HE Minister of Public Health Her Excellency Dr Hanan Mohamed al Kuwari visited patients and staff at Hamad Medical Corporation’s (HMC) Enaya Specialized Care Center recently and inspected the construction site of the new Daam building.

Opened in early 2015, the Enaya Specialized Care Center provides an advanced care system for long-term patients with chronic illnesses and degenerative diseases that restrict their ability to care for themselves. The facility offers a healing environment with over 150 patient beds, state-of-the-art facilities and round-the-clock monitoring and treatment from specialist nurses and doctors.

"The care that our teams at Enaya are providing is so important to patients and their families. Dedicated care teams provide specialised medical care while also working to enhance the ability of patients to function independently, to engage more with family and friends, and where possible, to bring a sense of normalcy into patients’ lives. Our plans to expand Qatar’s community-based care facilities in 2019 with the opening of the Daam Specialized Care Center will ensure we can continue to provide patient-centred medical care to even more people in the future,” said HE Dr Al Kuwari.

Late last year, HE Dr Al Kuwari and Qatar Central Bank Governor and Chairman of the Board of Directors of the Sports and Social Activities Support Fund (Daam) HE Sheikh Abdulla bin Saoud al Thani signed a Memorandum of Understanding (MoU) to establish the Daam Specialized Care Center. The donation from Daam covers 100 percent of the costs to retrofit and commission the new facility, which has already commenced construction in Hamad Bin Khalifa Medical City. The new facility, which will join HMC’s existing Enaya Specialized Care Center, is expected to open in late 2019 and will have 67 beds. This inpatient specialised care centre will provide an advanced care system for patients who are well enough to be discharged from hospital but still require specialised medical treatment that is often long term. It will expand the capacity of the current Enaya facilities while also providing more privacy for patients who require long-term medical care outside of the hospital setting.

In recent years, HMC has made major strides towards redefining continuing care in Qatar. In addition to the two existing Enaya Specialized Care Centers, the Corporation operates two community-based facilities in Muaither and a busy multi-disciplinary Home Healthcare Service which currently cares for thousands of patients across Qatar.
HE National Center for Cancer Care and Research (NCCCR), part of Hamad Medical Corporation’s (HMC) network of specialist hospitals, recently announced the successful re-accreditation of its Supportive and Palliative Care Programme by the Joint Commission International (JCI).

Palliative care is provided for people who have a life-limiting illness and for whom the primary goal is quality of life. Palliative care takes a holistic approach to address the full spectrum of a patient’s needs, from the physical and emotional to the spiritual and social.

Commenting on the significance of the international accreditation, Professor Alexander Knuth, CEO and medical director at NCCCR, said: “We are proud of this achievement and honoured to be re-accredited by an internationally recognised organisation such as JCI. This highlights HMC’s approach to developing excellence in healthcare in Qatar and it recognises the outstanding quality of care we provide to our patients. Our vision is to deliver an internationally recognised Supportive and Palliative Care Programme and to become a regional leader in palliative care clinical services.”

Professor Knuth continued: “This is the only palliative care programme accredited as a clinical care programme by the JCI in the Middle East and Gulf region. This achievement reflects HMC’s commitment to providing the best quality services to our patients by offering world-class cancer therapies and support. Our Supportive and Palliative Care Programme meets the highest quality standards and our teams are committed to the provision of exemplary care.”

Dr Azza Ibrahim Hassan, senior consultant of Oncology at NCCCR and director of the Supportive and Palliative Care Programme said coping with advanced illness is stressful for patients and their families. She said the goal of HMC’s Supportive and Palliative Care Programme is to maintain an optimal quality of life for patients and caregivers.

“The patient is at the heart of everything we do here at HMC and our Supportive and Palliative Care Programme is focused on the patient. It is tailored to meet patient needs, using proven tools and techniques to better integrate, coordinate, and communicate patient care. The programme prioritises patients with late-stage disease, identifying those who may need immediate assistance and accepting referrals for symptom control and psychological support for both patients and their families. The programme also provides advice on the direction of care and assistance in communicating difficult medical information,” said Dr Hassan.

“We are grateful to have the Supportive and Palliative Care Programme re-accredited, highlighting the quality of this programme and its focus on delivering optimum care. This accreditiation is a major achievement not only for our division but for the hospital as a whole. Our success is the result of the significant contributions made by every member of the Supportive and Palliative Care team”, Dr Hassan concluded.

The Palliative and Supportive Care Programme was initially accredited in 2012, followed by a second re-accreditation in 2015. The JCI accreditation recognises hospital programmes that demonstrate exceptional care to optimise the quality of life for patients with serious illnesses. It acknowledges compliance with the highest standards.

In 2016, the supportive and palliative care team developed a fellowship programme focused on palliative care for patients and families at diagnosis, during active treatment, and at end-of-life. The first fellow joined the programme in 2017.
‘Advancements in MS treatment enhance patients’ quality of life’

"MS is a very unpredictable disease that has both physical and emotional effects. Researchers believe a combination of genetic and environmental factors contribute to the development of MS. The causes of MS are not well understood. There is no cure, but there are effective medications and therapies that modify the disease outcome. We are continuing to learn more about what causes MS and are zeroing in on ways to prevent it."

— Professor Dirk Deleu, Director of HMC’s MS Programme

MULTIPLE sclerosis (MS) is a potentially disabling disease of the brain and spinal cord (central nervous system), but treatments are emerging that can help prevent relapses and halt the progression of the disease in most patients, says Director of Hamad Medical Corporation’s (HMC) MS Programme Professor Dirk Deleu.

He, however, adds that the neurological condition remains one of the most misunderstood diseases. According to Professor Deleu, MS is one of the most common disabling neurological conditions affecting young people, but it is also one of the most misunderstood. "No two patients with MS experience the same symptoms or have the same journey. This makes understanding MS all the more difficult. It also highlights the significance of raising awareness of the condition and the importance of early diagnosis and treatment," he says.

He adds that the MS Program at HMC was established to provide excellence in care for patients who have the disease, noting that tremendous progress has been made in recent years in the approval of disease-modifying drugs used to treat MS. According to him, Qatar is one of the leading countries in the region to introduce many of these new treatments.

Prof Deleu says early diagnosis and treatment are critical to preventing relapses and may help delay or prevent irreversible damage. "We are able to help many patients with MS effectively manage their symptoms and these patients are able to live full and active lives. However, early detection is the key to getting the disease under control. If symptoms are ignored or discounted and a person has several attacks, we may have lost the critical window for treatment."

The symptoms of MS can vary widely and depend on the amount of central nervous system tract damage and which tracts are affected. Professor Deleu says the initial presenting symptoms often include blurred vision, numbness or loss of sensation, incontinence, extreme weakness, coordination problems and double vision. The disease is more common in women than men and while it is not believed to be hereditary, family members have a slightly higher risk of developing the disease.

The MS Programme at Hamad General Hospital is currently caring for over 700 patients who have been diagnosed with the disease. Over the last four years, almost 45 percent of those diagnosed have been Qatari, with the majority of patients being women between the ages of 31 and 40.

Prof Deleu says MS is a very unpredictable disease that has both physical and emotional effects. He says researchers believe a combination of genetic and environmental factors contribute to the development of MS. "The causes of MS are not well understood. There is no cure, but there are effective medications and therapies that modify the disease outcome. We are continuing to learn more about what causes MS and are zeroing in on ways to prevent it," Prof Deleu remarks.

Most patients with MS are diagnosed between the ages of 20 and 40, although it can occur in children as well as in older adults. Professor Deleu says MS can be difficult to diagnose because of the diversity of symptoms it causes and the multiple ways in which the symptoms present. "The average age of diagnosis among the Qatari population is 35 years old. There is a clear female preponderance with the female-to-male ratio being 1.83," adds Prof Deleu.

MS is rarely fatal, but it is a lifelong condition that requires careful monitoring and ongoing management. Professor Deleu explains that treatment plans are individualised and designed around the patient, depending on the type and stage of their disease.

"Early diagnosis and treatment are important for MS. A neuro-inflammatory disorder like MS leaves a lot of lesions (scars) in the central nervous system and with every lesion there is a potential loss of function," he points out.

"Depending on the severity of the disease, the patient will be recommended for first-line or second-line treatment. Some MS drugs have the potential for complications that can be quite serious so it is of critical importance that the patient understands the pros and cons of each therapy," adds Prof Deleu.
Pay undivided attention to your child: Dr Afana

WITH internet and social media addiction taking its toll on actual communication between people in our fast-paced world today, a HMC expert has warned parents against continuing with this habit for the good of their children.

Hamad Medical Corporation’s (HMC) Psychotherapy Consultant and Trauma Specialist Dr Abdelhamid Afana says that such parents are unable to give proper attention to the children when they most need it, giving children a feeling of being disrespected by them.

Dr Afana adds: “Parents nowadays often talk to their children nonchalantly while they are doing something on the internet or watching television. Their cold response often gives children a sense of being disrespected.”

He advises parents to schedule their activities at home so that they can pay adequate attention to the children when they need it.

According to Dr Afana, a psychological disconnect prevails in families these days because most people prefer to remain glued to internet, TV and social media to communicating with one another while they are physically together, which gives a wrong message to the children who do the same.

Dr Afana points out that since children learn from their parents, the latter must try to be good role models for the former.

“Parents should ask children about their experiences at school. If a child does not want to go to school, parents should try to find out why it is so. They should listen to their children, their feelings and offer them reassurance. The parents must ensure to spend quality time together with their kids.”

LIFESTYLE IMPACT

ORROR stories of childbirth shared by new mothers on online forums and social media platforms like Facebook could be driving the rise in tokophobia — a pathological terror of pregnancy and childbirth — leading to more C-section requests and abortions, a media report said.

“You just have to Google childbirth and you’re met with a tsunami of horror stories,” BBC Health quoted Catriona Jones, a lecturer at the University of Hull as saying.

If you go to any online forums, “there are women telling their stories of childbirth — ‘Oh, it was terrible’, ‘it was a bloodbath’, ‘this and that happened’. I think that can be quite frightening for women to engage with and read about,” she added.

Tokophobia is a mental condition defined as a severe fear or dread of childbirth. It affects around 14 per cent of women, and can be serious enough to lead to requests for caesarean sections, and abortions, the Guardian reported.

According to Professor Louise Kenny of the University of Liverpool, that tokophobia was seriously under-researched and there was little literature on the condition.

“Stories shared in safe environments can be quite healing and informative but some women are predisposed to developing a phobia due to stories taken out of context or experiences that are graphic,” she noted.

Kenny added that the main causes of the condition varied depending on whether you were pregnant with your first or second child.

“Some women develop it due to an adverse birth experience but for others the main cause can be a history of childhood or adult sexual assault or abuse. It can also be due to previous exposure to a story or something they have seen on TV or social media,” she explained.

Treatment for tokophobia includes cognitive behaviour therapy, one-to-one educational sessions with midwives, and “graded exposure”, a process that involves having access to labour rooms or operating theatres in a gradual and non-threatening way.
Health Check

ACHIEVEMENT

HMC doctor elected to WHO panel on organ donation and transplant

“It is as a result of our culture of respect for human dignity, autonomy, equity and well-structured and resourced public education, that organ donation and transplantation programmes are accessible to all nationalities here in Qatar. There have been significant changes in the mindset of Qatar’s multicultural society, as demonstrated by strong participation in the organ donor registry and in the deceased and living donation and transplantation programmes.”

— Professor Riadh Abdul Sattar Fadhil, Director of the Qatar Organ Donation Center at HMC

HEALTH CHECK TEAM

ROFESSOR Riadh Abdul Sattar Fadhil, the director of the Qatar Organ Donation Center (Hiba) at Hamad Medical Corporation (HMC), was recently named a World Health Organization (WHO) advisory expert in the field of organ donation and transplantation. Professor Fadhil has been appointed to the newly formed WHO Taskforce on Donation and Transplantation of Human Organs and Tissues. The taskforce is comprised of experts from around the globe who are specialists in their fields, which cover the areas of medicine, surgery, ethics, law, patients’ rights, public administration and health systems.

“It is as a result of our culture of respect for human dignity, autonomy, equity and well-structured and resourced public education, that organ donation and transplantation programmes are accessible to all nationalities here in Qatar. There have been significant changes in the mindset of Qatar’s multicultural society, as demonstrated by strong participation in the organ donor registry and in the deceased and living donation and transplantation programmes,” said Professor Fadhil.

According to Professor Fadhil, since the Qatar Organ Donor Registry was launched in 2012, around 300,000 donors, or 15 percent of the country’s adult population, have registered as organ donors. “Trust in the system is now well established and 2017 was the best year ever since the launch of the transplant programme in 1986. Last year 47 patients received 12 livers and 35 kidneys from ethically approved living and deceased donors, compared to 2008 when only two transplants were done. This explains why Qatar has become a model for other countries to emulate, thanks to the support of our wise leaders and the Minister of Public Health Her Excellency Dr Hanan Mohammed al Kuwari,” added Professor Fadhil.

The WHO has identified organ donation as one of its priorities and Professor Fadhil joins other eminent experts, advising on policy and strategy. “It is a great honour to be chosen as a member of this taskforce; we have a lot of experience and knowledge we can share with other countries,” Professor Fadhil said.

The most recent data from the WHO Global Observatory on Donation and Transplantation (GODT) shows that more than 130,000 solid organ transplants are performed worldwide each year, and although impressive, it is estimated that this number represents less than 10 percent of the global need.

Dr Fadhil is a professor of Urology and Transplant Surgery. He joined HMC as a senior consultant surgeon in 2004 and is currently director of the Qatar Organ Donation Center (Hiba) and the Doha International Academy for Organ Donation. In addition to his recent affiliation to the WHO, Dr Fadhil also works internationally with the Transplantation Society Ethics Committee and the Declaration of Istanbul Custodian Group Board of Councilors.
Pulmonology & chest Department

Diagnosis and treating the following:

- Disease of the upper and lower airways.
- All types of infectious, inflammatory and malignant lung diseases.
- Pulmonary manifestation of other systemic diseases.
- Vaccination antiviral and antibacterial.
- Diagnosis and treatment of allergy and Bronchial asthma.
- Pulmonary vascular disorders.
- Diagnostic and therapeutic procedures.
- Full Pulmonary Function Tests.
- Fully equipped Sleep Laboratory.
- Smoking cessation specialty.
- Early diagnosis of lung trauma.
- Bronchoscopy and lung biopsies.
- Diagnosis and treatment of Pulmonary embolism.
Al Ahli Heart Center has signed an education affiliation agreement with Weill Cornell Medicine-Qatar for the elective teaching of medical students.

The agreement was signed by Mr Khaled Emadi, the CEO of Al Ahli Hospital, and Dr Abdurrazzak Gehani, Chairman of Al Ahli Heart Center. Weill Cornell Medicine - Qatar was represented by the Vice Dean for Clinical and Faculty Affairs, Dr Robert Crone, and the Senior Associate Dean for Medical Education, Dr Thurayya Arayssi.

The agreement outlines the rules and regulations for medical students from Weill Cornell Medicine to spend an elective period of training at the Heart Center. This enables students to have bedside clinical teaching, as well as attending all investigations carried out in the center, including attending procedures in the cardiac catheterization laboratory, and open-heart surgery.

The program will be directed by Dr Gehani with the teams in the Heart Center. Patients’ privacy, confidentiality, dignity and consent will be at the center of all conduct, as is the standard in all teaching institutions.

Mr Emadi further emphasized that Al Ahli Hospital is always ready to contribute to medical education in Qatar and, as a private institution, believes that such contributions are at the very core of the hospital’s social responsibilities towards the State of Qatar.

Mr Emadi added in his opening speech that Al Ahli Hospital has included training and education among its development aims for the institution, and wants it to operate as a teaching hospital so that it contributes to the education of medical students in Qatar. The hospital’s efforts are to advance medicine, and medical education has a fundamental role in this goal.

Mr Jamal Hamad, the Deputy CEO of Al Ahli Hospital, explained that this agreement illustrates the fundamental trust between Al Ahli Hospital and Weill Cornell Medicine in the expertise of physicians working at the institution and its heart center, and their capability in training future doctors. The ultimate aim in all this is the welfare of the patient, as medical students who are trained by experienced consultants will practice medicine to the same high standards. This is the basis for which the management wishes to pursue the collaboration between Weill Cornell Medicine and the Heart Center at Al Ahli Hospital.

Finally, Dr Gehani, the Chairman of Al Ahli Heart Center added that there is a keen interest from all parties to aim for the highest standards of patient clinical care and that medical education is the main pillar that guarantees healthcare advances in hospitals and specialized centers around the world. He added that he wishes that this milestone will contribute to the great advances that the nation witnesses, not only in Al Ahli Hospital and its Heart Center, but health services throughout Qatar. He also emphasized that it is this combination of excellent national health care, with medical education and clinical and basic research, that has raised Qatar to the forefront of global medical care, and earned it its distinguished ranking from international organizations.
HEALTH CHECK TEAM
DOHA

Are you suffering from insomnia? If yes, Primary Health Care Corporation (PHCC) has given tips for those experiencing insomnia in an effort to improve the overall health and wellbeing of Qatari citizens and residents.

According to international research, approximately 30 percent of adults report one or more of the symptoms of insomnia: difficulty initiating sleep, difficulty maintaining sleep, waking up too early, and in some cases poor quality of sleep. PHCC Head of Mental Health Programme Dr Fatema Musa said, “Sleep is a vital part of leading a healthy lifestyle. But, many people suffer from insomnia or symptoms of insomnia and we would like to provide some simple tips and advice that may support people with their sleep, which hopefully improve overall health benefits.”

PHCC accords highest priority to the health of citizens and residents of Qatar, with a focus on knowledge sharing to improve health awareness, health promotion and eventually health outcomes for all.

Tips for sound sleep
- Maintain a sleep schedule of the same bedtime and wake up time, even on the weekends. This helps to regulate your body’s clock and could help you fall asleep and stay asleep for the night.
- Set aside at least an hour of ‘wind-down’ time dedicated to relaxation before bedtime, for instance, meditation, deep breathing, reading a book or magazine.
- Turn off electronics such as laptops and phones before bedtime as bright light from the screens can make it harder to fall asleep.
- Avoid alcohol, tobacco, caffeine and heavy meals in the evening as they can disrupt sleep.
- If you have trouble sleeping, avoid having short naps during the afternoon. Stopping short naps during the day time may help if you are unable to fall asleep at bedtime.
- Make sure your sleep environment is cool in temperature quiet and dark. You can use blackout curtains to block the light, or buy earplugs or a fan to block noise.
- Exercise daily. Vigorous exercise is best, but even light exercise is better than no activity.
- Make sure the mattress and pillows are comfortable as the one you have used for some time may have exceeded its life expectancy.
- If you are still having trouble sleeping, please speak to your doctor at the primary health care centre.

PHCC offers tips to tackle insomnia

Most parents believe that an excessive late night use of gadgets has significantly hampered the sleep patterns of their teenage children, leading to poor academic performance, researchers warn.

According to them, 56 per cent of parents fall in this category.

In the study, published by C.S. Mott Children’s Hospital National Poll on Children’s Health at the University of Michigan, 43 per cent of parents said their teenage children are struggling to fall asleep or wake up.

“The poll suggests that sleep problems are common among teenagers and parents believe late-night use of electronics are a main contributor,” said Sarah Clark, poll co-director at M.P.H.

For the study, the researchers included responses from 1,018 parents with at least one child aged between 13-18 years.

Teenagers’ hectic schedules and homework load — as well as anxiety about school performance and peer relationships — are also seen by parents as contributing to sleep disorders.

Some parents also reported that their child experienced occasional sleep problems (one to two nights per week) while 18 percent believe their teenage kids struggle with sleep three or more nights per week.

In addition, 10 per cent of parents believe their teenage kids’ sleep problems are associated with their health conditions or medication.

“Other reasons of sleep disturbances included irregular sleep patterns due to homework or activities which accounted for 43 per cent, worries about school (31 per cent) and concerns about social life (23 per cent), the study noted.

The parents have encouraged their children to try different strategies at home to help them cope up with sleep problems, including limiting caffeine in the evening (54 per cent), turning off electronics and cell phones at bedtime (53 per cent), having a snack before bed (44 per cent) and natural or herbal remedies, such as melatonin (36 per cent).

Twenty-eight per cent of parents said their kids have also tried some type of medication to address sleep problems.

“Parents whose teen continue to have frequent sleep problems, despite following recommendations for healthy sleep hygiene, may want to talk to a health care provider, particularly when considering which type of medication to try,” said Clark.

Late night use of gadgets leaves kids sleep deprived: Study

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What do you pack in your child’s lunchbox?

Parents of school going children these days struggle with one issue every morning - what to put in the lunchbox that their children would eat. Mothers scolding children for not eating their lunches at school and children concocting excuses are a common sight in almost every household.

According to Hamad Medical Corporation (HMC) Senior Clinical Dietitian of Pediatrics Dr Mona Shaat, this happens because children are not involved in the packing of their lunchboxes.

Dr Shaat says that parents should allow their children to decide on what they want to be put in their lunchboxes. She adds that if a child makes unhealthy food choices, such as candy let them know the adverse impact that it may have on their health and how it can lead to tooth decay. “Gradually, the child will stop asking for it,” she points out.

She advises parents to start educating children about healthy food choices at an early age so that they do not deviate later on. “If a parent educates the child about healthy food, he/she will not be influenced otherwise by friends when they are at school.”

Dr Shaat further notes that the lunchbox should include at least four of the six groups of food including carbohydrates, fruits, vegetables, dairy, proteins and oils.

“Parents should prefer the whole meal including cereals, vegetable and fruit and milk or yoghurt instead of fruit juices for the lunchbox. The lunch box should also be colourful,” she says.

According to her, the processed juice contains lots of sugar and it’s not healthy. “This sugar makes the child active for a short time and then leads to fatigue making him/her unable to concentrate well in the classroom.”

Dr Shaat further points out that instead of chocolate spread, parents should use peanut butter since the chocolate one contains a lot of sugar. “This is a calorie that is not helpful to the child. Peanut butter contains fat that is good for the child,” she stresses.

She added that a child should take at least 500ml to 700ml of water while at school before going back home. Dr Shaat says it is important for children to start their day with a healthy breakfast. She says parents should encourage their child to have breakfast before going to school, even if it is just a small amount of yoghurt and cereal.

“Since many children do not like vegetables, parents should try to make patterns and shapes that will attract the child, for example shapes in baby carrot or cucumber.”

She says it is important to be mindful of food safety. She recommends keeping food in a air conditioned room and consuming it within three to four hours of preparation. “Some children have a habit of eating their lunch in the bus on their way back home. It’s not healthy.”

According to her, if the child wishes to keep the food until lunch time, they can keep the non-perishable foods like fruits and vegetables.

“For instance, one can sprinkle orange or lemon juice on bananas and apples to prevent it from turning brown after it has been prepared. This will help to prevent it from going bad.”
E wary of black ants because they can trigger allergic reactions, an expert has advised.

According to Senior Consultant of Pediatrics and Allergy and Immunology at Hamad Medical Corporation (HMC) Dr Mehdi Mohammad Adeli, household ants can trigger allergic reactions and asthma symptoms. He notes that families, especially those with young children who have allergies, should be aware that black ants can cause respiratory problems.

Adeli adds, "Qatar is situated in the warm Eastern Arab Peninsula, so black ants are very common throughout the year. However, most infestation occurs during summer due to the warm weather. Black ants are particularly attracted to the scent of sugar and grease, so good housekeeping is often the key to keeping them out of the home."

Dr Adeli says that proper food storage and regular and thorough cleaning of the kitchen and other areas of the home where food is prepared or consumed can help deter ants, pointing out that it is important to be proactive and diligent, quickly cleaning spills with soap or vinegar to help eliminate food odours. "These ants are attracted to the smell of food, so it is important to keep the kitchen clean, to cover cooked food properly and to store sugary foods in airtight containers," Dr Adeli stresses.

He says using pesticides with caution and professional pest control services can help to eliminate ant colonies in the case of an infestation. He notes it is important to be cautious when using chemicals, especially if there are young children or pets at home.

Dr Adeli explained that children are often the target of black ants because they spend much of their time playing on the ground without shoes.

He says while severe allergic relations from black ant bites are not common, they are not unheard of. According to Dr Adeli, the symptoms of black ant bites can vary widely between mild allergic reactions and full-blown anaphylactic shock. "When a case involving a black ant bite is referred to us, we watch out for anaphylactic shock signs and symptoms. These symptoms will usually appear within a few seconds to minutes after a black ant bite. While these symptoms might not be serious or life-threatening, it is important to treat the patient promptly, especially if they experience breathing difficulties," Dr Adeli remarks.

He says black ant bites often cause minor swelling, redness, pain and itching. These mild reactions are common and may last from a few hours to a few days. Dr Adeli says it is essential to seek medical attention if the child has a pronounced local reaction, such as severe swelling, redness, pain or an infection.

He adds that babies and young children may be more affected by ant bites than adults, noting that it usually is not necessary to seek medical attention for mild reactions. "If there is not a severe allergic reaction, home-based remedies such as applying a cold compress over the area for 20 minutes to prevent itching is recommended. Taking an antihistamine is also a good option, especially if there is minor pain, itching, or a localised allergic reaction," says Dr Adeli.

To help prevent ant bites, Dr Adeli recommends children avoid going barefoot, cover exposed skin using long sleeves, pants and a hat, and use insect repellent creams.
Tips to consider for a safe back:

- One should choose the right backpack which is made of light material.
- Students should only carry books they need for that day.
- The bag should be well packed—the weight should be well distributed.
- Students should wear the backpack properly—not using one shoulder.
- The bag should have multiple compartments so that the weight can be properly distributed.
- Straps should be wide and on both shoulders.
- Straps should be tight enough and not hang below the waist.

Heavy school bags behind back pain among children

According to Hamad Medical Corporation (HMC)'s Hamad Injury Prevention Program (HIPP), many children are suffering from back pain because of heavy school bags. Dr. Omar Alnori, Associate Consultant of Orthopaedic and Spine Surgery, said that children, especially young children, are at an increased risk of back pain due to heavy school bags.

HIPP recently urged the public to take extra road safety advice. Parents should ensure their children wear seat belts and car seats properly. Children should walk to school with a parent or guardian, and drivers should watch for children walking on the sidewalk.

Dr. Alnori emphasized the importance of choosing the right backpack. He said, “The bag should ideally be from the shoulder to the waistline of a child. It should not be below that otherwise it will pull the child’s back and hunch it forward”, he said.

Hamad Medical Corporation Associate Consultant of Orthopaedic and Spine Surgery Dr. Omar Alnori.
SMOKING IN CLOSED PUBLIC SPACES IS PUNISHABLE BY LAW

According to Article 17 of Law No. 10 of 2016 on the control of tobacco and its derivatives:

Without prejudice to any more severe penalty stipulated in any other law, a penalty of not less than one thousand (1000) Riyals, not exceeding three thousand (3000) Riyals shall be imposed on anyone who smokes cigarettes or tobacco or its derivatives, or permits smoking in closed public places where smoking is prohibited.

VIOLATION HOTLINE 50302001
GHCC@MOPH.GOV.QA
moph.gov.qa