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### LIFESTYLE AND HEALTH

*J P Srivastava*

Department of Community Medicine, Era's Lucknow Medical College & Hospital, Lucknow

**Author for correspondence:** *Dr. J P Srivastava, Prof & Head, Department of Community Medicine, ELMC & H, Lucknow-226003, UP. Email: [jp\\_srivastava07@rediffmail.com](mailto:jp_srivastava07@rediffmail.com)*

“Simple Living and High Thinking” Are these words true in righteous sense today or is it fading in its charm and glamour or is it reverse of it, which has now dominated the modern society in India and the world.

The life style has been changing with modernization, need of life and society and the habits of copying affluent societies and countries, consequently the newer health problems have arisen with the changing pattern of life. In India we are neither following the life style of our heritage nor does it resemble the living standards of affluent countries.

The fault can be attributed at the following levels:

Due to flaws in system of education?

Due to flaws in the Government policies regarding health and its implementation?

Due to flaws within individuals or society?

We are in the middle of road. We have not crossed the technical hygiene era and have also not adopted fully the preventive medicine. Even we have not been able to provide safe and wholesome water to every individual. We have not perfected in the disposal of human, animal or organic refuse. Even per capital consumption of safe and wholesome water is not available in metropolitan cities like Madras, Calcutta, Bombay and Delhi. It is a rare commodity in summer in almost all big towns of the country. It is all due to consequence of migration of people from rural to urban areas, which has resulted in sources of diseases associated

with unhygienic conditions. They are not aware of basic principles of hygiene and health.

The medical education before independence was more or less based on the British system of medicine, where general practitioners in true sense were family physicians. They were strong doctor patient ties, where the family physician was a friend, advisor and a member of the family. In post independent era the medical education was influenced by American and other patterns practiced in affluent countries, which have abolished the institution of General Medical Practitioner as family physician. The noble profession of service to poor and sick has now in the modern era completely commercialized. There is hardly any place for the consideration of poor and deserving irrespective to the class of society to which he or she belongs.

The cardiac problems are manmade diseases, where general practitioners can lay a major role in its prevention. Multiple aetiological factors are responsible for ischaemic heart disease, where a large number of them are preventable. A medical practitioner can always advise the individual or a family on beneficial wholesome food patterns, exercise, avoiding abuse of alcohol and tobacco, stress and strain of life, family and professional problems and environmental improvement in order to prevent the associated disease. A sound counseling by family physician is the only effective remedy.

The life style has changed and so the disease pattern. The food habits have changed to rich fatty

diet with more and more sedentary habits leading to the problems of myocardial disease, hypertension, diabetes etc., in privileged society. The villagers, who have adopted the life style and diet of affluent society, have started experiencing the above pattern of the disease. Japanese who migrated to America have higher incidence of coronary artery disease.

The age of walking and cycling has been replaced by the two wheelers and cars. The stress and strain of schooling, work place, telephonic and mobile life have lead to increased mental, psychological and cardiac problems. An effective walking is the one, where the pulse rate should go up by 15 and the respiratory rate by ten to burn calories and have smoothing effect on blood pressure, diabetes etc. The religion has a definite positive effect on morals, attitudes and health. Such teachings have been disappearing from the curriculum and in the changing life style of most of the families.

The people have forgotten nutritious diet and have adapted too much of advertised foods and beverages. Proteins and other nutrients to be taken in their natural form in diet has become a taboo for them but much costly advertised products like Complian, Cerelax, Farex etc. are preferred as a pride and stigma of standard of living and show of wealth.

The breast feeding in India was practiced for centuries. The reference on breast feeding are available in our mythology, where LORD RAM AND LORD KRISHNA were breast fed. Breast milk is natural optimum food for infants and is the first natural immunization to protect him against large number of diseases. The communities and mothers in remote areas have adapted bottle feeding from affluent societies. The bottles used by them are neither scientific nor any where match pharmaceutical feeders, consequently has lead to milk borne infections and has added misery of diarrhoeal disease, morbidity and mortality. Only lately the Government has adopted policy on restriction of the advertisement of superiority of tinned powder milk over human milk. The breast feeding is possible by working women by storing expressed milk and to weak and premature infant through breast milk banks.

The health has become a purchasable commodity, until and unless the Government policies are changed. In spite of government's aim to provide health services to each person in the remotest area of the country by the year 2000, still a sizable number of populations remain without medical aid. The Health Centers though provided are in deplorable conditions and are either without proper medical man power or their callus attitudes to attend the health centers regularly. The Government can change the life style of the society by suitable plans and policies, which in turn will have effect on the health of society and the Nation.

The government has not used media effectively particularly T.V. and radio to educate and popularize cheap, nutritious and healthful products, which can be within the reach of common man. T.V. is a powerful media and should be utilized to educate and make the viewers health conscious for cleanliness, and hygienic habits. Instead of the media also to certain extent has become commercialized. Little national health programmes, that too in languages, all understood by majority living in rural and tribal areas, are the only programmes that are telecasted which are beneficial to general public.

The harmful products like chocolates, toffees and tinned food are shown as superior products, which are responsible for 70-80% dental and G.I.T. diseases.

The changing life style in any profession or occupation is associated with varying health problems. The subject is large enough, needs more to be emphasized and exercised.

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