



THE SBMCH HERALD

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JANUARY 2015

Department of Anesthesiology Conducted a CME Program “Contextual Professional Medical Practice” on 07.02.2015 Speaker Dr. S.V.JOGA RAO M.L., M.PHIL, PH.D of legal excel, Bangalore.

The speaker addresses the ways in which professional, familial, religious, financial, legal, and institutional factors influence clinical decisions. These factors are the context in which the case occurs and so we call this topic Contextual Features. Although clinical ethics focuses on medical



indications, patient preferences, and quality of life in particular cases of patient care, medical decisions are not simply individual choices by two autonomous agents (the physician and the patient). Choices are influenced and constrained by contextual considerations.

Today, the encounter between patient and physician occurs in more complex institutional and economic structures than ever before. Only occasionally does the traditional private relationship exist in which a patient chooses and consults a physician in private practice and pays a fee out of pocket for service. More often, doctors have multiple relationships with other physicians, nurses, allied health professionals, health care administrators, insurers, professional organizations, and state and federal agencies, in addition to their own families. Similarly, the relationship between a patient and a physician is surrounded by the patient's family and friends, other health professionals, and the hospital as an institution. The complex relationships



between medicine and the pharmaceutical industry burden patients and create conflicts of interest for physicians. Physicians and patients are also subject to the varying influence of community and professional standards, legal rules, governmental and institutional policies about financing and access to health care, computerized methods of storage and retrieval of medical information, the relationship between research and practice, and other factors.

Physicians often perceive these contextual features as conflicting with their primary

commitment to individual patients and they often do. Some physicians might believe that contextual factors are, or should be, of little or no relevance in an ethical decision about patient care: his or her duties are narrowly focused on the patient. We consider this view obsolete and theoretically incorrect. Many of the factors mentioned previously impose responsibilities and duties on both patients and physicians. The ethical task is to determine how correctly to assess the importance of these contextual features in a particular case.

Department of Community Medicine conducted CME on Epidemiology of Ebola Virus & Its Prevention Speaker :Dr.A.S Valan, Fellow in HIV Medicine, PG Dip.in Bio-Ethics EIS & NCOO, New Delhi

Dr.Valan addressed that the ongoing Ebola has been declared as an international emergency and hence every country needs to raise the level of vigilance on the deadly virus. India too should be



on alert. The reason being almost 45000 Indians live in Ebola-affected African countries and there is every chance that visiting Indians can bring it home. In India, steps have been taken by the health ministry to deal with this deadly virus, if at all it gets detected here. An emergency 24-hour helpline has been set up was established in airports.

Strong alerts have been issued at airports and ports. He also emphasize the reports,

have also stated that Indian missions have contacted resident Indians in the affected

countries and they were supplied all instructive materials so that they can take preventive measures. Some suggested coming from African nations. All passengers travelling to India via airways from Ebola-affected countries must fill a checklist health form. Travellers' address records will be maintained so as to track them easily if any symptoms are detected.

measures taken at the airport. Proper investigation of the passengers, especially

Department of Community Medicine conducted CME on "Epidemiology of Ebola Virus & Its Prevention" Speaker :Dr.A.S Valan, Fellow in HIV Medicine, PG Dip.in Bio-Ethics EIS & NCOG, New Delhi.



Compulsory self-reporting by passengers at the immigration check. Airport officials in the customs and immigration sections must keep tight monitoring.

Help desks are set up at airports and ports to deal with travellers showing any potential Ebola

symptoms. Immediate action to be taken after detection. Airport officials are in touch with doctors.

Also there were 2-3 reports of Indian passengers coming from the affected countries carrying the virus infection with them. But, proper screening reported negative results. So far so good with the assurance given by the Health Ministry and promising. Dr.Valan state to take precautions like maintaining cleanliness all the time, visiting the doctor if we detect any

with the preventive measures taken, we hope that things will be brought under control if at all the disease is detected in the country. However, considering India's past record in dealing with other diseases like swine flu, dengue, the situation looks not so symptoms and increasing awareness among the people about the disease.

Department of Physiology conducted CME on “Pathophysiology of Diabetes mellitus”

The Programme elaborates the Pathophysiology of Diabetes and the problems associated with the hormone insulin. Further the speaker address the Pancreas (an organ behind the stomach) and its malfunction during load and resistance of insulin response to glucose level. Further diabetes



is a disease of lifetime. Normally, body breaks down the sugars and carbohydrates we take into a special sugar called glucose. Glucose fuels the cells in body. Insulin is required by the cells in order to take in the glucose and use it for energy. It describes a group of metabolic diseases where the person has high blood glucose either due to insulin production is inadequate (or) the body's cells do not respond

properly to insulin or both.



Diabetes if left untreated can eventually cause heart disease, stroke, kidney disease, blindness, and nerve damage to nerves in the feet. Retinopathy: Blurred or distorted vision or difficulty in reading. Development of Floaters or spots in your vision. There may be

partial or total loss of vision. Nephropathy is most common symptom of type 1 and type 2 diabetes. A sudden rise in potassium levels in your blood (hyperkalemia). Symptoms include worsening of blood pressure and swelling of feet. Neuropathy: Signs and symptoms mainly depend upon type of

neuropathy that develops. Regardless of the cause, neuropathy is associated with characteristic symptoms. In peripheral neuropathy damage to sensory nerves is common . Signs include Low blood sugar levels (hypoglycemia) are associated with trembling, sweating, and palpitations.

FACULTY DEVELOPMENT PROGRAMME BY MEU -2015.

BASIC COURSE WORKSHOP ON MEDICAL EDUCATION TECHNOLOGIES

DATE – 20 to 22 JANUARY 2015

Minutes of Basic course workshop

Day 1-20.01.2015

- ❖ The Session started with the Co-coordinator welcoming the Participants. The Programme was inaugurated by the Dean and the Vice Principal.
- ❖ After an ice breaking session, an introduction to Medical education technologies by Dr. Arul Amutha Elizabeth. Group dynamics was dealt by Dr. P. R. Devaki .Systems Approach & Adult learning Principle was dealt by Dr. M. R. Renuka Devi.
- ❖ Learning Objectives and Competency was dealt by Dr. M. R. Renuka Devi. Microteaching was done elaborately by Dr. Saraswathy and Dr.Praveena took a session on Media – effective use of T-L. Media .

Day 2- 21.01.2015

- ❖ Dr. P. Sasi Kumar eloaborately explained the Curriculum development & Quality assurance in Medical Education. Principles of Assessment and Assessment of knowledge was dealt with Dr. Glory Josephine. Dr. Ajay elaborately dealt with skills of giving feedback Dr. A. R. Subhashree gave a talk an Internal Assessment Principles and its application.
- ❖ **Day 3- 22.01.2015** Dr. A. R. Subhashree dealt with Large group teaching and Dr. Arul Amuth Elizabeth dealt with Small group teaching. Dr. Renuka gave a brief session an E – learning. An elaborative session on OSCE and OSPE, OSLER was done by Dr. Chitralkha Sai Kumar.

FEBRUARY 2015

ISSPCON 30th Annual National Pain Congress conducted by Sree Balaji Medical College and Hospital Chromepet, Chennai and Apollo hospital jointly Organized the programme, held on 4th February 2015.

The conference discusses the specialty of Pain Medicine, or Algiatry and its essential in the field of medicine. It is concerned with the prevention of pain, and the evaluation, treatment, and rehabilitation of persons in pain. The typical pain management team includes medical practitioners, Pharmacists, Clinical Psychologist, occupational therapists, physician assistant,

nurse practitioners and clinical nurse specialists. Pain can be managed using pharmacological or interventional procedures by using pain reliefs. There are many interventional procedures typically used for chronic back pain include epidural steroid injections, facet joint Injections, neurolytic blocks, spinal cord stimulators and intrathecal drug delivery system implants. The Management goals when treating back pain are to achieve maximal reduction in pain intensity as rapidly as



possible, to restore the individual's ability to function in everyday activities, to help the patient cope with residual pain, to assess for side effects of therapy, and to facilitate the patient's passage through the legal and socioeconomic impediments to recovery.

Department of Biochemistry and Medical education unit conducted a CME Program on thyroid function disorder interpretation and management 03.02.15. Speaker Dr. P.G.Sundararaman Endocrinologist Apollo hospital & Bill Roth hospital.

The speaker portrays that there is a significant need for us to reach out and make people aware of



the causes, symptoms, treatment and importance of testing for thyroid problems. Women are a key audience because there is a higher incidence of thyroid disorders amongst women than men. The women of child bearing age, during period from planning for a baby or once they are pregnant must make sure that their thyroid functions are normal.



The survey, conducted through an agency TNS India, covered 11 towns including Delhi, Lucknow, Bareilly, Chennai, Guntur, Hyderabad, Madurai, Bhubaneshwar, Kolkata,

Patna, Indore, Ahmedabad and Mumbai. The sample comprised 2,797 males and females aged between 21 to 60 years.

Department of Obstetrics & Gynecology in association with Department of community medicine & MET unit conducted a Program on Anaemia in pregnancy & HIV in pregnancy.



The speaker delivers the Iron deficiency anemia (IDA). It is the most prevalent form in India, but "Lack of consciousness among women aggravates the situation, as now days, they attach more importance to losing weight.

Speaker also states that survey of National Family Health Survey (NFHS) shows a disturbing presence of anemia in pregnant

and lactating women; the disease troubles 59 per cent cases of pregnancy while 63 per cent of lactating women are anemic.

Department of Pathology & Medical education unit organized a CME program on Haematopathology held on 24.02.15 at SBMCH



The Program delivers on the study of blood which encompasses different sub disciplines, including the morphology of blood and blood forming tissues, coagulation system and transfusion medicine, including stem cell transplantation. The practice of hematopathology involves the provision in the laboratory of medical and technological services necessary for

large diagnostic hematology service. Such practice includes the detection and diagnosis and laboratory monitoring of disorders of blood and blood forming organs. Whether these are primarily diseases of the hematopoietic system

or the effects on the hematopoietic system of drugs or diseases of other organs. The speciality may also embrace the collection and provision of appropriate prepared blood and blood components for therapeutic purposes.

Department of Physiology & medical education unit organized a CME program on Pathophysiology of female infertility and its basic management on 25.02.15. Speaker Dr. C. Geetha Haripriya, Prasanth fertility research center Chennai.



CME program on Pathophysiology of female infertility and its basic management on 25.02.15. Speaker Dr. C. Geetha Haripriya delivers the association of hyperthyroidism and infertility in both men and women and to provide practical suggestions for the management of these patients. Thyroid hormone acts on the oocytes, sperm and embryo during fertilization, implantation and placentation. Both hypothyroidism and hyperthyroidism may influence fertility. However, evidence of the association of hyperthyroidism with infertility is scarce and sometimes conflicting. Thyroid hormone influences human reproduction via a variety of mechanisms at both the central

and the peripheral level. Infertility may occur in hyperthyroid men and women, but

it is usually reversible upon restoration of euthyroidism.

Department of Biochemistry and Medical education unit conducted a CME Program on How to question on Laboratory quality results on 28.02.15. Speaker Dr.M.P.Saravanan Biochemistry, R.S.R.M. Hospital, Stanley Medical College.

The speaker delivers the Laboratory quality results starts from laboratory personnel working in hospital-



based transfusion services soon realized that the relationship between quality management and laboratory technical activities extended far beyond the transfusion



service to all other specialty disciplines in clinical and anatomic pathology laboratories. In 1999, an NCCLS1 subcommittee, representing laboratory, industry, and government perspectives, produced the first medical laboratory-specific quality management system

(QMS) model. They based this salient model on the regulations, accreditation requirements, and laboratory standards the quality management of laboratory tests and reports should be reported.

International womens day was conducted on 6th march 2015



International womens day was conducted on 6th march 2015 at 11.am at T.R. Raman Hall. The celebration was enlightened by the prescence of beloved chairperson Dr. J. Srinisha. The guest for the day was Mrs. Nirosha Ramki.

Genomics research center & in association with ROCHE conducted a two days workshop on Real time PCR on 12 & 13.03.2015



The Workshop sessions were 1.sample Processing Lab: DNA extraction by manual and automated methods; 2. RNA extraction and Sybr Green Real-Time RT-PCR; 3. Real-time PCR lab (set up and run DNA and real-time PCR assays on the LC 480 w/ LC 480 Control

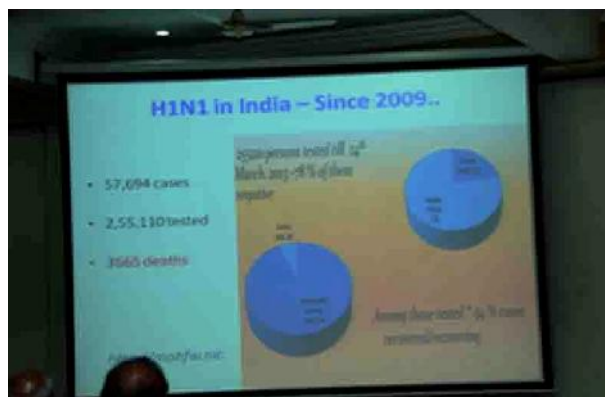


Kits & Extracted DNA);4. Analysis of RT-PCR Data; Use of Real-time + PCR Assay Software; Array qPCR (RT and Array Set-up);5. Analysis of Array qPCR Data; Quantitative Real-Time PCR Lab Set-up; Assemble dPCR Reactions and Initiate Run.

Department of General Medicine & MET unit conducted a program on Swine Flu on 17/3/2015. Speaker Dr.D. Suresh Kumar. Apollo Specialty Hospital, Chennai.



At the nut shell the speaker deliver as follows, The H1N1 virus outbreak had previously occurred India during the 2009 flu pandemic. The virus killed 981 people in 2009 and 1,763 in 2010. The mortality



decreased in 2011 to 75. It claimed 405 lives in 2012 and 699 lives in 2013. In 2014, a total of 218 people died from the H1N1 flu, India recorded 837 laboratory confirmed cases in the year. Every year, there was a rise

in number of cases and deaths during winter as temperature affects virus. So far there have been 12 Swine Flu deaths in the State. Officials said 320 persons have tested positive for H1N1 virus that causes the

dreaded flu, out of the over 2,600 who were tested. Of this, 183 people have recovered fully while 103 are still undergoing treatment in hospitals.

The Department of community medicine & medical education unit organized a guest lecture on 18.03.2015 “Cardiac trauma management at primary Health center level” International speaker Dr. Sivan Raj Ayyanathan delivered the lecture.

Department of Physiology & medical education unit organized a CME program on “Pathophysiology of Coronary artery diseases and its management” held on 20.03.2015. Speaker Dr. J. Ezhilan



Cardiac health throughout the past decade, the number of female deaths caused by cardiovascular disease still rises and remains the leading cause of death in women in most areas of the world. Novel studies have demonstrated that cardiovascular diseases, and more specifically coronary artery disease presentations in women, are different than those in men. In addition,

pathology and pathophysiology of the disease present significant gender differences, which leads to difficulties concerning diagnosis, treatment and outcome of the female population. The reason for this disparity is all steps for female cardiovascular disease evaluation,

treatment and prevention are not well elucidated; and an area for future research. This review brings together the most recent studies published in the field of coronary artery disease in women and points out new directions for future investigation on some of the important issues.

Department of Orthopedics & Medical education unit organized a CME program on Osteoporotic Spine-Problems & management on 20.03.15.



The speaker delivers the Osteoporosis spine problems and management. Due to ageing, our bones thin and our bone strength decreases. Osteoporosis is a disease in which bones become very weak and more likely to break. It often develops unnoticed over many years, with no symptoms or discomfort until a bone breaks.

Fractures caused by osteoporosis most often occur in the spine. These spinal fractures — called vertebral compression fractures — occur in nearly 700,000 patients each year. They are almost twice as common as other fractures typically linked to osteoporosis, such as broken

hips and wrists. Not all vertebral compression fractures are due to osteoporosis. But when the disease is involved, a fracture is often a patient's first sign of a weakened skeleton from osteoporosis. To learn more about osteoporosis

Department of Anatomy & Medical education unit organized a CME program on Stem cells for spinal cord injuries on 23.03.15. Guest Speakers Dr. Sankar & Dr. Alm university of Madras, Chennai.



Spinal cord injury (SCI) is a catastrophic condition associated with significant neurological



deficit, social, and financial burdens. Over the past decades, various treatments including medication, surgery, and rehabilitation therapy for SCI have been performed, but there were no definite treatment option to improve neurological function of patients with chronic SCI.

Therefore, new treatment trials with stem cells have been studied to regenerate injured

spinal cord. Among various types of stem cells, bone marrow derived mesenchymal

stem cells is highly expected as candidates for the stem cell therapy. The result of the current research showed that direct intramedullary injection to the injured spinal cord site in subacute phase is most effective. Neurological examination, electro physiologic studies, and magnetic resonance

imaging are commonly used to assess the effectiveness of treatment. Diffusion tensor imaging visualizing white matter tract can be also alternative option to identify neuronal regeneration. Despite various challenging issues, stem cell therapy will open new perspectives for SCI treatment.

Department of Obstetrics & Gynecology & MET unit conducted a Program “Newer trends in contraception Obstetrics Gynecology” on 28.03.2015



The speaker delivers his lecture on Newer trends in contraception Obstetrics Gynecology. The essence of the lecture portrays the Choices for family planning have increased since the availability of postpartum tubal ligation. Hysteroscopic tubal occlusion is set to become the method of choice for interval sterilization. However, hormonal contraception has proven to bring substantial additional benefits, such as reduced menstrual discomfort and treatment of hyperandrogenism among the most noted. Arguably, the back to back use of long-acting hormonal contraceptives, such as the intrauterine delivery systems, can be considered to be ‘permanent’ contraceptive alternatives to surgical sterilization. For surgical sterilization to become an attractive alternative,

there is a tendency to combine sterilization with other procedures, such as endometrial ablation.

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