

What's Up? @St John's Hospital

Issue 33, October 1st, 2019



Flag of St. John's Medical College on Top of Kilimanjaro. Flag bearers are Dr. Chittaranjan Andrade (Professor, Psycho-Pharmacology, NIMHANS) and Dr. George D'Souza (Dean, St. John's Medical College)



Alumni of St. John's in the picture on right side (from left to right): Dr. George D'Souza, Dr. Zia, Dr. Peter D' Sa, Dr. Chittaranjan Andrade, Dr. Davies.



World Heart Day 2019

EDITORIAL TEAM:

Alma Lakra, Archana S, Avinash. H. U, Bhavyank Contractor, Blessy Susan Biji, Deepak Kamath, Jennifer Gabriela, Jyothi Idiculla, Manu. M. K. Varma, Monica Rita Hendricks, Nivedita Kamath, Rakesh Ramesh, Reena Menon, Ruchi Kanhere, Sanjiv Lewin, Sanjukta Rao, Santu Ghosh, Saudamini Nesargi, Sheela Immaculate, Srilakshmi Adhyapak, Uma Maheshwari, Rev. Fr. Vimal Francis, Winston Padua



St John's National Academy of Health Sciences
St John's Medical College Hospital, Bengaluru

CONTENTS

<u>Message From The Editorial Team</u>	<u>02</u>
<u>Updates This Week</u>	
<u> World Heart Day</u>	<u>03</u>
<u> Breast Cancer Awareness Skit.....</u>	<u>05</u>
<u> Young Scientist Award.....</u>	<u>06</u>
<u> Trusted Hospitals 2019 (reader's Digest).....</u>	<u>07</u>
<u> 1st Floor new OT</u>	<u>08</u>
<u> Best Private Hospital in Bangalore (The Week)</u>	<u>09</u>
<u> Thanksgiving Time.....</u>	<u>10</u>
<u> Friday Clinical Meeting</u>	<u>12</u>
<u>Rhyme Chime (Depression)</u>	<u>14</u>
<u>Research Snippets (Questionnaire)</u>	<u>15</u>
<u>Ig Nobel.....</u>	<u>16</u>
<u>Survivor's Corner</u>	<u>17</u>
<u>Grey Matters</u>	<u>18</u>
<u>St. John's Watchdog</u>	<u>19</u>
<u>Laughter Is The Best Medicine</u>	<u>21</u>
<u>St. John's Fountainhead (Article 1).....</u>	<u>23</u>
<u>St. John's Fountainhead (Article 2).....</u>	<u>24</u>
<u>The Quotable Osler</u>	<u>25</u>
<u>Medicine Dis Week.....</u>	<u>25</u>
<u>Reference 1 of Medicine Dis Week.....</u>	<u>26</u>
<u>Reference 2 of Medicine Dis Week.....</u>	<u>27</u>
<u>The Story Of Medicine.....</u>	<u>28</u>
<u>Pearls Of Wisdom</u>	<u>28</u>
<u>L Johnny</u>	<u>29</u>
<u>Did You Know?</u>	<u>29</u>
<u>Grey Matters (Answers)</u>	<u>30</u>
<u>Announcements.....</u>	<u>31</u>



MESSAGE FROM THE EDITORIAL TEAM

Dear All!

We are pleased to share thirty third issue of “What’s Up? @ St John’s Hospital” magazine today. We welcome Ms. Monica Rita Hendricks from college of Nursing to our editorial team.

The present issue is themed red to highlight ‘World Heart Day’ which was observed on 29th September 2019. We thank Dr. Srilakshmi Adhyapak (Associate Professor, Department of Cardiology) and Dr. Kiron Varghese (Professor and Head, Department of Cardiology) for providing us a brief write up on account of world heart day.

Do not miss the story of a newborn baby girl was successfully treated and now grown to become a delightful toddler, in the section ‘Survivor’s Corner’. Our Watchdog busts the fake message on ‘Exceptional benefits of Celery juice’.

Please feel free to communicate with us to publish your achievements. Feedback on any section of the magazine is welcome. Happy Reading!!

Editorial Team

CONTENTS



UPDATES THIS WEEK

World Heart Day

29th September 2019

- *Dr.Srilakshmi Adhayapak (Associate Professor) and Dr. Kiron Varghese (Professor and Head) (Department of Cardiology)*

In May 2012 global leaders made a resolution to reduce world mortality from non-communicable diseases(NCD) by 25% by the year 2025. It is well recognized that cardiovascular disease (CVD) is accountable for nearly half of all NCD deaths making it the world's number one killer.

The World Heart Federation nominated September 29th as World Heart Day to inform people around the globe that CVD, including heart disease and stroke, is the world's leading cause of death claiming 17.9 million lives each year, and earmarked this day to highlight the actions that individuals can take to prevent and control CVD.

The aim is to educate people that by controlling risk factors such as tobacco use, unhealthy diet and physical inactivity, at least 80% of premature deaths from heart disease and stroke could be avoided.

It is a global campaign during which individuals, families, communities, and governments around the world participate in activities to take charge of their heart health and that of others. Through this campaign, the World Heart Federation unites people from all countries and backgrounds in the fight against the CVD burden and inspires and drives international action to encourage heart-healthy living across the world.

At St. John's Medical College Hospital, the Department of Cardiology has taken several steps in this direction through various activities. On the Hospital day, we encouraged risk factor screening for all visitors to our stall free of cost, inclusive of checking BMI, Blood Pressure and Random Blood Sugar. Our Department has been doing angioplasties and Permanent Pacemaker insertions at a highly concessional rate for underprivileged patients with donations from philanthropists, friends and well wishers.



**WORLD
HEART
DAY**
29 SEPTEMBER

CONTENTS



World Heart Day

The department of cardiology have been doing hundreds of angioplasties and pacemaker implantations over the past 10 years with help from an NGO and well wishers. This NGO has also helped concessional corrective cardiac surgeries for 3 children. Last year, we conducted a free angioplasty camp for underprivileged patients with single vessel disease requiring a single stent.



Team members of the NGO with the Department of Cardiology at SJMCH.

In this camp, 19 patients from across India who were underprivileged underwent successful angioplasties with drug eluting stents, completely free including hospital stay, investigations etc. This camp was aimed at providing free treatment for the sole breadwinners of the families affected by myocardial infarction in the most productive years of life. In our Department, we believe that heart health for everyone is a fundamental human right and therefore no person should be denied lifesaving treatment due to economic constraints. Poor patients are also being given free medicines on a long term basis.

World Heart Day forms a platform for the CVD community to unite in the fight against CVD and reduce the global disease burden.



The president of the NGO (Left) with a patient who underwent angioplasty. Few of the patients who underwent free coronary angioplasty in the camp conducted last year. Seen in the Cath Lab at SJMCH with Dr Kiron Varghese



Breast Cancer Awareness Skit

13th September 2019

3rd Year MBBS Students

Third year MBBS students performed a skit on Breast cancer awareness in the Oncology OPD on 13th September 2019. This was on account of the upcoming Breast cancer awareness month.



PC: Dr. Rakesh Ramesh



YOUNG SCIENTIST AWARD

13th September 2019

Dr. Farah Naaz Fathima

Dr. Farah Naaz Fathima, Associate Professor, Department of Community Health was presented “Young Scientist” award at the Karnataka Association of Community Health (KACH) conference on 13th September 2019. The young Scientist Award in community Health was instituted in the year 1998 by the KACH.



Do you want to access all
the previous issues of the
Magazine?

CLICK HERE →

*What's Up?
@St John's Hospital*

CONTENTS



Trusted Hospitals - 2019

Reader's Digest

September 2019 Issue

St. John's Medical College hospital has been voted as one of the trusted hospitals overall as well as in several specialties in a survey conducted by 'Reader's Digest' this year. Some snapshots are given below.



BENGALURU

- ★ Mallya Hospital
- ★ Manipal Hospitals, HAL Airport Road
- ★ Narayana Multispeciality Hospital, HSR Layout
- ★ Pristine Hospital
- ★ **St John's Medical College Hospital**

PEDIATRICS

BENGALURU

- ★ Manipal Hospitals, HAL Airport Road
- ★ Narayana Institute of Cardiac Sciences, Hosur Road
- ★ **St John's Medical College Hospital**
- ★ The Apollo Hospital, Bannerghatta
- ★ The Bangalore Hospital

CARDIOLOGY

BENGALURU

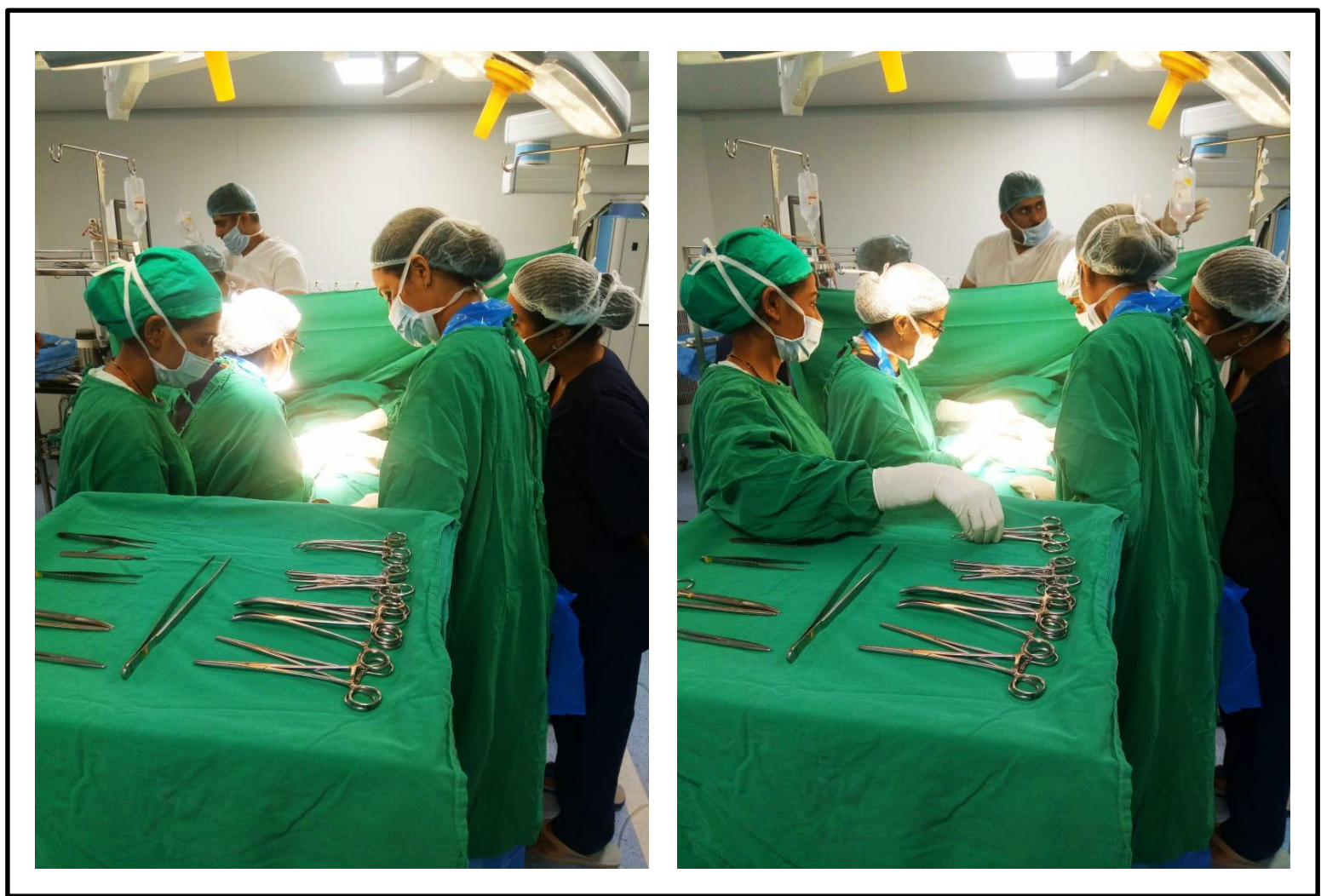
- ★ Mallya Hospital
- ★ Pristine Hospital
- ★ St. Philomena's Hospital
- ★ **St John's Medical College Hospital**
- ★ The Apollo Hospital, Bannerghatta

OBSTETRICS & GYNAECOLOGY

CONTENTS

1st Floor New Operation Theatres – Now Functional 27th September 2019

The Newly built operation theatres in the first floor started functioning on 27th September 2019. Congratulations to Dr. Ramesh L J (AMS and Professor of Orthopedics), Dr. Bindhu (Professor and Head, Anesthesiology) and Anesthesiology Team, Dr. Annamma Thomas (Professor and Head, OBG) and OBG team, Rev. Fr. Jesudoss (Associate Director, Finance), Rev. Fr. Pradeep Kumar Samad (Associate Director Hospital), Mr. Stephen (General Manager, Maintenance) and Mr. Patil for the excellent new facility on 1st floor. Not to miss mentioning our nursing team – CNS (Chief of Nursing Services), Nursing Superintendent, Mrs. Gracy, and Sr. Rosy. Also thanks to Dr. Savitha Nagaraj (AMS and Professor of Microbiology) with team HICC (Hospital Infection Control Committee) for bringing together everyone including administration, engineering, air handling, SOPs and taking the onus to ensure smooth functioning at every level.



Best Private Hospital - Bengaluru

The Week Magazine

29th September 2019

St. John's Medical College hospital ranked **5th** in 'The Week Magazine' Survey of 2019.

Bengaluru	
Rank	Hospital
1	Manipal Hospitals, HAL Airport Road
2	Apollo Hospitals
3	Narayana Health City
4	Fortis Hospital, Bannerghatta Road
5	St. John's Medical College Hospital
6	Aster CMI Hospital
7	Columbia Asia Referral Hospital, Yeshwanthpur
8	Ramaiah Memorial Hospital
9	BGS Gleneagles Global Hospitals
10	Sakra World Hospital
11	Vikram Hospital
12	Sagar Hospitals



[CONTENTS](#)



Thanksgiving Time

Several departments organized thanksgiving parties for all the nursing and administrative support staff for their invaluable support and hardwork during the NABH and MCI inspections.



Do you want to access all the previous issues of the Magazine?

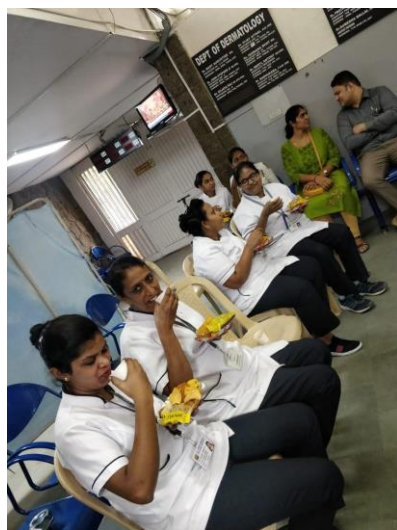
[CLICK HERE →](#)

***What's Up?
@St John's Hospital***



Thanksgiving Time

Several departments organized thanksgiving parties for all the nursing and administrative support staff for their invaluable support and hardwork during the NABH and MCI inspections.



24th SEPTEMBER: DEPARTMENT OF DERMATOLOGY



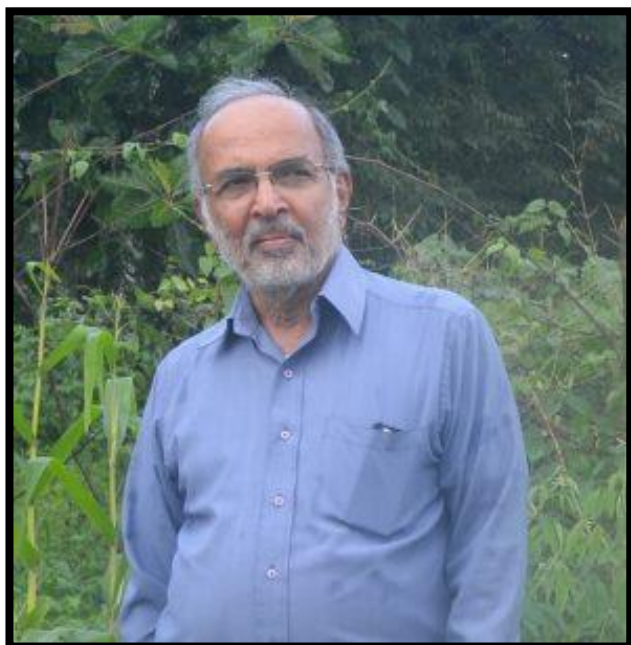
FRIDAY CLINICAL MEETING

20th September 2019

The First Professor Prakash Shetty Public Lecture

Nutrition, Diet and Public Health

- *Prof. K. VijayRaghavan FRS*
(Principal Scientific Advisor to Government of India)



Professor Prakash Shetty completed his Graduate and Postgraduate education from Christian Medical College (CMC), Vellore. He was Professor and Head, Department of Physiology, Head of Nutrition Research in St. John's Medical College. He has made commendable contribution in the field of Medicine. The first public lecture in memory of Prof. Shetty was organised by St. John's research institute on 20th September 2019

The lecture was delivered by Prof VijayRaghavan, who has earlier served as Secretary, Department of Biotechnology (DBT, Govt. of India), and as the Director of National Centre for Biological Sciences (NCBS). He is currently on the management board of the International Centre of Theoretical Sciences (ICTS) of Tata Institute of Fundamental Research (TIFR) and of the TIFR Centre for Interdisciplinary Sciences, Hyderabad. He is also a director of the Centre for Cellular and Molecular Platforms. He is recipient of prestigious 'Padma Shri' award and 'Infosys Prize in life sciences category'



[CONTENTS](#)



FRIDAY CLINICAL MEETING

Nutrition, Diet and Public Health

Professor Vijayraghavan addressed three important issues pertaining to Nutrition, Diet and Public Health in our country:

1. Complexity of problem

Overall the problem is complex and is multifaceted, multifactorial in nature. The Link between agriculture and nutrition was highlighted. Promoting nutrition sensitive agriculture by incorporating neglected & underutilized crops. There is a cycle of interaction between agriculture, economic growth & nutritional outcomes. Most research in our country is on staples but not on micronutrients. There is a lack of focus on pulses, Vegetables, fruits, micronutrients (is changing now). There is lack of information about cost effectiveness. Long-term Interventions are made difficult by politics and governance, because their focus is largely on short term goals.

2. Current state of nutrition in country

68% of under 5 deaths are due to malnutrition. Malnutrition was directly proportional to development of states. We will not be able to meet 2022 and 2030 targets of National Nutrition Mission, with the current rate of progress.

3. How do we correct. What role does science have in helping meet these aspirations?

Relationship between the nutrition and nutrition stem-cell was discussed. There is a direct effect of nutrition on male stem cells, female stem cells, neural stem cells, hematopoietic stem cells, intestinal stem cells etc. Hence a cost effective nutrition can be suggested by scientific research.

The lecture came to an end with a message that closer interaction between elite (scientists, politicians, doctors etc.) and society is required to address key issues at the ground level.





Rhyme Chime...

DEPRESSION

- Dr Nitya Raghu

A small event can trigger the pain,
And a cloud sweeps over the mind.
Rationality ceases, logic is questioned
Causing an agony unique to its kind

The wave of melancholy washes over over.
Silent screams behind closed doors,
Echo memories of unheard tales,
Told by the tears on the bathroom floor.

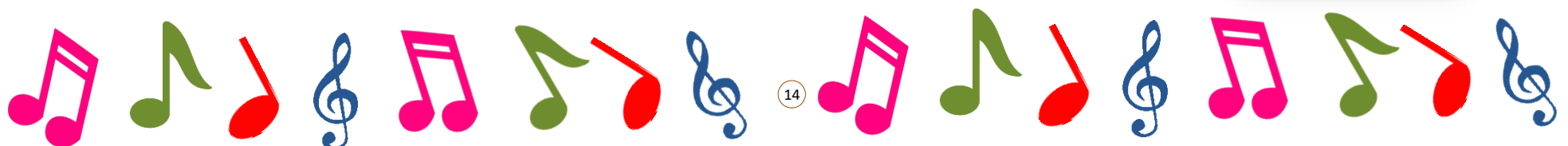
Self doubt, self hate and helplessness
Consume the very soul.
Neither the brightest sun, not the freshest rain,
Can bring the cheer it used to before.

Starved of happiness, they break,
Bit by bit, cut by cut.
Scarlet drops flow like drugs in veins,
As their world, slowly, closes shut.

But their masks hide the truth
From unsuspecting passers-by,
Who don't see the anguish behind the smiles
From the fresh open wounds, invisible to the eye.



[CONTENTS](#)

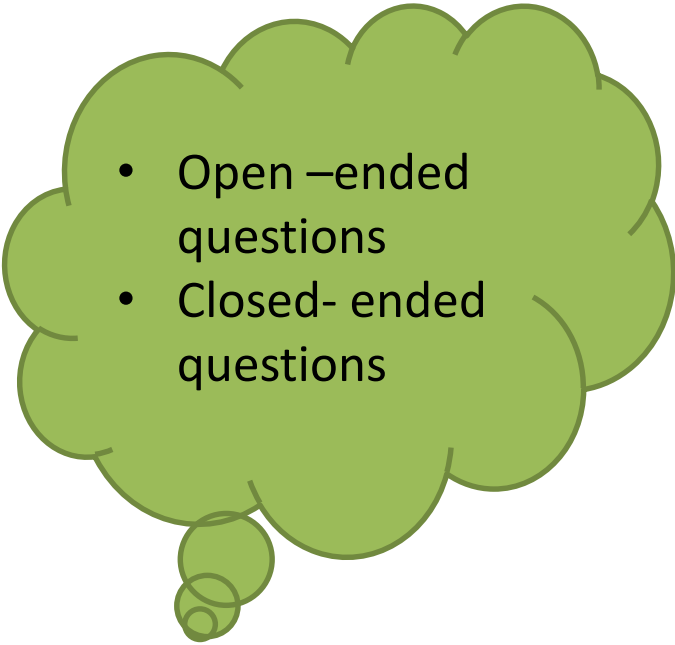


RESEARCH SNIPPETS

QUESTIONNAIRE

Researcher's collecting structured self-report data use a formal, written instrument.

A **Questionnaire** is a document used to gather self-report data via self-administration of questions, either manually or electronically.

- 
- Open –ended questions
 - Closed- ended questions

Types of structured questions

Open ended questions allow respondents to respond in their own words in a narrative fashion.

Eg. What was the biggest problem you faced after your surgery?

Closed ended questions offer respondents response options from which they must choose the one that most closely matches the appropriate answer

Eg. Have you smoked a cigarette within the past 24 hours?
Yes/ No.

IG NOBEL



1995 - DENTISTRY

Robert H. Beaumont

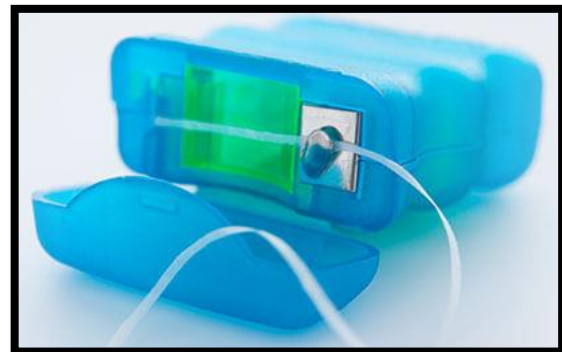
Waxed or Unwaxed Dental Floss!

Robert H. Beaumont, of Shoreview, Minnesota, for his incisive study "Patient Preference for Waxed or Unwaxed Dental Floss."

100 patients randomly presenting for routine dental examinations volunteered to sample a brand of similar-appearing waxed and unwaxed dental floss. After flossing an anterior and a posterior contact area with both types, the patients indicated whether they preferred the waxed or unwaxed floss.



UNWAXED FLOSS



WAXED FLOSS

21% Vs **79%**

Secondary Outcomes:

- Only **29.5%** of the patients claimed to floss daily.
- **53.5%** floss irregularly but at least once a week
- **17%** do not floss even once a week.
- **56%** preferred Mint flavoured waxed floss!

*Beaumont RH. J Periodontol. 1990 Feb;61(2):123-5.





SURVIVOR'S CORNER

A baby girl weighing 1 kg was delivered at 30 weeks of gestation. Although tiny, she initially needed only non invasive ventilation. On day 3 of life however she developed refractory hyperkalemia of 9.7meq/L and acute kidney injury (AKI) - requiring peritoneal dialysis (PD). This makes her the smallest baby to have ever undergone a PD in St. Johns! Just as the PD catheter was inserted, she developed an SVT (Supraventricular Tachycardia) which resolved conservatively but required invasive ventilation for the next few days. The aetiology for her AKI was thought to be angiotensin receptor blockers which the mother was taking, however the AKI resolved completely!

At 3 months of life, the baby required a surgical ligation of the ductus arteriosus as it was causing recurrent lower respiratory tract infections. She sailed through the surgery and had an uneventful post operative course.

A month later, she required laser for her eyes to treat retinopathy of prematurity.

After all these procedures, she is a delightful toddler who just celebrated her first birthday! She is neurologically normal, her vision is fine and her AKI has completely resolved.

Her tenacious parents, in spite of many financial difficulties, donated some money to the Child For Life fund on her first birthday!



Picture is published with informed consent from the parents





GREY *Matters!*



THE POWERPUFF GIRLS (Part 1) *Women Nobel Laureates in Medicine*

1. Map this lady laureate who discovered the GPS inside us!
2. This physicist made a path breaking invention that revolutionized diagnostic assays and won the Nobel for her.
3. She was the first Nobel Laureate in Medicine who proudly shared the honour with her spouse!
4. Spurred to discover a treatment for cancer after losing her grandparent to cancer, this Nobel laureate has discovered not only cancer drugs but also antiviral agents!
5. This Nobel Laureate was the first woman botanist to win an UNSHARED Nobel in Medicine and Physiology for her work on gene transposition



[CLICK HERE FOR ANSWERS](#)

[CONTENTS](#)

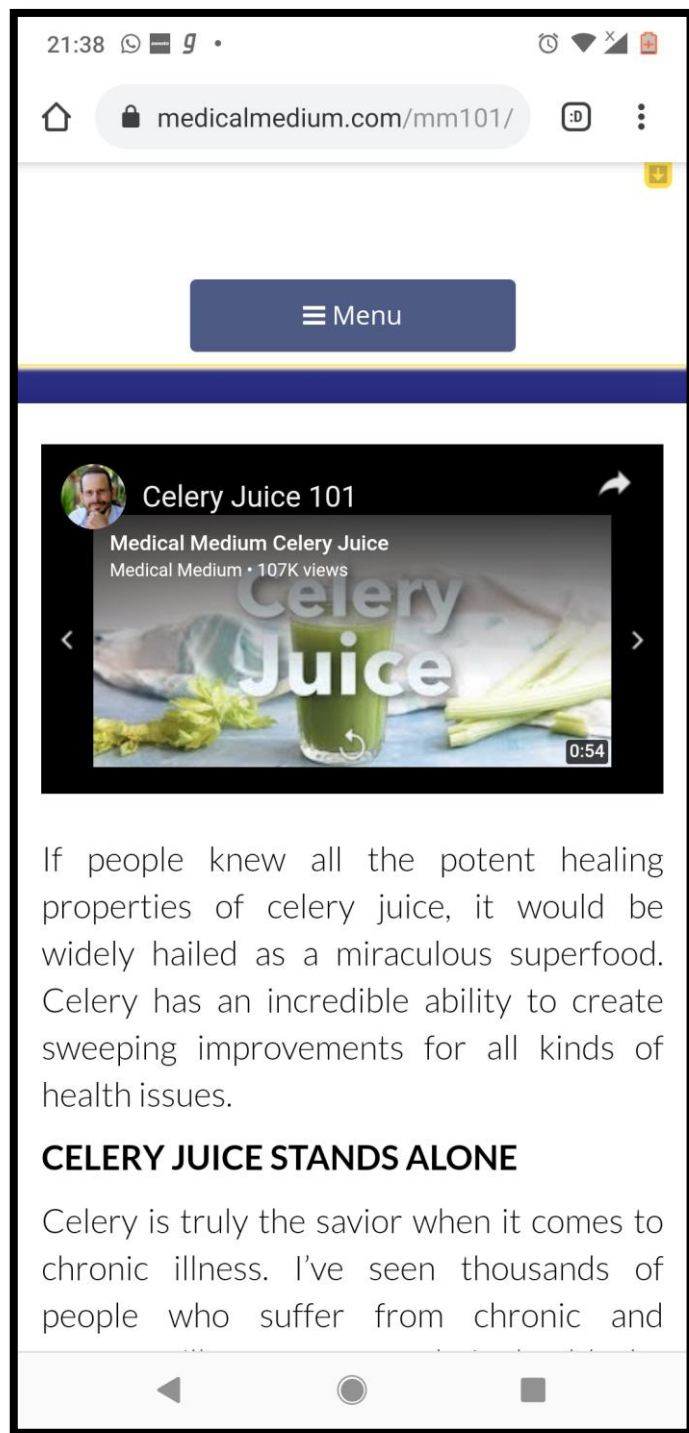




CELERY JUICE

Overview: The article for this issue focuses on the content produced by a popular website and Instagram account 'medicalmedium.com' run by one Mr. Anthony William. The website posts several videos and articles that make claims about the healing properties of many plants, vegetables and herbs. We verify the claim of the very first article 'Celery Juice 101'.

Content: The article starts with a title in bold "Celery Juice Stands Alone" and the line "If people knew all the potent healing properties of celery juice, it would be widely hailed as a miraculous super-food. Celery is the true saviour when it comes to chronic illness. I've seen thousands of people who suffer from chronic and mystery illness restore their health by drinking 16 ounces of celery juice daily on an empty stomach." It then recommends methods to prepare celery juice and claims that 16 ounces of celery juice a day is ideal for benefits and increasing intake up to 24 to 32 ounces a day can be extremely beneficial for anyone suffering with chronic illness and symptoms. The article then explains that the benefits of the juice are due to the "concentrated undiscovered cluster salts" in celery rebuild hydrochloric acid, 'strengthens the bile' and 'restores the central nervous system by removing toxins and poisons by de-toxifying the liver'.



If people knew all the potent healing properties of celery juice, it would be widely hailed as a miraculous superfood. Celery has an incredible ability to create sweeping improvements for all kinds of health issues.

CELERY JUICE STANDS ALONE

Celery is truly the savior when it comes to chronic illness. I've seen thousands of people who suffer from chronic and

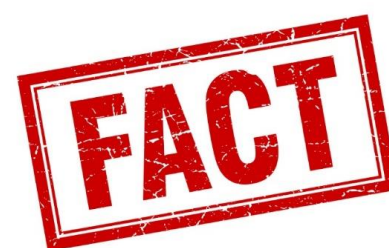




CELERY JUICE

Factcheck : A Pubmed search revealed that there is no evidence to support the above claims. There are a few in-vitro studies (cell-cultures/ petri-dish based studies) and animal studies which suggest that celery may have anti-oxidant properties, but we did not find trials conducted in humans. Further, there is absolutely no evidence to support sensational claims such as celery juice 'strengthens bile' or that it 'de-toxifies the liver'. A background check on Mr. Anthony William reveals that he has no training in medicine, nutrition or para-medical disciplines. Therefore, we may conclude that the information on this article is a hoax.

In general, it's recommended and healthy to have at least 5 servings of green vegetables and fruit per day. This helps maintain body weight (if already normal), provides dietary fiber and helps keep cholesterol and blood pressure levels in check. Claims for the health benefits of specific vegetables or fruits however, must be supported by scientific evidence.



[CONTENTS](#)





LAUGHTER IS THE BEST MEDICINE...



“Visit me for three days a week at \$300 a visit, and you’ll be cured of the fear of monsters under your bed,” the psychiatrist assures him. The price is a little steep , so he says he’ll think about it. Six months later, the two meet on the street. “Why didn’t you come to see me?” asks the psychiatrist. “Because a bartender cured me for only \$10.” “How?” “He told me to cut the legs of the bed.”



© Clipartstation.com



© Clipart-library.com

A woman and her husband stop at a dentist’s office. “I need a tooth pulled right away,” she says. “Don’t bother with the Novocain; we’re in a hurry.” “Which tooth do you want pulled?” asks the dentist. The woman shoves her husband toward the dentist. “Go ahead, dear. Show him your tooth.”

Did you hear the joke about the little mountain?
It’s hill-arious!



shutterstock.com • 98267492



© 123rf.com

My son wanted to know what it’s like to be married. I told him to leave me alone and when he did, I asked him why he was ignoring me.





New Section!!!

“ST. JOHN’S FOUNTAINHEAD”

We will publish Abstracts of your
published research.....

Based on criteria laid down by the
Editorial Board.....

Email your Full Articles at the earliest to
Dr. Santu Ghosh

santu.g@stjohns.in

Articles published in the year 2018
(1st January to 31st December 2018)

[CONTENTS](#)



Compliance, toxicity and efficacy in weekly versus 3-weekly cisplatin concurrent chemoradiation in locally advanced head and neck cancer.

¹Sandeep Muzumder, ¹Nirmala Srikantia, ²Ganesha Dev Vashishta, ¹Avinash H. Udayashankar, ³John Michael Raj, ¹M. G. John Sebastian and ¹Prashanth Bhat Kainthaje

¹Department of Radiation Oncology, St. John's Medical College and Hospital, Bengaluru, Karnataka, India

²Department of Medical Oncology, St. John's Medical College and Hospital, Bengaluru, Karnataka, India

³Department of Biostatistics, St John's Medical College, Bengaluru, Karnataka, India

Abstract

Aim

Weekly low-dose cisplatin is routinely used in concurrent chemoradiation (CCRT) in locally advanced head and neck cancer (LAHNC), despite 3-weekly cisplatin being the standard of care. We compared compliance, toxicity and efficacy in weekly versus 3-weekly cisplatin CCRT in LAHNC.

Materials and methods

In this retrospective study, weekly cisplatin 50 mg flat dose was compared with 3-weekly cisplatin 100 mg/m², when given in CCRT in LAHNC with curative intent. The study outcome was compliance, toxicity, loco-regional control (LRC), disease-free survival (DFS) and overall survival (OS).

Results

Eighty-four patients received CCRT from January 2013 to June 2017, 40 in weekly and 44 in 3-weekly arm. There was no difference between the arms not completing scheduled radiation therapy or chemotherapy. Patient receiving 200 mg/m² cisplatin is higher in 3-weekly arm compared with weekly arm (75 versus 40.9%; $p < 0.0015$). Compared with 3-weekly arm, more patient in weekly arm developed grade ≥ 3 mucositis (52.5 versus 15.9%, $p = 0.0004$), day care intravenous hydration (82.5 versus 38.6% < 0.0001) and in-patient admission (55.0 versus 18.2%; $p = 0.0004$). The 2-year LRC, DFS and OS in weekly versus 3-weekly arm were: 70 versus 61.4% ($p = 0.406$); 67.5 versus 56.8% ($p = 0.314$); 67.5 versus 61.4% ($p = 0.558$), respectively. The median time to LRR, DFs and OS was not reached.

Conclusions

Weekly cisplatin is comparable with 3-weekly cisplatin in terms of compliance, disease control and survival, but with increased grade 3 mucositis and higher admissions for supportive care.

Journal of Radiotherapy in Practice **18 (2019):** 21–25. doi: 10.1017/S1460396918000341



Anaesthetic management of endobronchial ultrasound guided trans bronchial needle aspiration: Our experience with laryngeal mask airway

¹Arpana Kedlaya, ²Rashmi Rani, ³Uma Devaraj, ⁴Priya Ramachandran, ⁵Uma Maheshwari

^{1,2}Dept. of Anaesthesiology, ^{3,4,5}Dept. of Pulmonary Medicine, St Johns Medical College Hospital, Bangalore, Karnataka, India

Abstract

Introduction: Endobronchial Ultrasound Guided Trans bronchial needle aspiration (EBUS-TBNA) is a minimally invasive diagnostic modality for evaluating intra thoracic lymph nodes, becoming one of the important tool in the armamentarium of pulmonologists. The size of the fiberscope and sharing of the airway with the bronchoscopist poses unique challenges to the anesthesiologist. In light of these developments it is important to develop an office based anesthesia technique for this relatively new procedure. Hence we did this descriptive cohort study.

Aim: To describe the accuracy and anaesthetic management of EBUS-TBNA as a day care procedure, done with general anesthesia (GA).

Materials and Methods: Data was collected from January 2017 to December 2017 at our institute from patients who underwent EBUS-TBNA under GA using second generation laryngeal mask airway (LMA). Specifically, hemodynamic status, Oxygen saturation, duration of the procedure, diagnostic yield and complications of the procedure were recorded.

Results: 23 patients underwent EBUS-TBNA under GA. All patients were found to be hemodynamically stable with fluctuations in blood pressure and heart rate being less than 20% from the baseline with no episodes of desaturation. The average number of biopsies taken is 3.3, with average duration of the procedure being 67.0 ± 17.6 (mean \pm SD) minutes. The incidence of post procedural complications like cough and sore throat were minimal. Successful diagnostic yield was found in all cases with no incidence of recall of the procedure.

Conclusion: The performance of EBUS-TBNA under general anesthesia with LMA provides great hemodynamic stability and adequate ventilation in a shared airway. It demonstrates excellent diagnostic accuracy. It provides comfort to the patient and the good examination conditions to the bronchoscopist.

Clinical Significance: Use of P-LMA solves the dilemma of managing ventilation during EBUS TBNA without affecting the diagnostic yield of the procedure.

Indian Journal of Clinical Anaesthesia, October-December, 2018;5(4):479-485.



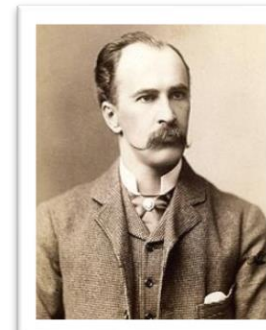
THE QUOTABLE OSLER

Love humanity through love of your profession:

The love of humanity associated with the love of his craft! - philanthropia and philotechnia - the joy of working joined in each one to a true love of his brother.



© <https://ballmedia.com>



SIR WILLIAM OSLER



© <https://gisp.com>

The wisdom of tomorrow is the foolishness of yesterday:

The philosophies of one age have become the absurdities of the next, and the foolishness of yesterday has become the wisdom of tomorrow.

REF: The Quotable OSLER: Edited by Mark E Silverman, T. Jock Murray, Charles. S Bryan



MEDICINE DIS WEEK

A Bird's Eye View.....

White coat hypertension (WCH) increases risk of cardiovascular events and mortality.

The long-term cardiovascular risk of isolated elevated office blood pressure (BP) is unclear. WCH is defined as elevated office blood pressure with normal out-of-office blood pressure readings, and white coat effect (WCE) is defined as elevated office blood pressure in a patient treated for hypertension with normal out-of-office readings. In a metaanalysis of 27 observational studies, it was shown the WCH was associated with increased risk of cardiovascular events and mortality as compared to normotensive subjects. Whereas WCE was not associated with increased risk.

- Cohen JB et al. *Ann Intern Med.* 2019;170(12):853.

Role of Colonoscopy after Acute Diverticulitis.

Routine colonoscopy was traditionally recommended after acute diverticulitis to exclude coexistent malignancy. Improved CT imaging may make routine colonoscopy less required over time but most guidelines still recommend it. Metanalyses of 17 studies with 3296 patients. The pooled prevalence of Advanced colorectal neoplasia was 6.9 (95 per cent c.i. 5.0 to 9.4) per cent and that of colorectal carcinoma was 2.1 (1.5 to 3.1) per cent. In subgroup analysis of patients with uncomplicated acute diverticulitis, the prevalence of colorectal carcinoma was only 0.5 (0.2 to 1.2) per cent. Routine colonoscopy may be omitted in patients with uncomplicated diverticulitis if CT imaging is otherwise clear. Patients with complicated disease or ongoing symptoms should undergo colonoscopy.

-Rottier SJ et al., *Br J Surg.* 2019;106(8):988.

CONTENTS



Ann Intern Med. 2019 Jun 18;170(12):853-862. doi: 10.7326/M19-0223. Epub 2019 Jun 11.

Cardiovascular Events and Mortality in White Coat Hypertension: A Systematic Review and Meta-analysis.

Cohen JB¹, Lotito MJ², Trivedi UK³, Denker MG¹, Cohen DL¹, Townsend RR¹.

Author information

- 1 University of Pennsylvania, Philadelphia, Pennsylvania (J.B.C., M.G.D., D.L.C., R.R.T.).
- 2 Princeton University, Princeton, New Jersey (M.J.L.).
- 3 Rutgers New Jersey Medical School, Newark, New Jersey (U.K.T.).

Abstract

BACKGROUND: The long-term cardiovascular risk of isolated elevated office blood pressure (BP) is unclear.

PURPOSE: To summarize the risk for cardiovascular events and all-cause mortality associated with untreated white coat hypertension (WCH) and treated white coat effect (WCE).

DATA SOURCES: PubMed and EMBASE, without language restriction, from inception to December 2018.

STUDY SELECTION: Observational studies with at least 3 years of follow-up evaluating the cardiovascular risk of WCH or WCE compared with normotension.

DATA EXTRACTION: 2 investigators independently extracted study data and assessed study quality.

DATA SYNTHESIS: 27 studies were included, comprising 25 786 participants with untreated WCH or treated WCE and 38 487 with normal BP followed for a mean of 3 to 19 years. Compared with normotension, untreated WCH was associated with an increased risk for cardiovascular events (hazard ratio [HR], 1.36 [95% CI, 1.03 to 2.00]), all-cause mortality (HR, 1.33 [CI, 1.07 to 1.67]), and cardiovascular mortality (HR, 2.09 [CI, 1.23 to 4.48]); the risk for WCH was attenuated in studies that included stroke in the definition of cardiovascular events (HR, 1.26 [CI, 1.00 to 1.54]). No significant association was found between treated WCE and cardiovascular events (HR, 1.12 [CI, 0.91 to 1.39]), all-cause mortality (HR, 1.11 [CI, 0.89 to 1.46]), or cardiovascular mortality (HR, 1.04 [CI, 0.65 to 1.66]). The findings persisted across several sensitivity analyses.

LIMITATION: Paucity of studies evaluating isolated cardiac outcomes or reporting participant race/ethnicity.

CONCLUSION: Untreated WCH, but not treated WCE, is associated with an increased risk for cardiovascular events and all-cause mortality. Out-of-office BP monitoring is critical in the diagnosis and management of hypertension.

PRIMARY FUNDING SOURCE: National Institutes of Health.

PMID: 31181575 PMID: [PMC6736754](#) [Available on 2019-12-18] DOI: [10.7326/M19-0223](#)

Meta-analysis of the role of colonoscopy after an episode of left-sided acute diverticulitis

S. J. Rottier^{1,2,4} , S. T. van Dijk², A. A. W. van Geloven⁴, W. H. Schreurs¹, W. A. Draaisma⁵, W. A. van Enst⁶, J. B. C. M. Puylaert⁷, M. G. J. de Boer⁸, B. R. Klarenbeek⁹, J. A. Otte¹⁰, R. J. F. Felt³ and M. A. Boermeester²

¹Department of Surgery, Northwest Clinics, Alkmaar, Departments of ²Surgery and ³Gastroenterology, Amsterdam UMC, Amsterdam, ⁴Department of Surgery, Tergooi Hospital, Hilversum, ⁵Department of Surgery, Jeroen Bosch Hospital, 's-Hertogenbosch, ⁶Knowledge Institute of Medical Specialists, Utrecht, ⁷Department of Radiology, Haaglanden Medical Centre, The Hague, ⁸Department of Infectious Diseases, Leiden University Medical Centre, Leiden, ⁹Department of Surgery, Radboud University Medical Centre, Nijmegen, and ¹⁰Department of Internal Medicine, ZorgSaam Hospital, Terneuzen, the Netherlands

Correspondence to: Professor M. A. Boermeester, Department of Surgery, AMC, Meibergdreef 9, 100 DD, PO Box 22660, Amsterdam, the Netherlands (m.a.boermeester@amc.nl)

Background: Routine colonoscopy was traditionally recommended after acute diverticulitis to exclude coexistent malignancy. Improved CT imaging may make routine colonoscopy less required over time but most guidelines still recommend it. The aim of this review was to assess the role of colonoscopy in patients with CT-proven acute diverticulitis.

Methods: PubMed and Embase were searched for studies reporting the prevalence of advanced colorectal neoplasia (ACN) or colorectal carcinoma in patients who underwent colonoscopy within 1 year after CT-proven left-sided acute diverticulitis. The prevalence was pooled using a random-effects model and, if possible, compared with that among asymptomatic controls.

Results: Seventeen studies with 3296 patients were included. The pooled prevalence of ACN was 6.9 (95 per cent c.i. 5.0 to 9.4) per cent and that of colorectal carcinoma was 2.1 (1.5 to 3.1) per cent. Only two studies reported a comparison with asymptomatic controls, showing comparable risks (risk ratio 1.80, 95 per cent c.i. 0.66 to 4.96). In subgroup analysis of patients with uncomplicated acute diverticulitis, the prevalence of colorectal carcinoma was only 0.5 (0.2 to 1.2) per cent.

Conclusion: Routine colonoscopy may be omitted in patients with uncomplicated diverticulitis if CT imaging is otherwise clear. Patients with complicated disease or ongoing symptoms should undergo colonoscopy.

Paper accepted 5 March 2019

Published online in Wiley Online Library (www.bjs.co.uk). DOI: 10.1002/bjs.11191

Introduction

The incidence rates of acute diverticulitis have been increasing rapidly over recent decades^{1–3}. Acute diverticulitis has traditionally been associated with an increased risk of colorectal malignancy, which has led to routine colonic evaluation by colonoscopy after the episode of acute diverticulitis has resolved. However, a causal association between colonic diverticulitis or diverticulosis and malignancy has never been found. The association is most likely explained by misdiagnosis of colorectal malignancy as acute diverticulitis. The fact that acute diverticulitis used to be diagnosed based on the clinical picture or barium enemas, and later on by ultrasonography, probably increased the number of misdiagnoses and thereby played

a role in establishing the association between acute diverticulitis and colorectal malignancy^{4,5}. CT has a higher accuracy for the detection of an alternative diagnosis such as colorectal carcinoma^{6,7}. If this were accurate enough, colonoscopy would not be needed in every patient, thereby reducing the healthcare burden and colonoscopy-related morbidity^{8–10}.

Even though the risk of colorectal carcinoma in patients with acute diverticulitis has been the topic of debate in multiple studies^{11–18}, there remains a lack of clarity. The majority of guidelines^{11,13–15,17,18} still recommends routine colonoscopy after an episode of acute diverticulitis. The objective of this review was to assess the role of colonoscopy in patients with CT-proven acute di

WILLIAM STEWART HALSTED

William Stewart Halsted's entry to medicine was a great surprise to his fellow graduates at Yale. Prior to joining college of physicians and surgeons (1874), he had devoted his time to football, baseball, gymnastics and rowing. In 1878 he moved to Vienna to be trained in surgery and research with one of his trainers being Theodor Billroth. Back in New York in 1880, Halsted was one the successful young surgeons in the city.

After being rehabilitated from addiction, Halsted as a surgeon, was highly cautious. This lead to 'surgery of safety', where care was taken to not to injure patients' tissues more than necessary, with a result that they recovered quicker and better in shape. Halsted had trained 17 house surgeons at John Hopkins, who further trained 166 resulting Halsted's methods becoming the standard.

Halsted's research methods resulted in exceptional operations. This included surgery to inguinal hernia, bileduct, intestines, thyroid gland arterial aneurysms and breast cancer. In the winter of 1889/90, one of his nurses complained of dermatitis caused by mercuric chloride in her hands and arms. This made Halsted request the Goodyear company to make a pair of thin rubber gloves with gauntlets. He later married that nurse.



William Stewart Halsted



Halsted is seen second from the left bending over the operative field



© semantic scholar

Halsted's associates and residents commemorating the 25th Anniversary of Johns Hopkins Hospital, October 7, 1914.



© semantic scholar

PEARLS OF WISDOM

Do a deed of simple kindness; though its end you may not see, it may reach, like widening ripples, down a long eternity.

- Joseph Norris

Acts of Simple Kindness

© https://free-classifieds-usa.com



©https://www.underconsideration.com

We love the things we love for what they are.

- Robert Frost

Ideas are like stars; you will not succeed in touching them with your hands. But like the seafaring man on the desert of waters, you choose them as your guides, and following them you will reach your destiny.

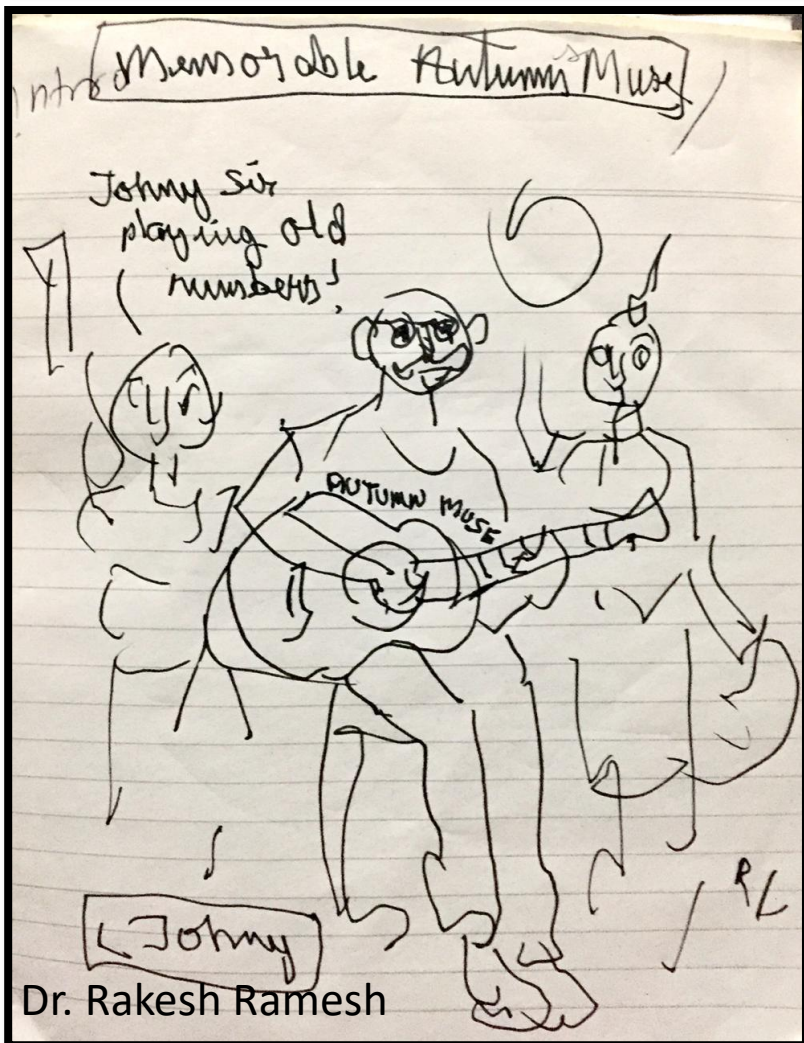
- Carl Schurz



© Pinterest



L Johnny



Did You Know?



The Ganges is the longest river in India?

If the length traversed by any river through India is considered, the holy Ganga ranks first at 2525 km. The Indus and Brahmaputra are longer in total length but the distance covered within the Indian subcontinent is substantially shorter.

Source: Wikipedia

CONTENTS



DISCLAIMER: For Private Circulation and Academic Non-Commercial Purpose only

DO YOU HAVE ANY INTERESTING CONTENT TO BE PUBLISHED?

Write to Dr. Avinash. H. U: avinash.hu@stjohns.in



GREY *Matters!*



POWERPUFF GIRLS (Part 1) *Women Nobel Laureates in Medicine*

ANSWERS

1. MAY-BRITT MOSER(2014)
2. ROSALYN SUSSMAN YALLOW (1977) – Radio Immuno Assay
3. GERTY THERESE CORI (WITH CARL CORI, 1947) - Cori Cycle
4. GERTRUDE B ELON (1988)- Purinethol. Acyclovir, Azidothymidine
5. BARBARA MCCLINTOCK (1983)

[CLICK HERE TO GO BACK TO QUESTION](#)

[CONTENTS](#)





ANNOUNCEMENTS



INTERNATIONAL SPEAKERS



Ms. Jane Field, Paediatric Physiotherapist, Bluebell Wood Children's Hospital, UK



Ms. Julie Hudson, Paediatric Physiotherapist, Southwest Yorkshire Partnership Trust, UK

NATIONAL SPEAKERS

Dr Sudha N M, Ophthalmologist, Spastic Society of Karnataka

Ms Rekha Chalapathy, Vision Therapist, Milestones Visual Development Center, Bangalore

Dr Sashikala, Developmental Paediatrician, Sagar Hospitals, Bangalore

Dr Karthik S Babu, Associate Professor, Physiotherapy, Manipal Academy of Health Sciences, Bangalore

Ms Sujata Missal, HOD, Occupational Therapy, KMCH, Coimbatore

Ms Geetika Sood, Occupational Therapist, Apollo Cradle, Bangalore

SJMCH SPEAKERS/ FACILITATORS

Dept of Paediatrics		Dr Maria Lewin
Dept of Neonatology		Dr Chandrakala
Dept of Ophthalmology		Dr Usha Vasu
		Dr Ankita
		Dr Niveditha
Dept of Physiotherapy		Dr Annie Thomas
		Ms Smita E Joseph
		Ms Jennifer Vincent
		Ms Nirrmy Jose
Dept of PMR	Occupational Therapist	Ms Sikha Sharma
	ASLP	Ms Sangeetha
Unit of Hope	Special Educator	Dr Shilpa
	ASLP	Ms Littina
	ASLP	Ms Binitha
	CARE-ADD	Dr Sowmyashree Kaku
	CARE-ADD	Ms Divya Swaminathan
Dept of ENT	ASLP	Ms Nagapoomritha
		Ms Sowmya Nayak



ST. JOHN'S NATIONAL ACADEMY OF HEALTH SCIENCES

Cerebral Palsy Symposium

"Targeting Functions through Integration"

Organized by

Department of Physiotherapy

&

Unit of Hope

on

8th & 9th November, 2019

at

"Cardinal Gracias Hall"

PATRONS

Rev Dr Fr Paul Parathazham
Director, SJNAHS

Dr George D'souza
Dean, SJMC

ORGANISING CHAIRMAN

Dr Ramesh L J

ORGANISING SECRETARY

Dr Annie Thomas

VENUE

Cardinal Gracias Hall

Ground Floor

St John's Medical College,

Sarjapur Road, Bangalore

CONTACT DETAILS

Ms Smita Joseph/ Ms Jennifer Vincent
cpsymposium2019@stjohns.in
080-22065036

Topics

Day—1 (Birth to 1 year)

- Introduction to Cerebral Palsy
- Understanding Neuroplasticity
- Early Identification in NICU
- Assessing the young infant
- Comprehensive care
- Intervention

Day—2 (1 to 3 years)

- Motor and sensory function
- Neuromusculoskeletal evaluation
- Neuromusculoskeletal intervention
- Sensory evaluation
- Sensory intervention
- Speech and hearing
- Cognitive functions

Note: The sessions will also include case discussion and video demonstrations

Who can attend?

Professionals , UG and PG students

from:

Pediatrics
Rehabilitation Physiatry (PMR)
Visual Rehabilitation Therapy
Physiotherapy
Occupational therapy
Speech therapy
Special education
Rehabilitation Psychology/
Clinical Social work

REGISTRATION FEES

(Registrations limited to first 100 delegates)

Early bird (till 25th October 2019)	Rs 1250
Till 5th November 2019	Rs 1500

(No spot registrations)

PAYMENT DETAILS

Visit Events section on www.stjohns.in to fill the online application form and make payment

ACCOMODATION DETAILS

Accommodation is not available on campus

"Targeting Functions through Integration"

"The process of rehabilitation requires a co-ordinated multidisciplinary team working to provide integrated evaluations and therapeutic interventions.

Research by S Bulekbayeva (Lancet, Apr 2017; Vol 5, Issue 4) showed that multidisciplinary approach should include medical rehabilitation, assessments, interventions, individualised education plans, physiotherapy, occupational therapy, and social adaptation .

The team must have a clear understanding of the physical, emotional, cognitive, and social consequences of a child's needs. This conference aims to focus on ways in which professionals of multiple disciplines can unite to achieve rehabilitation goals across domains during the crucial first 3 years of life and emphasizes to concentrate on strategies designed to effect functional improvement."

