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Protecting Health
from Climate Change

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Horizontal expansion of ICDDR,B's Dhaka Hospital with BRAC Bank funding



An inside view of the extended hospital area (Signing ceremony of the Memorandum of Understanding between ICDDR,B and BRAC Bank in the inset)

ICDDR,B needs to expand its hospital area each year during the seasonal peaks of diarrhoeal diseases caused by flooding and/or other natural disasters to accommodate the extra patient-load. Part of the temporary make-shift treatment units, often built with tents to meet emergency needs, now has a semi-permanent structure, with financial assistance from BRAC Bank. Modern facilities, such as better ventilation, air-conditioning, and good drainage system, have substantially improved the accommodation and comfort of patients during their short stay at the Hospital. In recognition of the generous financial contribution to this renovation work, the unit is named 'BRAC Bank Short Stay Ward' which extends up to the main entrance to the Hospital.

On 11 November 2007, a Memorandum of Understanding (MoU) between ICDDR,B and BRAC Bank, was signed at a ceremony held at ICDDR,B. Professor Alejandro Cravioto, Executive Director of ICDDR,B and Mr Imran Rahman, Managing Director and Chief Executive Officer of BRAC Bank, signed the MoU on behalf of their respective organizations. Mr AKM Zafar Ullah Khan, Secretary, Ministry of Health and Family Welfare of the Government of Bangladesh, was present as Chief Guest. The Secretary reiterated continued support from the Government of Bangladesh to the Centre and its activities.

In addition to making donations to the Hospital Endowment Fund,

BRAC Bank formed an agreement with ICDDR,B to introduce a joint credit card, of which a certain percentage of costs incurred in all purchases made with the card will go to the Hospital Endowment Fund.

ICDDR,B expresses its gratitude to BRAC Bank for this generous contribution and to the Government of Bangladesh for their continued support to the Centre's activities. At the same time, the Centre management hopes the generous example set by BRAC Bank will encourage other corporate donors to assist ICDDR,B in further improving the hospital facilities to better handle the huge load of patients arriving at our door. ■



Fekrul Alam

The Board of Trustees in its full session of the June 2008 Meeting

June Meeting of BoT Held

ICDDR,B's Board of Trustees (BoT) held its first meeting of 2008 on 14-15 June. A team of the trustees arrived earlier for a review of the Laboratory Sciences Division. Prior to the actual sessions at the Sasakawa International Training Centre, the trustees also met at the Radisson Hotel for a retreat where much of the time was spent reviewing the efforts to design, for the Centre, a new Strategic Plan to the Year 2020.

Over the past year, the Centre's management prepared a draft strategic plan that was submitted to the Board. While presenting the retreat report to the Centre's staff on 14 June in the Sasakawa International Auditorium, BoT Chair Dr Timothy Evans expressed his satisfaction and gratitude to all those who participated in the process, including ICDDR,B staff

members at all levels and the key stakeholders outside the Centre. The Board made a detailed response to the draft strategic plan as it now stands but emphasized that these comments were offered in the "spirit of further development of the strategy" and to "raise issues for reflection" and not intended to be prescriptive. The Board looks forward to considering a final draft of the strategic plan at its November 2008 Meeting.

In the meantime, the Board members had plenty of opinions on, and reactions to, the plan as it stands. General comments included:

- It should be mindful of, but not a slave to, the history of ICDDR,B
- It must reflect the value of service
- It needs a more altruistic vision

The Board also raised several issues relating to the research foci in the strategic plan, overall feeling that there should be more focus on a few research areas where ICDDR,B has a "current, practical comparative advantage." The Board also expressed the 'rich legacy' of ICDDR,B regarding its services and suggested that both aligned (those services that are aligned with research) and non-aligned (those that are independent of research, e.g. the Traveller's Clinic) are important to the future activities of the Centre. The Board also expressed interest in the strategic issues relating to training and human resources. Importantly, the Board expressed concern that focusing more on training and services may diminish the ability of the Centre to excel in its primary mission relating to research. ■

ICDDR,B-Prothom Alo Roundtable

Protecting Health from Climate Change

A roundtable discussion jointly organized by ICDDR,B and the leading Bangla daily Prothom Alo was held on 17 April 2008 at the Sasakawa International Training Centre of ICDDR,B. The deliberations and discussions focused on the central theme of this year's World Health Day: "Protecting Health from Climate Change." Previously, a similar event was organized at ICDDR,B during the devastating flood of 2007 for discussions on the management of water-borne diseases. As was previously done, the outcome of the second roundtable was also published in the Prothom Alo, followed by wide-scale secondary coverage in several other media to raise public awareness about the issues discussed.

The roundtable was presided over by Mr Matiur Rahman, Editor of Prothom Alo. Mr AKM Jaffor Ullah Khan, Secretary to the Ministry

of Health and Family Welfare of the Government of Bangladesh, was present as Chief Guest. Dr Andrew Travett, WHO Advisor for Environmental Health and Mr Abdul Quddus, Head of the World Food Programme in Bangladesh, were Special Guests.

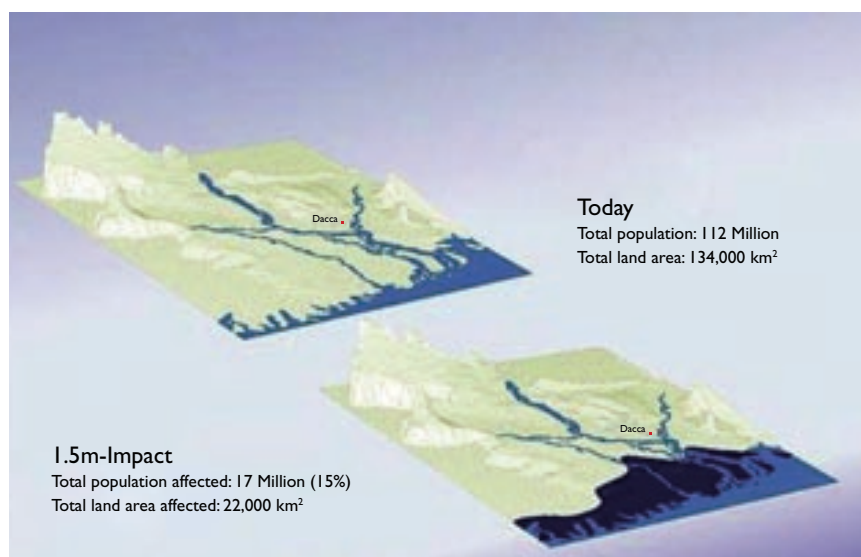
Several ICDDR,B scientists, including Dr Hubert Endtz, Dr Md. Yunus, Dr Rashidul Haque, Dr Sirajul Islam, and Dr Munirul Alam, made presentations that highlighted technical information on the subject. Dr Ishtiaque A Zaman, Head of the External Relations and Institutional Development Department of ICDDR,B, moderated the deliberations in the roundtable.

Dr Hubert Endtz, Director of the Laboratory Sciences Division of ICDDR,B welcomed the speakers on behalf of the Centre's Executive Director Dr Alejandro Cravioto.

He said, ICDDR,B has sound infrastructural facilities, including several surveillance systems for collection of field-level data on various diseases. However, it is difficult to know which of the diseases prevalent in different parts of the country have resulted from the adverse effects of global warming and climate change. However, a season-specificity in the prevalence of certain infectious diseases is evident in Bangladesh, implying occurrence of diseases due to temporary changes in the climate. For example, floods and cyclones are events of the monsoon that have a close relationship with certain diseases and deaths. Our broader concern is the consequence of global warming and climate change, which is a very slow process. Morbidity and mortality due to this change in the climate is, thus, an apprehension. "We hope, within the next three-year period,

Participants in the roundtable





Potential impact of sea-level rise on Bangladesh (Source: UNEP/GRID Geneva; University of Dacca; JRO Munich; The World Bank; World Resources Institute, Washington, DC)

ICDDR,B will be able to establish a database on the management of health problems originated from global climate change too", said Dr Endtz.

Prothom Alo Editor Mr Matiur Rahman, as Chairperson in the roundtable, invited presentations from experts on the subject matter. Deliberations of ICDDR,B scientists were followed by thought-provoking speeches by the two Special Guests and the Chief Guest.

Dr Munirul Alam of the Laboratory Sciences Division of ICDDR,B, in his presentation, explained the underlying scientific phenomena of how the Greenhouse Effect, El Nino, La Nina, etc. disturb the environmental equilibrium and pose a threat to the health conditions of the plant and animal kingdoms, including humans. He said, the elevation of sea-level and unexpected melting of perennial ice-sheets as a result of global warming will cause frequent natural calamities like floods and cyclones and will also cause draught in the arid and semi-arid areas. Consequently, health of humans and animals as well as natural growth of plants will be adversely

affected; spread of both water-borne and air-borne diseases will be accelerated, he said. He opined that inclusion of more green plants in the forestry and agro-forestry programmes may defer these disastrous effects of climate change to a great extent.

ICDDR,B's parasitologist Dr Rashidul Haque said, spread of several vector-borne diseases, especially malaria, dengue, and leishmaniasis will be accelerated in the coming decades as a result of global climate change. He also presented data to show the re-emergence patterns of these diseases over time. He mentioned that malaria is re-emerging at an alarming scale in 13 districts of Bangladesh bordering Myanmar and India; re-emergence of leishmaniasis is accelerated in Bangladesh, India, Nepal, Sudan, and Brazil. "Microscopic examination is no longer an effective method for detection of pathogens of these diseases", he said. Dr Haque highlighted the importance of using modern methods and explained the salient features of these effective diagnostic tools.

Dr Sirajul Islam, Head of the Environmental Microbiology Laboratory of ICDDR,B, reminisced on the history of cholera and explained how changes in the climate, even when seasonal, can influence the prevalence of this disease. Although epidemics or sporadic outbreaks of cholera occur in many parts of the world, Bangladesh is said to be the 'motherland of cholera' because of the frequency and duration of its prevalence. Every year, cholera shows up with two seasonal peaks in this country—once during the monsoon and again in the winter. In between the two outbreaks, cholera-causing germs, called vibrios, survive using the aquatic blue-green algae as their host in a symbiotic relationship. Blue-green algae are abundant in Bangladesh for the geographical and ecological pattern of the deltaic country, with a web-like network of stagnant water-bodies. The growth of these algae is dependent on a specific temperature level, and it is observed that outbreaks of cholera are often associated with algal bloom. Most families living in the marshy areas of the country use surface water for cleansing and, in some cases, even for drinking. This increases the risk of being affected with cholera and other diarrhoeal diseases. Dr Islam said, people in the urban highlands may also be affected when the germ-contaminated algae infiltrate these areas when inundated during flood. He recommended that all of our efforts to combat cholera and other diarrhoeal diseases be directed towards ensuring pure water for the users. Exploring easily-accessible and cost-effective methods for point-of-use purification of water is of prime importance, he concluded.

Health research agenda, including the methodological designs, may also be influenced by climate change at the global level, said Dr Md. Yunus, a senior scientist

of ICDDR,B. He cited a WHO definition of climate change that emphasized the environmental and climatic changes resulting from human interventions in the process of rapid urbanization and industrialization. Although climatic changes have been occurring very slowly since the beginning of time, the changes that have occurred during recent periods, especially in the last three to four decades, are of great importance to us. Dr Yunus opined that mechanisms of global climate change have been accelerated mostly by the human interventions of developed countries because the process of urbanization and industrialization is more rapid in these countries than in the developing world. They have a legal obligation to invest more in research to address the emerging issues. In addition to emergence and re-emergence of various diseases, geographical and geological changes may also occur due to this climate change. It is anticipated that a large segment of our country, especially in the coastal region, will be inundated for ever, thus, increasing salinity of soil and deteriorating its fertility. This topographical change will affect crop production that will, in turn, affect human and animal nutrition. Before we permanently lose this part of our land for crop cultivation, important issues of public health must be considered while setting research agenda of the Centre and elsewhere. We cannot retard the process and speed of global climate change, but can find ways to save ourselves, our plants and animals from the adverse effects of these changes. Dr Yunus added that increased usage of air-conditioners, refrigerators, etc, has been increasing the level of chlorofluorocarbon gas in the atmosphere causing chronic diseases such as asthma. We must collect data on these diseases from the field level and include them

in our research agenda. Inter-departmental coordination at the government level and collaboration among relevant stakeholders may help us design appropriate strategies to address these issues. ■

To be continued in the next issue...

Darren Wright joins ICDDR,B as Director, Infrastructure Services



Mr Darren Wright, an Australian national, joined ICDDR,B on 10 June 2008 as Director, Infrastructure Services. He is responsible for all the infrastructure and service support requirements, including General Services, Transport, Staff Canteen, Travel, Guest House, Computer Information Services, Maintenance, Civil and Electrical Engineering, and the Gyanaloy Project (vertical extension and renovation of the ICDDR,B main building). He is placed under the administrative control of the Executive Director's Division of the Centre.

Darren was educated in Australia. Upon graduation from the Royal

Military College, Duntroon, in 1988, he joined the Royal Australian Engineers (RAE) where his initial assignments included overseeing the construction of military barracks working accommodation and infrastructure improvements for a large aboriginal community located in a remote part of Australia.

Some of his time as a Captain included two years with a large engineering organization that was responsible for providing short-notice support to domestic emergencies and overseas military deployments; he also worked as an instructor at the School of Military Engineering.

When promoted to a Major, he commanded the infrastructure and corporate services group at the School of Military Engineering. This was followed by a deployment to Bougainville as an Operations Manager for the military organization responsible for securing the cease-fire. On return from Bougainville, he was recognized with a General's Commendation for his efforts in implementing the cease-fire agreement in his area of operations. His next assignment was for two years as Senior Engineer Instructor at the Combined Arms Training Centre.

At the end of 2001, he was posted to the Australian High Commission in Singapore as Assistant Defence Adviser. During this appointment, he worked closely with other departments of the Australian Government, the Singapore Armed Forces, and other foreign military attaches in Singapore. On return to Australia in 2005, he was deployed to the Solomon Islands as Commander of the coalition military forces. In 2006, he served as Operations Manager for the largest and most diverse engineer organization on the Australian Defence Force (ADF).

His final appointment in the ADF was as Senior Engineer Planner on the headquarters responsible for commanding all overseas military deployments.

Darren arrived in Bangladesh in February 2008 and is here with his spouse Kilmeny Beckering Vinckers.

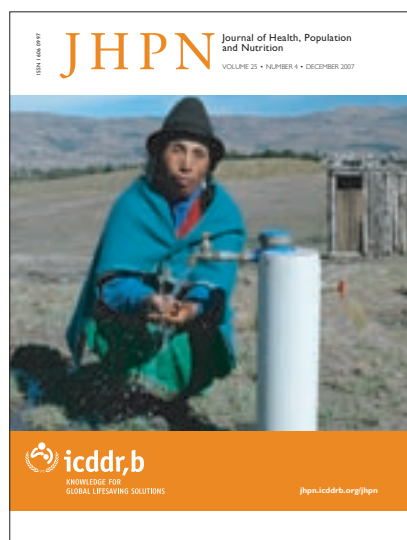
We welcome Mr Darren Wright and wish him a successful tenure at the Centre. ■

JHPN introduces a new Section on 'Gender Health and Human Rights'

The Journal of Health, Population and Nutrition (JHPN) introduced a new section on 'Gender Health and Human Rights' beginning in its December 2007 Issue, with Dr. Ruchira Tabassum Naved of ICDDR,B as Section Editor. The Section deals with health and human rights issues within the framework of gender and accepts manuscripts in the form of original articles, reviews, short communications, letters, or commentaries, with links between social construction of gender and health and human rights of females, males, and transgender populations, especially in developing countries.

Impact factor of JHPN is on the rise

After re-launching under its current title in 2000, the Journal has broadened its scope to publish



papers on various disciplines other than diarrhoeal diseases. The impact factor is on the rise; the Journal is now being covered by all important indexing/abstracting agencies of the world and has ranked 33rd among the top 100 journals covered by IndexCopernicus™ in their rating done in late 2007. The recent *Journal Citation Reports* (JCR) Thomson Scientific shows that the impact factor of JHPN has risen to 1.060 as in 2007. JCR presents quantifiable statistical data that provide a systematic and objective way to evaluate the world's leading journals and their impact and influence in the global research community. Following an agreement recently signed between ICDDR,B and Google, full texts of the JHPN articles will soon be available through Google Scholar Services. The Open Access Publisher BioMed Central recently rated JHPN in two categories. In the 'Medicine' category, JHPN ranked 1,683rd among 4,837 entries and in the 'Public Health and Environmental Sciences' category, the Journal ranked 110th among 361 entries. Arrangements have also been made with PubMed to make full texts of JHPN available.

Articles relevant to the new section are invited from prospective authors around the world. ■

ICDDR.B scientists in honorary positions

As a nominee of the Hon'ble President of Bangladesh, Dr Abbas



Uddin Bhuiya, Head of the Social and Behavioural Sciences Unit under the Public Health Sciences Division of ICDDR,B, has

been included as a member in the Syndicate of the Bangabandhu Sheikh Mujib Medical University (BSMU) for a two-year term.

The BSMU, formerly known as 'Postgraduate Hospital', is the apex body for postgraduate research and clinical services in Bangladesh. Another prestigious honour that Dr Bhuiya has received recently is a membership in the National Council for Population—the highest-level policy-making body for population studies in Bangladesh.

Dr SK Roy, Senior Scientist of the Clinical Sciences Division,



has recently been elected Chairperson of the Bangladesh Breastfeeding Foundation.

The Foundation is the premier organization in the country and South Asia working in areas relating to infant and young child-feeding. Dr Roy replaced Prof. MQ-K Talukder who retired after completion of his tenure as Chairperson of the Foundation since 1989.

ICDDR,B congratulates Dr Abbas Bhuiya and Dr SK Roy for their commendable achievements. ■