



## Prof BN Dhawan: Grand Octogenarian of Medical Ethics

### *A Tribute*

Prof BN Dhawan, Chairperson of our Ethics Committee, passed away on June 16, 2017. Prof. BN Dhawan was born on October 11, 1932. After obtaining his medical degree and MD (Pharmacology) from the King George's Medical College, Lucknow, he joined the faculty at that institution. In 1962, he decided to go to Birmingham School of Medicine, UK for advanced training in the field of pharmacology. On his return, he joined as Professor and Head, Department of Pharmacology at MLN Medical College, Allahabad. After a 4-year stint there, he decided to move to Central Drug Research Institute in Lucknow, where he worked for the next 30 years in different capacities and rose to become its Director from 1988-92. On superannuation he was appointed as an Emeritus scientist for 5 years.



field and his knowledge and experience on ethical issues related to biomedical research were recognized both within the country and internationally. He was a key force behind the formulation of national guidelines in this area, by the Government of India and its several agencies such as the Indian Council of Medical Research.

Prof. Dhawan was a keen and avid researcher, and was deeply interested in the development of new drugs. During his stint at CDRI, Lucknow, he contributed to the development of four synthetic and three plant-based drugs. Other areas close to his heart were neuropharmacology and pharmacology of natural products used in the traditional Indian systems of medicine. He contributed to more than 400 published research papers, and delivered many prestigious orations and received many prominent awards - to name a few, the Hamdard Foundation Research Award, Vasvik Life Sciences Award, Ranbaxy Medical Sciences Award, OP Bhasin Medical and Health Sciences Award, DN Prasad Memorial Award, Dhanwantari Prize, KP Bhargava Memorial Award and Dr. B.K. Anand Memorial Oration Award of the Indian National Science Academy. He was also conferred the Vigyan Gaurav Samman of the Government of Uttar Pradesh. He was a fellow of the Indian National Science Academy, National Academy of Sciences and Indian Academy of Sciences.

Besides research, Prof Dhawan was passionate about Medical Research Ethics. He was a stalwart in this

SGPGI was fortunate to have him as the chair of our Ethics Committee for 10 years. He helped the committee frame the standard operating procedures of its working, and ensured that these were implemented both in word and in spirit. He was the one who cajoled, encouraged and ensured that our Ethics Committee obtains an international accreditation from Forum for Ethical Review Committees in the Asian and Western Pacific Region (FERCAP) in the year 2009.

My real interaction with him began with the meetings of the Ethics Committee, which he chaired and of which I was a member. During the meetings, it was always apparent that, despite being the most elderly member of the committee, he was the one who had read the projects in the most detail, with not the minutest detail escaping his attention. Even at the age of 85, he would read each and every document placed before the committee, and came ready with notes and comments on each project. His comments on patient information documents were always absolutely apt. He was a stickler for time and discipline, though in his own gentle style, with a perfect smile on his face. He was an absolutely perfect human being - and would always have a few personal words for younger members such as me, either before or at the end of the meeting.

His demise is a big loss to the Institute, as well as to the Indian biomedical community at large. The best tribute we can pay him is to do our research work sincerely, and in keeping with the highest ethical standards.

*Amita Aggarwal*

## Robotic Surgery @ Sanjay Gandhi PGIMS

### *Better Treatment: Better Outcome*

The surgical department gears up for performing robotic surgery in near future. In contrary to what the name suggest, the operation is performed by the surgeon. While robot is highly specialized equipment, the knowledge and skill of the surgeon utilizes it to perform complex surgery through small or keyhole incisions.

Robot consist 4 arms that enter the body cavity through keyhole incisions in the skin. Surgeon is seated away from the patient on a console. The arms carry instruments for cutting and suturing and a camera. These instruments are controlled by the surgeon seated on the remote console. The



surgeon has the vision of operating site, inside the body, with the help of camera. 3-D image is created on the console for clear vision of surgeon. The image can be magnified from 3 to 20 times to increase the accuracy of the operation. Robot helps in eliminating the tremors of even finest order and thus provides stability and precision in performing a task. Moreover it gives a

surgeon an immense degree of freedom in handling of instruments. The instruments are mounted on a wrist and in contrary to human wrist, it can rotate even 360 degrees. These facts enhance vision and movements of the surgeon thus improving the quality of surgery. Though there remains a steep learning curve for surgeons, this kind of surgery is extremely successful in urology, endocrine surgery, thoracic and gastroenterology.

Surgical departments of the institute are already performing laparoscopic and minimally invasive surgery. Most of them initiated these programs and are leaders in their respective fields. While departments await robot, there are consultants in urology and endocrine surgery who have already trained themselves in robotic surgery. Considering the achievement of institute in minimally invasive surgery, robotic surgery is expected to be utilized for benefit of those requiring it in the state.

*Shantanu Pandey*

## 3D Mapping of Cardiac Arrhythmias

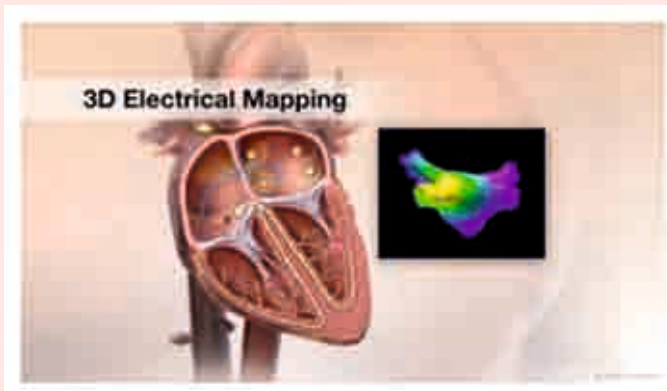
An arrhythmia is a heartbeat that is too fast or too slow and is caused by problems within the heart's electrical system. The electrical signals may fire too fast (tachycardia) or too slowly (bradycardia). These abnormal electrical signals can originate in different areas of the heart (such as the atria or ventricles). Patients from any age group may present with symptoms like palpitations, fluttering in the chest, shortness of breath, syncope (unconsciousness), pre-syncope (a feeling of near unconsciousness), fatigue, sweating or lightheadedness during episodes. Department of Cardiology, SGPGIMS recently successfully performed 3 D mapping cardiac

arrhythmia followed by radio frequency ablation in 3 patients. 3 D mapping technique is an advanced method for managing complex cases of tachycardia.

What is electrophysiology and radiofrequency ablation: This includes studying the electrical system of the heart and understanding its physiology (electrophysiology) and delivering energy (Radiofrequency) to selective burn (or ablate) the area responsible for the abnormal fast rhythm. To begin an electrical mapping procedure, thin tubes called catheters are inserted into the heart via the upper thigh under local anesthesia. This process is usually visualized using x-rays and fluoroscopy. The specialized catheters have electrical sensors at their tips

which sense the electrical activity and signals generated in the heart. The entire signals are then displayed on a computer console and analyzed to predict which area in the heart is responsible for the abnormal electrical activity.

What is 3D mapping: 3D mapping and navigation is a means by which the doctor can create a three dimensional model of any chamber of the heart and then track the exact location of the catheters. This allows movement of the catheters with minimal use of X-ray or fluoroscopy. At the tip of these catheters are electrodes, which are small pieces of metal that conduct electricity and evaluate the heart's electrical activity. Detailed color coded maps of the heart's electrical system and the patterns of abnormal heart rhythm can be created, allowing precise targeting of catheters so as to deliver accurate delivery of



radiofrequency current. The systems follow the principle of electro-anatomical navigation, which uses strategically placed electromagnets (patches) that detect micro-impedance differences (small changes in electrical resistance) inside the body to precisely guide catheters into place. The systems can also integrate this 'electroanatomic' information with non-invasive images of the heart (eg. computed tomography or magnetic resonance images). Unlike traditional mapping where the abnormal rhythm has to be sustained long enough to significant wire manipulation can be made and

circuits can be mapped, 3D mapping systems can map sporadic abnormal rhythm allowing the doctor to get a rapid glimpse of these circuits even if they don't last too long.

*Aditya Kapoor*

## Aesthetic Breast Surgery : Trans-axillary Augmentation Mastoplasty

With increasing awareness and extensive use of breast surgery to deal with breast cancer, reconstructive breast surgery is the new frontier for plastic surgeons in particular and all breast surgeons in general. Increasing trends towards breast conserving surgery and prophylactic mastectomy has fuelled interest in Reconstructive breast surgery.

As an off shoot of these procedures used for reconstructive surgery, interest in Aesthetic Breast Surgery has also risen manifolds and is one of the commonest aesthetic surgery procedures, being practiced around the world. Aesthetic surgery unlike reconstructive surgery involves enhancement of form and function of a pathologically normal body part or tissue. Both reduction and augmentation mastoplasty are commonly done procedures, with trend towards minimally invasive scar-less procedures.



Keeping this trend in mind, Dep't of plastic surgery, which has been involved with reconstructive breast surgery for post cancer and patients with congenital chest wall deformities and also conventional aesthetic surgery, has now added Minimally invasive Aesthetic mastoplasty in its armentarium.

The department has recently started performing trans-axillary augmentation mastoplasty.

This technique involves placement of implants on to the chest wall from a remote port in the axilla. This procedure uses special self illuminating retractors, custom made inflatable implants , special endoscopes and has a steep learning curve. The procedure has shorter downtime with satisfactory results in properly chosen patients.

*Rajiv Agarwal*

## Hemostasis: Diagnosing Hemophilia

A CME cum workshop on hemostasis: Diagnosing hemophilia was held at Telemedicine at SGPGI from 28-29 April 2017 for pathologists and laboratory technicians from 17 government medical colleges and 6 district hospitals to make them aware about the approach to the bleeding disorders namely hemophilia and how to diagnose these congenital bleeding disorders by various coagulation tests. This program was organized by Dept of Transfusion Medicine with support from Dept of Pathology and Clinical hematology. Another CME program for physiotherapists was held on 29 April 2017 in seminar of Dept of Transfusion Medicine. Besides residents from Transfusion Medicine and Pathology many doctors from the city also attended this program. At present hemophilia program is being run in the state at 23 centers, SGPGI is the nodal center.



Although UP has made tremendous progress in hemophilia treatment by clotting factor concentrates specifically FVIII & FIX, FVII courtesy grant from NHM and Medical Education Dept, Govt of UP. Earlier patients used to receive cryoprecipitate and FFP for hemophilia but now patients have access to safe and efficacious treatment. Despite providing free factors to hemophilia patients our services especially in diagnostic area and physiotherapy are yet to be improved in UP, one of the reasons for this is the lack of proper training in coagulation testing for hemophilia and differentiating it from other bleeding disorders. Other important issues are lack of reagents and coagulometer and a dedicated technician for doing coagulation assays at most medical colleges. The coagulation lab is also useful for other patients having bleeding like ANC patients, surgery patients. This CME cum workshop was an effort to rekindle the desire to learn and recapitulate the concept of hemostasis and to get familiarity with fully automated coagulometer.

*Anupam Verma*

## Renal Nutrition & Metabolism

Department of Nephrology, SGPGIMS, organized "Advanced Certificate Course in Renal Nutrition and Metabolism" which was held on April 29<sup>th</sup> and 30<sup>th</sup> 2017 under the banner of Society of Renal Nutrition and Metabolism. The course was inaugurated by Principal Secretary Medical



Education, Dr Anita Bhatnagar Jain. The aim of the course was to bring about awareness among physicians, nephrologists and dieticians on prevention and management of malnutrition in CKD population.

The scientific content was focused on issues of utmost importance in day to day practice and was structured along pathophysiology, causes and metabolic changes contributing to protein-energy wasting in kidney disease, development of practical skills to implement and critically evaluate nutritional assessment methods and research to review current renal-specific nutritional practice, nutritional guidelines and treatment options for the spectrum of CKD conditions such as acute kidney injury, diabetic nephropathy, hypertension, kidney stone disease, glomerulopathies, and kidney transplant. Updates on latest information on nutritional management strategies in chronic kidney disease (CKD) were also shared.

There were four exclusive workshops on clinical case discussion in which cases on pre dialysis CKD, maintenance hemodialysis, peritoneal dialysis and complicated acute kidney injury. In addition to renowned nephrologists from all over India, the faculty had two eminent international speakers from US and Malaysia who shared their expertise on prevention and management of malnutrition. The highlight of the meeting was prelaunch of Hand Book Of Nutrition In Kidney Disease written by Dr Anita Saxena published by Oxford University Press.

*Anita Saxena*

## World Digestive Health Day

World Digestive Health Day is celebrated in the month of May every year to increase awareness about various gastrointestinal diseases. This year, the theme was Inflammatory Bowel Disease (IBD). IBD includes ulcerative colitis and Crohn disease. It is well known that ulcerative colitis is often diagnosed late by the primary care physicians as bleeding per rectum, a common symptom of ulcerative colitis is also caused by piles. Sometimes, patients are even operated for piles before the final diagnosis is made by the specialists. Crohn disease, on the other hand, may be treated as intestinal tuberculosis once or more than once, as clinically, the two conditions are difficult to differentiate. This year, on the occasion of World Digestive Health Day, an awareness program was organized by the Department of Gastroenterology, SGPGI Lucknow. To spread the awareness



beyond the boundaries to reach out to public, message was spread through several news papers as well. Moreover, to reach beyond the state, support was provided by the School of Telemedicine to connect to the students of NRS Medical College, Kolkata and Burdwan Medical College, Burdwan, West Bengal.

Speaking on the occasion, Dr. Uday C Ghoshal, Professor, Department of Gastroenterology elaborated upon the causes of increasing cases of IBD. He said that IBD is a name of a group of disorders which causes inflammation of the intestine. It includes two disorders which is Crohn's disease and Ulcerative Colitis. Crohn's disease affects any part of digestive tract from mouth to anus whereas Ulcerative colitis affects the inner lining of the large intestine. Growing urbanization is restricting children to play in mud which is known to lower the immune regulation causing increased allergic and autoimmune disorders (hygiene hypothesis).

*Kusum Yadav*

### MRI and CT - Basics to Advanced

The department of Radiodiagnosis SGPGI organised a National CME on 'MRI and CT - Basics to Advanced', on 6th and 7th May 2017. Eminent speakers from across the country came to participate in this event and deliberated their talk on basis and recent diagnostic imaging techniques and their interpretation on CT and MRI in cardiac, brain and



abdominal Imaging. Current concepts and recent advances, pertaining to common and complex diseases of brain, heart, lung, liver, pancreas, intestines, kidneys and pelvis were discussed in the forum, which will go a long way in improving diagnosis and management of patients, as well as promoting useful research.

Guest speakers of repute included Dr Ram Mohan from Hyderabad; Dr Jitendra Saini from Bangalore; Dr Mahesh from PGI, Chandigarh; Dr S.Thapar, Dr Amar Mukund, Dr Seema Sud, Dr S Puri, Dr Subash Khusu and Dr Pankaj from New Delhi. More than 150 delegates and approx 50 national Faculty had attended this scientific event from all over the country. The conference had provided an unique opportunity to the participants to interact with each other and the stalwarts of specific speciality of radiology which in turn helped them to enhance and update their knowledge with new techniques in various fields of radiology and imaging.

As an organising co-ordinator & secretary it was felt that in view of the fact that the science of imaging is fast developing and is achieving new horizons, such types of conventions are necessary for the benefit of the members of the association to exchange their views and update their knowledge.

*Archna Gupta*

### Biostatistical Computing with R

The Department of Biostatistics and Health Informatics is committed to disseminate knowledge of advance research methods to clinical, biomedical and public health researchers; with this motivation a workshop on **Biostatistical computing with R** was organised during 15-20 May, 2017. Prof. Rakesh Kapoor, Director, SGPGI inaugurated the workshop and Prof. Sheela Mishra, Head, Department of Statistics, Lucknow University delivered the key note address. The workshop was attended by 32



participants from various parts of the country. Biostatistical methods commonly used in medical research were discussed. The emphasis was on active interactive participation through lab sessions running along with theory sessions. R is a widely used software for statistical computing and available free of cost. The participants were trained on R Commander which is quite beneficial and powerful tool to explore biomedical data. This workshop helped scholars to improve their decisive thinking and problem solving skills. Following this series, the Department has planned a 7 days training course on Biostatistical Methods and Computing with SPSS which will be organised during 10-16 July 2017.

*C.M. Pandey*

## Ambedkar Jayanti



26<sup>th</sup> Birth Anniversary of great thinker, revolutionary social reformer and father of Indian Constitution, Bharat Ratna, Bodhisattva, Baba Sahib Dr. B.R Ambedkar was celebrated at Shruti Auditorium, SGPGI on 13<sup>th</sup> and 14<sup>th</sup> April, 2017. The program was organized by SC/ST Employees' Welfare Society of SGPGI along with Swargiya Shrimati Shanti Devi Memorial Samvedna Kalyan Samiti, Lucknow. More than thousand people from various walks of life attended the ceremony. Profs. R K Kapoor, Amit Agrawal, Raj Kumar, K N Prasad, Hemchandra, Ashok Gupta and Advocate and Social worker Mr. Mohammad Iqbal of "Manav Kalyan Seva Dharma NGO graced the occasion. The ceremony began with "Buddh Vandana".

All speakers agreed that we all are responsible for preserving justice, liberty, equality and fraternity, which are key factors of our constitution. School bags and stationeries to school going kids of servants and temporary workers of SGPGI were distributed to promote education. A booklet based on life struggle and quotes of Lord Buddha, Ambedkar ji, Jyotiba Phule ji (whose's 190th Birth Anniversary was also celebrated) and first lady teacher Mata Savitri Bai Phule ji, compiled by Dr. Basant Kumar and Dr Suman Lata were also distributed.

On 13<sup>th</sup> April singing, dancing, quiz and poster competitions for children were held, which were judged by Mrs. Anju Paliwal (renowned Sculptor and Painter). Profs. K N Prasad, Ashok Kumar and Dr. V K Paliwal distributed the prizes. "Ambedkar-Phule Cake-cutting ceremony" was followed by a Candle March from Shruti Auditorium to SGPGI main gate. A massive "Bhim Bhandara" was held outside the SGPGI main gate on 14<sup>th</sup> April.

*Basant Kumar*

## Nurses Day

*"Save one life and you are a hero, save a hundred lives and you are a Nurse".*

With radiating energy May 12th comes every year, as we celebrate International Nurses Day. It commemorates with the birth anniversary of Florence Nightingale- The lady with the lamp- the ultimate ideal of all nursing professionals. This year's theme as declared by ICN was "Nurses: A voice to lead, achieving the sustainable development goals".

The day started with the lighting of the auspicious lamp by the Guest of Honour Prof. Rakesh Kapoor Director SGPGI and the Chief Guest Mr. Shailendra Nath (Retd C.N.O SGPGI), and other dignitaries such as Prof. Hemchandra, Dr. Harshwardhan and Mrs. Chhaya Sanyal amidst hymns by senior nursing Officers.

Mrs. L K Solanki welcomed the audience while Mrs. Chhaya Sanyal unfolded the theme for International Nurses Day. All the dignitaries shared their valuable thoughts while the master of ceremony Mrs Neema Pant in her invincible style moderated the program.

The scientific session had four Paper presentations Mr. Dikhil C.D, Mrs. Anitha Sharon, Mr. Shaik Mohd. Shafi and Mrs. A. Merlin Cheema. Mrs. Chhaya Sanyal, Mrs. Shabana Khatoon, L K Solanki, Mr. Ramesh, Mrs. Neema Pant and Mr. Suresh were the moderators of the scientific sessions. This was followed by Poster presentations the prizes of which were all bagged by the



students of SGPGI College of Nursing. Three posters reached the zonal level and Sister Manju won the first prize. A Quiz Competition was also organized at the end of scientific sessions. PMSSY group won first prize in quiz. The Nursing professionals who pioneered and served this institution and retired were also honored during the occasion.

The day ended with Cultural Program which was coordinated by Mrs. Neelam Fazal Massey and hosted by Mrs. Charul Srivastava. Certificates were distributed to the winners and participants and last but not the least Mrs. Metty (Stoma care nurse) was adorned with the Best Nurses Award of the year.

*Lizsamma Kalib*

## A Step Forward

Faculty Members from SGPGIMS visited Bhutan to participate in the special CME on Emergencies. The CME was organized by the Faculty of Post-graduate Medicine, Khesar Gyalpo University of Medical Sciences of Bhutan (KGUMSB), Thimphu. The CME program was made possible by the active efforts of Dr Tashi Tenzin, Neurosurgeon and Head of Surgery Department, the Dean of the host Institute and Dr VK Kapoor Professor of Surgical Gastroenterology, SGPGI.

The 2 day CME program included topics of medical and surgical emergencies encountered by any medical practitioner. CME presentations were made by 19 speakers from India, out of which 9 were from SGPGIMS, Lucknow (Prof VK Kapoor, Prof Anil Agarwal, Prof RK Singh, Dr Amit Goel, Dr Sabaretnam, Dr Sanjay Kumar, Dr Sujeet Gautam, Dr Devendra Gupta and Mrs Lily Kapoor) and others were from AIIMS New Delhi, PGIMER Chandigarh, GMC Chandigarh and JIPMER Pondicherry. The Day 1 topics included emergencies like Anuria/ Oliguria, Acute scrotum, Post partum hemorrhage, Management of anaphylactic shock, Optimization of surgical patient, Interpretation of ABG, Post-operative Pain management, How to make a presentation, Online education portal: Prashna India. The Day 2 topics were Renal replacement therapy, Necrotizing soft tissue infections, Diabetic foot, Acute pancreatitis, Acute abdomen and Esophageal perforation.

The participants were the faculty members, post-graduate students and the interns of the University. All the sessions involved active participation from the interns and post-graduate members of the university. The faculty members of the Khesar Gyalpo University looked forward for more such events in future also. Some of the faculty members and students expressed their keen interest to visit India for higher studies, training and observership. They were assured by the Indian delegation for facilitating opportunities to Bhutanese students and faculty members in India.

A few faculty members also visited the Jigme Dorji Wangchuck National Referral Hospital (JDWRH) attached to KGUMSB. Though the hospital lacked sophisticated equipment and high end facilities,



yet wards were scrupulous in maintaining hygiene and providing good facilities to the family members staying with the patients. The treatment expenses of all patients are taken care by the Bhutanese government.

Bhutan termed as 'Land of Happiness' has stunning natural scenery, a strong sense of culture and tradition that binds the kingdom and distinguishes it from its neighboring countries. Bhutanese are basically very helpful and peace loving people. During our entire visit we never felt that we are travelling in another country. Based on our fruitful experience we envisage to organize similar broad based or theme based CMEs in Thimphu in near future.

*Sujeet Gautam*

### New Joinings

*The Editorial Board welcomes the following staff who joined in this quarter to SGPGI Family*

- ❁ Smt. Sajia Asif joined as Medical Record Technician on 27<sup>th</sup> April, 2017
- ❁ Sri. Shreyesh Misra joined as Medical Record Technician on 4<sup>th</sup> May, 2017
- ❁ Smt. Elizabeth Charan joined as Lab Attendant Grade-2 on 8<sup>th</sup> May, 2017

## भौतिक-चिकित्सा (फिजियोथैरेपी) - एक झलक

किसी भी उत्कृष्ट चिकित्सालय की पूर्णता तभी संभव है जब चिकित्सा-क्षेत्र से जुड़ी छोटी-छोटी इकाईयों भी अपना उत्तरदायित्व निभायें। इस संस्थान की 'फिजियोथैरेपी' (भौतिक चिकित्सा) इकाई का अपना एक महत्वपूर्ण योगदान है। इस इकाई के महत्वपूर्ण पक्षों एवं क्रिया-कलापों को समझने के लिए यहाँ कार्यरत सभी भौतिक-चिकित्सकों से की गई बात-चीत के कुछ अंश-

### फिजियोथैरेपी क्या है ?

"यह चिकित्सा की एक ऐसी पद्धति है जिसमें रोग या रोग के पश्चात् होने वाले अनेकों प्रकार के दुष्प्रभावों का उपचार Physical Agent के माध्यम से किया जाता है।

इसमें प्रमुख रूप से वाह्य या आन्तरिक बल (Force) विद्युत (Electricity), विभिन्न प्रकार की विद्युत चुम्बकीय तरंगें (Electromagnetic Waves) अल्ट्रासाउण्ड तरंगें, उष्मा (Heat) शीतलन, इन्फ्रारेड अल्ट्रावायलेट तरंगें, ऊतकीय स्पन्दन, व्यायाम एवं विभिन्न प्रकार के व्यायाम-उपकरण आदि आते हैं। इस विधि में औषधि/शल्य क्रिया का प्रयोग नहीं होता है।

### फिजियोथैरेपी से रोगी को किन कठिनाईयों में लाभ मिलता है ?

मॉशपेशियों, जोड़ों तथा स्नायुविक दुर्बलता, शिथिलता या असंतुलन, विभिन्न प्रकार के दर्द, चोट, श्वसन प्रणाली की विशेष फीजियोथैरेपी, त्वचा के अनेक रोग, शारीरिक या मानसिक रूप से बाधित विकास, अपंगता, खेल-कूद में लगे चोट, तथा कुछ परीक्षण भी किये जाते हैं।

### क्या फिजियोथैरेपी में भी उपचार के विभिन्न क्षेत्र हैं ?

वस्तुतः यह क्षेत्र अत्यन्त विस्तृत है। जो प्रमुख क्षेत्र हैं उनका वर्गीकरण निम्नलिखित ढंग से किया जा सकता है-

- **न्यूरो फिजियोथैरेपी**-विभिन्न प्रकार के न्यूरोमस्क्यूलर प्रभावित समस्याओं का उपचार किया जाता है। जैसे-स्ट्रोक (फालिज)
- **आर्थो फिजियोथैरेपी**-इसमें गर्दन, कमर या रीढ़ के दर्द, जोड़ों की विभिन्न बीमारियाँ, फ्रैक्चर के बाद की कमजोरी, जोड़ों का शिथिल हो जाना, मॉशपेशियों का दुर्बल हो जाना इत्यादि का उपचार किया जाता है।
- **कार्डियो वेस्कुलर फिजियोथैरेपी**- रोग के अनुसार कार्डियो पल्मोनरी एण्डुरेंस को बनाये रखना, हृदय की शल्य चिकित्सा के बाद का पुनर्वास, हृदय की बीमारियों में व्यायाम आदि का परामर्श दिया जाता है।
- **स्पोर्ट फिजियोथैरेपी**- खेल-कूद की चोट, खेल के अनुसार 'पावर' व 'एण्डुरेंस' को विकसित करना आदि।
- **गॉइनी फिजियोथैरेपी**- इसमें प्रसव पूर्व और पश्चात का विशिष्ट बचाव, व्यायाम और पीड़ा की देख-भाल का दायित्व आता है।
- **चेस्ट फिजियोथैरेपी**- श्वास और श्वसन से सम्बंधित बीमारियाँ, वेन्टीलेटेड रोगी की फिजियोथैरेपी, पाश्चुरल ड्रेनेज इत्यादि।
- **अन्य**- पीडियाट्रिक फिजियोथैरेपी, हीमोफीलिया फिजियोथैरेपी, जेरियाट्रिक फिजियोथैरेपी आदि।

### अपने कार्यों का निर्वहन आपके लिए कितना चुनौतीपूर्ण है ?

सीमित उपकरणों एवं संसाधनों के बावजूद चिकित्सालय की कार्य-अवधि के मध्य, वार्ड में उपचाराधीन अनुमानतः 50 रोगियों एवं बहिरंग विभाग के अनुमानतः 25-30 रोगियों को हम अपनी सेवायें प्रदान कर रहे हैं।

फिजियोथैरेपी इकाई के शैक्षणिक कार्यक्रमों पर कुछ प्रकाश डालिये।



यह हमारे लिये कठिन अवश्य है कि अपने नियमित उत्तरदायित्वों का वहन करने के बाद कुछ और संपादित कैसे करें। इस फिजियोथैरेपी इकाई ने जो कुछ भी उपलब्ध किया है, उसकी एक झलक इस प्रकार है-

- कुछ वर्षों पूर्व फिजियोथैरेपी कान्फ्रेंस, तीन दिवसीय POTCON-2003 संजय गांधी स्नातकोत्तर आयुर्विज्ञान संस्थान और के0जी0एम0यू0 के संयुक्त तत्वाधान में सम्पन्न हुआ जिसमें देश भर से अनुमानतः 800 प्रतिभागी थे।

- विगत वर्षों में नेफ्रोलॉजी विभाग तथा गायत्री परिवार के साथ मिलकर ग्रामीण क्षेत्रों में

03 निःशुल्क फिजियोथैरेपी चिकित्सा शिविरों का आयोजन।

- 'Use of recent Advances and Technologies to enhance functional ability in Developmental Disorder' विषय पर एक दिवसीय सतत् चिकित्सा कार्यक्रम आयोजित हुआ जिसमें लगभग 125 प्रतिभागी सम्मिलित हुये।
- WHO से अनुमोदित WSTP (व्हील चेयर सर्विस ट्रेनिंग पैकेज) का एक दिवसीय कार्यक्रम आयोजित किया गया।
- गत कई वर्षों से टेलीमेडिसिन विभाग के सहयोग से फिजियोथैरेपी के विभिन्न विषयों पर नवीनतम जानकारी प्रदान की जाती है जिसका संस्थान के टेलीमेडिसिन केन्द्र से जुड़े देश के अन्य केन्द्रों पर सजीव प्रसारण किया जाता है।
- फिजियोथैरेपी में 6 महीने की 'अनिवार्य इन्टर्नशिप' सम्पन्न करायी जाती है।
- सतत् चिकित्सा शिक्षा कार्यक्रम-"फिजियोथैरेपी इन हीमोफीलिया" अप्रैल 2017 में हीमेटोलॉजी विभाग में सम्पन्न हुआ जिसमें फिजियोथैरेपी इकाई द्वारा शैक्षणिक एवं प्रायोगिक गतिविधियाँ प्रस्तुत की गईं।

### फिजियोथैरेपी के क्षेत्र में क्या और कुछ किया जा सकता है तथा एक फिजियोथैरेपिस्ट की विशेषता क्या होनी चाहिए ?

संभावनायें अपार हैं करने को भी बहुत कुछ है जैसे कि यह जागरूकता उत्पन्न करना कि बिना औषधि के भी कई शारीरिक या मानसिक समस्याओं का समाधान और पुनर्वास संभव है। एक फिजियोथैरेपिस्ट की प्रमुख विशेषता उसकी विनम्रता होनी चाहिए जिससे कि रोगी को वह पीड़ा मुक्त कर सके।

### फिजियोथैरेपी में परिवार के सदस्यों की क्या भूमिका है ?

यह अतयन्त ही तार्किक प्रश्न है। देखिये, फिजियोथैरेपिस्ट रोगियों को परामर्श दे सकता है उन्हें सिखा सकता है किन्तु व्यायामों, सावधानियों पर सतत निगरानी नहीं रख सकता। ऐसे में परिवार के सदस्य ही महत्वपूर्ण होते हैं क्योंकि उनका भावनात्मक अपनापन और आत्मीयता रोगी के मनोबल को बढ़ा देता है। 'सेरेब्रल पॉलिसी' के बच्चे की फिजियोथैरेपी के लिए उसकी माँ से बढ़कर 'फिजियोथैरेपिस्ट' भला और कौन हो सकता है।

यह अकादय सत्य है कि रोग और रोगी की पीड़ा को कम करने में 'फिजियोथैरेपिस्ट' की भूमिका और उनका योगदान कहीं से भी कम नहीं है। आवश्यकता है, उनके योगदान, समर्पण, कर्मठता और भूमिका को पारदर्शी ढंग से समझने की।

वार्तालाप में प्रतिभागी:- श्री ब्रजेश त्रिपाठी, श्री संदीप कुमार शर्मा, श्री कमल गुप्त, डा0 रामजीत राम एवं श्री राजेन्द्र कुमार

राम प्रमोद मिश्र



## सुनो जरा.....

### परिप्रेक्ष्य.....

अपने व्यस्त पारिवारिक एवं व्यवसायिक जीवन के लंबे-लंबे रास्ते दौड़ते भागते तय करते हुए क्या हमें कभी यह आभास हुआ कि हम धीरे-धीरे अपनी सकारात्मक ऊर्जा एवं सोच, उत्साह एवं हासपरिहास करने के नैसर्गिक गुण को खोते जा रहे हैं। बढ़ते तनाव के कारण हम कड़वाहट एवं उग्रता को आत्मसात कर रहे हैं और हमें यह भान भी नहीं है कि यही असामान्य एवं आवेशशील व्यवहार हमारी कार्यशैली बन चुका है।

ओ.पी.डी. में घुसते ही चिकित्सक और रोगी के बीच का संवाद कान में पड़ा, “हाँ बताइये”! क्या परेशानी है ?

डाक्टर साहब! पथरी की शिकायत है, जॉन्डिस भी बताया है”! रोगी ने उत्तर दिया।

“इतना मुझे दिख रहा है, आपके पर्चे पर लिखा है! परेशानी पूछी है डायग्नोसिस नहीं! जितना पूछा है, उतना बताओ!”

चिकित्सक के इस तल्ख व्यवहार से आहत होकर रोगी ने सभी प्रश्नों के उत्तर रूखाई से दिये। कुंठा से कुंठा उपजी और असहजता ने असहजता को जन्म दिया।

एक दिन पहले ही भर्ती हुए रोगी का बुखार न उतरने पर चिंतित परिजनों ने जब परिचारिका से प्रश्न किया तो उसका सपाट उत्तर आया, “उपचार अभी शुरू हुआ है हमारे पास जादू की छड़ी नहीं है” कि घुमाई और आदमी ठीक होकर घर चला गया! जाइये, अपने मरीज के पास जाइये।”

अनजाने में या जानबूझकर एक या दो बार इस तरह की प्रतिक्रिया उस समय की हमारी खराब मनःस्थिति की ओर संकेत करती है, किन्तु जब यह हमारे दिन-प्रतिदिन के आचरण का हिस्सा बन जाता है तो यह हमारे कुंठित व्यक्तित्व का परिचय देता है।

रोगी के किसी भी प्रश्न को सुनने से पहले ही भृकुटी चढ़ाना, मोबाइल फोन पर व्यस्त रहते हुए ही प्रतिक्रिया देना, पीड़ा से कराहते रोगी के पास से गुजरते हुए जोर-जोर से हंसते हुए बात करना, ये सभी हाव-भाव हमारी नकारात्मक प्रवृत्ति की ओर संकेत करते हैं। हाव-भाव के द्वारा हम कुछ न

कहकर भी बहुत कुछ कह जाते हैं। हमारे रवैये (attitude) का आसपास के वातावरण पर बहुत सूक्ष्म प्रभाव पड़ता है विशेषतया वहाँ, जहाँ हम बीमार व लाचार रोगियों के निदान व उपचार के प्रति उत्तरदायी होते हैं।

नियत तिथि पर रोगी को भर्ती न कर पाने के कारण चिकित्सक और रोगी के संबंधी दोनों ही चिंतित थे। “सर! हम बाहर से आये हैं। कहाँ रुकेगें ?” रोगी ने निवेदन किया।

“जिन दो मरीजों को डिस्चार्ज करना तय था, उन्हें एक दिन और रोकना पड़ रहा है। कल शाम तक हम आपको निश्चित रूप से भर्ती कर लेंगे।” चिकित्सक ने उसे आश्वस्त किया। पर परिजनों के माथे पर पड़े बल देखकर चिकित्सक ने मुस्करा कर उनके कंधे पर हांथ रखा और कहा, “चलिये! आज आप हमारे घर रुकिये। कोई न कोई व्यवस्था तो करनी पड़ेगी।”

अगले ही क्षण आत्मीयता का ऐसा भाव उत्पन्न हुआ कि रोगी परिजनों की सारी आशंकायें तिरोहित हो गईं और भर्ती के लिये अगले दिन आने की बात कहकर उन्होंने चिकित्सक से विदा ली।

अधिकांशतः इस विषय पर गहन चर्चा की जाती है कि अस्पताल में स्वास्थ्य कर्मियों को क्या पहनना चाहिये, उनकी वेशभूषा व केशविन्यास कैसा हो, किन्तु विचारणीय बात यह है कि साफ सुथरे वस्त्रों, कटे नाखूनों व सुव्यवस्थित केशविन्यास के साथ-साथ यदि हमारा व्यवहार भी साफ सुथरा हो, तो अस्पताल में छोटी-छोटी नगण्य बातों पर होने वाले झगड़ों और गरमागरमी को न्यूनतम किया जा सकता है।

प्रख्यात दार्शनिक व विचारक श्री “सद्गुरु” कहते हैं “कोई काम तनावपूर्ण नहीं है। यह शरीर, मन और भावनाओं को प्रबंधित करने की दिशा में हमारी अक्षमता है, जो इसे तनावपूर्ण बना देती है।”

अपने कार्यक्षेत्र में किसी भी स्तर पर उत्पन्न तनाव व इससे उपजी कुंठा कभी भी अपने सहकर्मी, वरिष्ठजनों व रोगी परिजनों पर परिलक्षित न हो, इस दिशा में हमारा प्रयास होना चाहिए व इस प्रयास के लिए पहला विचार यही हो, “जो व्यवहार हमें अपने लिए स्वीकार नहीं, वह दूसरों के साथ बिलकुल न करें।”

कुसुम यादव

## सूचना प्रणाली प्रबन्धन प्रकोष्ठ

जनसूचना अधिकार एवं ‘डिजिटल इण्डिया’ के प्रभाव एवं पारदर्शिता को प्रोत्साहित करने के लिए राष्ट्र व राज्य के साथ-साथ इस संस्थान के निदेशक प्रो0 राकेश कपूर द्वारा 17 अक्टूबर 2016 को “सूचना प्रणाली प्रबन्धन प्रकोष्ठ” (Information System Management Cell, SGPGI) की स्थापना की गई। इस प्रकोष्ठ द्वारा सभी महत्वपूर्ण प्रपत्रों यथा शासी निकाय, वित्त समिति आदि के सभी कार्यवृत्त का डिजिटलीकरण (डिजिटाइजेशन) किया जा चुका है। विभिन्न कार्यालय आदेशों आदि का विवरण भी इस प्रकोष्ठ के ‘वेबसाइट’ पर उपलब्ध कराया जाता है।

इस प्रकोष्ठ की पारदर्शिता को और अत्यधिक विश्वसनीय बनाये जाने की दिशा में प्रयास एवं पहल निरंतर चल रहे हैं। उदाहरणार्थ— गुर्दा प्रत्यारोपण से पूर्व उनसे साक्षात्कार वीडियोग्राफी कर सूचना प्रबंधन प्रणाली की वेबसाइट में उपलब्ध करा दिया जाता है। इसी प्रकार ‘सिविल अभियांत्रिकी’ के ‘आर्किटेक्चर’ द्वारा बनाये गये सभी मानचित्रों/योजनाओं की रूपरेखा भी इस वेबसाइट पर उपलब्ध है। इसी क्रम में संस्थान के वाहन प्रकोष्ठ को ‘आनलाईन’ करने की प्रक्रिया चल रही है।

इसके साथ-साथ संस्थान के विभिन्न विभागों के लिए इस वेबसाइट पर स्थान निर्धारित किये जाने की योजना है। जिससे वह स्वयं ही अपने विभाग से संबंधित किसी भी परिपत्र/कार्यालय आदेश को सीधे इस ‘वेबसाइट’ पर लोड कर दें जिससे कि अनावश्यक पेपर वर्क तथा जन शक्ति के संचालन से बचा जा सके।

डिजिटल क्रान्ति के इस युग में कुशल डिजिटल जनशक्ति उत्पन्न करने हेतु “स्वास्थ्य सूचना प्रबन्धन” विषय में स्नातकोत्तर स्तर की शिक्षा प्रारम्भ किये जाने हेतु एक प्रस्ताव ‘कालेज आफ मेडिकल टेक्नोलोजी’ विभाग को प्रस्तुत किया जा चुका है तथा प्रक्रियाधीन है।

सूचना प्रबन्धन प्रणाली विषय से संबंधित विभिन्न विषयों पर विज्ञान एवं प्रौद्योगिकी विभाग, भारत सरकार से ‘समझौता ज्ञापन’ का प्रस्ताव भी प्राप्त हुआ है और संस्थान इस दिशा में क्रियाशील है। ‘सूचना प्रबन्धन प्रणाली’ प्रकोष्ठ ने डिजिटल क्षेत्र से संबंधित अनेक विषयों पर प्रशिक्षण कार्यक्रमों का आयोजन किया जिसके अर्न्तगत संस्थान के 20 अधिकारी प्रशिक्षण से लाभान्वित हुए।

इस प्रकोष्ठ द्वारा अभी हाल में ही ‘विज्ञान एवं प्रौद्योगिकी परिषद’ में एक परियोजना प्रस्तुत किया गया है जिसमें ‘सूचना प्रणाली प्रबन्धन’ विषय पर शोध कार्य किया जाना प्रस्तावित है। संस्थान के लिए यह गर्व का विषय है कि ‘सूचना प्रणाली प्रबन्धन’ पर अध्ययन करने हेतु विभिन्न विश्वविद्यालयों से छात्र-छात्रायें प्रकोष्ठ में प्रशिक्षण प्राप्त करने आते हैं।

संस्थान द्वारा की गई इस पहल की तरह ही अन्य चिकित्सा संस्थानों में भी ‘सूचना प्रबन्धन प्रणाली’ के गठन हेतु माननीय चिकित्सा शिक्षा मंत्री की ओर से निर्देश जारी कर दिये गये हैं।

राजेश कुमार तिवारी

## A Runner's Trial

*A run begins the moment you forget you are running.....  
Adidas*

I am not a marathon runner but sometime back started morning walk on the advice of doctor to control blood pressure and keep healthy. Abhishek Misra, was not a name known to me until January 2017, when Dr. Sudip Kumar persuaded me to run half marathon event organized by this man who is also known as Ultra man and Iron man of UP. Having no experience of running made me reluctant but as a self determined person and a grit to pick up challenges I went ahead and registered myself for the 10 kilometer run in the city.

With zero knowledge and experience, I had no clue how to start my practice. Besides I was also on the wrong side of fifty but that did not let my spirits down. I said to myself, if others can why can't I? Since a novice to the whole idea, the only training I gave myself was building up my stamina. I am regular brisk walker and I walk every morning for quite a long distance. To prepare for the half marathon I started increasing my walking pace and slowly began running for about 2 kilometers each morning. It was not a vigorous training though but my indomitable wish was to complete the run that I was to participate in.

The day of the Half Marathon dawned, with anxiety of completing the 10 kilometer race in the stipulated time. I



reached the starting point in my outfit and got myself the racing BIB as they call it in the racing world. My heart was pounding and this was when I had not even begun the race. God only could take me through it. People warming up from different age groups and walks of life gave me confidence. I saw some participants from our Institute as well. We were all standing at the starting line and the race began.

I walked for a bit in between because I couldn't swish through the crowd that had turned up for the race. I gradually got the hang of it and my brisk walk turned to steady run. I was enjoying every bit. It was a smooth sail, much smoother than I had thought. As I crossed the finishing line in triumph, I checked the time and to my surprise I had completed it well within time. A sense of exhilaration, joy and pride filled my heart. I never knew little accomplishments in life could bring in so much pleasure.

'Run for Health' was organized by Faculty club on 11<sup>th</sup> June 2017, under the guidance and mentorship of Mr. Abhishek Misra a name much familiar to all of us now. A large number of PGI Campus residents including doctors officers employees and their families participated and listened to Abhishek Mishra giving his experiences and tips on healthy running and exercises with apt attention.

*Sunil Shishoo*

## Life Planning v/s Financial Planning

It's May - the month of mangoes, long vacation, and of course the swelter. Surely, many of you miss your school and college days when summer vacation was truly enjoyable. We reminisce about the past because over the years 'life' has taken a materialistic turn with 'finance' being the driving force. We have envisioned certain dreams, financial goals and run this rat-race to achieve them. But we also have to save enough money, invest it prudently - in a disciplined manner - so as to accomplish our financial goals. The fabric of life planning is clearly embellished with financial planning. We must learn to rope in the varied elements of our life so that our 'financial planning' is wholesome.

Many of you may have reached out to a financial planner, but a traditional financial plan may not be in your best interest long-term. You need a 'financial guardian' who can understand you, your lifestyle, emotional quotient, goals, etc.; who can counsel you, and accordingly draw up a customized holistic financial plan. A financial guardian or life planners will literally handhold you to safeguard your financial future. He/she will even energize and encourage you to do better financially, whereby all your dreams / financial goals can be accomplished.

Here's what financial planning is all about...

**Financial planning** is a process, to achieve one's

*Continued on page .....*

## A Peep into the Past



I retired from PGI as Medical Superintendent in 1991, after serving under 4 Directors the 5th one I served as Consultant. That's how I updated & perfected my DOs and DONTs in Administration in present era of expediency.

At present I am running 87 and have senile partial deafness (for which I have hearing aid, which I don't use, because there is nothing much to hear) and macular degeneration (for which I use kindle), but (touch word) still mentally alert. I go regularly to MB Club to play Bridge & have my drinks. (Everybody invited)

In the first meeting of Faculty under chairmanship of Director (Dr. B B Sethi) I put up code of conducts for Doctors, Officers & Employees (which in past, was as under)

1. Punctuality is a must, especially in OPD. All patient's shall be referred by treating physician with history of illness, investigations done, TR given and problem in hand. (Advertised twice in Newspapers)
2. All shall be entitled to leave only two days in a year.

3. None to chew pan-masala or smoke in Hospital area. (Those days I was a compulsive smoker, but I followed it meticulously.)
4. None to do any type of Private Practice or visit any Nursing Home. (etc, etc.....)

Few weeks after I got an urgent call from a Nursing Home, "Sir, our Surgeon has cut Aorta while operating. He is in deep trouble can you help?"

I sent Prof. Pramod Mittal of CVTS immediately in my staff car. He returned after couple of hours and reported, "Job done Patient is fine. I have taken nothing except a cup of coffee."

Those were good old days.

I am a confirmed bachelor but I have a daughter I got in a lucky draw, who takes good care of me. Now I wish to give a lecture to both Junior & Senior Doctors on "Art of Living, Loving & Leaving" before I depart on my last journey. Let us wait and see. So far all my wishes were horses for me.....



**R P Saxena**

*Former Medical Superintendent, SGPGIMS*

### *Continued from Page 10...*

financial goals viz. buying a dream home, a swanky car, travelling abroad for leisure, planning for children's future (their education and marriage needs), and your own retirement among a host of others - with a definitive, personalized financial plan in place. And mind you, there's no one-shot solution or 'one size fits all' approach. Life is dynamic, it does not move in a linear direction, and hence all aspects need to be interwoven well in your financial plan. Once the financial plan is complete, continuous monitoring and reviewing is a must.

It begins with understanding your current financial state; accounting for changes (if any); defining your financial goals; charting your asset allocation; choosing productive investment avenues and drawing a financial plan to achieve your goals.

**Financial Planning vs. Life Planning** Life planning' plays a bigger role. Life planning is highly sophisticated version of financial planning that is done following high fiduciary standards. It involves an

empathetic financial planner, who reads between the lines for you, understands and counsels you. Doing so brings a new meaning to one's financial plan.

Sometimes people feel the burden of saving and consider goals as an obligation. Their fear makes them resistant about compromising today, when in fact in the long run this can secure their financial future. While saving for your child's future, you probably sacrifice a holiday but at the same time you are rest assured that you will provide for them a better future. A life planner or financial guardian counsels and guides you to take the corrective course.

**Life planning simplifies the battle of mind and heart** So, a life plan simplifies the constant battle of the mind and the heart. It's more compassionate and virtuous way of putting your financial health in order much more holistically and enables you to save even for that rainy day. Hence, reach out to a financial planner or a financial guardian in your vicinity today and start living your dream life.

**Mahesh Arora**

## Its Farewell; Not Good Bye

*"To everything there is a season and a time to every purpose under the heaven."- Old Testament*

It is the season and the time for couple of our SGPGI colleagues to bid farewell with mixed emotions as they complete the years of active service life and gear themselves to life's another innings and an opportunity to pick up forgotten hobbies and nurture the little desires within you. After all, it's never too late to start living the life that you have always wanted to.

Professor UK Mishra, HOD, Department of Neurology and Professor Surendra Singh, HOD, Department of



Anaesthesia, on the eve of their retirement, were given a warm send off in a small farewell function held in the Mini Auditorium.

The function was attended by the Director, Professor Rakesh Kapoor, the Dean, Professor Rajan Saxena and most of the faculty members of the Institute. They were both felicitated with presentation of mementos. The Director and the Dean in their address noted that Professor Mishra and Professor Singh were one of the earliest faculty members of the institute and have had a long and mutually fruitful relationship with SGPGIMS. Both have been devoted clinicians, respected teachers and mentors who have made significant contributions to research in their respective fields and the Institute would remember them warmly and miss their valuable presence. Both Professor Mishra and Professor Singh shared their feelings with the gathering and commented on how time seemed to have flown and how much they had enjoyed their innings at SGPGI both professionally and personally. All the faculty wished them all the very best in their future endeavours.

Sri A. K. Singh, Supdt Engineer (Electrical) retired on 31<sup>st</sup> May, 2017. He was given a warm send off by Officers and also his departmental colleagues whom he had worked with



for nearly 28 years. They said that Mr. Singh was the man whose word were

trusted more than operating procedures, checklists and manuals. He was acclaimed as cool, friendly and dependable Officer.

Sri Pradeep Jha, Supdt Engineer (Civil) retired on 30th

June, 2017. He was gifted with a keen engineering mind and his attention to detail, while keeping the broader picture in mind, has been invaluable to set up and maintaining various systems in hospital for over 28 years will always be remembered. His knowledge and experience was always beyond par.



Brother D.J. Wardhe Deputy Nursing Supdt. joined the



Institute in year 1989. He specialized in nursing of dialysis patients. After impeccable record of staff nurse in dialysis unit, he was

given responsibility of various wards as Incharge, such as CVTS ward, cardiac cath lab, post op ward and newly designated swine flu ward. On 30th June 2017, he proceeded for his superannuation. We wish him a healthy and fulfilling retirement life.

Smt Kamini Pradhan, Head Mistress, Nursery School retired on 30.6.17. She has provided about 29 years of devoted service. Her willingness to put in extra time and effort to steer the administration of SGPGI Nursery School, inspite of her health issues has been incredible. Her co-workers recognize Mrs Pradhan for her courtesies and amicability.



Sri Ramesh Chandra Katiyar, Horticulturist, retired on 30.6.17. He served the Horticulture department for 27 years. His contribution in bringing up this beautiful green campus of our Institute will be long remembered.



From the editorial team of *SGPGI Newsletter* we would like to put in a message to all the dear ones who have retired that as you move on into the next amazing chapter of your life, know that you will be missed, know that our best wishes and thoughts go with you, come and visit us often- for this is farewell and not good bye.

## वार्षिक समारोह- केन्द्रीय विद्यालय पी.जी.आई.



दिनांक 06 मई, 2017 को केन्द्रीय विद्यालय, एस.जी.पी.जी.आई., लखनऊ का "वार्षिकोत्सव" संजय गाँधी स्नातकोत्तर आयुर्विज्ञान संस्थान के श्रुति प्रेक्षागृह में अत्यन्त हर्ष एवं उल्लास के साथ

संपन्न हुआ।

माननीय डा. रीता बहुगुणा जोशी कैबिनेट मंत्री, उत्तर प्रदेश सरकार को मुख्य अतिथि के रूप में आमंत्रित किया गया। सम्माननीय प्रो. राकेश कपूर, निदेशक, एस.जी.पी.जी.आई. तथा सम्माननीय श्री अजय पंत, उपायुक्त, केन्द्रीय विद्यालय संगठन, लखनऊ संभाग विशिष्ट अतिथि के रूप में पधारे। श्री जी.के. द्विवेदी, प्राचार्य, केन्द्रीय विद्यालय, एस.जी.पी.जी.आई. ने पुष्प गुच्छ देकर अतिथियों का स्वागत किया। दीप प्रज्ज्वलन के पश्चात विद्यालय के प्राचार्य ने विद्यालय का वार्षिक प्रतिवेदन प्रस्तुत

किया तथा छात्र-छात्राओं की उपलब्धियों से अतिथियों का परिचय करावाया।

वार्षिकोत्सव में अनेक सांस्कृतिक कार्यक्रम आयोजित किए गए। सरस्वती वंदना, नन्हें-मुन्ने बच्चों द्वारा प्रस्तुत समूह नृत्य, होली-नृत्य, पंजाबी नृत्य के साथ-साथ योगासन की भी अत्यन्त मनोहारी प्रस्तुति की गई। लखनऊ के प्रसिद्ध हास्य व्यंग साहित्यकार श्री के०पी० सक्सेना द्वारा लिखित हास्य-एकांकी "तलाश अर्जुन की" दर्शकों द्वारा विशेष रूप से सराहा गया। सांस्कृतिक कार्यक्रम के अन्त में, मुख्य अतिथि ने विद्यालय के प्रतिभावान छात्र-छात्राओं को पुरस्कार एवं प्रमाण-पत्र बाँटे।



जी.के. द्विवेदी

### Summer Cool

Nursery School children enjoying at the Splash Pool in School



### Mango... Don't Go...

Creche children celebrated yellow day in June by wearing yellow dresses, coloring mango cutouts yellow and eating mangoes too...



### Forthcoming Events

Training Course on Biostatistical Methods & Computing with SPSS10-16<sup>th</sup> July 2017

Sixteenth ICMR Course on Medical Genetics and Genetic Counseling: pedigree to Genome

24<sup>th</sup> July to 5<sup>th</sup> August 2017

UP CYTOCON 2017 (8 Credit hours awarded by MCI for this conference) 5<sup>th</sup> Annual Conference of UP CHAPTER OF INDIAN ACADEMY OF CYTOLOGISTS

16<sup>th</sup> to 17<sup>th</sup> Sep 2017

### Corrigendum

Some printing mistakes in the previous issues of SGPGIMS Newsletter, stands corrected.

1. Issue October -December 2016 - page 7 please read the name of the writer of obituary of Shanbhu Prasad as Naw Ratan Lal Nigam
2. Issue January-March 2017 - page 13 under New Joinings Dr. Durga Prasanna Misra is Asst prof Clinical Immunology.

Editorial Board deeply regrets the inconvenience caused.

## No Tobacco Day

Drs Piyali Bhattacharya and Perna Kapoor contributed to the campaign against Tobacco on "World No Tobacco Day 2017" by Interactive talks with Doctors and Health Professionals at the Nirvan Hospital & De addiction Centre, Lucknow. (HOPE initiative) was an active partner to this campaign. Approximately 60 people attended the program and were benefited with the talks. Participants pledged to contribute their inputs in making our city, Lucknow, a Tobacco free zone.



## World Yoga Day

The World Yoga Day was celebrated on 21<sup>st</sup> July by holding a Yoga session in the Hobby Centre, conducted by Yoga teacher Kamlesh and attended by faculty, residents, officers staff and their families. Besides, in the morning about 100 participants from P.G.I. participated in Yoga session with Hon'ble Prime Minister in the Ramabai Park. They were taught Yoga according to a standard module provided by Government of India prior to the Yoga Day.



## Rabindra Jayanti



The faculty and their children put together a wonderful cultural program on 10th May to celebrate the 157<sup>th</sup> birth anniversary of 'Gurudev' Rabindranath Tagore. From recitation of verses from Gitanjali to soulful rendition of songs and verse followed by Tagore's legendary dance dramas were all put together in a impeccable way. The show was aptly punctuated by eco friendly messages and witnessed a packed Shruti Auditorium.



## Awards & Accolades

**Department of Gastroenterology**, SGPGI has been designated by the World Health Organization (WHO) as a WHO Collaborating Center on Viral Hepatitis for a period of four years (2017-2021).

**Dr Amit Agarwal** has been elected the President of International Society of Oncoplastic Endocrine Surgeons (ISOPES) for the year 2017-2019.



**Dr. S.K. Yachcha**, department of Pediatric Gastroenterology received the annual health awards of the Times Group, 'Icons of Health-2017' for his distinct contribution in pediatric gastroenterology.

**Dr. Aloknath**, department of Pulmonary Medicine received the annual health awards of the Times Group, 'Icons of Health-2017' for his contribution in the field of Pulmonary Medicine.



**Dr. Samir Mohindra**, department of Gastroenterology received the annual health awards of the Times Group, 'Icons of Health-2017' for his outstanding role in managing patients of gastroenterology disorders.

**Dr. Rajesh Harshvardhan**, Department of Hospital Administration received the National Healthcare Leadership Award for innovative initiative in Public Sector Healthcare delivery.



**Dr. Prabhat Tewari** department of Anaesthesiology has taken over as Editor-in-chief of Annals of Cardiac Anaesthesia (ACA) from April 2017. ACA is widely indexed, peer reviewed, specialty journal and publishes original research articles This journal has around 300 specialists around the world on its reviewer's panel including the editorial board. The tenure of editor-in-chief is for five years.



**Dr Rakesh Aggarwal**, Department of Gastroenterology has been elected as a fellow of the Indian National Science Academy, New Delhi beginning 2017. He has been also appointed as a member of Strategic Advisory Group of Experts (SAGE) on Immunization of the World Health Organization.



### From the Editorial Desk

*While our Institute is coming of age a lot of persons amongst us who had joined in the early days of inception are also retiring. Retirement is that bittersweet end of professional life which is incomplete without a celebration. As we all move from one phase of life to another, we often look back at least once and assess what it is we leave behind. A formal office adieu strengthens social bonds. Not very often we get to meet our office colleagues, so let it be an occasion on that last day of the month to get together to create an everlasting memory both for us and the retiree to cherish for long. Big or small let the farewells be celebrated equally and with full attendance...after all each one of us has contributed in his own capacity to build this magnificent Institute. Wishing all of them good health and world of happiness who retired this quarter.*

*Flipping through the pages of April-June 2017 SGPGIMS Newsletter issue you have surely come across an assortment of interesting features, informative articles and invincible reports. A 'retro special' photo feature awaits you to identify some very well known faces amongst us. Let's see how many of you can do so...!! We shall anxiously await your feedback and also urge you to write and flood the inbox of [sgpgimsnewsletter@gmail.com](mailto:sgpgimsnewsletter@gmail.com) with your interesting anecdotes and feedbacks. It helps us to improve. As of now, its happy reading to all our readers.*

*Monalisa Chaudhari*

## #Throwback-When #SGPGI was Young

*Have a look maybe you can spot yourself and find out who is who.*



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