

Sushruta

Newsletter of Surgical Society of Bangalore

NOV 2021

Dr. Venkatachala K
President .

Dr.Sampath Kumar K
President Elect.

Dr.Harisha N S
Hon. Secretary

Dr. Manish Joshi
Hon. Jt. Secretary

Dr. Ramesh B S
Hon Treasurer



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Editorial

Dear Esteemed Member of SSB,

'SUSHRUTA' is a monthly newsletter, creating a platform where in the members and surgical postgraduates can publish original articles, case reports, surgical guidelines or any other material of surgical relevance, This will be made available online for all the members.

I request everyone to make use of this platform to disseminate, share or acquire knowledge.

Dr Kalaivani V
Editor SSB KSCASI CC

Dear All,

Kindly encourage this new monthly initiative of the SSB.

Academic Articles

Please send articles, guidelines, humour, stories, trivia, quiz questions and interesting Case report or case series with Review of literature for academic purposes.

Non-Academic

Inviting articles - That may be appropriate and interesting to the SSB members. Examples: life beyond surgery, my daily routine, how I manage stress, interesting place I traveled, books I recommend etc.

Opportunities / Classifieds

Relevant Jobs, Ad's and upcoming events can be included at a nominal fee as per the discretion of the Editorial team.

Feedback / Suggestions

Any other suggestions for improvements, feedback, letters to the editor, inputs are welcome.

Deadline :

Last day of every month.

Send your article to : editorssb@gmail.com

WhatsApp - 8197910166

Please mark all your contributions via emails, WhatsApp with the heading for Sushruta and mention your name, designation and institution.

Request all the SSB members to actively contribute, participate and wholeheartedly appreciate this new initiative "[Sushruta - official newsletter of the Surgical society of Bangalore](#)"

Regards,
The Editorial team of Sushruta

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Message from the President

Dear respected members,

Warm greetings from the office of SSBASICC.

“SUSHRUTHA” our e-newsletter has established successfully in these last two years and has become very popular among all the members of the SSB. Let us give credit and congratulate the great work done by Dr.KALAIVANI, Dr Manish Joshi and the editorial board members. I request everybody to continue to support this venture and make this e-newsletter much more useful to all of us.

Through this e-newsletter I along with my office bearers and executive committee members would like to promise some innovative programmes which will bring the members of SSB to these meetings in good numbers. I sincerely request all the esteemed members of the SSB to be with us supporting and guiding us in our endeavour.

Wishing all those who are participating in KSC-ASICON 2022 for their success.

I sincerely request everybody to follow strict COVID guidelines.

Warm regards

Dr.Sampath Kumar.K

President

SSBASICC.

Bengaluru.



Dr.Sampath Kumar.K

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Glimpses of 2021



Dr. Venkatachala K

Dear members of SSBASICC,

This year 2021 was full of academic extravaganza for SSBASICC and for me, as we conducted the various scientific Programs of SSBASICC with excellent support and coordination from our very enthusiastic Executive Committee members. It was my pleasure to head and serve this prestigious organization, which gets more vibrant and stronger with every successive year. We were strongly supported by a blend of senior members, mature stalwarts, and the young and dynamic surgeons of Bengaluru. This year too was marred by the pandemic and the second wave, which forced us to conduct most of our activities on a virtual platform. I appreciate the enthusiastic participation from our hosting institutions.

To compensate for the missed out Monthly clinical meetings from few hosting institutions, we initiated few CME programs on the virtual platform which were well attended and appreciated for their diversity and content.

- 8th May 2021: Prehabitation in Surgery.
 - 8th May 2021: Covid & Surgeon.
 - 19th June 2021: Perioperative Blood Management.
 - 24th July 2021: Ethics in Surgery – Part -1
 - 31st July 2021: Ethics in Surgery – Part -2
 - 27th Oct 2021: Surgical Management on Ano-Rectal Disorders – Back to the Future.
 - 10th Nov 2021: Pediatric Surgery Update for General Surgery
- Postgraduate students

We updated the bylaws booklet this year, with necessary corrections as adopted during the 2021 General body meeting. We also successfully initiated the e-voting process and incorporated new guidelines for the same. We have a very interactive website, You-tube channel, and newsletter, Sushrutha, to disperse knowledge and information.

The CSEP this year was exclusively on a virtual platform and the clinical discussions, teaching activities and the arrangements were appreciated by everyone. I would like to thank all the moderators and teaching faculty, without their efforts, the program wouldn't have been successful.

We were fortunate enough as the situations permitted us to conduct the Annual Orations on a physical platform, which was well attended and appreciated. I thank Prof B Hanumaiah memorial orator, Dr H K Nagaraj and Prof Authikeshavulu memorial orator, Dr Rajashekhara Reddy for their wonderful orations and for inspiring/ guiding us with their vast experiences. I would also thank Dr. Ganesh Natak for delivering Professor Nityananda Shetty memorial lecture.

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I would like to appreciate the efforts put in by Dr K Lakshman and team to conduct online meetings and for making the CSEP 2021 a tremendous success.

Dr C S Rajan, Dr Gurushanthappa & Quiz Team has put lot of efforts to make Dr K S Shekar KSCASI State Level Surgical Quiz very successful & spectacular. My special thanks & congratulations to Dr C S Rajan for conducting this exemplary quiz 19 years in a row.

I would like to thank Dr H V Shivaram for his valuable inputs and guidance throughout the year.

My special thanks to Dr C R Chhallani for arranging the funds from Micro Labs Limited.

My special thanks to Dr Manish Joshi & Dr Kalaivani V for their sustained and sincere efforts to bring out the colourful e-newsletter, Sushrutha, with sponsorship from Newmedd Diagnostics.

My special thanks to Dr Abhay Dalvi, President of ASI, Dr Siddesh G, Vice-President of ASI, and Dr Sanjay Kumar Jain, Secretary of ASI for their constant support and encouragement.

My special thanks to Dr Aravind Patel – Chairman & Dr Chandrashekar S – Hon Secretary KSC ASI for sanctioning the funds for the Quiz Programme.

My special Thanks to Dr Wasim Darr for his support in Managing YouTube channel for SSBASICC

I was very lucky to have Dr Harish N S as Honorary Secretary, who deserves special appreciation for his dedication and effort in making this tenure unique. I thank all the EC members for their whole-hearted co-operation, the senior surgeons who guided us, every member who participated in all the deliberations and finally Mr Glen William and Mr Kumar, who are the backbone of SSBASICC. I also thank Mr. Amulraj, who was appointed temporarily for office work between May & Nov 2021.

For the coming year 2022, I have few suggestions for the incoming team under the leadership of Dr Sampath Kumar

1. Work hard to get a land for SSBASICC, so that we can construct our own building
2. All EC members and others should get familiarized with Bylaws from the first EC meeting itself and participate actively in the various activities of the society.

I wish you all a very Happy New year 2022 and wish the incoming President Dr Sampath Kumar K and his team a very successful tenure.

Dr. Venkatachala K
President SSBASICC 2021

Best Paper - First Prize

Impact of various phases of lockdown policies on patient outcome

Dr. Manya Omkumar*, Dr. Y V Narayanaswamy Chetty, Dr. Anupama Pujar, Dr. Nandakumar BM

Department of General Surgery, Ramaiah Medical College, Bengaluru



Dr Manya

-INTRODUCTION-

During COVID19, elective surgery and outpatient clinics were suspended indefinitely to reallocate in-hospital resources, expand the number of ICU beds, and reduce personal protective equipment consumption. Further, restrictions of the patient's mobility among other factors impacted patient behaviour. Thus, there was a delay in definitive care due to non-availability and non accessibility of primary contact medical facility (specialist services). The dynamic changes in policies during the pandemic required flexible approach by the medical community towards patient care. There was tendency towards treating acute conditions conservatively (Eg - Acute appendicitis, Acute Cholecystitis, Diabetic foot). The lockdown policies imposed to contain the spread COVID19 had negative impact in delivering optimal surgical care.

AIM-

To assess the impact of policies implemented during various phases during lockdown in the management of Emergency surgical cases on patient outcomes

METHODS-

Ambispective study was conducted by collecting details from emergency surgical patient records during lockdown periods and compared to the same in the same period of time prior to lockdown. During lockdown, 110 patients required emergency surgical care whereas prior to lockdown in the same period in 2019, 249 patients required emergency surgical care. The data collected was objectively analysed using POSSUM(Physiological and Operative Severity Score for the Enumeration of Mortality and morbidity) score and Clavien Dindo score. The same was compared during lockdown(2020, 2021) and prior to lockdown(in 2019).

RESULTS-

Mean Physiological score and Mean Operative severity Score for patients requiring emergency surgical care in lock down was significantly higher($p < 0.001$)



compared to patients requiring emergency surgical care prior to lockdown. This was extrapolated to calculate the mean morbidity and mortality which was also significantly higher in the lockdown period compared to the same prior to lockdown. Post operative complications were assessed by Clavien Dindo score which was found to be similar in the 2 periods indicating patients received optimal treatment in hospital.

CONCLUSION-

We can thus conclude that the lockdown period had significant negative impact on morbidity and mortality in patients requiring emergency surgical care.

Dr. Manya Omkumar

Surgery Resident

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Best Paper - Second Prize

Effect of Chewing gum on reducing post operative ileus after intra Abdominal surgeries. a randomized clinical study

Dr. Sandeep S *. Dr Vijayakumar H M, Dr Srikantaiah H C, Dr Sanjeev Shetty, Dr Sayed Faizan. Department of General surgery. Ramaiah medical college, Bangalore.



Dr. Sandeep S

INTRODUCTION -

Ileus is a major cause of morbidity in hospitalized patients. A degree of ileus is a normal physiological response to intra-abdominal surgery, which often resolves quickly. Exposure of peritoneal cavity to outside and bowel manipulation provokes various systemic and local inflammatory response leading to paralytic ileus. Sham feeding is a procedure where food and drink are not actually digested, but a regional cephalic-vagal response is activated, promoting an increase in plasma gastrin levels, substance P and pancreatic polypeptide. Gum chewing has shown the same response of activating regional Cephalo-vagal response

OBJECTIVES -

To determine the effects of Chewing gum for the reduction of post-operative ileus after surgery for Intra-abdominal pathology

METHOD -

A randomized clinical study done including 40 patients undergoing intra-abdominal surgery for various intra-abdominal pathology at Ramaiah medical college hospital from December 2020 to September 2021. post operatively patient divided into two groups. Group A (gum chewing group) allowed to chew the gum for 4 times a day for 15 min each time. Group B (control group) standard post operative care is given without gum chewing. both group patients were assessed for presence of paralytic ileus.

RESULTS -

Post operative ileus is seen in 4% (1 patient) among Group A compared to 20% (4 patients) among Group B with a significant p value (0.006). passage of flatus within first 48 hours observed in 95 % (19 patients) among Group A compared to 60 % (12 patients) among Group B with significant p value (0.002). Decrease in incidence of post operative nausea and vomiting is observed among Group A compared to Group B.



CONCLUSION –

Use of chewing gum is associated with less incidence of post operative ileus, decreased incidence of post operative nausea and vomiting with early passage of flatus. since gum chewing is inexpensive, easily available and with less morbidity can be used safely among patients undergoing intra-abdominal surgery.

Dr Sandeep S

Surgery resident

Department of general surgery, Ramaiah medical college, Bangalore.

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Phone- 9738658641

Best Poster

A Rare Case of Focal Nodular Hyperplasia (FNH).

Presenter- Dr. Chetan Manjunath

Faculty:-Dr. Vijayakumar H M, Dr. Srikanthaiah, Dr. Sanjeev Shetty, Dr. Syed Faizan, Dr. Nitin Rao.A.R (Surgical Gastroenterologist), Department of General surgery M S Ramaiah Medical college, Bangalore



Introduction:-

FNH is an unusual benign condition of unknown aetiology. There is a focal overgrowth of functioning liver tissue supported by fibrous stroma. Patients are usually middle aged females, and there is no association with underlying liver disease.

Dr. Chetan Manjunath

Case history:-

A 33 year female presented with the complaints of mass in the right upper abdomen since 1 year. Associated with pain which was on and off. No H/o Use of Oral contraceptive. K/C/O Autoimmune thyroiditis during pregnancy. Patient underwent annual health check up. In which USG abdomen showed, well defined oval isoechoic solid lesion of 75x58 mm in right lobe of liver with no calcification or cavitation.

On examination patient is moderately built and well nourished. Heart rate of 90 bpm, Blood pressure 110/70 mmHg, SpO₂- 99% on room air, Respiratory rate 20 cycles per minute. Systemic examination, inspection no abnormality on palpation 6x5cm mass noted in right hypochondrium region in the midclavicular line 3 cm below costal margin. borders well made out, smooth surface. moves well with respiration on percussion Dull note over the mass continues with liver dullness. CT abdomen revealed exophytic mass of 71x73x95 mm arising from the inferior right lobe of liver with prominent arterial recruitment and central scarring. AFP, CEA, HCV AND HbsAg were negative. Patient underwent laparotomy with cholecystectomy and wide resection of segment V and VI of liver. Intraoperatively 10x8 cm vascular fibrous exophytic growth arising from segment v and vi of liver adherent to gallbladder, dilated lymphatics noted around gall bladder and remaining liver parenchyma appeared grossly normal. Histopathological report was suggestive of focal nodular hyperplasia of liver.



Discussion:-

Pre-operatively FNH is difficult to diagnose. If patient present with huge lesion and with symptoms surgical resection of the liver with adequate margin is the treatment of choice. FNH do not have malignant potential.



Interview with Surgeon - Dr Siddesh G (President, ASI)



Current positions:

President, Association of surgeons of India 2021 - 22

Medical director and Consultant surgeon, Sigma hospital, Mysuru

National executive member, Association of surgeons of India (2016-2021)

Vice President, MAHAN (Mysore association of Hospitals and nursing homes)

Executive committee member, IMA , Mysore.

Vice President, Baden powel educational society, which is running a public school, Mysore district, Bharath scouts and guides

Founder Trustee and President , Sapthaswara Balaga Trust

A cultural trust encouraging development of Hindustani music in Mysore region and also sponsoring a music school teaching Hindustani music to children, creating platform for young talents

EDUCATION:

Lakshmipuram Govt. primary school, 1st standard to 4th Standard

Marimallappas school, 5th standard to 10th standard

Sarada Vilas College, 1st puc and 2nd Puc

MBBS from Mysore medical college 1975 Batch (1975- 1981)

MS general surgery from JJMMC (1982january to 1984December)

Advanced training in GI surgery and endoscopy from Srihande clinic and Bombay hospital, Mumbai(February 1985 to Dec 1985)



Academic achievements:

31 years of teaching experience in JSS medical college, from Dec 1985 to October 2016.
Head of department of general surgery for over 8 years and held position of dean of faculties at JSS university

In addition to training post graduate students and training many young surgeons, has been examiner in many Post graduate examination.

Pioneered GI endoscopy and laparoscopic surgeries in Mysore

Established the endoscopy department and head of the department till the end of JSS tenure

Active in ASI programmes

Progressed in the ranks of ASI right from the Mysore district secretary to all the way to the president of ASI, 2022. Served in all strata right from EC member of the district, to the state.

Organised state conference as the secretary of Karnataka state chapter and later organised the national conference of ASI, 2016 in Mysore which was considered as benchmark for further conferences.

Took part in imparting basic surgical skills, laparoscopic and endoscopic training programmes.

Has been a faculty in Ethicon institute of surgical training and CEMAST





Personal life:

As a boy scout, lead the then Mysore district contingent to President Scouts' Rally, receiving the award from the Sri. V.v. Giri, the President of India in 1972.

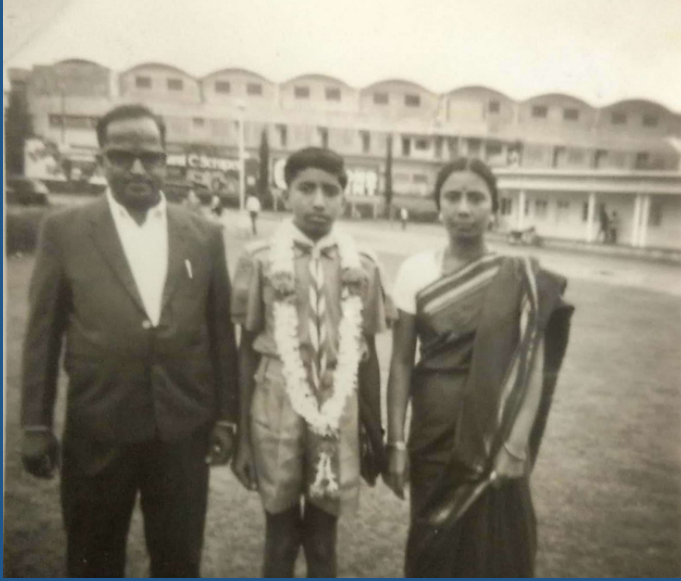
Was chosen as one of only four to represent India in the international Children's camp at Artek, Crimea of then USSR.

Was a keen mountaineer, having undergone basic mountaineering course during school and college days.

Music lover, founder member of trust, which is supporting music for over thirty years. (Had a brief stint in learning Hindustani Tabala playing.)

After leaving Medical College, from 2016, has taken up farming, especially planting hundreds of tree saplings every year. Involved in restoring a Sri. Laxminarayana temple of Hoysala times, which was in dilapidated condition in the farm land.





Family:

Wife: Dr. Anjali Siddesh, former prof. of Ob. G, has been calm and supportive. Has looked after the home front and progress of Two lovely sons,

1. Dr. Nitesh, Mch.(Uro.) a Gold medalist, recently married, the ever smiling, beautiful Dr. Gouri, pursuing her second year Ob G at BMC.

2. Dr. Ashwin, who is preparing for his P.G. entrance.



Events:

1. Academic:

Soon after M.S. left to then Bombay for further training, after a hard search for a suitable post, accidentally met, the famous Surgeon Dr. V.N. Shrikhande, who offered me a job. References did not get me a post, but a honest and simple personal approach worked.

Dr. V.N. S. is my real Guru, the Mentor who taught me the way of life along with Surgery and Endoscopy. I had an opportunity to meet world greats, like Dr. Nib Soehendra and Dr. Ligory, world renowned Endoscopists and learn from them.



This transformed my career and helped me to plan my future with confidence.

2. Personal: At one stage in the middle of my career, I was cheated by my own doctor colleague and was left with a huge loss and a loan of over two crores. At once I thought, I am doomed. It was my wife who solidly stood with me and supported morally and financially, I could bounce back to normal state in a short time. This made me strong mentally to face any eventuality.



Advice to youngsters:

There is no shortcut to success. Success is something in everyone's reach. You only have to go for it. Hard work and sincerity are a must. But you need to be a bit humble, (not the Luck).

You are bound to face failures, but take a pause, learn from mistakes and keep going.

Never stop progressing. If you stop progressing, you are already going backwards.

Believe in God,

Respect parents and teachers,

Love your work and do your work with love.





SSB welcomes new office Bearers 2022



SSB CSEP in pics





Sushruta

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THE CORONA SAGA..... 'CONFIDENT SIGNS' FOR 2022.

I am a Constant and Steadfast optimist...!

As 2021 Closes Shut,
Leaving a trail of Compounded Suffering
Induced by the ongoing Ceaseless Spread
Of the Cursed Structure virus,
Man looks Confidently and Surely forward
To Comfortable and Safer times in 2022.
And for this,
The Clear Set of Codes and Surmises are:

Covering Society with Vaccinations.
Central Supervisory directive now mandates
The Covering Shot (booster) for those Crossed Sixty
And for Health Care Service delivery teams.
[Note: Vaccines Do Not Curb Spread,
But they do Control Significantly the disease effect,
Reducing Crippling Sequelae and the
Compressive Strain on the Crumbling Staff
Of our Choked, Stuffed hospitals]

Covid Specific behaviour norms,
Be Commanded Seriously for a while more.
Cover Screen (masks) and
Clean Sanitizing of hands a must.
Crowd Swarms not to be allowed,
Closed Space events to be put on hold.
Common Subsistence livelihoods must continue
Travels to be Cut Short and only
For Crucial Summons.

The optimism Comes Specifically
From the Community Scientific, who
In their Collective Studies assure us
The Cease and Stop of pandemics
Is when the Cursed Strain of germ
Mutates itself Chip-chop and Swift
To Carry its Survival for long, and yet
Lose its Cunning Strengths of disease,
Thus, Cooling its Spite against humans.



This has been Covid 19's Street ways too,
With Omicron having many Changed Spikes
Making it spread Corruptly Swift
But yet Charitably and Sympathetically milder,
As it Charges and Seeks ways to infect humans.
Meanwhile, our Clan Swarm (herd) immunity
Gains Collective Strength, and this aids
Our Combating Strategies.

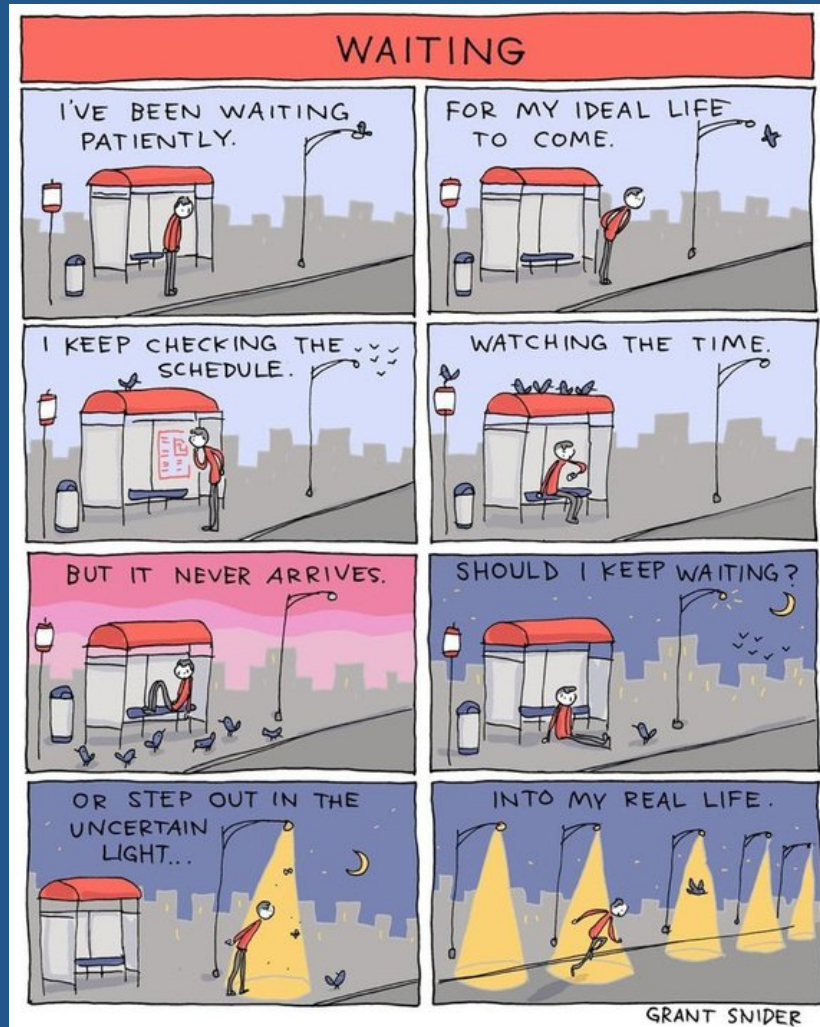
And so we Contemplate and Speculate
The end of our Circumspect Session
With the Corona Syndrome.
We await a Clear Summer in 2022,
Of Cash Slowdown's reversal,
Return of Children to Schools, and
College Students getting their due.

Of Choice and Styles that reflect
Cheerful Smiling times of a
Courageous Society that
Crossed the Span of the
Covid 19 Sars Virus.

Dr C S Rajan
Consultant Surgeon
Bengaluru.

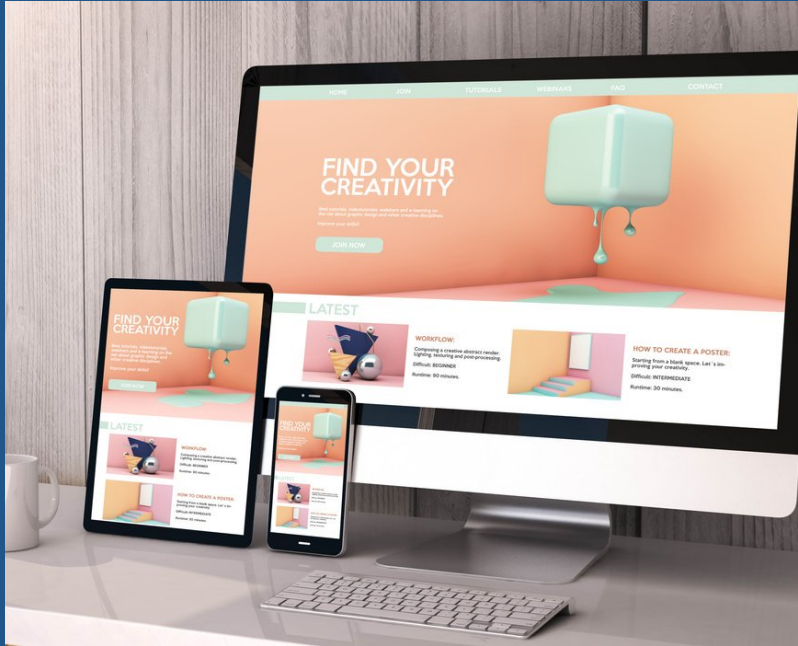


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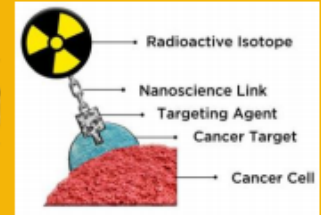
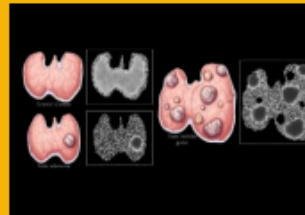
Our Services

PETCT Scan

Nuclear Medicine

Thyroid Disorders

Radionuclide Therapy



Our Facilities

Nuclear Medicine

- Thyroid Scan/Parathyroid Scan
- Myocardial Perfusion Scan (Stress Thallium)
- Renal Scans (DTPA/EC/DMSA/VUR)
- Liver Scans (HIDA/Bile Leak/GB Ejection)
- Bone Scan
- RBC Scan/Meckel's Scan
- MIBG Scan
- Lymphoscintigraphy/VQ Scan

PET-CT

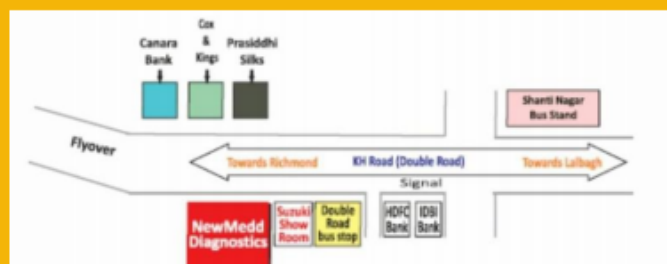
- OncoPET
- CardioPET (Viability)
- NeuroPET
- F18 Bone Scan
- Fever of unknown origin
- Multislice CT
- Ga-68 DOTANOC PETCT
- Ga-68 PSMA PETCT

Radionuclide Therapy

- Pain Palliation
- Radiation Synovectomy
- Hyperthyroidism
- Thyroid Cancer
- Neuroendocrine Tumors
- MIBG Therapy
- Lu-177 DOTATATE Therapy
- Lu-177 PSMA Therapy

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Thank-You