



NABL & NABH accredited

From Editor's Desk...

Monsoon showers have brought relief from the sweltering summer. Vacation is over. Back to school days for the children and the medical profession too has to gear up for the potential outbreaks of monsoon maladies.

I take this opportunity to answer a few FAQs. (Frequently Asked Questions).

Q1. Who can utilize the facilities at G.M.H.?

A. Anybody and everybody can avail of the services at G.M.H. It is open to one and all at all times.

Q2. Do we have to pay a deposit before getting admitted in an emergency specially at odd hours?

A. **NO.** This is one of the few hospitals in its class that does not insist on a deposit on emergency admission. It does not deny treatment or admission during an emergency on that ground. Of course, the patient/relative gives an undertaking that they will pay at the earliest convenience. We have found that our trust in patients is well founded & we are proud to say that our community is by and large very honest.

Q3. In case of emergency where can I contact? Will I get an ambulance?

A. You can call **66417100 / 7052 (8am.- 9pm.)** or **Casualty 66417031 / 25749400 (24 Hrs)**. You can avail Cardiac / Transport ambulance at a reasonable cost.

Wishing you all good health, we at G.M.H. are ready to serve.

**Dr. Kanishka Kapasi
M.D, DGO**

For Private Circulation only

Godrej Memorial Hospital

(Unit of Godrej Memorial Trust)

PULSE

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THE TRAIN THAT MAKES YOU SMILE...

SMILE is probably the best gift that God has showered on all of us. It helps us to forget worries, sorrows and shortcomings of our lives. But many, mainly children, from our neighborhood, are deprived of this smile because of the congenital defect called "cleft lip and palate". These children have cut lip or palate as birth defect and become under nourished due poor intake of food and has profound impact on the proper development of the children. Many people relate it with eclipse and many other misconceptions/superstitions. This creates a panic in the family and they just wander in darkness with retarded growth and social isolation. Godrej Memorial hospital and an US based NGO "Smile Train" have partnered from 30/12/2005, to treat children from poor families with developmental defects such as Cleft lip and Palate and the first surgery was performed on 19/04/2006 at GMH.



The Story Behind The Project...

The original concept was an actual train that would travel around developing countries, providing free surgery for poor children and free training for doctors. Smile Train was founded in 1999 and began with one surgery in China performed by a local medical team. In nine years it has grown into the largest cleft organization in the world with hundreds of partners and programs in 77 countries. Godrej Memorial Hospital in collaboration with Smile Train, provides cleft lip / cleft palate surgeries and hospitalization **FREE** of cost for children from weaker sections of society. Related referrals, post operative management like speech therapy and post operative complications, if any, are also taken care of. Primary consultation and screening also are provided **FREE** of cost. The child necessarily has to have hemoglobin of 10, be in age group from 06 months to 40 years, minimum weight of 10 kilograms, positive preoperative fitness and then they would be considered for surgery.

The Specialists supporting the program at GMH are :

- Dr. Ravin Thatte - Project Director
(Formerly Prof. Plastic Surgery Dept of LTMG Medical College- Sion Hospital).
- Dr. Bharati Khandekar - Plastic Surgeon.
- Dr. Nishit Agni - Maxillofacial Surgeon
- Dr. Vaishali Ahire - Anaesthetist.
- Dr. Smita Roy Choudhary - Pediatrician



The Smile Train OPD runs on all Wednesdays except on hospital declared holidays, from 12.00pm-01.00pm. The Smile Train coordinators are available on 66417100/66417047/9920206805 for any further details. You can certainly **CHANGE** someone's life for better if you pass this information to the needy. Godrej Memorial Hospital in partnership with Smile Train has brought Smiles to **535** children and their families till date. In 2010, in a function at Mumbai, Mr. Ratan Tata presented Nano car to Smile Train partner hospitals and Godrej Memorial Hospital was among one of them to receive this appreciation as a mark of achievement in the field of Smile Train Services.

Complied By Madam Daisy N Raj

"Face every challenge confidently thinking "If I Cant, Who Can?".
But after winning be humble enough to say -' If I Can, Who Cant".

WHY WE MIGHT NEED A HAND SURGEON ?

Like many specializations in medical field, Orthopaedics has developed into many focused sub- specializations like Joint Replacement, spine Surgery, Pediatric Orthopaedics etc. Hand surgery has too developed in last 2 decades as a separate orthopedic sub specialization. India has one of the most advanced hand surgery care to offer in the world and has become a teaching center for many aspiring hand surgeons from around the globe. Likewise, hand surgery has become one of the fields in which medical tourism is fast catching up.

Hand Surgeons are a group of Orthopaedic surgeons or plastic surgeons who have obtained special training in treating various acute and chronic conditions in the hand, more aptly the upper extremity.

The scope of hand surgery encompasses the problems of brachial plexus both during Birth Brachial Plexus injuries and adult brachial plexus injuries; congenital deformities of the Upper extremity, repetitive stress injuries in the upper extremity, occupational injuries, as well as any other injuries and conditions which are peculiar to the hand.

Brachial Plexus Injury; BPI which may result from birth trauma or in adults from high speed vehicular injuries (two wheeler) requires extensive surgery to restore function and reduce morbidity. Number of secondary procedures may have to be performed after primary treatment for the injury.

Congenital deformities; Syndactyly, camptodactyly, Congenital trigger thumb, hypoplastic thumb, constriction band syndrome, radial club hand are some of the common conditions occurring at birth which can be effectively treated by Hand surgeons.

Repetitive stress injuries : Tennis elbow, Carpal Tunnel syndrome, DeQuervain's Tenosynovitis, trigger digits, tendon ruptures, rotator cuff injuries, arthritis of small joints of hand and basal joint of the thumb. Occupational Hazards: Inclusion cysts, crush injuries, finger amputations.

Fractures and dislocations in the hand & wrist, rheumatoid hand deformities, nerve and tendon injuries, vascular problems in the upper extremity - are also effectively dealt with by a hand surgeon.



Blast Injury to a Child's Hand



Restoration of Function after Surgery

Dr. Pankaj Ahire M.S.(ORTHO) Specialist Hand Surgeon
www.handsurgery.org.in

Sugesstions from the previous issue (May'2012)

Dear Dr. Suhas Gangurde & Team,

I was delighted to read 1st issue of PULSE dated 1.5.12, which gave insights on HBOT, proving a boon for patients giving them 2nd life.

The following are few suggestions, if feasible, can be implemented for future issues:

- 1) Below any message, either from the Editor, Trustee or CEO, the name of the person needs to be mentioned.
- 2) What will be the frequency of publication of Pulse?
- 3) Please do mention about SMILE Project in any coming issues.
- 4) Interview of speciality Doctor, practicing at GMH should be thought.

Best Wishes for coming issues.

Regards,

Nariman Bacha - 4.6.12

Administration Dept. (Plant-11)

Extn: 4108

Dear Mr. Nariman Bacha,

Thank you for your valuable feed back on the first issue (May'12) of GMH newsletter "PULSE". We have considered your suggestions and we are in a process of improving ourselves with each issue. I would like to answer your queries regarding the first issue.

1. We have implemented your suggestion and we have entered the names of the person below the messages. The trustee's message in the first issue was pened by respected trustee Mr. Behram Hathikhanawala.
2. "Pulse" will be released bi-monthly
3. We have mentioned about the smile train project in the current issue.
4. Interviews of speciality doctors will be published in the coming issues.

We again thank you for you suggestions and hope for your constant support for the betterment of the community.

Regards

Team Pulse

Myths & Facts about Food

Food myths are part of every culture. Some are plain superstition while some myths are dangerous, having smattering truth in them. Here are some examples

Myth : Bittergourd & Neem Leaves have mild transient, blood sugar lowering effect.

Fact : The fact is, most diabetics hate controlling their diet and taking insulin drugs. Diabetics generally opt out of a rational treatment and substitute bittergourd, neem leaves, fenugreek seeds for their treatment. The above listed do have a glycemic control effect, but it alone won't help the individual to control his/her sugars. This can be taken as a supportive therapy rather than the only therapy like most of the diabetics do and thus land into diabetic ketoacidosis and ICU. Thanks to bitter gourd therapy

Myth : Drinking water helps to lose weight

Fact : Water only makes you eat less. Just adding water to your normal diet doesn't seem to promote weight loss. But if you have water instead of sugary drinks, colas or snacks then it will help you shed kilograms. Water should not be totally substituted with major meals which may affect your health, though it may help to lose your weight but also at the same time it will make you immunodeficient.

Myth : Popcorn is a healthy & nutritious snack

Fact : Pop corn can be healthy but it all depends on how it is prepared. Air popped popcorn & sand roasted pop corn is the best choice. Stay away from microwave popcorn brands as they have 20-25 grams of oil in it which gives 180-225 kcals from fats alone in one serving.

Myth : To lose weight you should eliminate all starchy food from your diet

Fact : When carbohydrates are severely restricted from the diet, the body doesn't have enough energy to sustain itself & it starts using fat stores. That's how most people initially lose weight, but they gain it back when they reintroduce carbohydrates again in their diet.

Sneha Trivedi

Dietitian

Godrej Memorial Hospital

Obstructive Sleep Apnea (OSA)

Obstructive Sleep Apnea is when a person stops breathing (repeatedly) during sleep. Breathing stops because the airway collapses and prevents air from getting in to the lungs. Sleep patterns are disrupted, resulting in excessive sleepiness or fatigue during the day.

OSA is very common, under recognized problems in India. There are very few surveys done to see the actual problem. A survey done at Hinduja Hospital, Mumbai had shown its prevalence at 8% of the general population.

What causes the airway to collapse during sleep ?

- ★ Obesity - Fat tissue deposition around the airway
- ★ Extra tissue in the airway such as large tonsils
- ★ Decrease in the tone of the muscles holding the airway open
- ★ The tongue falling back and closing of the airway

What happens if Obstructive Sleep Apnea is not treated?

- ★ High blood pressure
- ★ Heart failure and heart attack
- ★ Stroke
- ★ Worsening of Diabetes Mellitus
- ★ Fatigue - related motor vehicle and work accidents
- ★ Decreased quality of life
- ★ Memory loss, less alertness throughout the day

How many people have Obstructive Sleep Apnea?

- ★ In India, 8 in 100 middle-aged men and 4 in 100 middle-aged women have Obstructive Sleep Apnea.
- ★ Most OSA sufferers remain undiagnosed and untreated.
- ★ Obstructive Sleep Apnea is as common as adult asthma.

What are the signs and symptoms of obstructive sleep apnea?

- ★ Obesity- Fat tissue deposition around the airway
- ★ Snoring, interrupted by pauses in breathing
- ★ Gasping or choking during sleep
- ★ Restless sleep
- ★ Excessive sleepiness or fatigue during the day
- ★ Poor judgement or concentration
- ★ Irritability
- ★ Memory loss
- ★ High blood pressure
- ★ Depression
- ★ Large neck size (>17" in men; >16" in women)
- ★ Crowded airway
- ★ Morning headache
- ★ Sexual dysfunction
- ★ Frequent urination at night.

How do we diagnose OSA?

A complete polysomnography will help detect these episodes of airflow cessation. Signals pick up EEG, EMG, ECG, snoring, leg EMG, thoraco-abdominal movements and airflow. It is normally an overnight study.

What is the treatment of OSA?

- ★ Continuous Positive airway Pressure devices are the mainstay in the treatment and help in abolition of apnea / hypopnoea, reduce hypertension, DM, Heart failure and improve daytime alertness and cognition
- ★ Surgery like UPPP and bariatric surgeries also help to some extent.
- ★ Medical treatment with Modafinil drug also helps some
- ★ Lifestyle modifications-Smoking cessation, Weight reduction, Alcohol reduction and Yoga : Pranayama also help in mild cases.

Dr. Tejal Shah

MD (TB and Chest Medicine)

Polysomnography (Sleep Study) is done at Godrej Memorial Hospital. Contact 6641 7100 / 7052

Did You Know ?

The first known heart medicine was discovered in an English garden. In 1799, physician John Ferriar noted the effect of dried leaves of the common plant, digitalis purpurea, on heart action. Still used in heart medications, digitalis slows the pulse and increases the force of heart contractions and the amount of blood pumped per heartbeat.

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Dr. Yusuf Esaf on behalf of
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Suggestions & feedback

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INTERNATIONAL NURSES' DAY CELEBRATION.

Nursing is one of the noblest profession in the world. The great lady "Florence Nightingale" was the founder of modern day nursing. She improved the quality of the nursing, elevated the status of nursing and founded the modern day nursing education.

12th May is celebrated as 'International Nurses' Day' in the warm remembrance of the great lady fondly known as 'Lady with lamp'. On this occasion the employees of GMH celebrated Nurses' Day as a tribute to all the nurses.

The program began with a prayer song to invoke God's blessings and a prayer dance in thanksgiving. This was followed by a welcome address and floral tribute to the guests & traditional lamp lighting. The Nightingale Oath was then recited by the Nurses...

The chief guest Dr. Suhas Gangurde, CEO addressed the gathering and highlighted the achievements by the nurses in the delivery of healthcare and specially noted the recent achievement by a nurse who topped the IAS examination this year.

A variety of entertainment programs followed. The guest of honor. Dr. S V Pandit, in his address touched upon the day's theme where as, Ms. Lisha ceremoniously announced the theme "Closing the gap from evidence to action".



Nurses Day Celebration

Unveiling the Newsletter

Godrej Memorial Hospital Inaugurated its first issue of newsletter "PULSE" in the first week of May 2012. The newsletter was released in the presence of respected trustee of Godrej Memorial Trust, Mr. Percy E. Fouzdar, Dr. Suhas Gangurde, CEO Godrej Memorial Hospital, Dr. Kanishka Kapasi, Chief editor and member of the advisory board Dr. G.D Bhatia. Mr. Percy E. Fouzdar congratulated GMH for its achievement, followed by a short speech by Dr. Bhatia. The ceremony was concluded with vote of thanks by Mr. Persis Banaji Chief Finance officer.



From Left to right Dr. Kanishka Kapasi, Dr. Suhas Gangurde, Mr. P.E Fouzdar, Dr. G.D Bhatia

Activity for July 2012		
Date	Name of Activity	Name of Doctor
01 st July 2012	"Free Cataract Camp"	Dr. Smita Mukherjee Ophthalmologist
08 th July 2012	"Free Cataract Camp"	Dr. Anagha Deshpande Ophthalmologist
27 th July 2012	"Discussion on Stroke Management"	Dr. Vishwanathan Iyer Vascular & Interventional Neuro Surgeon
29 th July 2012	"Free Dental Camp"	Dr. Charu Girotra Dental Surgeon

Activity for August 2012		
Date	Name of Activity	Name of Doctor
05 th Aug 2012	"Free Menstrual (Bleeding) Disorder Camp"	Dr. Padma Khade Gynaecologist
12 th Aug 2012	"Paediatric Camp"	Dr. Smita Roychoudhary Paediatrician
19 th Aug 2012	"Bariatric Camp" (Weight Loss Surgery)	Dr. Sanjay Sonar Laparoscopic Surgeon Neuro Surgeon
26 th Aug 2012	"Diabetes & Thyroid Camp"	Dr. Ameya Joshi Endocrinologist

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