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T	Dr. Alka Kshirsagar
0	Hon. Jt. Secretary
R	Dr. Geetanjali Sharma
	Asst. Secretary & Jt. Treasurer
I	Dr. Kedar Patil
A	Chief Advisor - IMA Publication
L	Dr. Suhas Nene
	IMA Publication Directors
	Dr. Avinash Bhondwe
В	Dr. Padma Iyer
0	Dr. Sanjay Patil
	Committee Members
A	Dr. Jayant Navarange
R	Dr. Aarti Nimkar
D	Dr. Meenakshi Deshpande

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# Congratulations



**Dr Suresh Gokhale**, 83 years was felicitated as 'senior most player' by IMA National President Dr J A Jayalal and HSG Dr Jayesh Lele in national sports event at Nashik.



**Prof. Dr. Shrikant Kelkar** received SHUSHRUT SAMMAN (the highest Honour of Forum of Ophthalmology Professor of India (FOPI) for his life long sincere and dedicated extraordinary Teaching Career.



**Dr. Sunil Ingale** elected Unopposed as Vice President Maharashtra State Branch of India of Radiology and Imaging Association.



**Dr. Aditya Kelkar** received Honorary fellowship from American society of retina specialist(FASRS).



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# Editorial

**Dr. Padma lyer** Mob : 9373305154

Dear Friends & Colleagues,

Most of us were very optimistic and positive that by the end of this year 2021, that Covid 19 infection cases will go down in number significantly and will cease to be an Epidemic anymore, but continue to remain an endemic like most other Viral diseases. Out of the blue, again came the news that Omicron variant of the coronavirus, first identified in South Africa on 25th November 2021 and as per latest (9th December 2021) information from WHO: Omicron is reported in 57 countries, hospitalizations set to rise. Scientists presented evidence that the variant spreads twice as fast as the



delta variant. In general, it is too early to make a claim that Omicron has better or worse symptoms than delta. Although anecdotal evidence shows that confirmed cases of COVID-19 caused by Omicron have caused mild symptoms, most of those people have been younger, according to South Africa's health department. The World Health Organization (WHO) declared Omicron to be a COVID-19 variant of concern based on preliminary evidence that it spreads quickly. A variant of concern is one that may change how the pandemic behaves, so the WHO pays close attention to it. Most of the reported cases of COVID-19 associated with the Omicron variant have been mild so far. Scientists around the world reiterated that there is no evidence the Omicron variant is more deadly than previous strains till now, but experts say it will take weeks to understand how severe the variant can be.

#### Omicron (B.1.1.529): The latest Variant of Concern

The first known confirmed infection was from a specimen collected on 9th November 2021, according to the WHO. On 26th November 2021, WHO designated B.1.1.529 as a variant of concern and named it Omicron.

The new variant has around 50 mutations with more than 30 mutations on the spike protein and is believed to be the most mutated version of SARS-CoV-2. One of the three target genes is not detected (called S gene dropout or S gene target failure) in cases of infection with this variant. This test can therefore be used as marker for this variant, pending sequencing confirmation. On the ACE2 receptor the protein that helps to create an entry point for the Corona virus to infecthuman cells the new variant had 10 mutations. In comparison The Beta variant has three and Delta variant has two.

Symptoms so far include headache, myalgia, fatigue; no hypoxia.. There is a 3-fold increased risk of reinfection with Omicron variant compared to the currently dominant Delta variant and the Beta strain. Early evidence shows that it is more infectious than the delta variant.

I would like to present salient points discussed in the webinar held by IMA HQ on 6th December with experts Endocrinologist and Member of Corona Task Force Govt of Maharashtra, Dr Shashank Joshi and Pulmonologist Dr AgamVora

#### **Summary of Omicron**

Rapid transmissible, Super mutant, RO unknown, replacing Delta, Immune escape possible, Severity and Virulence unknown, early trends less severe.



#### Potential impact of mutations

Multiple RBD and NTD mutations associated with resistance to neutralizing antibodies including therapeutic monoclonal antibodies.

Cluster of mutations associated with more efficient cell entry leading to enhanced transmissibility.

nsp6 deletions associated with evasion of innate immunity (interferon antagonism) could also enhance transmissibility.

Mutations in Nucleocapsid associated with increased infectivity.

The new variant is 500 times more infectitious.

It will take atleastnext 4 to 6 weeks to really predict the cosequences and implications of the Omicron variant infection and the magnitude with which our healthcare establishments will be stetched.

#### **India Update**

Total tally of new Corona virus variant is 23 as on 8th Dec 2021. So far the cases are sporadic and travel related, no community spread till now. No need to panic, but need to take precautions like double masking, focus on mass vaccination of 2 doses of Covid 19 and recommend booster dose for healthcare workers who received vaccination more than 6 months back and to all citizens above 40 yrs.

Advice given to healthcare workers and medical professionals.

To avoid ACs in Consulting rooms and Clinics, open windows with cross ventilation, use of N 95 masks or double masking with other universal precautions of Covid 19 like social distancing and use of sanitizer. Travel history should be taken. Patients with mild symptoms and comorbidities should be tested for CBC & CRP. If RDW is more than 14.5 and CRP is raised they should be admitted, as their condition is likely to deteriorate. Once admitted they should be given lytic cocktail of monoclonal antibodies in the first week itself which is shown to have mortality benefit.

#### **Booster dose for Covid19**

Meanwhile, speaking in Lok Sabha, Union Health Minister Mansukh Mandaviya said any decision on administering a booster dose will be taken on a scientific basis and as per the expert committee's recommendations. The Indian SARS-COV-2 genome consortium, INSACOG said preliminary evidence suggests that Omicron may increase reinfection risk, which is expected from the structural changes due to the mutations, and the number of cases of this variant appears to be increasing in almost all provinces in South Africa, where it was first detected. "Genomic surveillance will be critical for early detection of the presence of this variant (Omicron) to enable necessary public health measures. Monitoring travel to and from known affected areas, and contact-tracing of COVID-19 cases with an epidemiological link to the affected areas has been implemented along with increased testing (with sequencing of confirmed cases)," the consortium said in its bulletin.

Top American infectious diseases specialist Anthony Fauci stressed that fully vaccinated adults should seek a booster when eligible to give themselves the best possible protection. The US and Britain have already cleared booster shots for some age groups. The Indian SARS-COV-2 genome consortium (INSACOG), which confirmed the presence of the Omicron variant, in an advisory made public on Thursday, has recommended that boosters (or third doses) "be considered" in those above 40. Decisions on vaccination are vetted by the



National Technical Advisory Group on Immunisation (NTAGI) and the INSACOG is a body of 10 labs with expertise in genome sequencing and isn't an advisory body. However, this is the first time that an official body in India has broached the subject of booster doses.

The antibody count in medical professionals as well as general public vaccinated more than 6 months back is on lower side. The need of third /booster dose for Covid19 is need of the hour and is the view of IMA.

The positive prediction by many is that replacement of deadly Delta variant with milder variant Omicron infection may mark the beginning of the end of Covid 19 Pandemic and happy days will be here again.

Let us hope and pray for the best, prepare for the worst and take whatever comes our way. Jai IMA!! Long live IMA



# Congratulations

Following members of IMA Pune got elected in the IMA Maharashtra State Council Meeting on 26/11/2021



- 1) Dr Mohan Joshi Joint secretary, IMAMS
- 2) Dr Aarti Nimkar Vice Chairman, AMS IMA MS
- 3) Dr Rajan Sancheti Secretary, CGP IMAMS
- 4) Dr B. L. Deshmukh Member Governing Council, CGP IMAMS
- 5) Dr Sanjay Patil Hon Treasurer, HBI IMA MS
- 6) Dr Avinash Bhondwe Election Commission, IMA MS (2021-24)

#### **CWC Regular**

- 1) Dr. Jayant Navarange
- 2) Dr. Dilip Sarda
- 3) Dr. Prakash Marathe
- 4) Dr. Sanjay Patil
- 5) Dr. Aarti Nimkar

#### **CWC** Alternative

- 1) Dr B. L. Deshmukh
- 2) Dr Arun Halbe
- Dr Alka Kshirsagar

#### Following Members were nominated:

- 1. Dr. Sham Damle Hon. Secretary IMAMS Social Security Scheme
- 2. Dr. Suhas Nene Hon. Treasurer IMAMS Social Security Scheme



IMA Pune Branch was awarded as the Best Big Branch of IMA Maharashtra State2020-2021



#### Awards IMA Maharashtra State

- 1. President Appreciation Award & IMAMS SSS Award Dr. Prakash Marathe
- 2. IMAMS SSS Appreciation Award Dr. Jayant Navarange



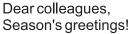
# WELCOME NEW MEMBERS

-0-		INEW MEMBERS	
Sr. No	Name .	Speciality	Contact
1	Dr. Lomesh Bhirud	Neurologist	9818272309
2	Dr. Paras Ravindra Doshi	Medicine	9028775027
	Dr. Rutuja Paras Doshi	Radiologist	9403870930
3	Dr. Prajakta Kulkarni	MBBS	9967809993
4	Dr. Motwani Yash Sanjay	MBBS	8999236724
5	Dr. Ashishkumar Shrivastava	Consultant	9371460636
6	Dr. Nachiket Ramesh Mahindrakar	Physician	9096342421
7	Dr. Paryani Mukesh	Ophthalmologist	9820465000
8	Dr. Sanghasheel Jumle	Radiologist	8446680011
	Dr. Nutan Jumle	Consultant	8600280432
9	Dr. Vinit Jain	Orthopaedic	9890176068
10	Dr. Pravishal Adling	Diabetology	9923460821
	Dr. Shubhangi Agawane	Physician	9922934207
11	Dr. Kalpesh Chhajed	Orthopaedic	9922407105
12	Dr. Yogesh Jain	Orthopaedic	9822847474
13	Dr. Vandana Ghude	Anaesthesiology	9673338038
14	Dr. Rahul Satpute	Orthopaedic	9011448556
	Dr. Ranjita Kadam	Ophthalmogist	8888198424
15	Dr. Milind Apsingkar	Anaesthesiology	9860408007
4.0	Dr. Swati Apsingkar	Microbiology	7775911461
16	Dr. Sudhir Sonawane	Medical Officer	9922903710
17	Dr. Aarti Sameer Desai	Ophthalmologist	9763652141
18	Dr. Anita Santosh Kirloskar	Anaesthesiology	9823081114
19	Dr. Joshi Shitalkumar	Orthopaedic	9637053333
20	Dr. Joshi Arati	Consultant	9762449317
20	Dr. Sameer Gosavi	Pathologist  Payabiotrist	9890788210
21	Dr. Harinakshi Gosavi	Psychiatrist MBBS	9373669534 8237777979
22	Dr. Sanjeev Gujarathi Dr. Shreyans Chinchawade	MBBS	8861849066
23	Dr. Nimish Gogawale	Consultant	9673258140
24	Dr. Surbhi Kaul	Physician	8390946737
25	Dr. Harip Amod	Orthopaedic	9130446668
26	Dr. More Rahul	Radiologist	9975455801
20	Dr. Smita Bhadekar	Pathologist	8624049510
27	Dr. Khivansara Anand	Orthopaedic	9561418392
	Dr. Durga Khivansara	Ophthalmology	9561551756
28	Dr. Smita Parakh	Consultant	9911660537
29	Dr. Banwat Neha	Anaesthesiology	9970024442
30	Dr. Raje Samidha Sudhir	Consultant	9881725409
31	Dr. Nilegaonkar Sujit	Consultant/assistant	9096076446
	Dr. Gouri Gulayani	Professor	8888610542
32	Dr. Tejaswini Prasad Walimbe	Consultant	8888831905
33	Dr. Vivek Ashok Warade	Emergency Medicine	9975021399
34	Dr. Chakor Sunil Vora	Oncologist	9423584609
35	Dr. Sumant Patil	Pediatrician	9158560323
	Dr. Sharmila Patil	Pediatrician	9158556107



### From the President's Desk

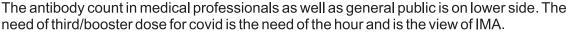
**Dr. B. L. Deshmukh** Mob: 99601 72759

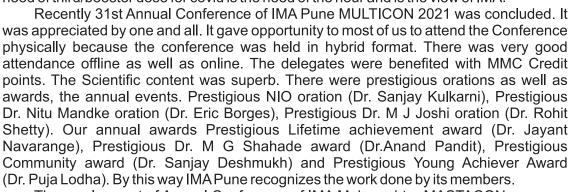


We were on the verge of coming out of Covid pandemic. Oh! But there is one more variant now. It's Omicron, originated from African continent. A super-fast spreading hence infectivity is more. Again, it has shaken the world. The only hope till date that it is less virulent. Hopefully it doesn't standstill the world.

The schools are reopening now. The students who were deprived of physical attendance in the schools, colleges and forced for online education will take sigh of relief. The international and domestic travels are in confused state because of the changing rules and guidelines. In addition to vaccination certificate RTPCR test reports are asked for

safety reasons. Where are we heading exactly, only the time will decide.





The yearly event of Annual Conference of IMA Maharashtra MASTACON was very well conducted. The most of the meetings with Installation Ceremony were in physical format. IMA Pune got Best Branch Award (2020-21) and recognized for our work which was done in outstanding manner. We have increased our life membership number. Now the number is 4946. It is because of efforts of our managing committee and all members. This year IMA Pune got maximum number of Office Bearers representation in IMA Maharashtra. Hope we shall do best at State level. National President Dr. J A Jayalal, HSG Dr. Jayesh Lele, all stalwarts of national and state appreciated the work done by IMA Pune at every level.

There is special concessional membership drive campaign going on. We all have been trying hard to increase our membership. There is so much scope because most of the modern medicine doctors are still not IMA members. IMA Pune has been working for betterment of its members and medical fraternity.

Jai IMA! Long live IMA!!

कोरोना हरेगा.. भारत जीतेगा...

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## Notice for Elections for the Managing Committee 2022 of IMA Pune

This year (2022-2023), there are 10 posts to be filled by election to the Managing Committee. The tenure of these 10 posts will be 3 years from 1.4.2022 to 31.3.2025

Nominations for 10 posts are invited from amongst IMA life members of Pune Branch who fulfill following criteria:

- 1) Candidate must be a Life Member of IMA through Pune branch for at least 3 completed calendar years, before the date of nomination i.e. 03-01-2022 (Monday)
- 2) He/She must apply on the prescribed printed form available with IMA office from Monday 03/01/2022 and his/her nomination must be duly proposed by one life member and seconded by another life member and consent of the candidate in writing of his willingness to serve actively and to fully co-operate with the Managing Committee of IMA Pune.
- 3) A member can propose and / or second more than 1 candidate.
- 4) Candidates contesting for the election will have to deposit (Refundable) Rs. 10,000/- at the time of filing the nomination. The cheque is to be drawn in favor of Indian Medical Association Pune. The deposit will not be refunded to the candidates securing less than 10% of total votes cast.

The following members of Managing Committee of IMA Pune branch are retiring on 31st March 2020 and they are eligible for re-election.

1.	Dr. Bhondwe Avinash	2.	Dr. Chaudhari Prashant
3.	Dr. Halbe Arun	4.	Dr. Ingale Sunil
5.	Dr. Jape Ashutosh	6.	Dr. Kulkarni Ananta
7.	Dr. Dudhbhate Anil	8.	Dr. Sancheti Rajan
9.	Dr. Sangamnerkar Sachin	10.	Dr. Varyani Raju

(Dr. B. L. Deshmukh being current President will be office bearer as an IPP 2022-2023 he need not contest)

#### Important Dates to Remember

Date of receiving nomination forms 03-01-2022 to 17-01-2022 till 5pm

Scrutiny of nomination forms 18-01-2022, Tuesday Last Date of withdrawal 29-01-2022 up to 5 pm

Elections, if needed (Sunday) 27-02-2022, 08.00 am to 01.00 pm at IMA Pune Counting of Votes will be done on same day from 01.30 pm onwards and results will be declared on the same day.

**Dr. Padma lyer** Election Officer -2022 IMA Pune.

Please refer to IMA Pune's Constitution for any doubts / clarifications. Decision of the Election Officer will be final.



#### IMA Pune MULTICON 2021

#### **Inauguration Ceremony**

Hon. Sec Dr. Sunil Ingale welcomed all and invited. Chief guest Dr. Shekhar Mande Director gen. CSIR New Delhi (joined on live) guest of Honour Dr. Shivkumar Utture, President MMC along with President Dr. B. L. Deshmukh, Dr. Sanjay Patil executive Trustee, Dr. Aarti Nimkar IPP, Dr. Meenakshi Deshpande President Elect, Dr. RajuVaryani Vice President, Dr. Rajan Sancheti Treasurer, Dr. Jayant Navarange, Dr. Avinash Bhutkar Chairman trust Board on the Dias At first Dr. Bhakti Datar Song Ganesh Vandana in her sweet voice. Floral welcome was done by Dr. B. L. Deshmukh. As per the custom IMA prayer by Dr. Sunil Ingale and flag salutation was performed by Dr. Alka Kshirsagar Prestigious lamp lighting for the Inauguration of Multicon 31st Annual Conference Dr. B. L. Deshmukh gave Presidential Speech, Dr. Shivkumar Utture, Guest of Honour gave very information Speech about MMC proceeding and 30 credit points Submission before 28th February 2022 for renewal of MMC registration to all doctors. Chief guest Dr. Shekhar Mande explained about research steps taken in Covid 19 virus. Four Awardees were given awards in the same ceremony in a respected manner. Dr. Alka Kshirsagar gave vote of thanks.

**IMA Pune Annual NIO Oration** The Oration was delivered by Dr. Sanjay B. Kulkarni, Renowned Urologist, and Pune. This was the third year of NIO oration conferred by Dr. Shreekant Kelkar, and Dr. Aditya Kelkar, Managing Director of NIO. Dr. B. L. Deshmukh, President. Chaired the session. Dr. Padma lyer introduced Dr. Sanjay Kulkarni who gave a talk on My Journey through Urethra. Dr. Sanjay Kulkarni was felicitated with Uparane, shreephal, Pagadi and Plaque by Dr. B. L. Deshmukh in the presence of Dr. Shreekant Kelkar, Dr. Avinash Bhutkar, Dr. Sanjay Patil.

**Dr. M. J. Joshi IMA Bhushan Puraskar ceremony and oration** Dr. Madhuri Lokapur conducted the session while Dr. Geetanjali Sharma introduced Dr. Rohit Shetty, Renowned Ophthalmologist from Narayan Netralaya Bangluru. Who gave oration on Accidenciatial Scientist. He was felicitated by Dr. B. L. Deshmukh, President with shawl, Pagadi, citation, memento and was given a cheque of Rs. 2500/- in presence of Dr. Madhuri Lokapur, Dr. Milind Joshi and Mr. Girish Joshi (Both joined Online) and Dr. Jayant Navarange and Dr. Sanjay Patil. It was 4th year of the oration.

**Dr. Nitu Mandke IMA Annual oration** It was 4th year of Dr. Nitu Mandke oration Dr. Alka Mandke had joined online. Dr. Navarange sir gave overview of this oration followed by a special flim on Dr. Nitu Mandke was shown. Renowned Cardiologist from Mumbai Dr. Eric Borges gave oration talk online on "Palliative Care in Cardiac Patients" Dr. B. L. Deshmukh President chaired the session Dr. Borges was felicitated by Dr. B. L. Deshmukh with shawl, shreephal, puneri Pagadi and memento and citation written by Dr. Mandar Paranjape.

#### IMA Pune Award

IMA Pune conferred four prestigious awards on to their stalwarts who have given their excellence in respective medical field

**Lifetime Achievement Award** was conferred to Dr Jayant Navarange Sir, who was a meritorious student throughout his career from BJGMC, with gold medals at MBBS, DCH, MD Paediatrics and LLB, has a roaring practice of 38 years, also as an Adoption consultant for BSSK, and Srivatsa. Along with his sincere dedicated work in IMA since 32 years as he was President of IMA Pune, IAP Pune & MS, his varied interests in Medico Legal, finance, taxation



laws, organizational experience has enabled him for an exemplary contribution to IMA as Chief Executive Trustee, Building management Secretary for many years. He is also an excellent guide for Medico Legal cases, having helped more than 2350 doctors. A marathoner, cyclist and blood donor more than 68 times have added more feathers in his cap. He, being a recipient of first IMA HQ Doctor of the Year Award, is an inspiration to all of us at IMA Pune.

Senior most Pediatrician Dr. Anand Pandit was introduced by Dr. Suhas Nene. He was conferred with Academic Excellence and Research Award in the name of Late Prof. **Dr. M. G. Shahade Memorial Award**. He was teacher of teachers. Many of researches in ICC have helped to reduce mortality in Indian Childhood Cirrhosis. Citation was read by Dr. Navarange.

**IMA Pune Community and Social Award** was given to renowned Oncologist Surgeon Dr. Sanjay Deshmukh from Indrayani hospital Alandi He has done extra ordinary outstanding work treating poor cancer patients.

**IMA Pune Young Achievers Award** was conferred to Dr. Pooja Lodha, Renowned Fetal medicine specialist and Researcher. She has achieved many awards from various organisations.

They were felicitated by Dr B L Deshmukh President with Puneri Pagadi, Uparane Shreephal, citation and memento.

#### Scientific sessions IMA Pune MULTICON 2021 20th November 2021 Alexander Fleming Hall

Dr. Abhijit Whatkar talked about Gall Bladder Disease in Post Covid Patient. Dr. Aniket Patil spoke on Knee Arthritis, Advances In Robotic surgery Dr. Amit Dravid gave excellent talk on Challenges encountered by the Physicians in Covid 19.Dr. Vaishali Shinde gave Overview of Radiotherapy Dr. Ravindra Mahajan narrated Recent Advances in Radiotherapy. Dr. Sameer Melinkeri nicely explained Thrombosis and Covid. Dr. Manish Sabnis spoke on Neurosurgeries helpful in movement disorders. Dr. Uday Phadke discussed Management of Diabetes in Covid Era. Dr. Dhanesh Kamerkar discussed about Management of Abdominal Aortic Aneurysms in 2021. Dr Rahul Sheth talked about Aortic Dissection/ Intramural Hematomas-Medical Management/ Endovascular Intervention. Dr. Dhanesh Kamerkar explained Necessity For Aortic Centre in City in 2021.

#### 21st November 2021 - Edward Jenner Hall

Dr. Kedar Patil talked about Weight loss and Hernia Surgery Update. Dr. Tushar Patil nicely discussed Antiangiogenic Therapy with Bevacizumab in Solid Tumours. Symposium On Covid And Kidney in Day to Day practice.

Dr Nilesh Shinde talked on Covid and Kidney in Today's Practice. Dr. Ajinkya Patil very well spoke on Covid and Chronic Kidney Diseases. Dr. Atul Sajgure discussed Covid with kidney Special Diseases. Dr. Ashish Arbat explained about Bone Death Syndrome in Hip Joint Postcovid and its surgical management. Dr. Vijay Mandora spoke on Fixed Dose Combination in Management of Hypertension. Dr. Meenakshi Deshpande talked on Immunization in Pregnancy



Thanks to all chairpersons Dr Prakash Marathe & Dr. Meenakshi Deshpande Dr Rajan Sancheti & Dr Nandkishor Mantri Dr Raju Varyani Dr.Padma Iyer & Dr. Aarti Nimkar Dr. Vaijayanti Patwardhan & Dr. Ravindra Chhajed Dr. Anil Dudhbhate Dr. Virendra Ostwal

#### 21st November 2021 - Alexander Fleming Hall

Dr. Pravin Patil nicely discussed Rheumatology Update. Dr. Ashwin Porwal with wonderful videos of surgery showed Role of Laser in Fistula, Pilonidal Sinus & Piles. He also spoke on Role of STARR surgery in Rectal Prolapse & Constipation. Dr. Paresh Gandhi told about how laser surgery helps in Varicose Veins. Dr. Amol Lunkad talked about A to Z of Infertility Management. Dr. Sachin Yadav explained importance of time in Stroke management especially in Covid era. Dr. Hasmukh Gujar gave a wonderful talk on and Hypertension updates. Dr. Gaurav spoke on Coronary Intervention - where do We stand todav.

Dr. Chakor Vora very well explained Introduction of Immunotherapy in advanced cancer patients. Dr. Reshma Puranik narrated about Future of Cancer Therapy.

#### IMA Multicon 2021 - Scientific Oral Paper and E Poster presentation competition

Date: 20th Nov 2021 Online Virtual Zoom platform Convener: Dr. Geetanjali Sharma, Dr. Virendra Ostwal

Total presenters: 14

Judges: 1. Dr. Surekha Shinde, HOD, Dept of Anaesthesia, BJ Govt Medical College and Sassoon Gen Hospital Pune

- 2. Dr. Jyoti Shetty, HOD, Dept of Psychiatry, Bharati Vidyapeeth Medical College, Dhankawadi. Pune
- 3. Dr. Pranjali Sharma, Faculty, Dept. Of Endocrinology, Park View Medical Centre, Colorado Winners

Best Paper: Dr. Shasidharan (AFMC)

Best Poster: Dr. Jaiman Sharma (D.Y.Patil Medical College)

Special Mention Consolation prize: Ms. Pranava Nande (UG student, B.J. Govt. Medical College, Pune). The organising Committee IMA Multicon 2021 congratulates all the participants and the winners. We thank all the judges for their valuable contribution and inputs.

# Preconference Work shops - 14 th November 2021 Ophthalmology Update

Conveners: Dr Sanjay Patil and Dr Anil Dudhbhate.

Dr. Jeevan Ladi spoke on Understanding Common Eye Diseases and Developments in Ocular Surgery. Dr. Shrutika Kankariya discussed Diabetes and Eye. Dr. Sangeeta Wagh talked about Cornea and Refractive Surgery. Dr. Anil Dudhbhate talked on Cataract. Dr. Geetanjali Sharma spoke on Covid and Eye

#### Cardiology Update for All Specialties

Conveners: Dr Sachin Lakade and Dr Sachin Yadav

Dr Akash Motgi nicely discussed Advances in heart failure diagnosis, Drugs, Devices.

Dr Krishna Kumar Dhoot thoroughly spoke on Heart and Fitness. Dr Sachin Lakade talked well on Sudden cardiac Death and sudden cardiac arrest - Can we predict and prevent. There was Panel Discussion with questions and answers on preventive aspects in cardiology by Dr. Sachin Lakade, Dr. Akash Motgi and Dr. Krishnakumar Dhoot.



### MULTICON 2021 - Speakers Take Home Message

#### Dr. Atul Sajgure

- 1. The outcomes of Covid 19 infection in kidney transplant recipients can be improved.
- 2. It is safe to continue their immunosuppressive medicines along with standard of care and antibiotic cover in Covid 19 infection.
- 3. Mycophenolate has immunosuppressive, antiviral and antifibrotic actions and should not be stopped.
- 4. Based on our retrospective data and prospective clinical trial experience, Mycophenolate in low dose can help in reducing the hospital stay, severity and mortality due to Covid 19 infection in general population.

#### Dr. Anil Dudhbhate

Now a days No need wait for catract maturation. With the help of new technology We have to operate catract when patient is unable to do day to day activity.

#### Dr. Chakor Vora

Appropriate combinations of chemo-Immuno-Targetted Therapies will bring best results for our cancer patients.

#### Dr. Hasmukh Gujar

ACE inhibitiors and ARBs should be continued to be used as an antihypertensive medicines even in Covid positive patients, pts recovered from covid and person's at risk of covid (can be given in all patients).

Current guidelines for hypertension should be followed even in Covid era.

#### Dr. Reshma Puranik

- Cancer is preventable If u follow healthy lifestyle and diet
- Cancer is curable If detected at early stage
- Cancer treatment can be treated at any stage.
- Be alert ,be vigilant, save lives

#### Dr Shrutika Junagade Kankariya

- 1. Diabetes affects each and every part of eyes besides retina.
- Need to identify high risk patients for probable diabetic retinopathy and motivate them to get complete eye check up including retinal examination
- Patient education and going that extra Mike to communicate effectively about diabetes may cause blindness is of utmost importance.

#### Dr. Vijay Mandora

Most of the Hypertension patients are not controlled with single antihypertensive medicine



and will require at 2 drugs.

Better to give it in single pill combination.

It will cause early control of Hypertension.

It will reduce morbidity and mortality.

Best combination are ace /arb with

Ca chanal blockers or diuretic

**Dr Kedar Patil,** Bariatric and Metabolic ,Hernia Surgeon ,Pune Indications for Bariatric Surgery

- For Bariatric surgery -BMI above 32.5 with comorbidities or BMI above 37.5 without comorbidities
- Surgery is now Covered under Insurance, PMC Scheme, CGHS Scheme and Finance option available for poor patients.
- Ithrnia Surgery -Loss of domain hernias require CT Scan .New procedures like TAR is required when there is Tension while closur eor Ventral hernias large than 8 cms o

#### Dr. Meenakshi Deshpande

FOGSI recommends immunization against tetanus, diphteria, pertussis and influenza during pregnancy, preferably between 27 and 36 weeks' gestation, to protect baby from whooping cough. Maternal Tdap [ tetanus + diphtheria+ acellular pertusis] contains these antigens in reduced dosages than in paediatric vaccines. Two doses of tetanus toxoid injection at least 28 days apart are to be given to all pregnant mothers commencing from second trimester. If the subsequent pregnancy occurs within 5 years only one booster is given. (T-dap)

IAP RECOMMENDATION: One dose of Tdap vaccine to pregnant mothers during each pregnancy (preferred during 27 through 36 weeks gestation) regardless of number of years from prior Td or Tdap vaccination.

#### Dr. Gaurav Ganeshwala

Coronary Interventions-Where do we stand today?

Coronary angioplasty (PTCA) has been the game changer in the management of Coronary Artery Disease. Some of the noteworthy changes which have taken place in the PTCA techniques are as follows:

- Improved designs and technical betterment of drug eluting stents
- Availability of advanced PTCA wires and balloon technologies
- Ability to treat calcified CAD with Rota ablation, Cutting balloons, scoring balloons and IVL balloons
- Optimization of PTCA results with imaging technologies like IVUS, OCT, Cardiac CT
- Highly efficacious Antiplatelet and LDL lowering therapies
- · Better learning curve of cardiologists and support staff
- Hybrid approach in selected cases



#### Dr. Pravin Patil, Rheumatologist

Given the importance of early recognition, frontline doctors have a crucial role to play in the early identification of RA symptoms and quick referral to the rheumatologist.

 Prompt DMARD therapy is central to the prevention of irreversible joint damage. With advances in treatment, it is possible to stop disease progression and avoid use of steroids/NSAIDs.

#### Covid and Eye

#### Dr. Geetanjali Sharma

- Conunctivitis is the most common ophthalmic presentation of Covid. Topical Steroids should be used cautiously
- Vascular occlusions are seen more
- Judicious use of steroids, good oral hygiene and saline wash of nostrils are essential to prevent complications of Mucormycosis. Early detection is the key factor to save vision and eye.
- Control of Diabetes Mellitus and Blood sugar levels are important to prevent Mucormycosis

#### Dr. Shefali Gokhale

Radionuclide Therapies

#### TAKE HOME MESSAGE:

- Targeted therapies with minimal side effects
- Radioiodine therapy for hyperthyroidism
- Radiation synovectomy
- Radioiodine therapy for Thyroid Cancer
- PRRT for midgut NET
- Lutetium PSMA therapy in Prostate Cancer (mCRPCa)

#### Incremental Role of Nuclear Scans in day to day practice

- Think Functional Imaging, Think Nuclear Scans
- GIT :Gastric Emptying scan,GE Reflux study, RBC scans for GI Bleed and hemangiomas, Liver scan
- · Hepatobiliary scans for bile leak and cholecystitis
- Thyroid scans for hyperthyroidism
- Myocardial Perfusion Imaging for reversible ischemia and risk stratification
- Bone scans for stress fractures, osteoid osteoma, avascular necrosis and skeletal metastasis

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# Indian Medical Association Pune Branch



# "Financial Diary 2022-23"



# Theme : Managing Vascular Diseases : Strategies in this Era.

<b>Highlights:</b> $\square$ important prione r	numbers   Privileges for livia members
Members birthdays	Articles on "Vascular Diseases" □

Dear Sir / Madam.

Greetings from the team of IMA Pune Diary committee!

We are delighted to invite you to join IMA Pune Financial Diary Project 2022-23. IMA Pune Branch is one of the most active and largest branches of IMA India, with the glorious and respectable standing of 94 years, with a strength of 5000 plus members. For the last 34 years, we are conducting the prestigious project of Financial Diary for our members.

We bring out the Financial Diary every year from April to March (12 months) with a theme, enriched with latest knowledge and useful tips that serves as a ready reckoner on the desks of IMA members.

The advertisements in this diary will help you to reach a large group of well qualified and knowledgeable Doctors and Specialists & Superspecialists in various branches of medicine.

The Diary will be circulated to Presidents and Secretaries of all 11 IMA Branches in Pune district and 220 branches in Maharashtra.

The diary is entirely supported by advertisements and the funds collected are utilized to fulfill the aims and objects of IMA. This year's theme *Managing Vascular Diseases: Strategies in this Era*.

The diary is also a source of saving important phone nos., details of authorities involved in giving permissions for hospitals, privileges of being IMA member and special birthday page for members.

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#### **SCANMYEYE**

**Dr Rajeev Raut** 7744938889

Pune ophthalmologist makes app for remote diagnosis of cataract and other eye disorders **Introduction:** 

There are 12 million blind people in India out of which, 80% are blind due to cataract, as per an epidemiologic study. Diagnosis of cataract requires a through eye examination with a slit lamp and many times with dilatation of the pupil. Patients from remote locations may find it difficult to reach an ophthalmologist, or it may be difficult for an elderly patient to reach an ophthalmologist for frequent follow ups. Patients may be reluctant to visit crowded clinic during pandemic times.

**Working of the app**: Scanmyeye is an app designed for remote diagnosis of cataract, with the use of a mobile smartphone. It does not replace the doctor, but it is intended to be used as a screening tool for home screening, so that the patient may see a doctor on time. It is the first such app available on google store. It uses machine learning and artificial intelligence to diagnose a cataract by mobile phone, and the app can be used at home by anyone.

The app requires either the patient himself or a family member to stand in front of the patient and take a four second video of the eye. How to take the video is described well in the app itself. The video is then sent to a server.

The server first checks if the video is good enough to analyse it. Then the video is analysed frame by frame and in a few milliseconds, the patient is informed about the result. The result is a statement such as you have a cataract, or a statement such as you may have a cataract so you need to see a doctor, or, you have no cataract. The app has other features such as intelligent history linked to a vast database, a module of number reduction surgery, and eye tests for diabetic retino [athy, optic nerve disorders, retinal defects etc.

#### Architecture of the algorithm:

The algorithms which are used to analyse the images are based on deep machine learning.

The building of the algorithm starts with obtaining images of thousands of eyes having cataracts, and not having cataracts, after obtaining informed consent from the subjects. The recognition of pupil outline and noise removal from the images is then done by manually marking these image outlines one by one. Once the images are ready to be fed into the deep training system, they are passed into the Resnet-50 neural network architecture, using TensorflowKeras API, in Python, initialized with random weights. The machine was fed thousands of videos of normal as well as cataractous eyes and the machine was forced to learn, to distinguish between a normal eye and an eye with a cataract. Various software teams from Germany as well as from India participated in construction of the algorithm.

**Validation study:** To validate the output, approval of ethics of committee was obtained. 182 consecutive patients were screened with the app before they were examined by an ophthalmologist in a well equipped clinic. When the ophthalmologist suspected a cataract, the patient was dilated, and the findings were recorded in patient's computer file.

The results from the application were compared with the results entered by the ophthalmologist. To measure the outcome, Precision, Recall and F1-score, positive



predictive value and negative predictive value were used as measures of accuracy.

Sensitivity for app based screening for cataract was 66%, specificity was 97%. Total false positives were 4, giving a positive predictive value of 71%, and total false negatives were 5, giving a negative predictive value of 96%.

**Conclusion:** The app under evaluation had an acceptable sensitivity and low false positive outcomes.

#### Limitations of the app:

The app is unable to exclude patients from cataract analysis, and its results may be confounded by the presence of occluding entities like a pterygium, corneal scars etc. In our study we masked these patients in the statistical analysis. Results in such cases are unpredictable.

Of the total number of patients diagnosed as having a cataract or cataractous changes, 5 or 3% were not diagnosed by the app. Reasons for the same may be varied, including the failure to detect varieties of cataracts like posterior-polar cataract which is not visible to the naked eye, even on torchlight examination. Early cataractous changes may be similar to the haze generated as a result of the flash used to illuminate the eye, and hence may be missed. Patients with very small pupils or constricted pupils, do not offer a sufficiently large area for analysis, and such cases may be missed, as the cataractous changes may not always be visible in the pupil diameter that is seen on torchlight.

#### Discussion: Administration of App Based Screening:

Lay-people or those without any medical training were used to administer the test. Despite the same, we found a low number of app based rejections. Most of the rejections were a result of the user being unable to hold the device steady or instruct the subject to look at the camera. Use of artificial intelligence as a self screening test at home may be a useful tool. Further studies with a larger sample pool may be used to improve the algorithm.

••

### **OBITUARY**

# Dr P B Joshi, senior Dermatologist and former HOD of Sasoon Hospital passed away. May his soul rest in peace

15 Bedded Registered Nursing Home C Laminator, Air flow O.T & Latest Equipments. Near Dandekar Pool off Sinhgad Road available on long lease. Kindly whatsapp 9422321739



### **डॉक्टर रखमाबाई रा**ऊत

२२ नोव्हेंबर २०१७ चे गुगल इडिंयाचे डुडल होते गळ्यात स्टेथोस्कॉप अडकवलेल्या एका महिला डॉक्टरचे. तिच्या मागे दिसत होता एक हॉस्पिटल वॉर्ड. खाली कॅप्शन होते पहिली practising भारतीय लेडी



डॉक्टर...रखमाबाई राऊत!!! वाचून नवल वाटले कारण पहिली महिला डॉक्टर म्हणून आपण डॉक्टर आनंदीबाई जोशी हेच नाव नेहमी ऐकले आहे. पुढे वाचत गेले तेव्हा ध्यानात आले की पदवी प्राप्त करणारी पहिली महिला डॉक्टर आनंदीबाई जोशीच होती पण त्यानंतर लगेच त्यांचे दुदैवीं निधन झाले त्यामुळे त्यांची विद्या समाजोपयोगी ठरू शकले नाही. म्हणूनच पहिली Practising भारतीय लेडी डॉक्टर हा बहुमान पटकावला रखमाबाई राऊत यांनीच.

९० वषाचें दीर्घ आयुष्य लाभलेल्या या कतृर्त्ववान स्त्रीची आपल्याला फारशी माहितीच नसावी याचा खेद वाटला. जसजशी शोध घेत गेले तशी या असामान्य कामिगरी करणाऱ्या स्त्रीची कहाणी उलगडत गेली.

आनंदीबाई, रखमाबाई आणि तिकडे बंगालची कादिंबनी या लेडी डॉक्टर समकालीनच

२२ नोव्हेंबर १८६४ ला जयंती आणि जनार्दन सावे यांच्या पोटी जन्माला आलेल्या रखमाचे पितृछत्र हरपले तेव्हा ती फक्त दोन वर्षाचा होती. विधवा महिलासाठी अत्यंत प्रतिकूल असणारा तो काळ. परंतु जयतीचे वडील म्हणजे रखमाच्या आजोबांनी नुसता भक्कम आधारच दिला नाही तर तिचा पुनर्विवाह सुद्धा केला. डॉक्टर सखाराम राऊत हे कतर्बगार हरहन्नरी व्यक्तिमत्व होते. वैद्यकीय पदवीधर तर ते होतेच शिवाय वनस्पती शास्त्रही जाणत होते. त्यांनी रखमाचे उत्तम पालनपोषण केलेच पण तिला शाळेतही घातले. रखमा अभ्यासात हशार होती. मन लावून शिके बालविवाहाची परंपरा मोडणे जयतीबाईना मात्र जमले नाही. दादाजी नावाच्या कुटुबातीलच एका मुलाशी रखमाचे लग्न लावून दिले. आता रखमा आणि दादाजी दोघेही शिकू लागले पण दादाजीचे मन अभ्यासात कधी रमलेच नाही. वाईट संगतसुद्धा त्याने जोडली होती. रखमाला यातील काहीच पसंत नव्हते. रखमा वयात

Dr Pradnya Rotithor

आल्यावर दादाजी आता तिच्या पाठवणीचा आग्रह धरू लागला. नांदायला जायला रखमाने साफ नकार दिला. इतकंच नाही तर हे लग्नच आपल्याला मान्य नाही असे ठामपणे सागिंतले. रखमाचा हा निर्णय पचनी न पडलेल्या

दादाजीने मग चक्क कोटार्त अर्ज केला की पत्नी नांदत नाही !!! एका अजब खटल्याला सुरुवात झाली, अनोखा अशासाठी की आजवर कोणत्याही हिंदू विवाहित स्त्रीने सासरी जायला नकार दिलाच नव्हता आणि तो ही हे लग्नच पसंत नाही या कारणास्तव. इंग्लिश न्यायमूतीर्नी रखमाच्या बाजूने निकाल दिला. निराश झालेल्या दादाजीला ऑथॉडॉक्स समाजाने फूस लावली. दादाजीने या निकालाविरुद्ध अपील केले. आता रखमाची कसोटी होती. दरम्यान पहाडासम आधार देणारे डॉक्टर सखाराम मृत्यू पावले होते. तरीही न डगमगता रखमाबाईने निवेदन दिले की विवाहाच्या वेळी अल्पवयीन मुलीला पतीची पारख करण्याइतकी समजच नसते. सबब हा पती तिच्यावर लादणे हे अन्यायकारक आहे.

या लोकविलक्षण खटल्याला तेव्हा अमाप प्रसिद्धी मिळाली. हिंदू लेडी या टोपण नावाने रखमाबाईनी टाईम्स ऑफ इंडिया मध्ये दोन लेख लिहून विवाहाचे न्यूनतम वय वाढवण्याची मागणी केली.

Infant marriage and enforced widowhood ... हे पत्र खटल्याच्या पहिल्या दिवशीच प्रसिद्ध झाले.

याही पुढे जाऊन तिने चक्क थेट इंग्लडच्या राणीलाच पत्र धाडले. या पत्रात भारतीय स्त्रीचे परावलंबी जिणे आणि अन्यायकारक रीतिरीवाज याबद्दल खंत व्यक्त केली होती तसेच हे सर्व अर्ध्या जगावर इंग्लंडच्या राणीचे म्हणजे एका स्त्रीचे अधिपत्य असताना!!! असे म्हणतात की राणीने ती पत्रे वाचली होती.

इकडे मुंबईत मात्र नव्या न्यायमूर्तींनी खटल्याचा निकाल दादाजीच्या बाजूने देताना सासरी न गेल्यास सहा महिन्याच्या कारावासाची शिक्षा रखमाला ठोठावली होती. मात्र कोर्टाबाहेर तडजोड करून दादाजीने खटलाच मागे घेतला आणि २००० रुपये इतकी भलीमोठी रक्कम घेऊन



रखमा वरील हक्क सोडून दिला.

१८८७ साली २००० रुपये ही भली मोट्ठी रक्कम असणार पण त्याबदल्यात रखमाबाईना मिळणारे स्वातंत्र्य केक अधिक मौल्यवान होते. आता लग्नाच्या बेडीतून मुक्त झालेल्या रखमाने शिक्षण सुरू केले. समाजातील काही लोकांनी रखमाबाईच्या खटल्याच्या वेळी तिचे कौतुक तर केलेच पण नंतर तिच्या उच्च शिक्षणासाठी आर्थिक मदत म्हणून रखमाबाई डिफेन्स किमटी या नावाने निधी सुद्धा गोळा केला.

रखमाबाईचा खटला ,त्या निमित्ताने उभी राहिलेली समाजसुधारक मंडळींची खटपट, इंग्रजी अंमलाचा रेटा या सगळ्याचा एकत्रित परिपाक म्हणजे १८९१ साली पास झालेला Age of consent act of 1891...ज्याद्वारे विवाहाच्या वेळची पूर्वी न्यूनतम १० असलेली वयाची मर्यादा म्लीसाठी १३ केली गेली !!!

रखमाबाईनी मेडिकल कॉलेजमध्ये प्रवेश मिळवण्यासाठी आवश्यक असलेल्या सर्व चाचण्या पूर्ण केल्या. मुंबईला वैद्यकीय शिक्षणाची सुविधा खरंतर उपलब्ध होती. तरीही नुकत्याच झालेल्या काडीमोड खटल्यामुळे तूर्तास रखमा मुंबई पासून लांबच राहिलेली बरी असे कुटुंबाने ठरवले. त्यानुसार लंडन येथील मेडिकल कॉलेजमधे प्रवेश मिळवून रखमा इंग्लंडला बोटीने रवाना झाली. आनंदीप्रमाणेच या साहसी सागर सफरीवर रखमासुद्धा एकटीच होती. अथार्त आनंदीबाईचे आर्थिक अडचणींनी जे हाल झाले ते मात्र रखमाबाईना सोसावे लागले नाहीत. लंडनमध्ये राहायची सुद्धा उत्तम सोय झाली होती. अपेक्षेनुसार रखमाबाईनी कोर्स पूर्ण करून लंडन मेडिकल कॉलेज मध्ये पदवी प्राप्त केली. इंग्लंडमधील वास्तव्यात तेथील स्त्रियांना असणारे स्वातंत्र्य आणि एकूणच तुलनात्मक दृष्ट्या सक्षम स्त्रीवर्ग पाहन हिंदुस्तानी स्त्री विषयी त्यांची खंत अजूनच वाढली.

१८९५ मधे डिग्री मिळवून रखमाबाई भारतात परतल्या. काही काळ मुंबईतील कामा हॉस्पिटल मध्ये काम केल्यावर सुरत येथील हॉस्पिटलमध्ये काम करायचे ठरवले. परंतु सुरतेच्या स्थानिक जनतेने त्यांना आधी स्वीकारले नाही. एकूणच आधुनिक allopathic उपचारांवर ना त्यांचा विश्वास होता ना रुग्णालयात admit होणे मंजूर होते. असे म्हणतात की सुरत हॉस्पिटलच्या आवारात एका शेळीचे सुखरूप बाळंतपण केल्यानंतर लोक हॉस्पिटलमध्ये येऊन उपचार घेऊ लागले. तोवर होम

visit करूनच वैद्यकीय सेवा पुरवणाऱ्या रखमाबाईनी आपल्या कौशल्याने जनतेचा विश्वास मिळवला होता.

१९१८ साली निवृत्त होईपर्यंत सुरतच्या याच हॉस्पिटलमध्ये त्यांनी रुग्णसेवा केली. हॉस्पिटलमध्ये वेळोवेळी आधुनिक सुविधा आणल्या. अनेक विधवा महिलांसाठी निर्सींगचे प्रशिक्षण देऊन स्वतःच्या पायावर उभे केले. एकंदरच स्त्रियांनी आर्थिकदृष्ट्या स्वावलंबी असावे,त्यासाठी शिकावे, वकुबी नुसार नोकरी व्यवसाय करून अर्थार्जन करावे असे विचार त्या सतत सांगत असत. सुरत हॉस्पिटलमधून निवृत्त झाल्यावर पुढची १२ वर्षेत्या राजकोट रुग्णालयात काम करत होत्या. राजकोट येथे रखमाबाईनी रेड क्रॉस सोसायटीची स्थापना केली.

१९२९ मधे तरुण विधवा स्त्रियांना मिळणाऱ्या दुय्यम दर्जा बद्दल निषेध व्यक्त करणारा Purdah: the need for its abolition या नावाने एक परखंड लेख लिहला होता. १९३० साली जवळपास ३५ वषाचीं दीर्घ कारकीर्द यशस्वी करून त्या मुंबईला परतल्या. फ्रेंच ब्रीज जवळचे त्यांचे निवासस्थान आजही शाबूत आहे. रखमाबाईनी परत संसार थाटलाच नाही. तसेच गूगलने त्यांचा नामोल्लेख डॉक्टर रखमाबाई राऊत असा केला असला तरी आपल्या सावत्र पित्याचे आडनाव त्यांनी स्वीकारल्याचा कोणताही पुरावा उपलब्ध नाही. कोणतेच आडनाव न लावता त्या स्वतः ची सही कायमच फक्त रखमाबाई अशीच करीत असत.

दादाजी बरोबरचा विवाह तसा औटघटकेचाच शिवाय अगदी भांडून काडीमोड घेतलेला. तरीही १९०४ मधे दादाजी मृत्यू पावल्यानंतर रखमाबाईनी कायमच फक्त पांढरी वस्त्रेच परिधान केली!!!

२०१७ मधे डॉक्टर रखमाबाई राऊत यांचा जीवनपट उलगडून दाखवणारा एक सिनेमाही प्रदर्शित झाला होता ज्यात तिनष्ठा चॅटर्जीने रखमाबाईची भूमिका साकारली होती. जवळपास ९० वर्षाचें दीर्घ आयु लाभलेल्या रखमाबाईचे २५ सप्टेंबर १९५५ रोजी निधन झाले. खेदाने नमूद केले पाहिजे की आनंदीबाई जोशी जितक्या आपल्याला माहिती आहेत तितक्या प्रमाणात इतकी दीर्घकाळ वैद्यकी करून सुद्धा आणि मुंबईच्या असूनही रखमाबाई महाराष्ट्रातही सरसकट परिचयाच्या नाहीत. प्रवाहा विरूध्द पोहणाऱ्या या स्त्रीला मानाचा त्रिवार मूजरा!!