EYESIGHT, SEEING AND VISION.

"The eyes do not see what the mind does not know" (Old Medical Teaching).

Eyesight is a neurophysiological attribute and function, while seeing is an intellectual phenomenon involved with interpretation and 'in-sight'.

Whereas, vision is about wisdom, intuition, inspiration, extrapolation/projection and sometimes spirituality.

While many can 'look', a few can 'see' and fewer still have 'vision'-- they are the dreamers, thinkers, catalysts for change and progress, pioneers. They reflect in many ways an evolution of the mind and soul, an increasing awareness, a distancing (emotional/selfish) and detachment--to create an objectivity.

"Wisdom is extended/expanded logic"--kaydee.

Dr Kanishka Kapasi
MD,DGO

Logo of Godrej Memorial Hospital

Godrej Memorial Hospital has been ably serving the community in eastern suburbs of Mumbai for almost a decade. However due to its proximity to the Godrej residential colonies and to the factories of Godrej & Boyce and Godrej Industries, many thought that it was meant only for the Godrej employees and their dependents. We, at Godrej Memorial Hospital, are proud of the eponymous association but at the same time wanted to convey that the hospital is in fact 'open to all' and not only for the employees of Godrej factories. With this issue of 'PULSE' we are happy to unveil our new logo. While retaining the ethos of the Godrej brand, subtly conveyed through patterns in Citrus, Sky and Ruby now familiar across the country and abroad, the logo gives a separate identity to Godrej Memorial Hospital.

The logo conveys the idea of selfless service to humanity at all hours. The heart shape combined with soft edges gives the feeling of compassionate service and care. Combined with the radiant glow emerging from within, the logo represents the firm belief in 'Compassionate care for all'.

Dr Suhas Gangurde
Chief Executive Officer
Godrej Memorial Hospital
OPHTHALMOLOGY
MY WORK, MY WORSHIP

The earliest and most vivid memory I recall in relation to Ophthalmology was that of me, all of six years old, standing on a stool, flanked by my Grandfather on my left and my Father on my right, leaning over ever so precariously to observe the most intricate steps of Cataract Surgery being performed by them. Ever since, I have had a passionate affair with Ophthalmology. Over the passing years this affair has taught me more than I could ever imagine about this wonderful profession and about the Miracle of Life.

After graduating from Medical College and later having done my Post-Graduation in Ophthalmology - a life transforming experience was when I had the opportunity of operating with my Father on his patients. Such was his humility and character, that he proudly admitted to all his patients about my calibre as a surgeon - and that although he would not be performing the surgeries, he would assist, his own son, in the same. Men of such character are seldom known. Slowly yet surely he took a backseat, prodding me into the limelight. Those glorious moments I will never forget.

Another life transforming experience was successfully passing the Fellowship Examinations (FRCS) from Glasgow - on the first attempt, 13 years after graduation! Not in my wildest dreams would I have imagined to have done the same - had it not been for the unending support and encouragement of my Family. Yes, I was married by then, to the most beautiful and understanding woman, and we were blessed with twin boys! What more could one have wanted? There was no turning back. Things only got better. My hospital attachments came soon after. Patience, perseverance and practice paid off!

Over the years - I have realised ‘simple truths’ regarding my profession. We are dealing with human lives - with mortals who have feelings, emotions, personal problems and difficulties. They are in pain and distress. We doctors are blessed with the power to ease their suffering.

Ophthalmic practice and surgery has some of the most profound and gratifying results - especially the results of Cataract Surgery. Giving a man back his vision - so transforms his very outlook and approach to life - there can be no greater joy in being party to that experience!

Another ‘simple truth’ regarding my profession is - to be true to oneself. To do what is within one’s capacity and to do it with all your heart - totally. The rewards come multifold, they do, believe me - they do. But it is imperative that you do your job with honesty and passion - just for the sheer joy of doing! More than the tangible rewards that follow, it is the blessings which are intangible, showered upon the likes of us by our patients that count. Those blessings help us keep our health, our sanity and our homes intact.

A final ‘simple truth’ regarding my profession is - Faith. Faith is a great healer. Faith in the ‘Great Doctor’, the Life Giver. Faith can move mountains. One has to only Believe. This is my mission, my work, my worship.

Dr. Dinshaw A. Dastoor.
MBBS; DOMS; FRCS (Glasg).
Consultant Ophthalmic Surgeon.
Godrej Memorial Hospital.
COMPUTER VISION SYNDROME (CVS)

Computer vision syndrome (CVS) is a temporary condition resulting from focusing the eyes on a computer display for protracted, uninterrupted periods of time. With the increased use of comps, laptops, smart phones CVS has become very common nowadays.

Symptoms of CVS include headaches, blurred vision, neck pain, redness in the eyes, fatigue, eye strain, dry eyes, irritated eyes, double vision, vertigo/dizziness, polyopia, and difficulty refocusing the eyes. These symptoms can be further aggravated by improper lighting conditions (i.e. glare or bright overhead lighting) or air moving past the eyes (e.g. overhead vents, direct air from a fan).

Prevalence
According to the National Institute of Occupational Safety and Health, computer vision syndrome affects some 90% of the people who spend three hours or more a day at a computer.[2]

Therapy
Dry eye is a major symptom that is targeted in the therapy of CVS. The use of over-the-counter artificial-tear solutions can reduce the effects of dry eye in CVS. Proper rest to the eye and its muscles is recommended to relieve the associated eye strain. Various catch-phrases have been used to spread awareness about giving rest to the eyes while working on computers.

A routinely recommended approach is to consciously blink the eyes every now and then and look at a distant object or at the sky—doing so provides rest to the ciliary muscles. One of the catch phrases is the *20-20-20 rule* every 20 mins, focus the eyes on an object 20 feet (6 meters) away for 20 seconds. This basically gives a convenient distance and timeframe for a person to follow the advice. Otherwise, the patient is advised to close his/her eyes (which has a similar effect) for 20 seconds, at least every half hour.

Decreased focusing capability is mitigated by wearing a small plus-powered (+1.00 to +1.50) over-the-counter pair of eyeglasses. Wearing these eyeglasses helps such patients regain their ability to focus on near objects. People who are engaged in other occupations—such as tailors engaged in embroidery—can experience similar symptoms and can be helped by these glasses.

Proper body positioning for computer use
Some important factors in preventing or reducing the symptoms of CVS have to do with the computer and how it is used. This includes lighting conditions, chair comfort, location of reference materials, position of the monitor, and the use of rest breaks.

- Location of computer screen - Most people find it more comfortable to view a computer when the eyes are looking downward. Optimally, the computer screen should be 15 to 20 degrees below eye level (about 4 or 5 inches) as measured from the center of the screen and 20 to 28 inches from the eyes.
- Reference materials - These materials should be located above the keyboard and below the monitor. If this is not possible, a document holder can be used beside the monitor. The goal is to position the documents so you do not need to move your head to look from the document to the screen.
- Lighting - Position the computer screen to avoid glare, particularly from overhead lighting or windows. Use blinds or drapes on windows and replace the light bulbs in desk lamps with bulbs of lower wattage.
- Anti-glare screens - If there is no way to minimize glare from light sources, consider using a screen glare filter. These filters decrease the amount of light reflected from the screen.
- Seating position - Chairs should be comfortably padded and conform to the body. Chair height should be adjusted so your feet rest flat on the floor. If your chair has arms, they should be adjusted to provide arm support while you are typing. Your wrists shouldn’t rest on the keyboard when typing.
- Rest breaks - To prevent eyestrain, try to rest your eyes when using the computer for long periods. Rest your eyes for 15 minutes after two hours of continuous computer use. Also, for every 20 minutes of computer viewing, look into the distance for 20 seconds to allow your eyes a chance to refocus.
- Blinking - To minimize your chances of developing dry eye when using a computer, make an effort to blink frequently. Blinking keeps the front surface of your eye moist.

Regular eye examinations and proper viewing habits can help to prevent or reduce the development of the symptoms associated with Computer Vision Syndrome.

Dr Anagha S Deshpande
M.S. (Oph)
Consultant Ophthalmologist
Godrej Memorial Hospital
WHY IS IT NECESSARY TO CLEAN YOUR EYELIDS

It is very important to wash and clean our face, the first thing in the morning. Not maintaining lid hygiene can give rise to a host of eyelid diseases which though not affecting vision, can create a lot of nuisance.

Inflammations of the eyelids is known as BLEPHARITIS. Common causes of Blepharitis are either allergic, infection, systemic diseases. Soaps, cosmetics, external irritants which give rise to dry scaly skin around the eyelids. Scalp dandruff is a common association with blepharitis. Patients develop scaling, white flakes on the lids, matting and glueing of eyelashes.

Patients complain of itching around the eyelids and also dryness due to disturbances in the tear film. The lids may become reddened and thickened, there may be constant watering or pain in the eye. Contact lens wearers are not able to tolerate their lenses. The infectious variety may cause a sticky discharge. Small ulcers are caused at the root of the eyelashes. Eyelashes may fall off and may grow back distorted or not at all. Systemic conditions like diabetes need to be ruled out. People who are on starchy diets do have a tendency to develop Blepharitis. Chronic Blepharitis in children may be an indicator of a refractive error, and need an Eye examination.

Good lid hygiene is the most important step in the management of Blepharitis. Warm compresses, local massage, lid scrubs, local ointment application and lubricants are advised. Sometimes, oral antibiotics are prescribed as well. Prolonged treatment may be necessary to prevent recurrences.

Other Eyelid inflammations

Stye: These are swellings at the root of eyelashes. Acute red swelling which creates a bump with a yellow spot or tip. It is a very painful condition and the patient is recommended local antibiotics.

Chalazion: These are hard lumpy swelling in the eyelids caused due to blockage of the oil glands in the lids. If it does not improve, an injection can be given into the swelling finally, or the swelling is surgically excised.

Less commonly, inflammation of the lids can be caused by a primary infection of the eyelids by bacteria or infestation of the lashes by tiny mites or head lice.

Dr Smita Mukherjee
MS., DOMS, DNB
Consulting Ophthalmic Surgeon
Godrej Memorial Hospital
Hello,

My father (gmh104772) was moved to your hospital, in a critical condition, from another hospital in Chembur.

Thanks to your dedicated staff including the doctors, nurses and other personnel, my father made a fantastic turnaround and was allowed to return home in a week.

Throughout the stay at the ICU and the super twin sharing areas, I have been very impressed with the quality of the care, professionalism of staff and the high standards of the facilities at Godrej Memorial Hospital.

I thank you for your impeccable service to those who need your care. Such superb standards are all the more appreciated in an era when almost all other hospitals in Mumbai fail at providing high quality and affordable health care to those in need.

I hope your hospital continues to uphold such excellent standards well into the future.

Kudos!

William D’souza
A patient of Godrej Memorial Hospital

Hello,

At the Godrej Memorial Hospital, calm, clean and serene;
such an ambiance green, hardly I’ve seen.
Various places well guarded by many a sentry,
For outsiders without proper pass there’s no entry.

The hospital comprises of many a section,
and patients are treated by experts in their vocation.
Surgery is recommended not only for survival,
but for quick recovery and patients fast revival.

In their smile, there’s charming beauty;
More often than not its misunderstood as duty.
There are other helping hands for these nurses.
All working in unison, not only for pursues.

But always there’s scope for the standard to be raised,
regarding with incentives, for these worth to be praised.
The hospital in the suburbs shines like a radiant ray.
Discharging many a patient, making them happy & gay.
May the hospital’s standard increase in leaps and bounds
and be number one, in the suburbs it surrounds!

Jacob Varghese
Ottawa, Canada.
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calinkedin.com/in/brandbytemedia
It is my best opportunity to give information about Humphrey’s visual field analyser, which we have in Godrej Memorial Hospital in Ophthalmology OPD.

Introduction
Humphrey’s perimeter is used for visual function assessment that can detect dysfunction in central and peripheral vision, which may be caused by various medical conditions most commonly glaucoma and neurological deficits.
- Glaucoma (raised pressure in the eye) is one of the leading causes of irreversible loss of vision. Perimetry is essential in glaucoma diagnosis and management, frequently used by ophthalmologists.
- Neurological diseases. Visual fields help in detecting optic neuropathies and hemianopias. Central scotoma is a typical pattern of visual field loss for several types of optic nerve diseases like optic neuritis, tobacco alcohol amblyopia.
- Drug induced maculopathies

Procedure
It takes about 7 to 10 minutes for each eye. Automated perimetry uses mobile stimulus moved by perimetry machine. Patient sits in front of small concave dome with a target in the centre. The chin rests on the machine and the other eye is covered. A mouse with a button is given to him and he is asked to focus on the target at the centre. The patient clicks the mouse whenever the light is seen. The computer then automatically maps and calculates the patient’s visual field. The report can be printed.

Common glaucomatous field defects
- Arcuate defect- Bjerrum scotoma
- Paracentral scotoma
- Nasal step

Dr Archana Choudhary
MBBS, DOMS, FCPS
Consultant Ophthalmologist
Godrej Memorial Hospital

Dr Kalpesh Shah
MS, DOMS, FCPS (Gold),
ICO(UK), FRCS(Glasgow),
Consultant Ophthalmologist
Godrej Memorial Hospital
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