



holding a pen by wrapping a kerchief round it to get a firmer grip. "All these tricks only served to put a real dampener – forgive the pun – on my confidence," rues Desai, pictured here. "I dared not even invest in one of those fancy touch screen cell phones for fear of damaging the surface with moisture."

**Losing grip** But it was when he entered the job market that Desai discovered the oddities of his bodily secretions could

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prove to be a handicap. As an upcoming marketing exec Desai was well aware that a handshake can make or break a deal. *How would a new client react to my clammy paws?* he worried. On the other hand *not* shaking hands appeared rude. Desai feared people would judge him even before he got to first base. What's more, by the end of the day, the marketing exec had a fresh problem to fret about: Body odour borne out of all that accumulated stale sweat. "If it disgusted me, I could only imagine what it did to other people."

The last straw landed when Desai was forced to give up driving because "I could never get a proper grip of the wheel, esp whilst reading a U-turn."

One day Desai read an article that indicated his problem was not unique and that did have a solution. So on 18<sup>th</sup> December 2009 Desai got in touch with Dr Avinash Katara, general surgeon attached to P D Hinduja hospital, Mumbai. "Excessive sweating (or hyperhidrosis in medicalese) is simply a condition in which the body sweats far more than its physiological needs," says Dr. Katara. Our internal temperature is regulated by the sympathetic nervous system that controls five million sweat glands in the body. Hyperhidrosis typically occurs in four major areas: hands, armpits, feet and face. Of these, excessive sweating of hands – also known as palmer hyperhidrosis –

happens to be the most bothersome. "In severe palmer hyperhidrosis sweat may drip from the hands continuously (as it happened with Desai) or periodically," explains Dr. Katara.

**Drip drying** There are temporary and permanent solutions for hyperhidrosis. These include botulinum toxin (commonly known as Botox), pills, lotions and even acupuncture.

But the only treatment that provides a permanent solution and maximum success rate, says Dr. Katara, is surgical intervention -- endoscopic thoracic sympathectomy — which Desai plumped for. "In endoscopic thoracic sympathectomy a small incision is made under the armpit area to snip the hyperactive sympathetic nerve that triggers excessive sweat production," says Dr. Katara. The net effect of this exercise is that the person will cease to sweat from his palms life long. Dire

as this sounds, it's not harmful. "In general we don't sweat in the palms unless we face a situation of severe anxiety or tension, says Dr. Katara. So drying up of the sweat glands in the area "has no serious physiological effect." The body has enough to spare and may compensate by sweating excessively through other parts that are less visible -- and therefore less embarrassing -- than the palms.

For Desai getting dry palms brought a hidden benefit: "I noticed during business meetings and important discussions, that as my sweating increased my heart beat too would speed up as anxiety set in. Happily, post surgery, this unpleasant side effect is no longer an issue!"

### "EXCUSE ME, PLEASE!"

40-year-old Paree Sharma thought diaper days were over when her son started wearing bloomers. "Little did I know that one day I would be buying diapers for myself," says Sharma.

Two decades ago Sharma had a normal delivery giving birth to a healthy boy. Post delivery, however, her body never returned to its pre pregnancy state: "My weight escalated and I kept coming down with allergic bronchitis.

I was the first one to catch a cold at the slightest change of weather even before my toddler got it. And once I started sneezing, I couldn't stop till I escaped the trigger, which was usually dust," says Paree. It was in these trying circumstances that Paree noticed an embarrassing, rather uncomfortable situation, crop up: She was passing small amounts of urine every time she sneezed or coughed heavily. "In the beginning I scarcely paid any heed to the problem, but over the past ten years it became really severe, occurring even when I laughed or sometimes while breathing deeply."

Involuntary leakage of urine, *a.k.a.* stress urinary incontinence, proved to be an enormous nuisance. Paree, a homemaker residing in King's Circle, in Mumbai, had recently shifted to a more spacious flat on the second floor. "This is where my problems became really severe. My building sits right next to the Metro line that's under construction. The minute I open my windows, a wave of dust blows in and sets me off on a sneezing and coughing spree all day," says Paree. Result: More stress incontinence. "There were times when I've had to change *salwars* at least thrice a day."

**Leaky pipes** Distressing though Paree's situation is, it is not unique. In fact according to Dr. Ranjana Dhanu, consultant gynaecologist, Lilavati Hospital, "At least one out of every 5 women in India faces stress urinary incontinence in her post reproductive years and it's more common in those who have had a normal delivery (like Paree). Intense labour can damage or weaken the pelvic floor muscles (which hold the urethra and bladder in position) causing the urethra (through which urine exits) to get displaced. The net result of this is stress urinary

