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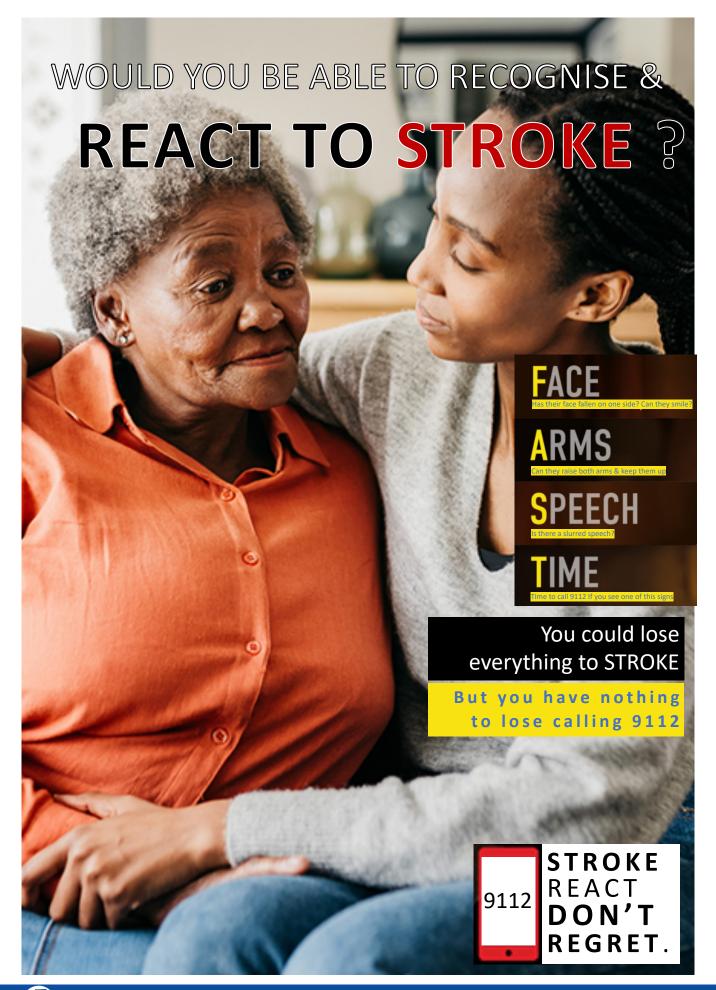
MAY IS EHLERS-DANLOS SYNDROME AWARENESS MONTH • HEALTH SERIES - PREGNANCY CALENDAR WEEK 10 • HEALTH & SAFETY: ELEVATING FALL PROTECTION • FUN TIME - JOKE OF E.M.A. WEEKLY EMERGENCY STATISTICS













Emergency Call: 9112

Coffee helps me with constipation – but is it healthy?

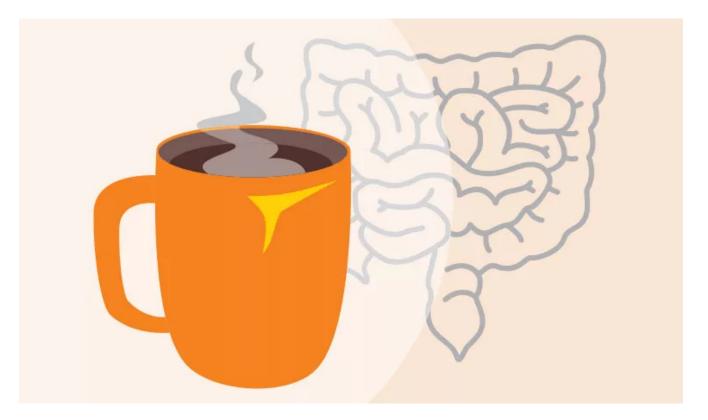
There are no embarrassing topics when it comes to health! Here are answers to questions no one dares to ask. This time: Coffee always helps me with constipation – is it healthy?

Um, so, well... Embarrassing topics? There aren't any when it comes to health! Here are answers to questions no one dares to ask (except maybe at your local pharmacy). This time, Christopher Ungelie, a pharmacist answers.

Coffee helps me with constipation – but is it actually healthy in the long run? Christopher Ungelie: "Coffee can contribute to bowel movements. This triggers a so-called gastrocolic reflex

response. This means that when something enters the stomach—for example, coffee—a signal is sent to the intestines to contract and empty. In addition, after consuming coffee, the hormone gastrin is released, which also supports bowel movement.

However, the question arises as to whether it is advisable to regularly use coffee as a remedy for constipation. While coffee can help prevent constipation, it can also lead to a habituation effect, causing its effectiveness to diminish. Furthermore, it should not be used specifically to treat constipation. Coffee can irritate the stomach lining in sensitive individuals, which can lead to symptoms such as heartburn or even diarrhea—especially if consumed on an empty stomach.





Important: If constipation persists for more than one to two weeks, medical advice should be sought. A conversation with a pharmacist can also be helpful, as some medications, such as strong painkillers (opioids), some antidepressants, and blood pressure lowering drugs from the calcium antagonist group such as nifedipine, as well as iron supplements, can cause constipation as a side effect. In this case, other measures should be taken to prevent constipation.

You should also keep an eye on your diet: A high-fiber diet naturally supports digestion. If that isn't enough, you can also resort to medication for a short time in consultation with your doctor or pharmacist.

Feel free to drink coffee for breakfast if you enjoy it, and this ritual can also help you avoid constipation problems.

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May is Ehlers-Danlos Syndrome Awareness Month. Understanding Ehlers-Danlos Syndrome

Ehlers-Danlos Syndrome (EDS) is a group of inherited connective tissue disorders that affect the body's connective tissues, which provide structure and support to skin, joints, and organs. EDS is characterized by overly flexible joints, stretchy skin, and fragile tissues. There are 13 distinct subtypes of EDS, each with its own set of symptoms and genetic causes.

The 13 Subtypes of Ehlers-Danlos Syndrome

The 13 subtypes of EDS are classified based on their clinical presentation and genetic mutations. These subtypes include:

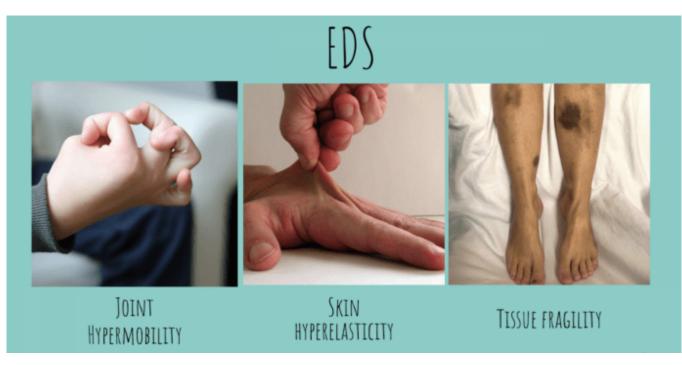
- Classical EDS (cEDS)
- Classical-like EDS (clEDS)

- Cardiac-valvular EDS (cvEDS)
- Vascular EDS (vEDS)
- Hypermobile EDS (hEDS)
- Arthrochalasia EDS (aEDS)
- Dermatosparaxis EDS (dEDS)
- Kyphoscoliotic EDS (kEDS)
- Brittle Cornea Syndrome (BCS)
- Spondylodysplastic EDS (spEDS)
- Musculocontractural EDS (mcEDS)
- Myopathic EDS (mEDS)
- Periodontal EDS (pEDS)

Each subtype has unique features, but they all share common characteristics such as joint hypermobility, skin hyperextensibility, and tissue fragility.

Symptoms of Classical and Hypermobile EDS can be characterized by:

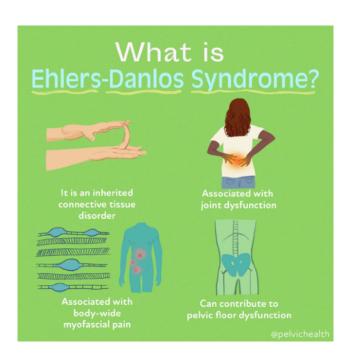
- Skin hyperextensibility: The skin can be stretched more than usual.
- Atrophic scarring: Scars that are thin and wide.
- · Joint hypermobility: Joints that



move beyond the normal range.

Hypermobile EDS (hEDS) is the most common subtype and includes:

- Joint hypermobility: Joints that are overly flexible and prone to dislocation.
- Chronic pain: Persistent pain in joints and muscles.
- Chronic fatigue: Ongoing tiredness and lack of energy.
- Autonomic dysfunction: Issues with the autonomic nervous system, affecting heart rate, digestion, and respiratory rate.



Misconceptions About Managing EDS

There is a common misconception that managing EDS is straightforward. In reality, EDS can involve up to 56 different symptoms, including Postural Orthostatic Tachycardia Syndrome (POTS), Mast Cell Activation Syndrome (MCAS), heart and vascular issues, and gastrointestinal involvement. In the case of hypermobile

EDS (hEDS), it can also include premature degradation of discs and osteoarthritis, which can cause nerve entrapment and damage, often requiring surgical intervention.

Additionally, EDS is significantly underdiagnosed. It can take an average of 18 to 20 years for a female to receive a diagnosis. This delay is often due to the wide range of symptoms and the lack of a wareness among healthcare professionals.

Causes of Ehlers-Danlos Syndrome

EDS is caused by genetic mutations that affect the structure and function of collagen, a key protein in connective tissues. These mutations can be inherited in an autosomal dominant or recessive manner, depending on the subtype.

Treatments for Ehlers-Danlos Syndrome There is currently no cure for EDS, but treatments focus on managing symptoms and preventing complications. Treatment options include:

- Physical therapy: To strengthen muscles and improve joint stability.
- Pain management: Using medications and other therapies to control chronic pain.
- Lifestyle modifications: Avoiding activities that put stress on joints and using supportive devices.
- Surgical interventions: In some cases, surgery may be necessary to repair damaged joints or tissues.

Living with EDS can be challenging, but with proper management and support, individuals with EDS can lead fulfilling



lives. Raising awareness and understanding of this condition is crucial for improving the quality of life for those affected.

Ehlers-Danlos Namibia is a dedicated nonprofit organization committed to raising awareness about Ehlers-Danlos Syndrome (EDS) and creating a supportive community for individuals living with this rare connective tissue disorder. Based in Namibia, we strive to empower patients and their families through education, advocacy, and access to vital resources. Our mission is to shed light on the challenges of EDS, foster understanding, and ensure that no one faces their journey alone. Together, we aim to make a lasting impact in the lives

of those affected by EDS, one step at a time



For more information, contact us on email ehlersdanlosnamibia@gmail.com or via our facebook page Ehlers-Danlos Namibia







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Health Series - Calendar: All 40 Weeks of Pregnancy - week 10

Your baby now measures about three centimeters. It can already move its arms and legs. Pregnant women should keep their skin elastic.

Weeks 10 of Pregnancy

Baby's Development

At the beginning of the tenth week, the unborn baby's fingers are already fully formed, but are still connected by flaps of skin reminiscent of the webbed feet of amphibians. By the end of the week, they separate completely. The baby's feet also continue to develop: distinct notches can be found between the toe rays of the fan-shaped footplates. For the first time, the baby intentionally moves its arms and legs. "You can actually speak of a certain arbitrariness here," says Dr. Mirja

Pagenkemper, who is researching prenatal imprinting as part of the PRINCE study (Prenatal Identification of Children's Health). "These are no longer pure reflexes."

The sexual characteristics are now beginning to develop. "Until now, the predispositions were the same in boys and girls," says Pagenkemper. "Now, the so-called Müllerian duct is regressing in boys, and the epididymis and vas deferens are developing from the Wolffian duct." In girls, the situation is reversed: The Wolffian duct regresses to a few remnants, while the Müllerian duct develops into the fallopian tubes, uterus, and vagina. Nevertheless, it is still too early to definitively determine the sex with an ultrasound.

From the outside, a small human being can already be seen: A neck and nape





region has developed, the eyelids are visible but remain closed for a long time, and the tiny ears are approaching their final shape. However, the baby's head is still very large compared to the rest of the body. "The average embryo now measures about 30 mm from crown to rump," says Pagenkemper. "Of course, this can vary somewhat in individual cases." Because embryos of the same age are still roughly the same size in the first trimester, the doctor can determine the gestational age to the exact week based on the length of the embryos or the crown-rump length (CRL).

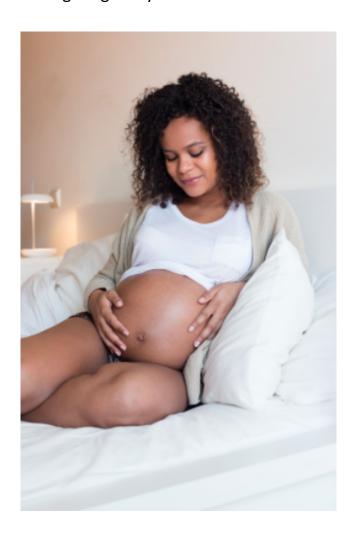
Mother's Health

Is your favorite bra starting to pinch, or have you even had to buy a larger size? Your breasts begin to increase in volume in the first trimester: High levels of the hormones estrogen and progesterone stimulate the breast tissue to grow.

When buying a new bra, make sure the cups cover your entire breast and provide good support. The bra should be made of stretchy material, and the back closure should be adjustable. Ideally, it should be comfortable, not dig in anywhere, but also not too loose. Learn how you can take additional care of your breasts in our tip below.

Also important: proper nutrition. You don't need to eat for two during pregnancy. But for the baby in your belly to develop optimally, many important nutrients are necessary. How do I eat

healthily during pregnancy? Which nutrients are especially important? What should I avoid? You can get information about this from your gynecologist or midwife and in the article: Healthy Eating During Pregnancy.



Tip: Skin Care

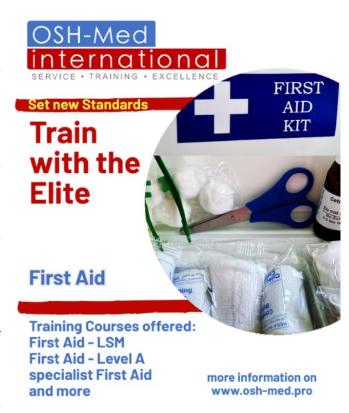
As your breasts grow, the skin there needs to stretch – just as it will later on your stomach and thighs. Start early by generously applying suitable creams to these areas and, ideally, massage them regularly. Stretch marks are small tears in the subcutaneous tissue caused by stretching. The underlying blood vessels shine through, making the marks appear bluish to brownish-red. After birth,



stretch marks fade and scar over time, but do not disappear completely.

You can try to prevent stretch marks with regular pinching massages. It's best to ask your midwife or gynecologist to explain the exact technique. Rub your stomach with a special oil – for example, available from a pharmacy. Then gently lift a small piece of skin with your thumb and index finger and release. Work your way from your belly button outwards. You should avoid the area above the pubic bone. You can also massage your buttocks, thighs, and breasts.

Caution: In the last few weeks before delivery, only apply oil to your belly. If you are prone to premature labor, you should first consult your gynecologist to see if a plucking massage is suitable for you! Advertisement







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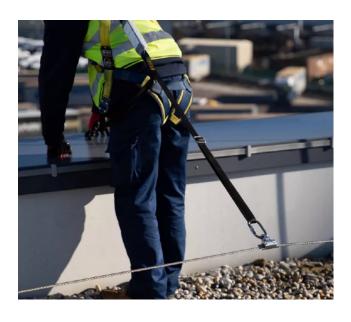
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Health & Safety - Elevating Fall Protection Through Innovations and Best Practices

The critical elements of fall protection involve identifying hazards, implementing safety solutions, embracing innovation, and fostering a culture of safety leadership.



Falls are a persistent threat to workplace safety, ranking as one of the most common causes of occupational injuries and fatalities. According to data from the international Labor Statistics, falls account for nearly 36 percent of construction-related deaths, while other industries also report alarming statistics. The financial impact of workplace falls includes medical expenses, worker's compensation claims, lost productivity, and regulatory penalties, often totaling millions of dollars annually. Yet, the human cost—emotional distress for

families and colleagues—is immeasurable.

Organizations have a critical role in preventing falls by creating and maintaining safe working environments. This commitment requires not only adherence to regulatory standards but also fostering a culture that prioritizes worker safety above all else.

Understanding Fall Risks

Fall risks manifest in various forms, often depending on the nature of the industry and work environment. In construction, open edges, scaffolding, and improper use of ladders are common hazards. Meanwhile, industrial facilities face unique risks, such as unprotected machinery, poorly lit walkways, and fragile roofs.

Identifying Hazards. A robust risk assessment is the first line of defense in fall prevention. This process should include:

- Visual Inspections: Conduct walkthroughs to identify hazards like uneven surfaces or missing guardrails.
- Employee Feedback: Workers often have the best insights into hidden dangers.
- Technology Integration: Tools like drones or 3D site mapping can provide detailed views of areas difficult to access.

Compliance with safety standards, such as those set forth by OSHA, provides a

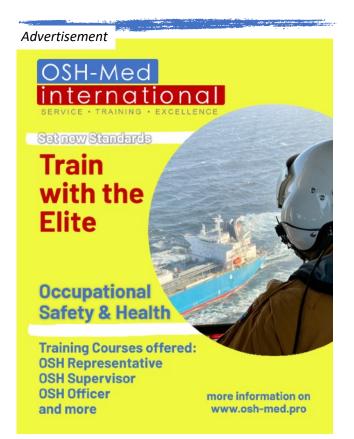


framework for identifying and mitigating fall risks. However, successful prevention programs often go beyond compliance, embedding proactive strategies into everyday operations.

An effective fall protection plan is comprehensive, addressing all aspects of workplace safety to minimize risks. Below are its core components:

1. Hazard Identification. Identifying fall risks is a continuous process. Conditions change, and new hazards emerge over time. For example, construction sites evolve daily, creating new challenges as projects progress. Regular inspections, detailed site audits, and risk management programs ensure hazards are identified and addressed promptly.

- 2. Engineering Controls. Whenever possible, hazards should be mitigated through physical solutions. These controls reduce or eliminate the need for worker interaction with high-risk areas. Examples include:
- Guardrails and Barriers: Provide permanent protection at open edges.
- Access Control Systems: Secure points like ladders or hatches with self-closing gates.
- Skylight Covers: Prevent accidental falls through fragile surfaces.
- 3. Personal Protective Equipment (PPE). PPE serves as the last line of defense when hazards cannot be engineered out. Examples include:
- Harness Systems: Full-body harnesses tethered to anchors.
- Self-Retracting Lifelines (SRLs): Automatically limit fall distances.







 Anchorage Systems: Properly installed points that bear the load of a falling worker.

While these systems are critical, their effectiveness depends on proper use, regular inspections, and timely replacements.

- 3. Training and Awareness. Training equips workers with the knowledge to recognize risks and use fall protection systems correctly. Key components of a training program include:
- Fall Arrest Systems: Understanding how to don and inspect harnesses.
- Emergency Procedures: Training workers to respond effectively during rescue scenarios.
- Awareness Campaigns: Keeping fall prevention top of mind through regular communications.

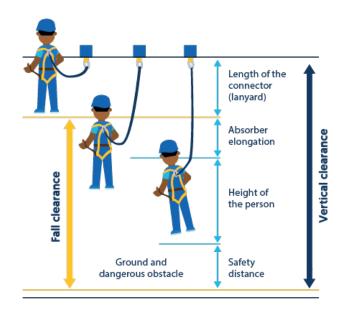
Innovations in Fall Protection

The safety landscape is evolving, driven by advancements in technology and materials. Modern fall protection systems offer innovative solutions designed to address both traditional and emerging challenges.

Smart PPE. Wearable technology has made its way into fall protection, with smart PPE systems that enhance worker safety. These devices feature:

 Fall Detection Sensors: Trigger alerts when a worker experiences a sudden drop.

- Location Tracking: Aid in rapid response during emergencies.
- Data Analytics: Provide insights into worker behavior and risk patterns.



Digital Site Assessments. Digital tools, such as virtual site assessments, allow employers to map out hazards remotely. By providing detailed visualizations, these tools enable precise planning and risk mitigation without the need for physical inspections.

Material Advances. Modern safety equipment incorporates lightweight yet durable materials, reducing worker fatigue and improving comfort. These innovations encourage consistent use, ultimately enhancing compliance rates.

Overcoming Common Challenges

Despite the availability of advanced tools and strategies, organizations often face hurdles when implementing fall protection measures. Below are some





common challenges and practical solutions:

- Budget Constraints. Safety investments are frequently scrutinized during budget planning, especially in industries with tight profit margins. However, framing fall protection as an essential, long-term cost-saving measure can change perspectives. Employers must consider the costs of accidents—regulatory penalties, lost productivity, and reputational damage—against the expense of preventive measures.
- 2. Resistance to Change. Implementing new safety protocols often meets resistance from employees accustomed to existing practices. Effective communication is crucial in

- overcoming this challenge. Explain how the changes benefit workers directly, and involve them in the process to build buy-in.
- 3. Maintenance and Inspection. Fall protection systems require ongoing care to remain effective. Neglecting regular inspections or failing to replace worn equipment can render even the most advanced systems useless. Creating clear schedules, assigning responsibilities, and documenting all maintenance activities ensure that nothing is overlooked.

The Role of Leadership

Effective fall protection programs don't succeed in isolation; they require strong leadership commitment. Managers and



supervisors set the tone for workplace safety by actively participating in safety initiatives and holding all employees accountable. Leadership involvement can take several forms:

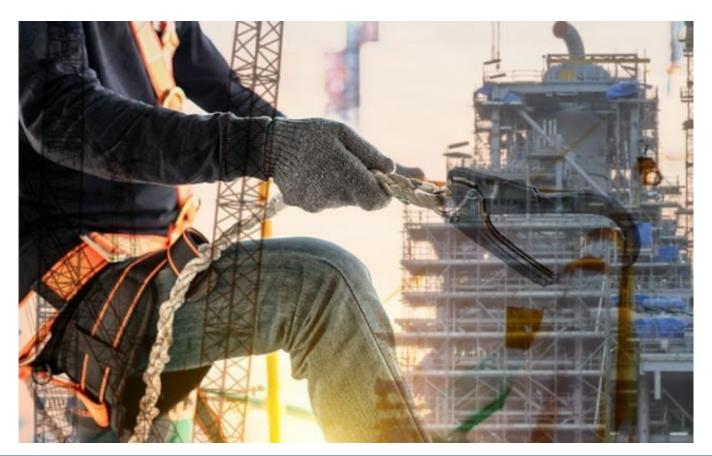
- Setting Clear Expectations: Ensure safety standards are well-defined and communicated across all levels of the organization.
- Modeling Safe Behavior: When leaders follow safety protocols themselves, they demonstrate the importance of compliance.
- Encouraging Feedback: Foster an environment where employees feel comfortable reporting hazards or suggesting improvements.

Strong leadership not only ensures compliance but also fosters a culture of trust and collaboration. Employees are more likely to embrace safety measures when they see that leadership prioritizes their well-being.

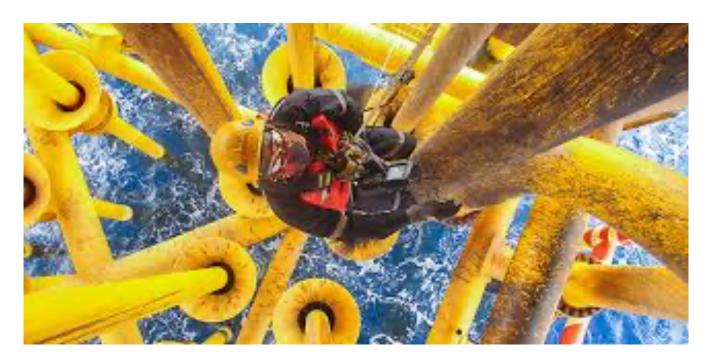
The Future of Fall Protection

As industries evolve, so too must approaches to fall protection. The future of workplace safety will likely be shaped by several key trends:

- Integration of Artificial Intelligence (AI):
 AI-powered systems can analyze real-time data to predict potential fall risks and alert workers before incidents occur.
- Customization of Safety Solutions: Onesize-fits-all solutions are becoming a thing of the past. Tailored safety systems designed to meet the unique needs of specific industries or job sites are gaining traction.
- Global Collaboration on Standards: As







 workplaces become increasingly interconnected, international safety standards are emerging to streamline practices and ensure consistency across borders.

These advancements reflect a growing recognition that fall protection is an ongoing process. Staying ahead of trends and embracing innovation ensures that workplaces remain safer and more resilient in the years to come.

A Commitment to Safety

Fall protection is not just about compliance—it's about valuing human life. Employers who invest in proactive strategies, training, and innovative solutions demonstrate a commitment to their workforce that extends beyond the bottom line. By embedding fall protection into workplace culture and operations, organizations can significantly reduce risks and create

environments where safety is second nature.

Workplace safety is a journey, not a destination. Continuous improvement, driven by technology and education, ensures that fall protection remains a priority. Together, we can work toward a future where workplace falls are a thing of the past.

E.M.A. recommends to contact our platinum supporter OSH-Med international and their partners. They can assist you with all your questions, requests, training and services in their expertise of Occupational Safety & Health, as well as Emergency & Medical Care.

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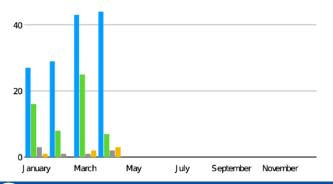
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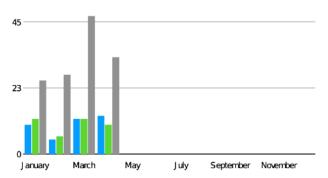
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February	29	8	1	0	5	6	27	
March	43	25	1	2	12	12	47	
April	44	7	2	3	13	10	33	
May								
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September								
October								
November								
December								
Total per annum Total	143 212	56	7	6	40 212	40	132	
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How many injured person

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