



newsletter

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Why are doctors under attack—and what can we do about it?

A sharp increase in attacks by patient's relatives on doctors in 2017 prompted strikes by emotionally stressed medical professionals in major cities across India. Practicing under fear of assault is no solution to this sorry state of affairs. Then, what is the remedy?

Let us backtrack a little. Decades ago medicine used to be simpler and less specialised. Families would consult a general practitioner, their relationship with the doctor was a bond of utmost trust and empathy. All this changed with the increasing complexity of disease and the development of super specialities. Now patients tend to seek health services from typically unknown consultants in hospitals.

What happens when a patient enters the portals of a hospital?

The rather impersonal healthcare

system adds to the stress of the suffering family. Sometimes, the cost of health care extends beyond the initial estimate, further aggravating their situation.

In all this, a trigger event, such as the sudden unexpected death of the patient can lead relatives to express stress in the form of violence against the doctor.

Violence of any kind cannot be condoned. However, the medical fraternity can also not remain blind to the plight of patients. We must take steps to safeguard ourselves as well as make the experience of hospitalisation less stressful for those we serve.

Hospitals must invest in training to teach staff how to communicate with patients and their relatives. It always helps to deploy more staff on the frontline, this is where the hospital is

seen and heard. A specialist social worker should be engaged to counsel the relatives of the patient.

Medicine is not magic, it has its limitations. This necessitates the practitioner to give patients and their relatives a realistic assessment of the patients' condition, risks and progress.

As far as possible work must be evenly distributed between medical professionals. Overworked doctors are more likely to have too little time for a patient and therefore, to delay care and/or to act erroneously, thus becoming potential victims of attacks.

Establishing procedures also helps to ensure the quality of care and the availability of equipment and drugs to tend to an emergency.

– Dr Partap Midha, Medical Director

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Tax exemption on donations

Under Section 80G of the Income Tax Act of 1961, Indian donors can deduct 50% of their donation to Global Hospital & Research Centre from their income for the purpose of computing taxable income. To know more, email info@ghrc-abu.com

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Thanksgiving



Medical director Dr Partap Midha presents a send off gift to Dr Shalabh Sharma, professor, Community Medicine, RNT Medical College, Udaipur, for serving as the chairperson of the hospitals' Ethics Committee from 2005 to 2017.

Special services

Visiting urologist from Gwalior Dr Brajesh Singhal with consultant surgeon Dr Somendra Sharma operated on one patient in July, four patients in August and six patients in September. He also performed four cystoscopies.

Fourteen patients consulted Gulbarga-based nephrologist Dr Manjunath Doshetty on July 4. Thirteen patients consulted nephrologist Dr Anand Narayan Malu from Solapur on August 18.



Dr Manjunath Doshetty sees a patient

Dr S C Tiwari, a dermatologist from Delhi saw 181 patients in the hospital and at the clinic in Delwara on July 10/11/12. Another dermatologist from Mumbai Dr Sunil Mishra saw 64 patients on August 26.

A health check up event led by the Department of Diabetes on August 17 attracted 71 patients. Their blood glucose level and other parameters were tested.



Diabetic clinic staff Dr Savita Sonar (left) and Dr Indu Chandiramani conducted health check ups

A neurologist from Delhi saw 18 patients on August 4. Neurologist Dr Ankur Wadhwa from Delhi saw 10 patients on September 16.

2

Joint replacement surgeon and medical superintendent at BSES MG Hospital Mumbai, Dr Narayan Khandelwal, performed 25 surgeries, assisted by orthopaedic surgeon Dr Kailash Kadel and registrar, orthopaedics & emergency department, Dr Murlidhar Sharma, between July and September.

Asset acquisition



Above: Medical director Dr Partap Midha (extreme right) performed the inaugural ceremony of a new dental chair! This new chair replaced the existing unit in the clinic of the head of the Dentistry Department, Dr Niranjana Upadhyaya (second from right). Visiting orthodontist Dr Puneet Batra was also present (third from right).

Dr Luz Cuestas from New York, USA, and Fauchère André-Philippe from Switzerland, sponsored this new acquisition.

MELANGE

Conferences, trainings attended

Who, with designation ~ Topic ~ Organised by ~ When ~ Where

Sanjeevani Bhandare, blood storage supervisor ~ training on *Quality Management Systems and Internal Audit in Medical Laboratories as per ISO 15189:2012* ~ Medical Education & Learning Point and BSES MG Hospital ~ July 12 to 15 ~ Mumbai

Bharat Chandra Sahoo, sr lab technician ~ CME on *Statistics in Clinical Lab (Concept Building)* ~ Medical Education & Learning Point ~ September 3 ~ Delhi

Jyoti Narang, chief lab technologist ~ CME on *Statistics in Clinical Lab (Concept Building)* ~ Medical Education & Learning Point ~ September 3 ~ Delhi

Prasanna Marathe, bio-medical engineer ~ basic CT training ~ Wipro GE Healthcare ~ August 21 to 25 ~ Bengaluru

Geetha Santoshi, jr engineer equipment maintenance ~ basic CT training ~ Wipro GE Healthcare ~ August 21 to 25 ~ Bengaluru

Dr E Archana, dental surgeon ~ orthodontic seminar ~ Clinical Orthodontic Workshop ~ August 27 ~ Mumbai

Lectures delivered

Topic ~ Who, with designation ~ When

Transforming a rural village through holistic education & healthcare: The Hunar Ghar Story by Ed Forrest, CEO & founder, Educate for Life, Udaipur, July 12

Management of Acute Stroke by Dr Kiran Bala, neurologist, Delhi, July 29

Male Hair Loss: Its Treatment & Management by Dr Sunil Mishra, dermatologist, Mumbai, August 25

Female Hair Loss: Its Treatment & Management by Dr Sunil Mishra, dermatologist, Mumbai, August 28

Urinary Tract Infection in Children by Dr K P Mehta, paediatric nephrologist, Jaslok Hospital, Mumbai, September 2

DIAL-A-DOCTOR

Need an appointment?
A second opinion?

Call Archana Kulkarni,
manager, hospital
promotional services on
9413775349

Nursing education

Activity diary



Girls take part in a running event during the Annual Sports Week in September 2017

Awareness: Traffic Rules

July 8

Chief guest Paras Gehlot, regional transport officer for Abu Road, urged students to follow traffic rules and use helmets. BK Jagdish, chairperson of the Environment & Travelling Department, Shantivan, co-organised this event.

Lecture: Discipline

July 22

Physician Dr Sachin Sukhsohale delivered a lecture on the importance of discipline in student's life.

Disseminating Awareness: Breastfeeding Week

August 2 to 8

Third year graduate students disseminated information about breast feeding at the Abhinav Bal Hospital, Abu Road. They were accompanied by vice principal Banupriya A and clinical instructor Saurabh Jani.

Cultural Activity: Fancy Dress Competition

August 15

Fourth year graduate students Pooja and Sheetal, third year

diploma student Santosh and first year diploma student Divya participated in a fancy dress competition held as part of a seminar-cum-Rajyoga retreat, *New Window for Travel & Tourism*. Santosh stood third.

Lecture: Visualisation techniques

September 2

Kalpna Bhandare, spiritual counsellor from J Watumull Global Hospital & Research Centre, Mt Abu, spoke on visualisation techniques.

Lecture: Dreams

September 8

Trainer EV Swaminathan from Mumbai lectured the students on dreams. This was a motivational speech.

Lecture: Young India, New India

September 11

Students avidly heard Prime Minister Narendra Modi's speech on the 125th anniversary of Swami Vivekananda's address at the Parliament of the World's Religions in Chicago.



Students conducted an awareness drive on breastfeeding at the Abhinav Bal Hospital in Abu Road



Distribution of prizes to winners of the fancy dress competition held in Shantivan, Abu Road, student Santosh bagged the third place

Event: Annual Sports Week

September 20-23

Deputy Director of J Watumull Global Hospital & Research Centre Dr Roja Tumma inaugurated the Annual Sports Week at Tapovan. Students competed in cricket, volley ball, badminton, carrom, chess, races, long jump, high jump, discus throw and other sports.

Australian Friends For Global Hospital (AF4GH)

Dr Partap Midha and Stephen Berkeley visited Australia from September 8 to 30. During this time, four programmes were held to launch the newly founded Australian Friends For Global Hospital (AF4GH).

The first launch at the Institute for Learning Professionals, Herston, Brisbane, on September 9, attracted 30 guests including healthcare professionals who offered to volunteer in India. AF4GH supporter Peter Clark conducted this event. Another event organised by AF4GH supporters Terri and Geoff Wieczorski at the Royal Hobart Hospital Cancer Support Community Room on September 12 attracted 20 guests.

In Melbourne, 36 people attended the launch on September 14 at the Kathleen Symes Centre, Carlton. President of the AF4GH Dr Barbara Hannon conducted this interaction while Global Hospital patron Robin Ramsay shared his experiences with the hospital. One participant, a lecturer in mental health nursing [later] committed to visiting the hospital to lecture nursing students.

Inner Space in Five Dock, Sydney, hosted a launch on September 20. Among the 34 guests, a medical student from the University of Notre Dame in Fremantle, Western Australia [later] committed to doing her four week elective placement in the hospital. A few others joined the AF4GH to help raise awareness about the hospital. AF4GH management committee member Maureen Chen conducted this event while palliative care physician Dr Roger Cole shared his hospital experience and conducted meditation.

Putting Feelings into Healing was the theme of six talks by Dr Midha in Brisbane on September 9, in Fitzroy on September 13/14, in Wilton on September 19, in Sydney on September 21 and in Leura on September 24. Stephen Berkeley delivered a talk, *The Hospital with a Heart*, on September 27. He also conducted two workshops, *Care and Wellbeing*, at the Baxter Retreat Centre on September 16 and *Values in Healthcare: A Spiritual Approach*, at the Leura Retreat Centre on September 23.



Palliative care physician Dr Roger Cole (left) shared his hospital experience; Dr Partap Midha is also seen

← OVERSEAS reach ↓



(l to r) Hospital patron Robin Ramsay, medical director Dr Partap Midha, AF4GH president Dr Barbara Hannon and Stephen Berkeley, manager, Organisational Development, Global Hospital

← OUT reach ↓

Staff training



Nurse educator Vikram Goswami trained 58 hospital drivers and health workers in basic life support and first aid, on September 26 and 29.

Renewal of contract for mobile clinics

Zorg Van de Zaak, a Dutch not-for-profit, has renewed its association with Global Hospital & Research Centre for the period from November 2017 to October 2018.

Zorg van de Zaak

The foundation is sponsoring:

- > the major part of the operational cost of the two mobile clinics that serve a population of about 150,000 in district Sirohi.
- > the employment of two disabled staff, and
- > the nursing education of three girls from economically less privileged families as well as one boy and one girl who suffer from a physical handicap.

Inspired to give?

Mail your cheque/draft favouring *Global Hospital & Research Centre* to PO Box 35, Mt Abu, 307 501 Rajasthan, INDIA
Email mail@ghrc-abu.com for details of a bank account to transfer funds

cases led by visiting doctors

Visiting doctors play a big role in extending the services offered at J Watumull Global Hospital & Research Centre, here we present three such examples:

Urology services

Bharat Garasia, 5, suffered bouts of fever and abdominal pain for which his family sought treatment from a local physician and a paediatrician. When the child experienced no relief, Sarma Ram, the father, approached Dr Somendra Sharma, Global Hospital's consultant laparoscopic surgeon.

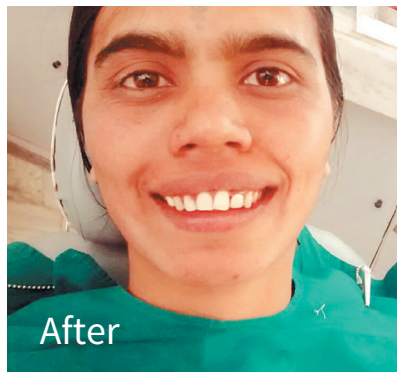
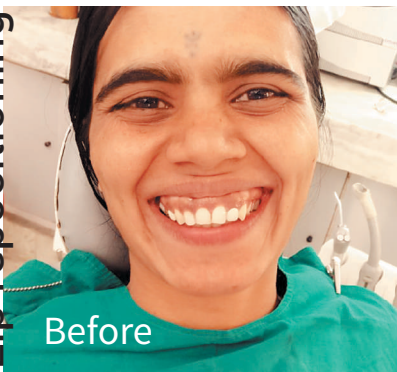
A diagnostic sonography showed that Bharat had a mobile stone measuring 24 x 25 mm in the urinary bladder with mucosal thickening.

Bharat underwent a suprapubic percutaneous cystolithotomy by visiting urologist Dr Brajesh Singhal and Dr Sharma, following which he recovered well.

He was treated for free because his family is poor. His father is a daily wage hand in a Mt Abu hotel earning about Rs 7,000 monthly, on which he supports his wife, a homemaker, and three children—Bharat, a class 3 student, a younger boy studying in class 1 and a younger sister at home. The family lives in Chandela, their native village.



Lip repositioning



A female patient, 35, felt conscious of her smile because her gingival display at baseline was 5-6 mm.

To correct this, dental surgeon Dr Laxmi Patil worked under the guidance of visiting periodontist, Dr Kamteshwari, dean, Aurobindo Medical College, Indore.

Dr Patil made two incisions in the inner lip (labial mucosa), 10-12 mm apart, and removed the epithelium tissue, with the idea of relaxing the smile, which would allow the lip to cover the extra gingival display.

By doing this, the gingival display reduced to 2-3 mm. The patient was very pleased with the outcome.

We were attracted by the lower cost [as compared to hospitals in Gujarat] and the longer hospital stay, during which the patient is given physiotherapy.

—Jatan ben, a joint replacement surgery patient



Jatan ben Chauhary, 50, is a resident of Palanpur, the nearest town in the adjoining state of Gujarat.

She had suffered pain in both knees since three years. Investigations showed wear and tear of the knee joint, for which she was advised surgery. However, she and her husband, Samal bhai Chauhary, felt surgery would prove too expensive.

Samal is a farmer. They have three children, two grown up girls and a son who is studying.

Jatan's son heard about the joint replacement surgery package at Global Hospital from a satisfied patient. So, the family decided to avail the services of visiting joint replacement surgeon Dr Narayan Khandelwal, also medical superintendent at BSES MG Hospital, Mumbai.

Dr Khandelwal was assisted by orthopaedic surgeon Dr Kailash Kadel, and registrar, orthopaedics & emergency department, Dr Murlidhar Sharma.

Jatan ben was up and walking the very next day after surgery.

Joint replacement surgery

Flood relief in Rajasthan



Extreme left: Senior clinical associate Dr Nabajyoti Upadhyaya led one relief team that visited Jalore; nursing supervisor Smita Prajapati and patient relation officer Rishi Mehta are seen standing behind him

Left: Village Outreach Programme chief and dermatologist Dr Kanak Shrivastava (sitting) led a second relief team to Jalore

The Service

Two relief teams from the hospital served the affected people. One team headed out on August 2. This included senior clinical associate Dr Nabajyoti Upadhyaya, patient relation officer Rishi Mehta, nursing supervisor Smita Prajapati, staff nurses Sristi and Jalam, OT assistant Manjunath, pharmacy sales assistant Umesh Singh, volunteers Vinod Jindal and Meena Agarwal, and drivers Ganpat and Aditya. They visited Bhil Basti and Bagri ki Basti in Sayla, Surana and Tiloda.

On August 3, another team led by Village Outreach Programme chief and dermatologist Dr Kanak Shrivastava, assisted by field supervisor Ramesh Prajapati, DOT supervisor Yoga Ram and health worker Ranjeet Hiragar, set out to serve the people of Bhinmal, Ghani Nadi, Kothvas (Bhilo ki Basti) and Raniwada.

In the next few days, Dr Upadhyaya saw 309 patients while Dr Shrivastava attended to 280 patients. Some relief materials such as blankets and food essentials were distributed.

The Location

District Jalore adjoins district Sirohi wherein Global Hospital is located. It has a population of 1.8 million.

The Situation

In end July, heavy rainfall in southwest Rajasthan necessitated water to be released from the Jawai Dam. Massive flooding in district Jalore ensued. Thousands lost their belongings and cattle. Some roads were washed away.

Thronged by patients in Bihar



The Location / Situation

Over a fortnight in August, 514 people died in flooding in Bihar. The water spread across an area spanning 21 districts with over 17 million residents. Medical help was desperately needed. Muzaffarpur lies over 1600 kilometres away from Mt Abu, still Global Hospital responded to the situation.

The Service

Volunteer pharmacologist Dr Devendra Sachdev, staff nurse Gopal Sharma, nursing interns Samir, Rajesh, Abhay and Durgesh and drivers Rajesh Singh and Devi Singh departed on August 24. They reached two days later. Over the next week, they served 5310 people in Muzaffarpur, Motihari and Sitamarhi.

In Bihar (as in Rajasthan, see above), fungal infections, skin diseases, fever, abdominal pain, nausea, vomiting and diarrhoea were the most common complaints.

Left above: Pharmacologist Dr Devendra Sachdev and staff nurse Gopal Sharma attended to patients

Left: Using whatever available means of transport to carry medicine supplies to remote areas

Paediatric ophthalmology

A wide reaching eye screening programme for school students is underway. This involves optometrists from Global Hospital Institute of Ophthalmology, Abu Road, visiting schools to check students' near and distance vision. Other ocular parameters are also examined, such as motility, vitamin A sufficiency, colour blindness, and the presence of eye conditions needing surgical intervention such as cataract, squint and eye deformities.

Wherever possible the team involves teachers so that they gain a basic knowledge of how to identify students struggling with poor vision and can inform the pupil's parents.

Correction action is taken for needy children. Those with a vitamin A deficiency are given a dose of medicine.

Students needing spectacles are provided with a pair. Those needing surgical intervention are advised to visit the hospital.



Between July and September, 16,353 students were screened at 45 events. Spectacles were distributed to 181 pupils while 14 underwent surgery. Squint correction was the most common surgery performed.

Two sponsors facilitated this work: PlayGames 24x7 supported 21 events where 6,077 pupils were screened and Dr Shroff's Charity Eye Hospital sponsored 24 events where 10,276 pupils were screened.

This project ensures that children under 16 years from poor households can avail eye surgery in addition to the free cataract surgery available under the government-sponsored programme.

The blood bank reports...



The Rotary International Global Hospital Blood Bank held eight blood donation drives between July and September where 660 units were collected. A drive conducted with the North Western Railways Employees Union, Abu Road, and the Lions Club Aravali, Abu Road, yielded 264 units (inaugural

event photographed above).

Other partners included the Adarsh Credit Cooperative Society, Abu Road; Prajapita Brahma Kumaris Ishwariya Vishwa Vidyalaya, Udaipur; Cross Gym Owners, Abu Road; Seth Mangalchand College, Abu Road; Agarwal Samaj, Abu Road; etc.

New asset

To contain blood processing costs, the trauma pathlab uses automated analysers as well as semi automated machines such as this semi automated biochemistry analyser →



New joinees at Mt Abu, Abu Road

Dr Roja Tumma has joined the hospital as consultant radiologist & deputy director. She brings 16 years experience in general radiology and three years in cardiac imaging. Prior to joining she was head of radiodiagnosis at CARE Hospitals, Hi-tec City, Hyderabad.

Dr Purvi Solanki joined J Watumull Global Hospital & Research Centre as

ayurveda practitioner. She has a decade's experience in ayurveda.

Screening for asthma

A programme to screen people for asthma attracted 43 beneficiaries. They underwent pulmonary function tests and a random blood glucose check. Cipla sponsored this event. Patients consulted senior medical officer Dr Hari Krupa Reddy.

Nutritional support for tuberculosis patients



On March 24, 2017, World Tuberculosis (TB) Day, the Indian government released a guideline: *Nutritional Care & Support for TB Patients in India*, the first country-level adaptation of the 2013 World Health Organisation guideline for the nutritional care and support of TB patients.

Prior to the development of anti-TB drugs in the 1950s, good food, open air, a dry climate and rest constituted the main treatment for TB, for which those who could afford it would retreat to sanatoriums.

With the advent of chemotherapy, the government's focus turned to the mass delivery of medicine—a necessity as India then had 23,000 TB beds for 1.5 million patients. In this switch, the role of a balanced diet in patient recovery was overlooked.

With the focus once again turning on nutrition to help TB patients make up for the wasting of fat and muscle caused by the disease, the Village Outreach Programme has started to distribute

gram and peanuts (high protein foods) to TB patients. The recommended protein intake is 1.2-1.5 g/kg/day as against the 1 g/kg/day recommended for the general population. Each adult patient is being given one kilogram of food. Ideally, a patient should gain 5% of their body weight in the first two months of treatment, and 10% over three months.

Between July and September, 136 TB patients were distributed gram and peanuts.

village outreach programme

VITAL STATS
JUN - SEP 2017

2325
PATIENTS
CONSULTED
IN FIELD

464
VOP WALK
IN
PATIENTS

56
ADMITTED
PATIENTS

Malnutrition Free Family Project

Under the *Kuposhan Rahit Parivar Yojna* (Malnutrition Free Family Project), 20 children with sub-acute malnutrition and 50 with moderate-acute malnutrition were put on a micronutrient-rich diet, 90 gm daily for the children with moderate-acute malnutrition and 180 gm for those who were sub-acutely malnourished.

These children were mostly of tribal origin, from five villages: Takia, Jaidra, Kyaria, Bageri Chandela and Siawa.

Over eight weeks, the children were monitored for weight gain. Twenty two



Mothers were distributed the sachets to feed their children, and explained how to feed them

children gained more than 500 gms of weight, 21 children gained upto 500 gms, and six showed no change.

Twenty one children discontinued the treatment because they experienced side effects such as distaste, vomiting or a stomach upset (nine) or because their parents migrated in search of work (four) or because of the logistical challenges involved in picking up the supplements from the distribution point (four) or because the parents were unwilling to change the child's diet (four).

Toddler Food Partners, a US based not-for-profit, sponsored this project.



Kajal, 3.5 years, daughter of Pappu, a resident of Chandela