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Bank A/C number::
038200100009653
IFSC code :: SRCB0000038**



**INDIAN MEDICAL
ASSOCIATION PUNE**

Dr. Nitu Mandke IMA House, 992,
Shukrawar Peth, Tilak Road, Pune - 2
☎ : 7350 214 512

PHOTO

Dr.

**IMA PUNE
LIFE MEMBER**

On the occasion of Doctor's Day IMA HQ, Delhi conferred prestigious, "IMA HQ Corona Warrior Award" to Dr Sanjay Patil.

Hearty congratulations
Dr Sanjay Patil,
Executive Trustee,
& Chairman HBI IMA Pune.
IMA Pune, is proud of your
achievement.



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Dr. Sunil Ingale / Dr. Alka Kshirsagar
Hon. Secretaries, IMA Pune

Tel: 020-24464771 / 24430042 Email: imaofpune@gmail.com

Editorial

Dr. Sanjay Patil

Mob : 98225 20257



History has taught us many lessons in disaster management and mitigation. Right from Black Plague, Spanish Flu and more recently, the HIV/AIDS epidemic, humanity has always been a step behind. The second wave of COVID19 caught us unaware and with our guards down. A steady fall in positive cases and a low mortality rate gave us a false sense of complacency. That is when disaster struck, again. Like the previous epidemics, this too has many lessons for us to learn, and the most important one being that COVID will continue to exist and catch us when we least expect it.

Of the many challenges in front of us, medical and economic management have to be the most vital ones. To tackle these, a persistent and dedicated effort is needed by society as a whole. The value of proper COVID19 appropriate behaviour cannot be stressed enough.

As it has been rightly said, "One for all, all for one", our society and its individuals have the responsibility to take care of themselves, which will in turn be beneficial for society.

What is beneficial for the individual, helps those around him, and vice versa.

This has to be an unwritten social contract and not commercial contract between the individuals of the society.

Health is not a commodity we can purchase and consume. It's a gift that each one of us has gotten. Hence, we should treasure it and make full effort to maintain and better it. This can only be achieved when there is a sense of collective responsibility within society. No class, creed, economic discrimination is made by the virus and hence it needs society as a whole to fight it.

Health is wealth, has been an often quoted statement, but never has it been more relevant than today. With this pandemic, people's health and wealth have taken a huge hit. It is now defined that health and financial well-being are two sides of same coin. And hence, it's in our self "interest" to work together and win this battle, and enjoy the "dividends" of a healthy society.

Another crucial cog in this wheel is the administration and our leaders, who have failed miserably till now. By misdiagnosing and misrepresenting the existing situation, they have tried their best to blame it all as a failure of the healthcare industry. With every square peg they tried to fit in a round hole, the piles of dead bodies kept rising.

Rampant injustice brought together 250 small and medium hospitals under the umbrella of IMA HBI. Their collective stand to surrender their registrations as a protest against unjust and unnecessary re-evaluation of bills was a fitting reply to the gift which they received on Doctor's day from local health department.

Upon completing such an audit, they were left red faced, as the average amount which was extra was a mere Rs 4,500 per bill. Our historical protest was a huge success and the health department has decided to ignore its own notice. Who knows what their



brains will come up with the next time. Maybe, they should focus on empowering small setups and planning and boosting infrastructure to handle such public health emergencies in the future.

Although vaccinations have started since the beginning of this year, a huge chunk of our vulnerable and susceptible population still is unprotected. A massive push is needed to complete vaccinations almost on a war footing.

So friends, the future is not in our hands, but on our face. So please wear masks. The future generation will be thanking you one day.



To,
All the Members of IMA

The existing guidelines and application form for conferment of title Honorary Professorship by IMA, IMA-CGP and IMA-AMS are updated. Please visit IMA HQ website for the same. (<https://www.ima-india.org/ima/contact.php>)

The applications are invited from the eligible Academicians for such positions as mentioned in the guidelines.

The applications will be screened by the IMA Academic and Accreditation Board along with the representative of IMA College of General Practitioners and IMA Academy of Medical Specialists.

The applications in the prescribed format may kindly be sent to the office of Honorary Secretary General at the email ID: hsg@ima-india.org on or before 20th August, 2021.

The selected persons will be conferred with respective titles on September 5, 2021 on the occasion of Teachers Day celebration to be held in IMA HQs.

For more details contact Dr. Meenakshi Deshpande, Chairperson, IMA AMS. Mob : 9922464365

शाप

डॉ. गीतांजली शर्मा (कसमळकर) पुणे
नेत्रतज्ज्ञ

प्रश्न माझा आपणा सर्वास आहे
जात रूपी शाप का जन्मास आहे ?
पक्षिप्राण्याना कधी ती जात लागे
उच्च मेंदू मानवी धर्मास आहे
वाळवीची कीड करते जीर्ण सदाना
रंग रंगोटी परी सर्वास आहे
लाज झाकावी कशी ती लक्तरानी

फूल कशिदा फफाटक्या पदरास आहे
जीवदाता सूर्य तळपे तेजपूर्ण
श्राप त्याला ही ग्रहण खग्रास आहे
पौर्णिमेचे नभ विलसते चांदण्यानी
लागलेला डाग त्या चंद्रास आहे
सांगते 'गीता' वसावा राम हृदयी
या जगी रामासही वनवास आहे

Disclaimer : Opinions expressed in various articles are of authors and do not reflect the views of IMA Pune Branch.

The appearance of advertisements in 'IMA Plus' publication is not a guarantee or endorsement of the product or the claims made for the product by the manufacturer. Editorial Board reserves the right of rejecting any matter without explanation or intimation. All legal matters subject to Pune Jurisdiction only.

We are extremely sorry for inadvertently printing map of India on the front page of July 2021 issue inappropriately. We apologise for the same.

Editorial Team

From the President's Desk

Dr. B. L. Deshmukh
Mob : 99601 72759

Dear IMA members,

Season's greetings of 75th Independence Day! Hope you are doing well!!!

We are still in passing phase of Covid 19. The third wave seems to be at the doorstep, what the experts have been predicting. Hope their prediction turns to be incorrect.

This is the second consecutive Independence Day in the shadow of Covid. Still, we are celebrating it with great enthusiasm. On this auspicious occasion of 75th Independence Day, after the flag salutation, we have witnessed internationally renowned authority on temple architecture and Indology, Dr G B Deglurkar's talk and slide show on: Deoul- Samajik Sanstha.

In our country the mission of Covid vaccination is still not satisfactory. The same we have been experiencing in Maharashtra as well as Pune. People are reluctant to take second dose of covid vaccine. Unavailability of vaccines in Govt hospitals is also one of the causes. Unless we vaccinate to majority, we will not be able to control covid pandemic. In some types of vaccines even we are thinking whether 3rd dose will be needed or not. The user-friendly nasal vaccine may be expected soon. The children's vaccination will be a great challenge to avoid pediatric covid pandemic.

To increase the membership strength of IMA is the mission taken by IMA Pune. We are trying hard for that by approaching big hospitals requesting their doctors to avail the membership, especially the younger doctors. It is useful for them to have medicolegal help, participate in various schemes like Social Security Scheme (SSS), Association of Medical Specialties (AMS), College of General Practitioners (CGP), Hospital Board of India, Pune Chapter (HBI) etc.

The PILs by IMA as intervenors and other organizations to safeguard the doctors towards Legal immunity in practice in covid pandemic is under consideration by courts. Through HBI we are fighting against capping of covid and non-covid hospital charges by Govt/Corporation. Even they are troubling the hospitals for unwanted, unnecessary audits. These things are misused for harassment of medical fraternity. If at all it is done it is to be done if there are complaints, with time limit and in presence of hospital representative with expert auditor.

Recently we have faced heavy rains, landslides and flood situation in Konkan and Western Maharashtra. The disaster management teams of IMA are working in these affected areas. Few of our members have joined this mission. We have provided masks, medicines, dressing materials and day to day needed things, blankets etc.

Recently IMA Maharashtra office has shifted to new premises in Mumbai. Few of us were present for Inauguration Ceremony of the same.

Stay fit! Stay healthy! Stay safe! Take care of yourself and your families!

Thanking you.

Long live IMA!





IMA HOSPITAL BOARD OF INDIA (HBI)

Dr Sanjay Patil

Chairman HBI IMA Pune

Dr Padma Iyer

Co-chairman HBI IMA Pune

IMA HBI is the special wing created to safeguard and help the interests of private hospitals. The IMA leadership over the years have realized the need for a specific body to look after the interests of Hospitals and Nursing homes at a local, State & National level.

AIMS & Objectives of HBI

- To assist and equip all healthcare institutions to provide quality healthcare by various means, including Accreditation.
- To represent and safeguard the interests of all healthcare institutions and their personnel
- To monitor and intervene in all legislations regarding hospitals being considered by the Parliament or State legislatures.
- To represent and negotiate on behalf of the hospitals, issues of concern to hospitals, with Governments and other appropriate local, state, national and international authorities.
- To develop, adopt and endorse standards and protocols for hospital services.
- Identify Issues related to Hospitals in various states
- Segregate issues with National & State character
- Study & organize discussions of various issues on HBI forums.
- Address Guidelines for solutions of issues.
- Plan of Action for addressing issues of HCEs.

Kindly become a member of IMA Pune HBI Subchapter. For details please visit www.imahbi.in

Contact:- IMA Pune Office – 020-24464771/24430042

For IMA Pune Navaratri Dance competition by WDW

1. Online competition(as of now. If situation allows there will be physical during Navaratri)
2. Solo/ Jodi/ Group(3 to 6 members in one group)
3. Only Indian traditional style dance : classical/ folk
4. Time : 4 min to 8 min
5. Open to ladies and gentlemen
6. Fees IMA Members : Rs 100/- & Nonmembers : Rs. 200/-
7. Record your video and send to e mail : imaofpune@gmail.com
8. Details for online fee payment....

Saraswat Co-operative Bank, Tilak road, Pune

Bank A/C name: Indian Medical Association Pune Branch

Bank A/C number : 038200100009653

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Last Date of Registration 31st August 2021

Last Date of Submission of Dance Video 30th September 2021



AGM Notice

Annual General Body Meeting of IMA Pune Branch

Date- 23rd September 2021, Thursday Time: 3.00 pm

Venue: Dr. Nitu Mandke I.M.A. House, 992 Shukrawar Peth, Tilak Road, Pune 411002.

Agenda:

- 1) Welcome address by President
- 2) Condolences
- 3) Confirmation of Minutes of AGM conducted on 05th December 2020.
- 4) Hon Secretary's report for the year 2020-21.
- 5) Adoption of Audited Reports of Accounts for Financial years 2020-21.
- 6) Appointment of Auditors and confirmation of their remuneration for the F.Y 2021- 22.
- 7) Election for the following posts -
 - 460 Posts of State Council.
 - 46 Posts of State Executive Committee
 - 46 Posts of Central Council of IMA HQ.
- 8) Resolutions from Trust Board / Managing Committee (if any)
- 9) Resolutions from any member of IMA Pune (should be submitted before 1st September 2021)
- 10) Any other business with permission of the chair

P.S.

The meeting will commence at 3.00 pm and, if there is a lack of quorum, it will be adjourned and will resume after 15 minutes, and whatever number of a members present, will form the quorum and decisions taken will be binding on all.

Note:-

- The copies of Audited statement of Accounts will be available for members at the Office during office hours from 05/09/2021.
- The nomination forms for the above elections are available at IMA office.

Dr. B. L. Deshmukh
President IMA Pune

Dr. Sunil Ingale / Dr. Alka Kshirsagar
Hon. Secretaries, IMA Pune

Hon. Secretary's report for the year 2020 – 21 is already printed in
IMA Plus April 2021 issue.



Last Month in IMA ***[July 2021]***

Dr. Sunil Ingale/ Dr. Alka Kshirsagar
Hon Secretaries IMA Pune

4th July
2021

Medicolegal Scenario during Covid

Dr. Jayant Navarange spoke on concept of negligence in Covid. Dr. Dilip Walke spoke on how one can prevent attacks on doctors. Dr. Meenakshi Deshpande explained the amendments in epidemic act and MTP act and un CPA. Dr. Aniket Joshi presented the challenges managing the emergencies during covid. Dr. Pratibha Kane spoke about importance of Consent and documentation. Dr. Jayant Navarange sir discussed interesting landmark judgments.

MMC points : 2

Delegates attended : 250

18th July
2021

Oncology Update

Webinar by IMA Pune in Association with Apollo Hospitals New Mumbai

Dr. Anil D'cruise, Head and Neck Oncosurgeon, gave talk on Management of Thyroid Nodule and how to differentiate between good and bad nodule, Dr. Richa Bansal spoke on Gynaecological malignancies and management of Ovarian tumours, Dr. Sandeep Dey, Radiational Oncologist explained details of Stereotactic Body Radiation Therapy (SBRT), Dr. Sandip Bipte gave a talk on changing trend in Breast surgery from Radical to Conservative Oncoplastic and about Radical Mastectomy to Prophylactic Mastectomy, Dr. Ashwin Tamhankar gave an insight to Uro Oncology and Robotic surgery which is the latest modality, Dr. Mahavir Modi spoke about management of Interstitial Lung Disease during Covid. He spoke about both ...pre existing Interstitial disease and post covid fibrosis pathogenesis and management, Dr. Tushar Patil spoke about Lung cancers. He spoke about Tailor made individualised treatment plan for lung cancers especially during Covid times.

MMC points : 2

Delegates : 110



WELCOME NEW MEMBERS

Sr. No.	Name	Speciality	Contact
1	Dr. Suhel Akhtar Khan	Orthopaedic	9763067782 7798797123
2	Dr. Jagdish Madhukar Dhake Dr. Singh Aparajita Ramanand	Orthopaedic Gynaecologist	9960964801 9564515006
3	Dr. Piyush Santosh Gugale	Consultant	8830176281



National Doctors' Day Celebration

On 1st July in the morning Blood donation drive and MPH programme of awareness about Anemia and Health of women was organized for girl students at Poona College. This social activity was in association with Lions Club and Gholap Blood Centre.

Mayor Mr. Murlidhar Mohol visited IMA Pune office to felicitate IMA Managing Committee members on the occasion of Doctors' day. Dr. B. L. Deshmukh, President of Pune IMA welcomed the Mayor and felicitated him. He appreciated service given by medical fraternity during Covid Pandemic in Pune. As first citizen of Pune on behalf of all Pune-kars. He gave thanks to all doctors of Pune. He also listened to problems faced by doctors.

7 senior eminent doctors were felicitated by President Dr. B. L. Deshmukh in Dr. Sancheti Hall at Dr. Nitu Mandke IMA House.

Dr. M.Y. Bapaye, Senior Surgeon, was a Director of Dept of Surgery KEM Hospital, Pune and associated with the hospital since more than 50 years. He was an excellent teacher and has been a postgraduate teacher for many years.

Dr. Deepak Kirpekar, Senior Urologist, He is Director and Chief Urologist at Hi – Tech Urology since 1982. He was postgraduate teacher for DNB since 2000 till 2015. He received Mayors award Pune city in 2006.

Dr. Madhusudan Khaladkar, Senior Surgeon, He was Practicing in Yeshwant Surgical Nursing Home on Bajirao road since 1975. He started and developed Department of Surgery in Kirkee Cantonment hospital and worked over 20 years.

Dr. Arif Memon, Senior Family Physician, is doing general practice since last 48 years. Presently he is Vice President of Rangoonwala College of Physiotherapy and Z. V. M. Unani Medical College, Pune.

Dr. D.B. Kadam, Senior Physician, at present Professor Medicine Smt. Kashibai Navale Medical College, Pune and Professor Emeritus Medicine at BJJG Medical College Pune. He is Chairman, Covid 19 Pune Divisional Task Force.

Dr. Pratibha Joshi, Senior Gynaecologist, She started her own hospital at Warje in 1986 and since then practicing for 35 years. She has done Diploma in counseling Psychology and actively working as an expert counselor

Dr. Tushar Patil, Oncologist, He is Consultant Medical Oncologist and Hematoncologist in Sahyadri Speciality Hospital, Bharati Hospital, Curie Manavata Cancer centre Nashik, Aditya Birla Memorial Hospital, Pune and many other hospitals.

Secretary Dr. Sunil Ingale conducted the programme. Vote of thanks was given by secretary Dr. Alka Kshirsagar.

••



Sexual Harassment of Women at Workplace (POSH) Act of 2013 ***Doctors - know your legal responsibilities***

Dr. Vaijayanti Patwardhan

Gynecologist and Public Health Researcher

Past President: IMA Pune

Trainer: POSH Act

Member – Internal Committee for many Organizations

This article is written in the lieu of the recently confirmed GR related to the implementation of POSH Act, necessitating the formation of Internal Committees at every workplace, the non-compliance leading to the imposing fine of Rs 50000 /- from 1st September 21.

It is required to Form a committee and submit the report along with other legal provisions upto 30 Aug 2021.

Happy also to convey that IMA Pune already has a committee in place as per the legal requirement and the regulatory compliance is ongoing.

Some FAQs:

1. Being a private practitioner and a small nursing home owner, is the Act applicable to me ?
2. What are the legal responsibilities?
3. Does the law applicable to me if I don't have 10 full time employees?
4. How to form the Internal committee

So on.... And so forth....

So let us know the important provisions of this act- Prevention of women against **Sexual harassment Act of 2013**

Sexual harassment at a workplace is considered violation of women's right to equality, life and liberty. It addresses the issue of insecure and hostile work environment, which discourage women's participation in work, thereby adversely affecting their social and economic empowerment and the goal of inclusive growth. The legislature formulated the Sexual Harassment of Women at Workplace (Prevention, Prohibition and Redressal) Act 2013.

Important facts about POSHACT

The Act defines sexual harassment as unwelcome acts or behavior (whether directly or by implication) namely, physical contact and advances, a demand or request for sexual favors, making sexually colored remarks, showing pornography, any other unwelcome physical, verbal or non-verbal conduct of sexual nature. Any act of unwelcome and sexual nature shall be considered as sexual harassment.

The Act also provides the circumstances which may amount to sexual harassment. Examples - implied or explicit promise of preferential treatment in her employment, threat of detrimental treatment in her employment, creating an intimidating or offensive or hostile work environment for her; humiliating treatment likely to affect her health or safety.

Important Provisions in the Act

The Act envisages the setting up of Internal Complaints Committee at every office of the organisation or institution, **having more than 10 employees**, to hear and redress complaints pertaining to sexual harassment irrespective of their employment status (Full time/ Part time/ temporary/ permanent etc. **The committee while inquiring into such complaint shall have the same power as vested in a civil court.**



An aggrieved woman can file a written complaint to ICC/LC from three months from the date of the incident and in case of series of such incidents within three months from the last such incident on receiving the complaint the committee, further proceedings will be initiated, which include Inquiry, interrogation/ settlements /action – with timelines to comply for that procedure.

Where both the parties are employees, the principle of natural justice is followed and both the parties are heard and opportunity is given to make representations against the findings of the committee. For the purpose of making an inquiry, the committee shall have the same powers as are vested in a civil court. The committee has to complete the inquiry within a period of 90 days. The committee can give certain interim reliefs to the aggrieved woman during the pendency of the inquiry

The committee within 10 days after completion of the inquiry shall provide the report of its findings to the employer/District Officer and the concerned parties. When the allegation against the respondent has been proved the committee shall recommend the employer/District Officer to take action for sexual harassment as misconduct in accordance with provisions of service rules. The employer/District Officer has to act upon the recommendations within 60 days.

There is a provision for action against filing of false or malicious complaint or false evidence the committee. There is provision for appeal also against the recommendations made by the committee.

The Act does provide a prohibition on publication of identity of the aggrieved woman, respondent, witnesses, contents of the complaint, inquiry proceedings or recommendations of the committee, except information regarding the justice secured to any victim of sexual harassment.

Responsibilities of the Employer - (published recently in the media)

The Act lays down certain duties of the employer and District Officer such as creating awareness on sexual harassment at workplace, sensitize the employees, Displaying a Board at the workplace in prominent place, assist the complaints committee in conducting the inquiry, act upon recommendations of the committee, timely submissions of reports of the committee etc.

The non compliance of the provisions of the Act by the employer may result in fine upto fifty thousand rupees and can also lead to cancellation of his license or withdrawal, or non-renewal, or approval, or cancellation of the registration, as the case may be. Even though the Act is in force since 2013, the awareness about the Act, its provisions and consequences of sexual harassment is limited.

The effective implementation of POSH Act requires creating an environment where women can speak up about their grievances without fear and get justice but sensitization of men towards treatment of women at workplace is equally necessary.

Let all of Us take the steps to support the act and take necessary action.

We have started renting out our Halls at IMA premises. Special preference and consideration will be given to IMA members

Building Management Committee, IMA Pune



MEDICOLEGAL CORNER

Dr. Meenakshi Deshpande
Chairperson MLCommittee
Cell: 9922464365

Dr. Jayant Navarange
Co-Chairman MLCommittee
Cell :9890206303

Updates on Bombay High Court hearing in intervention filed by IMA Pune in PIL . (Continued from last issue)

Honorable Chief Justice , Mumbai High Court, Mr Dipankar Dutta had directed Adv Kumbhkoni to formulate procedure acceptable to State Government and to form special cell to handle such complaints before FIR is filed on doctor . It was also requested to Mr. Thakare to furnish us a copy of the Act for prevention of violence against healthcare professionals and institutions as accepted by the Committee formed by the State Government.

On 29th June, Tuesday during the meeting in the Mumbai High Court , Adv.General Kumbhakoni had assured Dr. Meenakshi Deshpande that the government does not have any objection to MedicoLegal immunity and he would appraise the court during the hearing. We are yet waiting for the State to confirm to us regarding this in subsequent hearings . Regarding the procedure to be followed in the event of a patient / relatives filing a FIR police complaints, at the same meeting , it was discussed that a similiar directives GR had already been issued in 2010 , which were not followed by Government, which had clearly mandated inclusion of MMC representative in the Expert Committee.

In fact , Maharashtra Government vide its GR dt 26/03/2010 had directed to constitute a committee for examining complaints of medical negligence at the level of each district, in which there was one member of Maharashtra Medical Council. But By GR dt 31/01/2014 the Government has given responsibility of constitution for such a committee to the Medical College if it exists in the district, and removed the requirement of member of Medical Council from such committee.

Dr Shivkumar Utture, President MMC has cleared in his mail that MMC members are not invited in District Expert Committee .

So, we have sent a letter from IMA Pune , on 26 th July 21, to all IMA MS branches Presidents and Secretaries to collect information about whether MMC members are included in such District Committees .

We are planning to submit this discrepancy along with data as under for the consideration of High Court at Bombay , with next Affidavit .

We have prayed for Medicolegal Immunity for doctors working in Pandemic and also for :

- a. Strong Act for prevention of violence including harassment from patients
- b. Expert committee opinion be mandated for any Civil and consumer cases and such committee should have a representative from MMC . (please read GR of 26 March 2010)

We have given previous references that :

1. Hon'ble Chief Justice of Bombay High Court has expressed concern regarding frivolous complaints against doctors

<https://www.livelaw.in/news-updates/bombay-high-court-case-against-doctors-cant-administer-drug-175526>

2. Hon'ble Chief Justice of India has expressed concern regarding doctors being subjected to





violence for none of their fault.

<https://www.livelaw.in/top-stories/why-are-medical-professionals-at-receiving-end-for-someone-elses-failure-cji-nv-ramana-176687>.

Dear Friends , IMA members , colleagues and well-wishers ,

Our doctors and health care workers have been fighting the COVID Pandemic bravely from March 2020 . Many cases were managed as per present-day guidelines , which kept on changing as this disease is totally new and research studies were not available .But , in spite of this , many allegations and FIRs have been put up against doctors to drag them in Courts .

So IMA PUNE has filed this Intervention Appeal in PIL of COVID RELATED MANAGEMENT ISSUES , with help of Adv. Nitin Deshpande .

We are pleased to inform you that we are near to Mumbai HC is pro to giving MEDICOLEGAL IMMUNITY.

The legal and affidavit expenses are ever increasing (More than 1 lakh rupees are already spent) and *we appeal to you to donate generously for this cause .*

(80G exemption is there).

Account Details (Donation)

1) Name:- Indian Medical Association Pune branch (IMA PUNE)

2) Account Number:- 038200100009653

3) IFSC Code:- SRCB0000038

4) Branch Name :- Tilak Road Pune

(Pl.inform online transaction details with your details to imaofpune@gmail.com)

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WE WILL KEEP ON UPDATING YOU AND KEEPING YOU ALL INFORMED.

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9822258011



तिमिरातूनी तेजाकडे...संकल्प दृष्टीदानाचा

डॉ. गीतांजली शर्मा (कसमळकर)

नेत्रतज्ज्ञ

सहसचिव आय एम ए पुणे

मा. अध्यक्ष पूना ऑप्टॅल्मॉलॉजिकल सोसायटी

स्वातंत्र्य मिळाल्यानंतर गेल्या चौऱ्याहत्तर वर्षात आपल्या भारत देशाने अनेक आघाड्यांवर प्रगती केली. औद्योगिकरण. संगणक क्रांती, जलविद्युत प्रकल्प, आय आय टी, एम्स सारख्या शैक्षणिक संस्था, खगोल विज्ञानातील प्रगती असे अनेक दाखले देता येतील. त्याचप्रमाणे वैद्यकीय क्षेत्र व आरोग्य शास्त्रामध्येही देशाने प्रचंड प्रगती केली. निदान प्रक्रिया आणि उपचार पद्धती या दोन्ही पातळ्यांवर पाश्चात्य देशांच्या बरोबरीने वैद्यकीय क्षेत्राने प्रगती साधली. आजच्या घडीला तर कोविड संदर्भातील विचार करायचा झाला तर सर्व कोविड योद्ध्यांनी समर्थपणे दोन्ही लाटांचा सामना केला. लसीकरण जोरात सुरू आहे. अर्थातब अजूनही लढा संपलेला नाही. कोविड पुन्हा डोके वर काढू पाहतो आहे. पण संपूर्ण वैद्यकीय क्षेत्र तिसरी लाट आल्यास तिचा मुकाबला करण्यास तयारीत आहे.

असेच एक महत्वाचे कार्य गेल्या सत्तर बहात्तर वर्षात आपण करत आहोत ते म्हणजे अंधत्व निवारणाचे कार्य. देशातील सर्व नेत्रतज्ज्ञ..सरकारी व खाजगी एखादे व्रत घेतल्याप्रमाणे डोळ्याच्या अनेक विकारांवर विविध आधुनिक तंत्रज्ञान व उपचारांचा उपयोग करून दृष्टीदानाचे काम करत आहेत. गेल्या वीस वर्षांमध्ये नेत्रचिकित्सेमध्ये अमूलाग्र बदल घडून आले. मोतीबिंदू शस्त्रक्रिया अधिक सुरक्षित व कमी वेळात पार पडू लागली. फेकोइमल्सिफिकेशन सहाय्याने बिन टाक्याची शस्त्रक्रिया केल्यानंतर रुग्ण लगेच कामावर रुजू होऊ लागले. नेत्रतज्ज्ञानी गरीबांसाठी ही उपचारपद्धती मोफत स्वरूपातही उपलब्ध केली. अनेक धर्मादाय अशा डोळ्यांच्या हॉस्पिटलमध्ये, सरकारी हॉस्पिटलमध्ये वा अनेक खाजगी रुग्णालयांतून मोफत वा अल्प शुल्कामध्ये अनेकाना दृष्टी प्राप्त होऊ लागली. सर्वात महत्वाचे म्हणजे या सुविधा केवळ शहरापुरत्या मर्यादित न राहता तालुका पातळीवरही पोहोचल्या. खेडोपाड्यात फिरून अनेक स्वयंसेवकानी अंध रुग्णांना रुग्णालयात पोहोचवून नेत्रतज्ज्ञांकडून त्यांच्या शस्त्रक्रिया करवून त्यांना दृष्टी मिळवून दिली. ही मोहीम देशाच्या प्रत्येक राज्यात घडली व आजही घडत आहे.

मोतीबिंदू, काचबिंदू, मधुमेहाने येणारे अंधत्व, कमी वजनाच्या व कमी दिवसांच्या बाळांमध्ये येणारे अंधत्व, अजीवनसत्त्वाची कमतरता, विद्यार्थ्यांमधील नेत्ररोग या आणि अशा अनेक गोष्टींसाठी जनजागृती, नेत्रशिविरे, व्याख्याने अशा मार्गांनी नेत्रतज्ज्ञांनी सेवा देऊन अंधत्वाचे प्रमाण कमी केले आहे. आय एम ए च्या माध्यमातून आपण अंधत्व निवारणाची चळवळ देशाच्या कानाकोपऱ्यात पोहोचवत आहोत.

नेत्रदान चळवळीतून 'मरावे परी नेत्ररूपी उरावे' हा संदेश समाजाच्या प्रत्येक थरात पोहोचवत आहोत व ते कार्य सतत चालू आहे. गेली अनेक वर्षे समाजामध्ये नेत्रदानाविषयी जनजागृती करत आहोत. यासाठी २५ ऑगस्ट ते ८ सप्टेंबर हा

पंधरवडा आपण राष्ट्रीय नेत्रदान पंधरवडा म्हणून दर वर्षी पाळतो व देशभर विविध मार्गांनी नेत्रदान करण्याचे आवाहन करतो.

यानिमित्ताने सर्व नेत्रतज्ज्ञांतर्फे व आय एम ए तर्फे सर्वांनी नेत्रदानाचा संकल्प करावा व अंधत्व निवारण मोहिमेत सहकार्य करावे. हा संदेश समाजाच्या कानाकोपऱ्यात पोहोचवावा ही विनंती.

So..... Let's Pledge to Donate Eyes

The National Eye Donation Fortnight is observed in India every year from 25th August to



8th September. It is a campaign which aims to create mass public awareness about the importance of eye donation and to motivate people to pledge their eyes for donation after death.

Blindness is a major cause of concern around the world today. According to WHO, after cataract and glaucoma, blindness is mostly caused by corneal impairments. Most of these impairments are curable, specially through eye donation. Donating one's eyes is possible only after death. Just like any other body organ, the cornea of the eye can also be donated after death which will render vision to the blind.

Due to lack of awareness, social or religious reserves, etc., eye donation is yet get its due importance in our country. Thus, to raise awareness among the masses on eye donation, the National Eye Donation Fortnight is observed.

Donated eyes are used to restore vision in people suffering from corneal blindness. Vision can be restored by a surgery called keratoplasty wherein the cornea is replaced. As of today, there is no other solution for corneal blindness than the replacement of cornea. There have been a lot of technical and technological advances in Corneal transplant surgeries and the success rate has increased many folds giving vision to the blind.

- Anyone can be a donor irrespective of age, sex, blood group or religion
- Anyone with cataract, long/short sightedness, operated eyes or common illnesses can donate eyes
- It is essential to remove cornea from the body within six hours of the person's death. Wet cotton swabs should be kept on closed eyes and fans in the room should be switched off to prevent eyes and corneas from drying.
- Donation of eyes by one person can give vision to two or more blind persons. In addition to cornea, sclera and other tissues are also used to restore vision in blind people
- Total procedures take 15-20 minutes. No scar or disfigurement is left in the face of the donor
- Eyes cannot be traded in any way. It is a punishable offence.
- Identity of both donor and receiver is kept anonymous
- All facilities for eye donation are provided free of cost at govt institutes and at NGOs
- Willing persons may get themselves registered at an eye bank. After their death the eye bank must be informed and their team will come over to extract the cornea
- One can fill up the pledge form of eye donation. These forms are available on the website of
- Eye bank association of India : www.ebai.org
- Poona Ophthalmological Society : www.poseye.org
- Maharashtra Ophthalmological Society : www.moseye.org
- All India Ophthalmological Society : www.aios.org
- Or with any Eye Bank

Even if a person has not signed up the Eye donation pledge form but has expressed his wish to donate eyes, his immediate kin can take the decision immediately and can call Eye Bank Team. Early donation and early transplantation give best vision to the blind.

Let's pledge today to donate our eyes after death and give vision to a blind!

मरावे परी नेत्ररूपी उरावे... दृष्टीदान सत्कार्य करावे...



'कैलासवासी मॉडर्न मेडिसीन'

डॉ. सुहास नेने

९८२२११५३३५

स्थळ : फिलाडेल्फिया किंवा तत्सम कोणतेही
अमेरिकेमधील शहर

वेळ : पहाटे तीन

काळ : इसवी सन २०१० ते २०१५

पोटात भयंकर दुखायला लागले आहे म्हणून एक तरुण तरुणी 'चोवीस तास अत्यावश्यक सेवा' असे लिहिलेल्या इस्पितळातील एका विशाल कक्षासमोर उभे होते. बाई साधारण तिशीतली, पुरुष होता पस्तिशीतला, चांगला धडधाकट होता अंगाने. त्यांना इमर्जन्सी रुममधील डॉक्टरांना भेटायचे होते. त्यांच्या अपेक्षेपेक्षा खूपच लवकर त्यांना रिसेप्शन वरून निरोप मिळाला की ते आत येऊ शकतात. डॉक्टरांच्या खोलीत ते प्रवेश करते झाले.

'नमस्कार सर, नमस्कार मॅडम, मी आपली काय मदत करू शकतो?' डॉक्टर

डॉक्टर तसे पोरसवदा वाटत होते पण त्यांचा चेहरा खूप थकल्यासारखा वाटत होता.

'डॉक्टर, मी पाच महिन्यांची गर्भवती आहे. माझ्या पोटात अचानक खूपच दुखायला लागले आहे. इकडे मी याच्या आजारी आईला भेटायला आले होते. काहीतरी करा हो, मला हे दुखणे अजिबात सहन होत नाही! 'तरुणी वेदनेने भयंकरच तळमळत होती.

डॉक्टर काही बोलले नाहीत पण त्यांच्या नजरेचा वेध बाईने घेतला आणि डॉक्टर काही बोलण्याच्या आतच ती म्हणाली, 'हा माझा मित्र. हा ह्याच गावात राहतो.ड्व

डॉक्टरांचे लक्ष त्यांच्यासमोरील स्क्रीनवरच होते. तिथली नजरही न हटवता त्यांनी विचारले, 'मॅडम मी म्हणतो, तुम्हाला काय वाटतं? कशामुळे एवढं दुखत असेल? काही अंदाज? 'आश्चर्यचकित होण्याची पाळी दोघांची होती.

'अहो, डॉक्टर तुम्ही आहात, आम्ही पोटात दुखते

आहे म्हणून इथे आलो आहोत, तर तुम्ही आम्हालाच विचारताय की काय झालंय? ही कोणची पद्धत झाली? 'तरुणाला राग अनावर झाला होता. खरंच होतं त्याचे, खूप दुखत होते म्हणून तो मैत्रिणीला डॉक्टरांकडे घाईघाईने घेऊन आला होता.

'वाईट वाटून घेऊ नका, पण इथे अशावेळी येणार्या साऱ्यांनी अख्खा 'गूगल' पालथा घातलेला असतो, स्वतः साठीचे रोगनिदान केलेलेच असते म्हणून फक्त विचारले.ते स्वतःच काय आजार झाला आहे ते सांगतात, आम्हाला या तपासण्या करायच्या आहेत म्हणतात आणि हे वेदनाशामक इंजेक्शन या अमुक ठिकाणी स्वस्तात ऑनलाईन उपलब्ध आहे, ते लिहून द्या असे पण सांगतात!!'तुम्हाला राग आला असला तरी मी खरंच दिलगिरी व्यक्त करतो.' - इति डॉक्टर.

तरुणाने कसाबसा राग गिळला आणि उत्तरला 'हे बघा डॉ, खरंच आई शपथ, तिचं पोट खूप दुखतंय हो, कृपा करून काहीतरी करा ना. 'दहा अंक मोजून झाल्यानंतर त्याचा राग आता बऱ्याच प्रयत्नांनंतर शमल्यासारखा वाटायला लागला होता.

अगदी निष्पापपणे डॉक्टरांनी विचारले, 'सांगा ना तुम्ही, मी काय करावं असं वाटतं तुम्हाला? स्पष्ट सांगा! अजिबात लाजून नका!!'

तरुणीला खरंतर खाऊ की गिळू असे झाले होते पण तरीही शांतपणाचा उसना आव आणत ती म्हणाली 'डॉक्टर, कृपा करून मला तपासा की कशामुळे दुखते आहे? आणि दुखण्याचे कारण कळले की कृपा करून त्याप्रमाणे मला औषध द्या. नंतर काही तपासण्या कराव्या लागणार असतील तर ते सांगा. पुढे काही करायला लागणार असले तर त्याबद्दलही पण सूचना सांगा.'

'मॅडम, रागावू नका, पण मी काय म्हणतो ते ऐका. अगदी आत्ता आत्ता दोन दिवसांपूर्वीच येथेच एक

तुमच्यासारख्याच मॅडम हाडांच्या डॉक्टरांकडे आल्या होत्या.त्यांच्या पाठीत खूप दुखत होते. डॉक्टरांनी त्यांना कुठे दुखते विचारले. त्यांनी 'येथे' म्हणून दाखवले. स्वाभाविकपणे डॉक्टरांनी त्यांच्या पाठीला हात लावून 'येथे का?' असे विचारले. झालं! विनयभंगाची तक्रार केली की हो त्यांनी! त्यामुळे दुर्दैवाने तुम्ही न्यायालयातून मला तुमची तपासणी करण्याची परवानगी देणारे कागदपत्र आणून दाखवत नाही तोपर्यंत मी खरोखर काहीही करू शकणार नाही. तपासणी तर नाहीच नाही!! कायद्याने माझे हात बांधलेले आहेत.' म्हणताना डॉक्टरांनी एप्रनच्या खिशात हात कधी घातले त्यांनाही कळले नाही.

'डॉक्टर, तुम्ही पोटाची सोनोग्राफी का करत नाही? कदाचित तुम्हाला त्यात काहीतरी सापडेल ना! त्याप्रमाणे तुम्ही उपाययोजना करू शकाल. 'तरुणाने एक उपाय सुचवून पाहिला. खरे तर त्याला याच्यापेक्षा वेगळे काही सुचत नव्हते.

'वा ! अतिसुंदर!! अतिशय सुरेख सल्ला दिला की तुम्ही मला! आणि कर्मधर्मसंयोगाने येथे अल्ट्रासाउंड मशीनदेखील आहे. सोनोग्राफी करणेही सहज शक्य आहे. पण गोची अशी आहे की मी जर स्कॅन केला तर मला अटकही होऊ शकते!. एवढंच नाही तर आमचे हे मशीनच नाही तर सार्या हॉस्पिटलला देखील सील लागेल. खोटे नाही सांगत मी. सध्याचे दिवस फार वाईट आहेत ! इकडची गोष्ट तिकडे कशी पटकन जाते ते कळतसुद्धा नाही. काय काय प्रकारचे स्पाय कॅमेरे आलेत म्हणून सांगू. माझी नोकरी गेली तर माझ्या उपजीविकेचे काय? सरकारी नोकरीच सध्या परवडते. खाजगी वैद्यकीय व्यवसाय करणे म्हणजे महाअवघड काम होऊन बसले आहे बघा! मलाही खूप वाईट वाटते पण मला वाटते की मी नाही काही करू शकणार!' - इति डॉक्टर.

तरुण तरुणीने एक दीर्घ श्वास घेतला. एकाचवेळी किती दिवसांनी ते दोघं एकाचवेळी श्वास घेत होते! दोघांच्या मनात असा विचार एकाचवेळी आला आणि ते

एकमेकांकडे बघत मनापासून हसले, अगदी अशा परिस्थितीतही!!

"डॉक्टर, हिच्या पोटात खूपच दुखते आहे. तुम्ही तिच्यासाठी काही औषधे तरी लिहून देऊ शकता का? आम्ही ती फार्मसीमधून घेऊ". तरुणाने बाजू लढवण्याचा प्रयत्न केला. त्याचे बोलणं पूर्ण व्हायच्या आतच डॉक्टरांनी रागाने खरं दिशी खुर्ची मागे ओढली आणि उठता उठता ते जवळजवळ पडणारच होते पण त्यांनी स्वतःला सावरले आणि किंचाळले, 'चांगल्या कंपनीची ब्रॅंडेड लिहू ? का सामान्य, सर्वसाधारण जेनेरिक चालतील तुम्हाला ?'

तरुणी दुखण्याने खूपच कावली होती, तिला अजिबात दुखणे सहन होत नव्हते, गळून पण गेली होती. तिला म्हणायचे होते' जेनेरिक का वाईट असतात का? पण एखाद्या विशिष्ट कंपनीचीच तुम्ही देणार असाल तर त्यामागे...' पण ती पुटपुटली, 'का? त्याचा इथे काय संबंध? काहीतरी पटकन लिहून तरी द्याना,प्लीज.'

'मॅडम,मी मेडिकल कौन्सिलच्या अंतर्गत नियमित नोंदणीकृत डॉक्टर आहे. त्यामुळे ब्रॅंडेड कंपनीची औषधे मी देऊ शकत नाही आणि या हॉस्पिटलमध्ये जेनेरिक औषधांचा पुरवठा करण्याची व्यवस्था कार्यरत नाही. परंतु मला खूप वाटते की तुम्हाला औषधांची गरज असू शकते! ते मी दिलेही पाहिजे. पण खरंच मी काहीच करू शकत नाही.'

बोलता बोलता डॉक्टरांनी शेजारच्या टेबलावरचे शिरस्त्राण डोक्यावर चढवले आणि म्हणाले, 'तुम्ही तुमच्या आवडीच्या, जवळपासच्या एखाद्या परदेशात का जात नाही? आपले सरकारी नोकरशहा किंवा लाडके राजकारणी जातात तसे! 'खरंतर डॉक्टरांना वाटले होतं की एखादा तडाखा डोक्यावर बसणारच तेव्हा डोक्यावर काहीतरी असलेले बरे, म्हणून तर त्यांनी घाईघाईने शिरस्त्राण चढवले होते! अंगात बुलेटप्रूफ जॅकेट त्यांनी आधीच घातलं होते म्हणा! बोलता बोलता अंतर ठेवूनच सावधपणे ते थोडेसे मागेही

सरकले होते!!

तरुणाने रागाची परिसीमा सोडायची नाही ठरवले होते. डोकं थंड ठेवून तो म्हणाला, 'डॉक्टर, तुम्ही हिला दाखल करून घ्या ना. दवाखान्याचे काय बील होईल, ते आम्ही भरतो. तुम्ही नका त्याची काळजी करू!!'

'हे बघा, दाखल करून घेणं हे काही फारसे अवघड काम नाही.' डॉक्टर उत्तरले. तरुणाच्या चेहऱ्यावर एका मोठ्या काळजीतून सुटल्याचे भाव उमटले. त्याच्या चेहऱ्यावर एक स्मितहास्य खुलणार तेवढ्यात डॉक्टर बोलले.

'पण मी दाखल करून घेणार नाही. कारण दूरदर्शनवरचे सूत्रसंचालक, वृत्तपत्र वाहिऱ्यांचे प्रतिनिधी, अपघातात मदत करण्याच्या ऐवजी व्हिडीओ काढून व्हायरल करणारे लोक, आम्हाला टीकेचे लक्ष्य करतील!! त्यांच्या सान्यांचे एकच म्हणणे असेल की, आम्ही काही कारण नसताना, रुग्णांना दाखल करून घेतो, कारण नसताना मोठमोठ्या तपासण्या करायला लावतो, पेशंटला व्हेटिलेटरवर टाकतो, अनावश्यक शस्त्रक्रिया करतो, आम्ही पेशंटना लुटतो, बिचारा पेशंट काही कारण नसताना लुबाडला जातो!!

तेव्हा जोपर्यंत तुम्ही न्यायालयातून आदेश घेऊन येत नाही की या रुग्णाला अॅडमिट करणे कसे आवश्यक आहे तोपर्यंत मी तुम्हाला अॅडमिट केले तर तो अदखलपात्र गुन्हा होईल! 'जरा जरी गडबड होण्याची शक्यता आहे असे वाटले तर वेळ आली तर पळता येईल का याचा अंदाज घेत घेत डॉक्टरांनी उत्तर दिले होते. अगदी पळायचीच वेळ आली तर रस्ताही बघून ठेवला होता त्यांनी!!

त्यांचेदेखील खरेच होते ना! गेल्या काही दिवसांत त्यांच्या समकालीन डॉक्टर मित्रांवर असेच अत्यावश्यक सेवा देणार्या जागी जीवघेणे हल्ले झाले होते आणि निरपराध डॉक्टरांना पुरेसे संरक्षण देण्याबाबत सरकार पूर्णपणे मूग गिळून होते. मारहाण झालेल्या डॉक्टरांचे सर्वसामान्य माणूस घाबरून जाईल इतके लागलेले, फोटो सर्वत्र फिरत होते, त्यांचे जबाब पसरत

होते, पण पुढे काहीच सरकत नव्हते. वैद्यकीय संघटनांनी काळ्या फिती लावून काम ठप्प ठेवण्याचा इशाराही दिला होता. काहीही न करण्याचा सरकारचा रोख अगदी स्पष्ट दिसत होता.

तरुणाने आता फक्त डोके आपटायचे बाकी राहिले होते. वैतागलेल्या त्याने विचारले, 'डॉक्टर कृपा करून सांगा, इथे या दवाखान्यात मग तुम्ही नक्की करता तरी काय? ही उपचार देण्याची कोणती पद्धत झाली?'

डॉक्टर म्हणाले, 'चिडू नका हो! मी अगदी खरं ते सांगतो! मी इथे संगणकात क्रमवार माहिती संग्रहित करतो, फोल्डर्स भरतो. आम्हाला NABH (एनएबीएच) ची मान्यता आहे. त्यामुळे इथे सर्वच काही अगदी नंबर वन असते, असणार, आणि असेल !! बाकी सर्व वार्ताहर, राजकारणी, गुगलचे चाहते, चंदेरी पडद्यावरील कलाकार, रंगमंचावरचे शिलेदार, अंमलदार आणि न्यायालयातले चोपदारच ठरवतात!!'

डॉक्टर बोलत असतानाच पाठीमागून मॉडर्न मेडिसीनची एक करुणा पूर्ण किंकाळी ऐकू आली आणि मग ओक्साबोकशी रडण्याचा आवाज, आणि दबलेले हुंदके!!

डॉक्टरांचे बोलणे संपेपर्यंत खरोखरच मॉडर्न मेडिसिन कधीच काळाआड गेले होते. त्याच्या हुंदक्यांनी देखील विसावा घेतला होता.!!!

ता.क.

देव करो आणि अशी परिस्थिती आपल्या देशात न येवो. हे शक्य होईल तुमच्या माझ्यासारख्या काहींना मनापासून पटले तर! किमान प्रयत्न तरी करून बघायला काय हरकत आहे? मग करणार ना!!! ●●

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Yoga

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Yoga has become extremely popular nowadays. However, there are a lot of misunderstandings and numerous misconceptions regarding the subject in the minds of common people. This article explains briefly the subject of Yoga.

Yoga is one of the six orthodox systems or 'shad-darshanas' of Indian Philosophy. The word Yoga is derived from Sanskrit root 'yuj' meaning to join, attach, bind or yoke. According to Indian thought, cosmic universal spirits or 'Paramatma' is all pervading and permeates in everything in the Universe. Jivatma (Individual spirit or consciousness) is a part of 'Paramatma' within us. Yoga is called so because it guides us to unite the individual spirit (Jivatma) with the cosmic spirit Paramatma. The individual who attains this gets Moksha or emancipation, and is called a Yogi. Persons leading this path are called sadhakas. Patanjali systematised this subject and presented it to humanity in crisp 185 Sutras or aphorisms (PatanjalaYoga Sutras). Bhagwad Gita is a major text of this subject. Scattered references to Yoga are mentioned in Vedas and Upanishads. Yoga is defined by Patanjali as 'Citta Vritti Nirodha', the cessation of thoughts and mental modifications (Vrittis). Bhagwad Gita describes yoga as, "yogahkarmasukaushalam" i.e., Yoga is skilfulness in action. Another definition in this text states, 'samatvam yogamucchyate' meaning equanimity of mind under all circumstances like victory or defeat, gain or loss, honour or dishonour.

Yoga actually is an extremely disciplined, rigorous, life style led by sages, saints & munis. Based on their experience, they have put this practical experiential science in front of the world, so that we ordinary humans can practice and benefit from it. Human life is full of miseries and sufferings. Yogic science explains the cause of these sufferings and the means of lessening them.

Yoga is constituted of eight integral, interwoven limbs, petals or angas, hence called 'Astanga Yoga'. These eight units are 1. Yama 2. Niyama 3. Asana 4. Pranayama 5. Pratyahara 6. Dharana 7. Dhyana 8. Samadhi

1. Yamas: are social and ethical disciplines, transcending creed, country, age and time. There are five of them, namely ahimsa (nonviolence), satya (truth), asteya (non-stealing), brahmacharya (continence) and aparigraha (non-covetousness or non-hoarding). These are the principles which when followed can bring order to the society & are antidotes to six enemies of the mind namely – kama (sexual desire), krodha (anger), lobha (greed), moha (infatuation), mada (pride) & matsara (jealousy).

2. Niyamas: are individual observances which include saucha (cleanliness), santosa (contentment), tapas (penance or austerity), swadhyaya (self-study) and ishwarpranidhana (surrender to individual chosen deity).

3. Asana: means seat or posture. According to upanishadas, asana means samadhi and samadhi is asana. There are 84 lakh asanas according to shiva samhita equalling the number of species on this planet. Such a multitude of asanas increase blood supply to all

cells giving cellular health. The cells, tissues, organs, systems and an entire individual develops holistic (wholistic) health. The aspects of health developed are more in-depth and more profound than those understood by medical science and given by WHO health definition. These health aspects include physical health, musculo-skeletal health, physiological health, systemic health (of all systems), mental health, emotional health & spiritual health.

These aspects were given for all persons worldwide by the legendary Yogi-Padmavibhushana BKS Iyengar by his teachings and innovative supportive tools called props. The so-called yoga mat is his discovery.

4. Pranayama: Prana is the life force, Ayama - means stretching, extending or expansion. The life force is regulated and expanded all over the body using the breath as a tool. Breath consists of puraka (inhalation), antarakumbhaka (retention after inhalation), rechaka (exhalation), bahyakumbhaka (pause after exhalation).

5. Pratyahara: By following this anga, the senses of perception are brought under absolute control and the mind does not hanker after external objects of pleasure, but turns inward in its journey towards the soul.

6. Dharana (concentration): Intense concentration or focus of attention on a spot or task is dharana.

7. Dhyana (meditation): When dharana (intense focus & concentration) is maintained for a length of time, it is called dhyana.

8. Samadhi (absorption): After a period of dhyana, the object of meditation and the subject of meditation lose their identity and appear as one. This is termed complete absorption or samadhi.

Yoga is a universal science. The young, aged, extremely aged, sick, debilitated or any individual can practice Yoga and derive benefits. However, only one in millions reaches the end stage of samadhi and becomes a yogi. Since it is a science of making of a man, yoga makes one a better person. If we doctors take to yogic practice, we can become better doctors. All the principles required for becoming a good doctor are mentioned in yogic science like, maitri (friendliness) & karuna (compassion) which are essential while dealing with the sick patients and their relatives. Persistently dealing with suffering patients, diseases and deaths is one of the factors nowadays to the so called 'burn out' in young doctors.

Practice of yoga would help the doctors face such condition and many other adversities they face in life as medical professionals. Thus, yoga would be a boon to medical professionals as it is to humanity.

One warning after this explanation, anything which has name yoga attached to it is not yoga. In fact, yoga name is abused to fool innocent and gullible people. I will boldly state that there are more quacks in yogic field than medical field.

