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## SREE BALAJI MEDICAL COLLEGE & HOSPITAL CHROME PET



An Official Newsletter of  
**Sree Balaji Medical College and Hospital**  
Bharath Institute of Higher Education & Research-BIHER  
Chrompet, Chennai - 600044, Tamil Nadu, India



# Balaji Hereward



Volume 4 Issue 1 Jan - Mar 2017

An Official Newsletter of Sree Balaji Medical College and Hospital, Chennai, TN, India.

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**The Department of Anatomy & Medical Education Unit of SBMCH conducted a CME program on 12. 01.17 on “What Went Worng in Few Congenital Anomalies”**

The Department of Anatomy & Medical Education Unit of SBMCH conducted a CME program on 12. 01.17 on “What Went Worng in Few Congenital Anomalies”. The speaker of the day was Dr. Ash Benziger, consultant clinical Embryology, Dept of



Reproductive Medicine, Chettinad super Specialty Hospital. The speaker delivers as follows. During normal fetal development the gut protrudes from the umbilical ring and then retracts into the abdominal cavity by the 11th week of gestation. When the series of events needed to complete this process fail to occur, abdominal wall defects result. Gastroschisis is not commonly associated with other congenital anomalies, with the exception of intestinal atresia in up to 15% to 25% of cases and cryptorchidism in up to 30%. An omphalocele results from failed growth and fusion of the lateral folds early in gestation. This creates a central defect of the umbilical ring and allows the bowel to remain herniated. Up to 80% patients with omphalocele have associated anomalies, which are usually midline.

These include cardiac defects, colonic atresia, imperforate anus, sacral and vertebral anomalies, and genitourinary malformations. Syndromes associated with omphalocele include pentalogy of Cantrell (sternal cleft; pericardial,

cardiac, and diaphragmatic defects), Beckwith-Wiedemann syndrome (macroglossia, macrosomia, and hypoglycemia), and trisomy 13, 18, and 21.

**The Department of Biochemistry & Medical Education Unit of SBMCH conducted a CME program on 31. 01.17 on “Vitamin B12 -Looking Beyond Obvious”.**

The Department of Biochemistry & Medical Education Unit of SBMCH conducted a CME program on 31. 01.17 on “Vitamin B12 -Looking Beyond Obvious”. The Guest of the day was Dr. R. Satish, MIOT, Chennai. The challenges in medical management of cobalamin deficiency lie in attention to the unique pathophysiology

that underlies cobalamin deficiency, more than in the mechanics of therapy. The central physiologic principles are that clinically important deficiency is more likely to occur (and progress) when intrinsic factor–driven absorption fails than when diet is poor and that most causes take years to produce clinically obvious deficiency. Transient defects have little clinical impact. The key management principle is the importance of follow-up, which also requires knowing how the deficiency arose. The virtues of these principles are not always fully appreciated. Recent developments have made diagnosis and management more difficult by diminishing the ability to determine cobalamin absorption



status. Clinicians must also grapple with premature medicalization of isolated, mild biochemical changes that added many asymptomatic cases of still undetermined medical relevance to their caseload, often expanded by inflated cobalamin level criteria. The potential for misattribution of cobalamin-unrelated presentations to nongermine cobalamin and metabolite abnormalities has grown. Pathophysiologically based management requires systematic attention to each of its individual components: correctly diagnosing cobalamin deficiency, reversing it, defining its underlying cause, preventing relapse, managing the underlying disorder and its complications, and educating the patient.

**CME Program on Pharmadican- 2017: The Department of Pharmacology & Medical Education Unit of SBMCH organized on National conference on 20.01.2017  
“The Recent Advanced in Pharmacotherapy of Diabetes Miletus”.**

- The programme discusses on the incidence of type 2 diabetes mellitus is increasing rapidly, as are the associated co-morbidities. Consequently, it has become necessary for a diabetic patient to take multiple medications at the same time to delay progression of the disease. This can put patients at an increased risk of moderate to severe drug interactions, which may threaten patients' life or may deteriorate the quality of their life. Hence, managing drug-drug interactions is the cornerstone of



- anti-diabetic therapy. Most of the clinically important drug-drug interactions of anti-diabetic agents are related to their metabolic pathways, but drugs that compete for renal excretion or impair renal status can also play an important role. The programme delivered the clinical implications and underlying mechanisms of drugs that are likely to alter the pharmacologic response of or cause adverse events with antidiabetic drugs, and outlined safe and efficacious treatment modalities.
- Goals of therapy in DM are directed toward attaining normoglycemia (or appropriate glycemic control based on the patient's comorbidities), reducing the onset and progression of retinopathy, nephropathy, and neuropathy complications, intensive therapy for associated cardiovascular risk factors, and improving quality and quantity of life.

- Metformin should be included in the therapy for all type 2 DM patients, if tolerated and not contraindicated, as it is the only oral anti hyperglycemic medication proven to reduce the risk of total mortality, according to the United Kingdom Prospective Diabetes Study (UKPDS).
- Intensive glycemic control is paramount for reduction of microvascular complications (neuropathy, retinopathy, and nephropathy) as evidenced by the Diabetes Control and Complications Trial (DCCT) in type 1 DM and the UKPDS in type 2 DM. The UKPDS also reported that control of hypertension in patients with diabetes will not only reduce the risk of retinopathy and
- Knowledge of the patient's quantitative and qualitative meal patterns, activity levels, pharmacokinetics of insulin preparations, and pharmacology of oral and injected antihyperglycemic agents are essential to individualize the treatment plan and optimize blood glucose control while minimizing risks for hypoglycemia

nephropathy, but also reduce cardiovascular risk.

- Short-term (3–5 years), intensive glycemic control does not lower the risk of macrovascular events as reported by the Action in Diabetes and Vascular Disease, Action to Control Cardiovascular Risk in Diabetes, and Veterans Administration Diabetes Trial trials. Microvascular event reduction may be sustained, and macrovascular events reduced by improved early glycemic control, as evidenced by the UKPDS and DCCT follow-up studies. Significant reductions in macrovascular risk may take 15 to 20 years. This sustained reduction in microvascular risk and new reduction in macrovascular risk has been coined metabolic memory.



and other adverse effects of pharmacologic therapies.



- Type 1 DM treatment necessitates insulin therapy. Currently, the basal-bolus insulin therapy or pump therapy in motivated individuals often leads to successful glycemic outcomes. Basal-bolus therapy includes a basal insulin for fasting and

postabsorptive control, and rapid acting bolus insulin for mealtime coverage. Addition of mealtime pramlintide in patients with uncontrolled or erratic postprandial glycemia may be warranted.

#### CME- Revised Basic Course Workshop - 2017

Medical Education Unit of SBMCH conducted 3 days workshop on “Revised Basic Course Workshop on Medical Education Technologies” on 23, 24 & 25 Jan- 17.

#### CME- Integrated Teaching Program 2017

The Department Obstetrics, Gynecology and Medical Education Unit of SBMCH conducted a program on “Rh Isoimmunisation” on 30.1.17.



The speaker delivered in the program as follows, the incidence of Rh isoimmunization after genetic amniocentesis at our institution. In 115 Rh negative women who

underwent amniocentesis and subsequently delivered Rh positive infants, there were 4 (3.4%) sensitizations before birth. This was significantly greater than the 1.5% rate of gestational sensitization found in pooled populations of women who did not undergo amniocentesis. We also noted a significant increase in the number of sensitizations that

occurred before 28 weeks. The current policies for managing Rh negative women who have second trimester amniocentesis.

### **Janssen Dermatology -2017**

The Department of dermatology & Association with Janssen Dermatology conducted a Symposium on “Shampoos & Solutions” on 31.01.2017. The speaker of the day was Dr. Kovsineha.



The speaker delivered that, Dermatologists many a times encounter questions from patients and even

colleagues asking about how to keep their hair looking clean, healthy and beautiful. Therefore, familiarity and a basic knowledge of the available hair care products will help them to guide their patients properly. A shampoo not only provides the cleaning of the scalp skin and hair as its primary function, but in addition also serves to condition and beautify hair and acts as an adjunct in the management of various scalp disorders. To achieve this, various ingredients in the correct proportion are mixed to

provide a shampoo which is suitable for individuals having different hair types and hair need. Among the ingredients that go into the making of a shampoo are detergents, conditioners, thickeners, sequestering agents, pH adjusters, preservatives and specialty additives. Hair conditioners are designed to improve hair manageability, decrease hair static electricity and add luster. They are used in several ways depending upon the state of hair and requirement of the individual.

### **CME –Program on Campaign –Orientation:2017**

The Department of Pediatric & Medical Education Unit of SBMCH conducted a CME program on “Measles & Rubella vaccine” on 02.02.17. The speaker of the day were Dr. V.K. Palani, DDHS, Saidapet, HUD, Chengelpet, Dr. Raghunath, surveillance Medical officer, NPSP, WHO.



## PARACON- 2017

The Department of Microbiology and Medical Education Unit of SBMCH organized a “National on Parasitology” on 04.02.2017. The program was started with a welcome address given by Dr. D.R. Gunasekaran, Dean SBMCH, introduction of the chief guest by Dr. Kiran Madhusudhan, inaugural address given by Dr. Subash Chandra Parija, Director, JIPMER, Vice-Chancellor of Bharath University. Dr. Kanagasabai felicitated our guest speakers.

The key Speakers were Dr. Subash Chandra Parija, MD., Ph.D., FRCP (PATH) Director - JIPMER, Puducherry. Dr. Ashok Kumar Praharaj., MD., Ph.D, Professor & HOD Microbiology, AIIMS,

Bhubaneswar. Dr. Placid E.D' Souza, Professor cum Director, Centre of Advanced Faculty Training (CAFT) Veterinary Parasitology, KVAFSU Regional Campus Veterinary College, Hebbal, Bangalore. Dr. K. Anuradha, MD., Professor & HOD, Microbiology, Mysore Medical College.

Dr. Subash Chandra Parija, lectured on “Recent Advances in the diagnosis of Parasitic

Infections”. Dr. Ashok Kumar Praharaj. lectured on “Emerging Parasitic Infections”. Dr. Placid E.D' Souza, lectured on “Zoonotic Parasitic Infection”. Dr. K. Anuradha, lectured on



“Single Cell to Multicellular Parasites”.

The conference was attended by faculty,

Post graduates, Under graduates & interns.



Department of Physiology, Genomics Research Center & Medical Education Unit of SBMCH conducted a CME program on “Nitric Oxide & Function

Definition Endothelium Under Flow Condition” on 23.02.17. The guest speaker of the day was Dr. Suvro Chatterjee. Anna University, Chennai.

### **HICCON -2017**

Central Laboratory of SBMCH organized on National conference on “Hospital Infection control” on 10.03.2017. The key speaker were Dr. M. Vivekanandan ME (Med), HOD, Endocrinology, JIPMER, Puducherry. Dr. Joy Sarojini Michael MD (Micro), FRC (Path), HICC, CMC, Vellore. Dr. Uma

Sekar MD (Micro) Director, Central Lab Services, SRMC, Chennai.

Dr. M. Vivekanandan, lectured on Optimizing Antibiotic Therapy. Dr. Joy Sarojini Michael lectured on Surveillance of Health care Associated Infections. Dr. Uma Sekar lectured on Prevention & Control of HAI.



### **World Cancer Day Program – 2017**

February 4<sup>th</sup> is a special day for cancer patients, survivors, and their families. Each year on this date, the world pauses in recognition of World Cancer Day, and in consideration of the growing burden which the disease represents to all people, in both developed and developing countries. NSS unit of SBMCH organized a series of events to mark world cancer on Feb 2017. Road Rally was organized to create awareness on cancer problems among common peoples. The rally was inaugurated by



Dr.Kanagasabai, Vice-Chancellor  
of Bharath University &  
Dr.D.R. Gunasekaran, Dean SBMCH.

Aim of the rally was to create awareness on cancer. Around 200, Under & Post graduates participated the rally overwhelming enthusiasm. The Road Rally was started at SBMCH and ended at pallavaram. The students had prepared their own placards and various awareness materials to create awareness to the publics.





### International CME Programme cancer - 2017

The Department of General Surgery and Research & Development Wing organized an International CME Programme on 24.03.2017 on “Immunotherapy of Metastatic Cancer”.

apeutic responses on cancer.

Dr. Senthamil R.Selvan, M.Sc., M.Phil., Ph.D., Academic & Research Professor, Division of Integrative Medicine, Vetha Center for Transdisciplinary Studies, New York, USA. Speaker narrated his experiences on the glycomic their



Clinical correlation does not imply causation” is a well-known dogma. His research focusses is on specifically designed to test the hypothesis that

downregulating sTG would restore immune competence, improve survival and stabilize the disease, since tumor gangliosides released into circulation are

immunosuppressive. It is important to note that the earlier observations made from stage III melanoma patients<sup>12</sup> emphasize monitoring down or upregulation of sTG by week 24 post-treatment. Based on such monitoring, this study establishes a statistically significant difference in overall survival ( $p = 0.012$ ) and progression-free survival ( $p = 0.0001$ ) between sTG-DR and sTG-UR. Indeed, this correlation suggests

causation. However, though the data based on 34 patients is not sufficient to substantiate that causation is indeed the basis for the correlation observed between sTG-DR and sTG-UR, it emphasizes the need to expand the study to a larger cohort. Such an approach would strengthen the discovery of sTG as a novel glycomic therapeutic response marker for melanoma.

### **Publications**

Yogarajan and Irshad. Anaesthetic management for caesarean section in pregnant women with severe pulmonary artery hypertension due to mitral stenosis. World Journal of Pharmaceutical Research. 2017; 6 (4); 1381-1385.

Selvamani and Kokila. A Prospective Randomised Study Comparing The Preemptive Analgesic Effects Of Oral Gabapentine With Oral Clonidine On Intubation Response And Post Operative Analgesic Requirements For Patients Undergoing Laparoscopic Cholecystectomy. World Journal Of Pharmaceutical Sciences. 2017; 6 (3); 1311-1320.

Vedamanickam, R and Sakthi Dasan, S. Prevalence of Helicobacter pylori infection in patients with chronic dyspepsia among rural population A prospective study. RJPBCS; 2017; 8 (1); 1296-1301.





Palaniandavan and Suresh kanna. Assessment Of Proteinuria For Early Diagnosis And Risk Prediction Of Dengue Hemorrhagic Fever/Dengue Shock Syndrome In Dengue Infections. IJPBS; 8 (1); 440-443.

Aravind Rajasigamani and Sakthi Selva Kumar. Prevalence Of Cirrhotic Cardiomyopathy In Patients With Cirrhosis Of Liver : A Tertiary Hospital Experience. IJPBS; 8 (1); 298-303.

Noorul Ameen and Ramakrishnan. A Rare Case of Reversible Dementia In Old Age. RJPBCS; 2017;8 (2);1-5.

Noorul Ameen and Manikandan. A Case of Asymmetrical Lateral Ventricles with Normal Variant. 2017;8 (2);9-12.

Kanakaraj, Kalaichezhian and Shaik Farid. Estimation of foetal weight at term pregnancy by clinical and ultrasonographic methods. Scholars Academic Journal of Biosciences. 2017;5 (1);70-77.

Venkatraman I and Naveen P. Hole sign” of the gallbladder. Indian Journal of Gastroenterology. 2017; 36 (1);66-67.

Jayakar Thomas and Sharadha. Epidermolytic Hyperkeratosis : A New Histopathologic Finding in Acrokertosis Verruciformis of hopf. International Journal of Advances in Case Reports. 2017; 4 (2); 60-63.

Jayakar Thomas and Deepthi Ravi. Idiopathic true partial to total Leukonychia in 2 Siblings. International Journal of Advances in Case Reports. 2017; 4 (2); 68-70.

Jayakar Thomas and Deepthi Ravi. A study of Neonatal skin Disorders: A Cross sectional study in a Tertiary care Hospital. International Journal of Research. 2017; 6 (3);76-77.

Jayakar Thomas and Deepthi Ravi. A Case report of toilet seat Dermatitis. International Journal of Advances in Case Reports. 2017; 4 (2); 87-89.



Jayakar Thomas and Sruthy. Histopathological correction of lipoper Matosclerosis. International journal of Dermatopathology & Surgery. 2017; 6 (1); 8-10.

Shanthi Ramesh and Vijayasekaran. Clinical Signs and Diagnostic Tests in Acute Respiratory Infections-Correspondence. The Indian Journal of Pediatrics. 2017; 8 (1); 163-166.

## APPOINTMENTS

Sl.no.	Name	Designation	Department	DOJ
1	Dr.Nisha Alice Joseph	ENT	Sr.Resident	02.01.17
2	Dr.R.Ravikumar	Ophthal	Prof & HOD	04.01.17
3	Dr.A.MinuPriya	TB & Chest	Jr.Resident	23.01.17
4	Dr.A.Rajasekhar		ARMO	23.01.17
5	Dr. A.Sankar	General Medicine	Asst.Prof	13.02.17
6	Dr. P. Pradeep	Orthopaedics	Sr.resident	08.02.17
7	Dr. GVB. Sainath	General Surgery	Asst.Prof	22.02.17
8	Dr. P. Shiva	Orthopaedics	Asst.Prof	04.03.17
9	Dr.P.Anandan	General Medicine	Asst.Professor	27.03.17





## PROMOTION

S.NO.	Name	Department	Promotion details	
			Post	Date on which promoted
1	Dr. A. Thumjaa	Paediatrics	Asso.Prof	13.01.17
2	Dr. Sumitha	ENT	Asso.Prof	13.01.17
3	Dr. I. Venkatraman	Radiology	Professor	21.01.17
4	Dr. K. Kanakaraj	Radiology	Asso.Prof	01.02.17
5	Dr. L.Subha	Ophthal	Asso.Prof	01.02.17

## OUTREACH ACTIVITIES

### JANUARY 2017

DATE	DAY	NAME OF THE CAMP
01	Monday	URBAN SLUM DEVELOPMENT PROGRAM - PERUNGUDI
02	Wednesday	DIABETIC DETECTION AND AWARENESS PROGRAM - POZHICALOR
03	Thursday	SCHOOL HEALTH AWARENESS PROGRAMME AT SRIMATHI LAKSHMIAMMAL MEMORIAL MATRIC HIGHER SECONDARY SCHOOL - CHROME PET
04	Friday	HYPERTENSION SCREENING PROGRAM – CHROME PET
05	Monday	DERMATOLOGICAL DISEASES SCREENING PROGRAM – NEMILICHERRY
06	Wednesday	MCI INSPECTION – NO CAMP ACTIVITY
07	Thursday	MCI INSPECTION – NO CAMP ACTIVITY
08	Sunday	PONGAL HOLIDAY
09	Monday	PONGAL HOLIDAY
10	Wednesday	DIABETIC AWARENESS PROGRAM – DURGA NAGAR , CHROME PET



11	Saturday	MOBILE MEDICAL CAMP PROGRAM – NANMANGALAM
12	Monday	GENERAL HEALTH CHECK UP PROGRAM – WEST TAMBARAM
13	Thursday	REPUBLIC DAY-HOLIDAY
14	Friday	VILLAGE HEALTH PROGRAM – ARAMBAKKAM
15	Monday	SCHOOL HEALTH PROGRAM – KIDZEE SCHOOL-POZHICHALOOR NUTRITION DEFICIENCY SCREENING AND DEWORMING FOR KIDS
16	Tuesday	ANTI LEPROSY DAY PROGRAMME - POZHICHALUR

### **FEBRUARY 2017**

DATE	DAY	Name of the Camp
01	Wednesday	MULTISPECIALITY SCREENING PROGRAM – BY LIONS CLUB- MUDICHUR
02	Friday	PAEDIATRIC SCREENING PROGRAM FOR ANAEMIA – TB SANATORIUM
03	Saturday	WORLD CANCER DAY - CANCER AWARENESS STUDENTS RALLY
04	Monday	RURAL HEALTH PROGRAM – MANIMANGALAM
05	Wednesday	DIABETIC DETECTION AND AWARENESS PROGRAM - URAPAKKAM
06	Friday	OPHTHALMIC DISEASES SCREENING PROGRAM – KEEZHKATALAI
07	Monday	HYPERTENSION AWARENESS PROGRAMME
08	Wednesday	DIABETIC SCREENING PROGRAMME – DURGA NAGAR , CHROME PET
09	Friday	RURAL HEALTH PROGRAM – ARASANKHAZHANI
10	Monday	HYPERTENSION SCREENING PROGRAM – WEST TAMBARAM
11	Friday	VILLAGE HEALTH PROGRAMME – ARAMBAKKAM
12	Monday	URBAN SLUM DEVELOPMENT MEDICAL CAMP – KALLIKUTTAI, PERUNGUDI



## MARCH 2017

DATE	DAY	NAME OF THE CAMP
01	Wednesday	GENERAL MEDICAL CAMP – POZHICHALOOR
02	Friday	NATIONAL SAFETY DAY CELEBRATION- LNT WORKERS – SHOLINGANALUR
03	Saturday	WELL CHILD WEEK ( 3 TO 9 OF MARCH)
04	Wednesday	INTERNATIONAL WOMENS DAY – OLD PERUNGALATHUR
05	Thursday	NO SMOKING DAY (2 <sup>ND</sup> WEDNESDAY OF MARCH)
06	Sunday	WORLD ORAL HEALTH DAY WORLD KIDNEY DAY
07	Monday	NSS SPECIAL CAMP ACTIVITIES (SERPANANCHERRY PHC) CAMP INAUGURATION IMPORTANCE OF PERSONAL HYGIENE AND SAFE ENVIRONMENT - NAVALUR
08	Tuesday	NSS SPECIALITY CAMP – OBG - SERPANANCHERRY PHC HEALTH EDUCATION – NATARASANANPET GOVT HIGHER SECONDARY SCHOOL
09	Wednesday	NSS SPECIALITY CAMP – PAEDIATRIC – SERPANANCHERRY PHC TREE PLANTING – RHTC WORLD DISABLED DAY
10	Thursday	NSS SPECIALITY CAMP – DERMATOLOGY – SERPANANCHERRY PHC STUDENT TALK ON WOMEN EMPOWERMENT
11	Friday	NSS SPECIALITY – ORTHOPAEDICS – SERPANANCHERRY PHC CLEANING PONDS /TEMPLE - Kuehagalacheri
12	Saturday	NSS SPECIALITY CAMP – OPHTHALMOLOGY – SERPANANCHERRY PHC AWARENESS OF VACCINATION & IMMUNISATION SURVEY
13	Sunday	COUNSELLING HAZARDS OF SEEMA KARUVELAMARAM
14	Tuesday	INTERNATIONAL DAY FOR THE ELIMINATION OF RACIAL DISCRIMINATION
15	Friday	WORLD TB DAY / NSS CAMP
16	Monday	URBAN SLUM DEVELOPMENT PROGRAMME – KALLIKUTTAI , PERUNGUDI
17	Tuesday	CHART EXHIBITION-(Theme- International women's day)
18	Thursday	HIV AWARENESS PROGRAMME – LIFE & LIGHT NGO - KUNDRATHUR