

2019

Biannual Official Newsletter of
SMT. B. K. SHAH MEDICAL
INSTITUTE & RESEARCH
CENTRE

MEDICAL APOGEE VOLUME-I

Biannual Official Newsletter of SMT. B. K. SHAH MEDICAL INSTITUTE & RESEARCH CENTRE

**HON'BLE
PRESIDENT
DR.DIXIT SHAH**

**HON'BLE
CHANCELLOR
DR. HARSHAD SHAH**

**HON'BLE
VICECHANCELLOR
DR. R. P.BHARANEY**

2019

Dean: Dr. G. V. Shah

Chief Editor: Dr. Punit Singh
Assistant Professor, Ophthalmology

Co-Editors: Dr. Aditya Agrawal
Assistant Professor, Orthopaedics
Dr.Honeypal Singh Maharaul
Assistant Professor, General Surgery

Sumandeep Vidhyapeeth

Message from Chief Editor



Dr. Punit Singh

“The more that you read, the more things you will know, the more that you learn, the more places you’ll go.”—Dr. Seuss

Dear all, As the Editor-in-Chief of EBES newsletter, it gives me immense pleasure to share this newsletter. With the purpose of educating health professionals, the EBES core committee successfully completed the staff training program and PG orientation programs for the year 2019.

Message from the Dean



Dr. G.V .Shah

Dear Friends and Students,

SBKS MI&RC has one of the best faculties in the country which is an acknowledged fact. It's this reason that SBKS MI&RC is chosen over other by the brightest of students.

The students of SBKS MI&RC are its pride and its strength. I hope to be able to interact with both, the faculty as well as the students and will try to address any problem that they bring, to the best of my abilities. It will be my effort that all part of this college may function together harmoniously. It is my hope and dream that we take this institution to unprecedented heights. Towards this aim, I seek your sincere support.

Thanking You

DEPARTMENT OF ANAESTHESIA
CME on “World Anaesthesia day” Held on 16-10-2018



Dr. Dinesh Chauhan (HOD, Department of Anesthesia) gave a short speech about world anaesthesia day



As a part of this celebration, Dr Arish Sadaf 2nd year resident delivered a presentation on “History of anaesthesia”



Cake cutting and refreshment was enjoyed by the faculties and residents.

THE CME WAS CONDUCTED ON 16th OCTOBER 2018 ON WORLD ANAESTHESIA DAY BY DEPARTMENT OF ANESTHETIA.

Name of Organizing Chairperson: Dr. Dinesh Chauhan (HOD, Department of Anesthesia, SBKS MI & RC).

Dr. Dinesh Chauhan gave a short speech on world anaesthesia day. Dr Arish Sadaf delivered lecture on history of anaesthesia. Lecture on History and evolution of anaesthesia audio visual. Feedbacks of all the 36 participants were collected in pre structured Performa at the end of CME. Most of participants were satisfied with flow of Workshop and contain covered in workshop. Overall programme was good and informative.

DEPARTMENT OF MEDICINE
CME on “Seasonal flu” Held on 28-09-18



Lamp Lighting by honorable faculties



Presentation given by presenter

THE CME WAS CONDUCTED ON 28 SEPTEMBER-2018 ON “SEASONAL FLU”BY DEPARTMENT OF MEDICINE

The event was organized by Dr. Hetal Pandya (Prof & HOD, Department of Medicine, SBKS MI&RC)

Session included about registration and inauguration followed by lecture about background, outbreak, current trends and clinical presentation ,laboratory diagnosis sample transport ,management , paediatric aspect of swine flu ,preventive measures and prophylaxis.It concluded with the seasonal flu trend in our hospital

Feedbacks of all the 92 participants were collected in pre structured Performa at the end of workshop. Overall all the participants were extremely satisfied with the conference.

DEPARTMENT OF NEUROLOGY
CME on “Systemic Disease & Neurology”

Held on 14-09-18



Dr. Sanjay Prakash Welcome
Dr. G.V. Shah

Dr. Pinaki Mahato delivering
lecture



Dr. Kaushik Rana presenting
memento to Dr Hmanshu pathak
delivering lecture

Dr. C Rathore presenting momento to
Dr. Pinaki Mahato

**THE CME WAS CONDUCTED ON 14th SEPTEMBER 2018
ON SYSTEMIC DISEASE & NEUROLOGY AT
AUDITORIUM BY DEPARTMENT OF NEUROLOGY**

Name of Organizing Chairperson: Dr. G. V. Shah, the Dean, SBKSMI&RC,

Name of Organizing Secretary: Dr. Sanjay Prakash, department of neurology, SBKSMI&RC, Vadodara.

This CME aimed at sensitizing the neurologists and physicians about the advances in various other specialties. The scientific programme started with registration process at 01:30 PM followed by inauguration at 02:00 PM. Dr Sanjay Prakash welcomed all faculties and delegated.

All speakers and distinguished faculties had been felicitated by the organizing committee. It was followed by 4 talks by respected speakers, Dr Pinaki Mahata consultant Oncologist, Baroda, Dr. Himanshu Pathak, Consultant Rheumatologist Baroda, Dr. Samir Saini, Endocrinologist Baroda and Dr. Md. Hussain.

A total of 105 members participated in this CME. This Half day CME concluded at 05:00pm on 14th September, 2018. Delegates were overall satisfied with the CMEs. A few participants suggested discussing the real case in such conferences. They were happy with the arrangement.

DEPARTMENT OF OPHTHALMOLOGY

SEPTEMBER 2018

GLAUCOMA SUMMIT



**Dr.Punit singh Associate professor invited as guest faculty
at Glaucoma Society of India Annual Conference Mumbai**

DEPARTMENT OF OPHTHALMOLOGY

OCTOBER 2018

46TH ALL GUJRAT OPHTHALMOLOGICAL STATE CONFERENCE



Dr.Punit singh, Associate professor Department of Ophthalmology, Dhiraj hospital, SBKS MI& RC, Vadodara was invited as guest speaker at 46th All Gujrat Ophthalmological Conference hosted by Ahmedabad Ophthalmic society October 2018.



DEPARTMENT OF PHARMACOLOGY
WORKSHOP on “Basic Understanding on
Pharmacovigilance: Hands Technique to fill ADR form”
Held on 27-10-18

Participants Of The Workshop



Lecture 1: Pharmacovigilance Overview By Dr. B. M. Sattigeri

THE WORKSHOP WAS CONDUCTED ON 27/10/2018 ON BASIC UNDERSTANDING ON PHARMACOVIGILANCE: HANDS TECHNIQUE TO FILL ADR FORM BY DEPARTMENT OF PHARMACOLOGY.

Name of Organizing Chairperson: Dr. B. M. Sattigeri

Name of Organizing Secretary: Dr. Ervilla Dass.

With an aim to sensitize all the health care providers, the Department of Pharmacology, SBKSMI&RC, Sumandeep Vidyapeeth; had organized a half day workshop on “Pharmacovigilance Awareness Generation: Hands on training in ADR form filling & causality assessment”. Pre and Post session Questionnaire and filling up the feedback forms the workshop was ended in time, all actively participated during the workshop and group discussion.

Most of participants were satisfy with flow of workshop and contain covered in workshop

DEPARTMENT OF PHARMACOLOGY

WORKSHOP on“Pharmacovigilance Awareness Generation: Hands on training in ADR form filling”Held on 14-08-18

Pharmacovigilance Workshop Held On 14-08-18



Participants Of The Workshop

THE WORKSHOP WAS CONDUCTED ON 14/08/2018 ON PHARMACOVIGILANCE AWARENESS GENERATION: HANDS ON TRAINING IN ADR FORM FILLING BY DEPARTMENT OF PHARMACOLOGY

Name of Organizing Chairperson : Dr. B. M. Sattigeri,

Name of Organizing Secretary : Dr.Dr. Jayant Patharkar

With an aim to sensitize all the health care providers, the Department of Pharmacology, SBKSMI&RC, Sumandeeep Vidyapeeth; had organized a half day workshop on “Pharmacovigilance Awareness Generation: Hands on training in ADR form filling & causality assessment”.

Pre and Post session Questionnaire and filling up the feedback forms the workshop was ended in time,

All actively participated during the workshop and group discussion. Most of participants were satisfy with flow of workshop and contain covered in workshop

DEPARTMENT OF PHARMACOLOGY
Workshop on “Pharmacovigilance: An Awareness Generation”
Held on 16-08-18

Pharmacovigilance Work Shop Goraj 16-08-2018



Lecture 1 Pharmacovigilance An Overview By Dr B M Sattigeri



Lecture 2 How To Fill ADR Form By Dr Shruti Brahmhatt

**THE CME WAS CONDUCTED ON 16-AUGUST-2018 ON
PHARMACOVIGILANCE: AN AWARENESS GENERATION
BY DEPARTMENT OF PHARMACOLOGY**

Name of Organizing Chairperson: Dr. B. M. Sattigeri
Name of Organizing Secretary: Dr. Jayant Patharkar

With an aim to sensitize all the health care providers, the Department of Pharmacology, SBKSMI&RC, Sumandeeep Vidyapeeth had organized a half day workshop on “Pharmacovigilance Awareness Generation: Hands on training in ADR form filling & causality assessment”.

Pre and Post session Questionnaire and filling up the feedback forms the workshop was ended in time, all actively participated during the workshop and group discussion.

Most of participants were satisfy with flow of workshop and Contain covered in workshop.

DEPARTMENT OF PHARMACOLOGY
**Workshop on “Pharmacovigilance Awareness Hands on training
hoe to fill ADR form”held on 29-09-18**

Pharmacovigilance Workshop Held On 29-09-18



Participants Of The Workshop



Vote of thanks by Dr. Bhagya Sattigerl

THE CME WAS CONDUCTED ON 29-SEPTEMBER-2018 ON PHARMACOVIGILANCE AWARENESS HANDS ON TRAINING HOE TO FILL ADR FORM BY DEPARTMENT OF PHARMACOLOGY

Name of Organizing Chairperson : Dr. B. M. Sattigeri,
Name of Organizing Secretary : Dr. Jayant Patharkar

With an aim to sensitize all the health care providers, the Department of Pharmacology, SBKSMI&RC, Sumandeep Vidyapeeth; had organized a half day workshop on "Pharmacovigilance Awareness Generation: Hands on training in ADR form filling & causality assessment".

Pre and Post session Questionnaire and filling up the feedback forms the workshop was ended in time, all actively participated during the workshop and group discussion.

Most of participants were satisfy with flow of workshop and contain covered in workshop

DEPARTMENT OF PATHOLOGY

CME ON "Rational Use Of Blood & Components" Held On 01-10-18

Rational Use of Blood And Components



Welcome and Introduction by Dr. Premanth Hiriyur .



Lecture by Dr Rippal Shah.



Lecture by Dr Farzana kothari



Group photo of residents and professors.

THE CME WAS CONDUCTED ON 01-OCTOBER-2018 ON RATIONAL USE OF BLOOD & COMPONENTS BY DEPARTMENT OF IHBT AND PATHOLOGY.

Name of Organizing Chairperson :Dr.PremnathHiryur,Professor and Head of IHBT, SBKS MI & RC, Piparia.

Name of Organizing Secretary : Dr.JasminJasani, Professor, Department of Pathology, SBKS MI & RC, Piparia.

Three sessions were held by speakers,

1st Session was conducted by Dr.FarzanaKothari, Associate Professor, Department of IHBT, SSG Hospital ,Baroda on Topic: Rational use of blood and blood components .

2nd Session was conducted by Dr. Ripal Shah, Medical Director, IRC Blood Center, Ahmedabad on Topic: Aphaeresis & specialized blood components : Uses & Benefits.

3rd Session was conducted by Dr. Ashu Dogra, Assistant Professor, Department of IHBT on Topic: Interactive session between consumer and stakeholder of blood and blood components.

After that vote of thanks for such an interactive session was given by Dr. Ashu Dogra

DEPARTMENT OF PLASTIC & Reconstructive surgery
CME on “Current Management of Hemiplegia and future
role of Nerve transfer” Held on 23-08-18



Registration Desk



Dr. Paresh Gotwala giving
welcome speech to delegates.



Audience in CME

THE CME WAS CONDUCTED ON 23rd AUGUST 2018 ON CURRENT MANAGEMENT OF HEMIPLEGIA AND FUTURE ROLE OF NERVE TRANSFER BY DEPARTMENT OF PLASTIC AND RECONSTRUCTIVE SURGERY

Name of Organizing Chairperson : Dr. YogeshBhatt
Name of Organizing Secretary : Dr. PiyushDoshi

The objective of CME was to give overview on future role of nerve transfer in treatment of hemiplegia Patients. Feedbacks of all the 30 participants were collected in pre structured Performa at the end of CME

Most of participants were satisfy with flow of Workshop and contain covered in workshop.Overall programme was good and informative.

CASE REPORT

1.DEPARTMENT OF ANAESTHESIA

Takotsubo Cardiomyopathy after Spinal Anesthesia in an abdominal hysterectomy procedure

Dr. Priya Kishnani¹, Dr. Jigisha Mehta², Dr. Jatin Patel^{3*},
Dr. Juhi Jain⁴

¹Assistant Professor, ²Assistant Professor, ³Associate Professor, ⁴3rd year resident

*Corresponding Author: Dr. Jatin Patel, Associate Professor

Smt. BK Shah Medical Institute & Research Centre, Sumandeeep Vidyapeeth (An Institution Deemed to be University)

Abstract:

This is a case of Takotsubo cardiomyopathy (TCM) which occurred in a patient soon after the giving spinal anesthesia in a surgery of a 38year old female undergoing abdominal hysterectomy. TCM resembles acute coronary syndrome and it is believed that significant emotional or physical stress causing an exaggerated sympathetic reaction to can lead to it. The patient had symptoms of chest pain, palpitations, difficulty in breathing, and hemodynamic disturbances immediately after spinal anesthesia and then again in the post anesthesia care unit. Blood reports had increased Troponin, ECG showed ischemia and in ECHO there was decrease in the left ventricle contractility, apical ballooning and akinesia of the apex of the heart. The patient received proper care at cardiac intensive care unit and finally was discharged after recovery. So we concluded that apart from managing anxiety by pre medication it is essential to suppress sympathetic nervous system response and its cardiovascular consequences in order to prevent this condition.

DEPARTMENT OF PEDIATRICS
2.HOMOCYSTINUREA – A CASE REPORT

Authors: Dr.Smruti, Dr.Mansiha , Dr.Naeem

INTRODUCTION:

Homocystinuria is an autosomal recessively inherited defect in the transsulfuration pathway (type-i) or methylation pathway (types ii and iii). The internationally reported incidence of homocystinuria varies between 1 in 50,000 and 1 in 200,000. normally, homocysteine is an intracellular intermediate and is not detectable in plasma or urine. However, when the reconversion of homocysteine to methionine or cysteine is blocked, it accumulates extracellularly and results in homocystinuria.] patients are unable to fully metabolize the amino acid methionine, an essential amino acid found in food, which leads to the accumulation of homocysteine and methionine in the blood and urine. High levels of these amino acids are directly linked to morbidity and mortality, often at a young age. Symptoms include severe intellectual disability, eye lens dislocation, thromboembolism, osteoporosis, and seizures.

CASE HISTORY :

- A 10 years old female child presented with complains of blackish discolouration of knuckles for one and a half years, not gaining weight, decreased appetite for 15-20 days and not performing well in studies.
- Past history of removal of lens due to dislocation of lens.
- Family history s/o elder sibling died due to similar illness. Her mri report s/o acute stroke due to thromboembolism.
- Ophthalmology examination :aphakia with secondary open angle glaucoma.
- Psychiatry examination shows intellectual disability and mental age corresponds to 3 years of age.
- General examination shows pallor, knuckle pigmentation, clusterless hair, bowing of legs and undernourished.
- Investigations :hb = 7.0, mcv = 110, s.homocystine level = >50, vit. B12 = 204.



DISCUSSION :

Homocystinuria is a rare metabolic condition characterized by an excess of the compound homocystine in the urine. The condition may result from deficiency of any of several enzymes involved in the conversion of the essential amino acid methionine to another amino acid (cysteine)--or, less commonly, impaired conversion of the compound homocysteine to methionine. Enzymes are proteins that accelerate the rate of chemical reactions in the body. Certain amino acids, which are the chemical building blocks of proteins, are essential for proper growth and development. In most cases, homocystinuria is caused by reduced activity of an enzyme known as cystathionine beta-synthase (CBS). Infants who develop homocystinuria due to CBS deficiency (which is also known as classical homocystinuria) may fail to grow and gain weight at the expected rate (failure to thrive) and have developmental delays.[4] Elevations of both methionine and homocystine (or homocysteine) in body fluids are the diagnostic laboratory findings. Freshly voided urine should be tested for homocystine because this compound is unstable and may disappear as the urine is stored. Cystine is low or absent in plasma. Treatment with high doses of vitamin B6 (200-1,000 mg/24 hr) causes dramatic improvement in most patients who are responsive to this therapy.

Homocystinuria Caused by Defects in Methylcobalamin Formation develops Vomiting, poor feeding, failure to thrive, lethargy, hypotonia, seizures, and developmental delay may occur in the first few months of life. Laboratory findings include megaloblastic anemia, homocystinuria, and hypomethioninemia. Treatment with vitamin B12 in the form of hydroxycobalamin (1-2 mg/24 hr) is used to correct the clinical and biochemical findings.

Homocystinuria Caused by Deficiency of Methylenetetrahydrofolate Reductase develops apnea, seizure, microcephaly, coma, and death to developmental delay, ataxia, and motor abnormalities or even psychiatric manifestations. Laboratory findings include moderate homocystinemia and homocystinuria. Treatment of severe MTHFR deficiency with a combination of folic acid, vitamin B6, vitamin B12, methionine supplementation, and betaine has been tried. Of these, early treatment with betaine seems to have the most beneficial effect.

CONCLUSION :

- All features of homocystinuria matched with this patient. Patient was treated with conservative management like vitamin b12, b6, folic acid in therapeutic dose and supportive eye care and discharged after 5 days.
- Genetic counselling done on followup and advised for confirmatory tests like high frequency urinary hplc to detect homocysteine, molecular genetic analysis of the cbs gene.

PROGNOSIS :

Without treatment, life expectancy is markedly reduced. With early life-long adequate treatment, outcomes are generally good, although the very long-term outcomes are not yet known. Late teenagers and young adults are at high risk of non-compliance and complications, including death. Outcomes are determined primarily by pyridoxine responsiveness, adequacy of treatment and age of detection.

3.GENERAL SURGERY

COMPARISON BETWEEN OPEN AND LAPAROSCOPIC REPAIR (IPOM) IN VENTRAL HERNIA PATIENTS

1st Author-Dr.Pratik Shaparia (Assistant Professor) Dept.of General Surgery, Dhiraj Hospital.

2nd Author-Dr.Sneh shah (R3) Dept.of General Surgery, Dhiraj Hospital.

3rd Author-Dr.BHAVIN SHAH (ASSOCIATE PROFESSOR) Dept.of General Surgery, Dhiraj Hospital.

ABSTRACT-

Controversy still exists regarding the ideal treatment of ventral hernia patients. Ventral hernia includes Umbilical, Para-Umbilical, Infra-Umbilical, Epigastric, Spigelian and Incisional hernia. The aim of this study is to compare open and laparoscopic methods of ventral hernia repair in terms of Operative time, Complications, Postoperative recovery, Recurrence and cost factors. In our study laparoscopic repair was followed by shorter hospital stay, less pain, faster recovery, early return to work and recurrence rate was more in open repair than laparoscopic repair and cost of overall treatment was more in IPOM repair.