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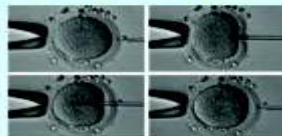
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AHMEDABAD MEDICAL ASSOCIATION

(Branch of Indian Medical Association)

ESTD : 1902

AHMEDABAD MEDICO NEWS

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DR. DILIP B. GADHAVI
President - AMA



DR. GARGI M. PATEL
Hon. Secretary - AMA

Imm. Past President - **DR. KIRITKUMAR C. GADHAVI**

VOL. 16

OCTOBER-2021

ISSUE-6

HIGHLIGHTS Programme

02-11-2021	धनवंतरी पूजन
14-11-2021	Scientific Programme
14-11-2021	Kids Carnival - 2021
28-11-2021	Diwali Get together

Article

The dietary & holistic approaches to blood glucose management By Dr. Banshi Saboo
Insulin Glargine in Type 2 Diabetes By Dr. Banshi Saboo

120th Installation Ceremony of AMA



**Wish You Happy Diwali
and
a Prosperous New Year**

'SECRET TO SUCCESS IS THE RESULT OF UNITY, HARD WORK AND PERSEVERANCE'

Message From President's Desk



PRESIDENT'S MESSAGE

Respected seniors, my colleagues & dear members,

Today I feel privileged for being the President of one of the oldest & most vital Medical Association - AMA.

As we know every privilege come with responsibility & I am thankful to all of you for identifying me for this responsibility. The efforts & hard working of my preceding presidents & office bearers brought this association at a new pinnacle ever.

"Growth is never by mere chance; it is the result of forces working together"

I am fortunate to have dynamic Dr. Gargiben Patel with me as secretary; Dr. Urvesh Shah & Dr. Maulik Sheth as Vice Presidents and certainly a team of experienced and enthusiastic office bearers & very high profile committee members too.

I congratulate our outgoing president Dr. Kirit C. Gadhave & team AMA 2020-21 for their great contribution during hardship of Covid - 19 pandemic.

We are grateful to the Chief guest Dr. Abhijat Sheth and Guest of honor Dr. Malay Mahadevia for gracing the installation ceremony. We began our tenure with the blessings from the past president of IMA, Dr. Jitendrabhai Patel & installation officer Dr. Mehul Shah. The Master of ceremony, Dr. Darshana Thakkar very nicely conducted the entire

ceremony. Presence & Blessings from "જગદ્ગુરુ શ્રી વલ્લભાચાર્ય વંશાવતંસ વૈષ્ણવાચાર્ય ગોસ્વામી શ્રી મધુસૂદનલાલજી (શ્રી તિલક બાવાશ્રી), શ્રી ગોપીનાથજી દીપક પીઠ - અસારવા બેઠક" gave divine touch to entire event.

Continuous medical education programme will definitely be the prime importance. We will arrange many scientific programmes catering every important field of medical sciences including robotics & artificial intelligence in & of course all Scientific events will be more fascinating.

The various cultural programmes, for entertainment of our members & their family members, will be continue as usual. Ongoing public awareness programmes, social & welfare activities make our Association very distinguished. I request all our members to actively participate in all the such programmes to make them successful.

"If you want to walk fast, walk alone, but If you want to walk far, walk together."

- Ratan Tata

There could be lots of upcoming challenges for our fraternity. So, I wish, in any of such challenges, certainly we will walk together, to go far & to make our path hassle free. Unity is our strength. Few of events we observed in previous years had proved above quote.

Dear friends, the past few months – the era of Covid- 19 pandemic, remained tough for many of us; Let's wish this Diwali will illuminate our lives with new hope, prosperity and happiness. Wishing you a prosperous New year too.....

Jay AMA, Jay IMA

Dr. Dilip B. Gadhave

President

Ahmedabad Medical Association

Message From Hon. Secretary's Desk



SECRETARY'S MESSAGE

Respected seniors & dear members,

At the outset, I am extremely thankful to all my seniors and stalwarts of AMA for selecting me for the post of honorary secretary of very prestigious, the biggest and the oldest association of IMA.

“If you want something said, ask a man; if you want something done, ask a woman.”

That may be the motive behind choosing me as the first ever woman secretary of Ahmedabad Medical Association; I am very much grateful to all who believed in me & conferred this responsibility.

“The strength of the team is each individual member. The strength of each member is the team.”

- Phil Jackson

It will be my great pleasure to work with quite positive & determined President Dr. Dilip Gadhavi & the energetic and assertive team members of AMA 2021-22. I am very much optimistic that, with active participation of each of our team members, we will be able to come up with more exciting & promising programmes this year.

Because the great things are never done by one

person; those are always done by a team. So, I hope that with everybody's coopearations, we will be able to achieve the great success, make the AMA stronger & will bring the AMA at a new heights.

We know the medical profession is the most revered profession of society; still, certain challenges to our fraternity are emerging; but, if each & every member of AMA / IMA will stand together, we will definitely overcome those issues.

“Individual commitment to a group effort—that is what makes a team work, a society work, an association work”

- Vince Lombardi

We have faced too much struggle in the last one & half years & many of “?????” programmes could not be organized due to Pandemic related issues. But I hope, during this year, we will be able to organize all of them & perhaps even in more captivating way. We already started the tenure with a public awareness programme on “World Mental Health Day” on 10th October 2021; there are even more programmes that will come back to back in upcoming months.

Finally, I end my message with best wishes to all of you for the sparkling & very happy Diwali.

I wish, this Diwali of Vikram Samvat 2077, will make our life free from darkness; & Vikram Samvant New year 2078 will become more prosperous, joyous & successful for all of us.

Jay AMA

Jay IMA

Dr. Gargi M. Patel

Hon. Secretary

Ahmedabad Medical Association

AHMEDABAD MEDICAL ASSOCIATION OFFICE BEARERS - 2021 - 2022

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VICE PRESIDENT



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VICE PRESIDENT



DR. MAULIK S. SHETH

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DR. DEVAL D. PANCHAL

IMM. PAST PRESIDENT



DR. KIRITKUMAR C. GADHAVE

BRIDGECON-2021 at Gujarat University



Meeting with Honourable Chief Minister of Gujarat



Meeting with Health Minister, Gujarat State



President Dr. Dilip Gadhavi & Team AMA met twice to Honourable CM of Gujarat State, Shree Bhupendrabhai Patel & Health Minister, Shree Rushikeshbhai Patel; conveyed various problems we are facing & requested for the solutions to get rid of them

120th Installation Ceremony



120th Installation Ceremony



120th Installation Ceremony



120th Installation Ceremony



120th Installation Ceremony



120th Installation Ceremony





120th Installation Ceremony



Women Doctors Wing - Resilience on 03-10-2021



Women Doctors Wing - Resilience on 03-10-2021



Women Doctors Wing - Resilience on 03-10-2021



Women Doctors Wing - Resilience on 03-10-2021



Women Doctors Wing - Resilience on 03-10-2021



Women Doctors Wing - Resilience on 03-10-2021



Face Book Live Programme on World Mental Health Day - 10-10-2021



Ladies Club Installation Ceremony 2021-22



Ladies Club Installation Ceremony 2021-22



**A.M.A. BULLETIN INDEX**

Content	Page No.
» Message From President's & Hon. Secretary's Desk	2-5
» Office Bearers New Team Photos	6
» AMA Programmes Photos	7-22, 55-57
» Wishing You Happy Diwali & a Prosperous New Year	25
» ધનવંતરી પૂજન.....	26
» Congratulation.....	27
» AMA Sub Committes 2021-2022	28-29
» Scientific Programme, Report.....	30-31
» Kids Carnival-2021, Obituary	32-33
» Diwali Get Together Programme	34
» AMA & AFPA Doctor's on Call in Diwali	35
» AMA Quiz Competition, New Life Member.....	36-40
» Report of Installation Ceremony.....	41-42
» Ladies Club.....	43-44
» Articles	45-53
» Advertisement	54

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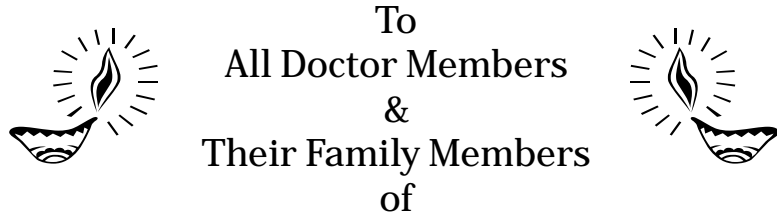
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*Wish you Happy Diwali
and
Prosperous New Year*



Ahmedabad Medical Association
From
Office Bearers

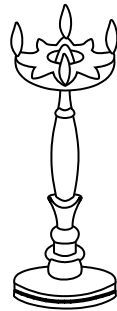
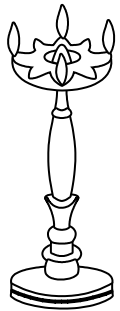
&
Managing Committee Members

&
AMA Sub Committees

&
All Past Presidents

&
Office Staffs
of

Ahmedabad Medical Association



ધનવંતરી પૂજન



તારીખ : ૦૨-૧૧-૨૦૨૧, મંગળવાર

સમય : બપોરે ૩.૩૦ કલાકે

સ્થળ : અમદાવાદ મેડીકલ એસોસીએશન

સર્વે ડૉક્ટર મિત્રોને ધનવંતરી પૂજનમાં
જોડાવા હાર્દિક આમંત્રણ છે.

કો-ઓર્ડીનેટર

ડૉ. સ્નેહલ કાલે

ડૉ. કીરીટ ખરસદીયા

ડૉ. દિલીપ બી. ગઢવી

ડૉ. ગાગી એમ. પટેલ

પ્રમુખ

સેક્રેટરી

અમદાવાદ મેડીકલ એસોસીએશન

અમદાવાદ મેડીકલ એસોસીએશન



CONGRATULATION

डॉ. मुंजपरा महेन्द्रभाई
Dr. Munjpara Mahendrabhai
(M.D. Medicine)



सत्यमेव जयते



राष्ट्र गंत्री
महिला एवं बाल विकास और आयुष
भारत सरकार
Minister of State for
Women & Child Development and AYUSH
Government of India

Date: - 23.09.2021

Dear Dr. Dilip B. Gadhavi Ji,

I am very pleased to send my warmest congratulations on your appointment as President of Ahmedabad Medical Association. I wish you much success in your new post.

With my kindest regards and very best wishes.

Thanking you,


(Dr. Munjpara Mahendrabhai)

Office (WCD) : Room No. 756, 'A' Wing, Shaastri Bhawan, Dr. Rajendra Prasad Road, New Delhi-110 001, Tel. : 011-23382361-63

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DISCLAIMER

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Dr. N. T. Shah & Dr. H. G. Jambhekar SCIENTIFIC PROGRAMME

Approaching A Case Of Diabetes

Date : 14-11-2021, Sunday

Time : 8.30 am onward

Venue : AMA Hall

:: Programme Details ::

- 8.30 am to 9.30 am : Registration and Breakfast
- 9.30 am to 10.00 am : Inauguration
- 10.00 am to 10.25 am : First consultation and investigations in a newly detected case of diabetes
Dr Jimit Vadgama
- 10.25 am to 10.50 am : First consultation and investigations in an already diagnosed patient of diabetes
Dr Vidhyut Shàh
- 10.50 am to 11.15 am : Monitoring a case of diabetes during follow up
Dr Sandeep Desai
- 11.15 am to 11.40 am : Medical nutrition therapy and exercise prescription in a patient of diabetes
Dr Parikshit Goswami
- 11.40 am to 12.05 pm : Selecting drugs for patient
Dr Pratap Jethawani
- 12.05 pm to 12.30 pm : Common mistakes made during management of diabetes.
Dr Urman Dhruv

12.30 pm to 01.00 pm : Open house and discussion'

01.00 pm onwards : Lunch

Register your names at AMA Office before 9-11-2021; 5.00 pm

First hundred registered family physicians will get glucose meter with 100 strips from Diacare on 9th November 2021 at 1 & 2 Gandhi Park, Near Nehrunagar Char Rasta, Ambawadi, to do free sugar camps and awareness program for world diabetes day in month of November.

:: Co-ordinators ::

Dr. Vishal Shah

Dr. Kamlesh Naik

Dr. Dilip B. Gadhavi
President (AMA)

Dr. Gargi M. Patel
Hon. Secretary (AMA)

Report of Public awareness programme on "World Mental Health Day"

A face book live programme was organized on 10-10-21, the "World Mental Health Day". It was gone live on 10.10 am. This was the first programme of new team AMA. The president, Dr. Dilip Gadhavi welcomed all & gave introductory speech on issues of mental health in our society. Hon. Secretary Dr. Gargi Patel, highlighted, the significance of today's topics & their discussion on public platform. Vice President Dr. Maulik Sheth introduced both speakers, Dr. Khyati Mehtaliya & Dr. Parth Vaishnav. Dr. Khyati mehtaliya nicely presented talk on subject of "મહિલાઓનું માનસિક સ્વાસ્થ્ય"; & Dr. Parth Vaishnav remarkably & distinctly explained the issues of "Addiction - ટેવ, આદત, શોખ કે માનસિક બિમારી". Vice President Dr. Urvesh Shah moderated the programme. More than 250 viewed the telecast on Face book / you tube.



Kids Carnival-2021

Ahmedabad Medical Association organizes Children day celebration party - Kids carnival , for children of AMA members

Date : 14-11-2021, Sunday

Time : 5.30 pm onward

Venue : AMA Hall

Attractions : - Fancy dress

- Dancing (group dancing only)

- Singing (on karaoke)

- Playing instrument

- One minute talk

Entry invited : All school going children can participate

(Last day of entry : 10-11-2021)

Entry fees : 50/- per participant (performer)

:: For participation Kindly contact ::

Dr. Deval Panchal
9925753032

Dr. Hetal Shah
98240 29761

Dr. Kalpita Dave
9924558450

Dr. Dipak Rao
9825210880

Dr. Maulik Sheth
9825915464



Program will be followed by dinner & DJ party;

passes available @ 100 rs per person

Passes will be available from 09-11-2021 to 12-11-2021

at AMA office

Dr. Dilip B. Gadhavi
President (AMA)

Dr. Gargi M. Patel
Hon. Secretary (AMA)

OBITUARY

We send our sympathy & condolence to the bereaved family.
May their soul rest in eternal peace.



DR. RAMNIKSINGH A. BHALLA
L-3866 M.S. (GEN. SURG.)

Date of Birth : 14-08-1959

Date of Death : 18-09-2021



DR. HARSHAD G. SHAH
L-1804 M.B.B.S.

Date of Birth : 27-10-1937

Date of Death : 01-10-2021





Diwali Get Together

Happy & Prosperous New Year

Hope you all have enjoyed your Diwali Vacation, now it is time to enjoy with our medical fraternity at AMA. Let us have most enjoyable Diwali Get Together.

Do not miss this most entertaining event.

Date : 28th November, 2021, Sunday
Time : 6.00 pm onwards
Venue : Reform Club, Opp. Handlooms House,
Ashram Road, Navrangpura, Ahmedabad-09
Program: 6.00 to 8.00 pm
Mega Housie & Entertainment Programme

Mr. Ankit Trivedi will be a Guest during
the Evening Program on 28-11-21

8.00 PM ONWARDS DINNER

Get your passes from AMA Office from 20-11-2021.
Rs. 150/- per person.

:: Supported By ::
DIVA ENDOSCOPY HOSPITAL, SHAHIBAUG
SUNFLOWER LABORATORY, MEMNAGAR

:: Co-Ordinator ::

Dr. Maulik Sheth
Dr. Deepak Rao

Dr. Naitik Patel
Dr. Deval Panchal

Dr. Dilip B. Gadhavi
President, AMA

Dr. Gargi M. Patel
Hon. Secretary, AMA

AMA & AFPA - "DOCTOR ON CALL " in Diwali

Dear Friends,

During Diwali festival many of our friends go out of station on vacation. So many of people face problems in their needs during these days. So to avoid such inconvenience to society we conduct project of Doctors on Call since 10 years in association with Ahmedabad Family Physicians Association and this will be 11th year. Though because of Corona many of doctors may not go out but we continue our activity this year also.

We are planning a list of Doctors available during these festival days of Diwali in Ahmedabad. If you are interested in rendering your services during Diwali kindly send your Contact - Speciality - Area - through email to AMA - amagsbima@yahoo.co.in

You are not suppose to sit in your clinic round the clock - you will only be called in case of any emergency.

We are preparing a master list - Area wise and Speciality wise.
The project will work like this :-

Patient



Call the Area Coordinator



As per need Call transfered to /Patient guided to available
Doctor/ Hospital



Telephonic advise is totally free to patient

In Clinic /Hospital charges as per routine can be charged

We will publish the Help Line number which will be operational from 03/11/2021 to 07/11/2021

Those Doctors who wants to give their services are requested to contact Office of AMA.

:: Co-Ordinators ::

Dr. Ramesh I. Patel

Dr. Hetal Shah

Dr. Vaibhav Patel

Dr. Dilip B. Gadhavi
President (AMA)

Dr. Dharendra Sanandiya
President (AFPA)

Dr. Gargi M. Patel
Hon. Secretary (AMA)

Dr. Pragnesh Vachharajani
Hon. Secretary (AFPA)

AMA Quiz Competition

All the AMA members are invited to participate in the intriguing quiz competition & have chance to get exciting rewards.

There are two types of quizzes published herewith : medical & of the fields other than medical.

Any member can participate in both quizzes.

How to participate

- Answers of questions can only be submitted by WhatsApp at +91 9726888775 (AMA BROADCAST INFO number); answering by any other mode won't be acceptable.
- Member must write his / her full name in the beginning & then write the title of type of quiz in which he / she is participating.
- Shall answer in chronological order with mentioning question number against / before each answer.
- After answering the entire one type of quiz only, shall start answering another type of quiz.

How will you get rewards

- The participants who would answer all the questions correctly will only considered for rewards; the earliest first five of amongst these, will be winners.
- The names of top five of medical quiz, will be excluded from list of winners of non-medical quiz.
- The names of all top five winners from both the quizzes will be announced in next bulletin.

Quiz masters

Dr. Vishal Shah
Dr. Balkrishna Rathod

Dr. Vaibhav Patel
Dr. Kirit Kharsadiya

Sports Quiz



- (1) Which Sport is described as the beautiful game ?
- (2) During Which years FIFA World Cup tournament was not held after its inauguration ?
- (3) When was the First International Football match played and between which Countries ?
- (4) What is the term used when a player is bowled out by the first ball they face ?
- (5) When a badminton player wins a rally, how many points he or she would get ?
- (6) National sports day is celebrated on ?
- (7) The First Official International Cricket match was held in 1844 between which two nations ?
- (8) Sultan Azlan Shah Cup is associated with which sport ?
- (9) How long is the total distance of a marathon ?
- (10) The term "Thomas Cup" is meant for ?

Medical Quiz



- (1) What is the most common cause of cushing's syndrome ?
 - (A) Glucocorticoid treatment (iatrogenic)
 - (B) Ectopic ACTH production
 - (C) Adrenal adenoma
 - (D) Pituitary adenoma
- (2) What is the infective agent implicated in acne ?
 - (A) Staphylococcus aureus
 - (B) Streptococcus pyogenes
 - (C) Staphylococcus epidermidis
 - (D) Propionibacterium acnes
- (3) What is the key complication in the first 24 hours of an MI?
 - (A) Fibrinous pericarditis
 - (B) Coronary artery aneurysm
 - (C) Arrhythmia
 - (D) Mitral insufficiency
- (4) What area does prostate cancer spread to most frequently?
 - (A) Brain
 - (B) Lung
 - (C) Pancreas
 - (D) Lumbar spine

- (5) Acute gout presents as painful inflammation of the big toe which is referred to as podagra. What is an acute treatment for gout?
 - (A) Allopurinol
 - (B) Probenecid
 - (C) Febuxostat
 - (D) Colchicine
- (6) What is the most common cause of postpartum haemorrhage?
 - (A) Vulval or vaginal lacerations
 - (B) Uterine atony
 - (C) Uterine rupture
 - (D) Retained placenta
- (7) If ST-elevation was noted in leads II, III and aVF, what would it suggest?
 - (A) A posterior myocardial infarction
 - (B) An inferior myocardial infarction
 - (C) An anterior myocardial infarction
 - (D) A septal myocardial infarction
- (8) Where is gonadotrophin - releasing hormone produced?
 - (A) Anterior pituitary
 - (B) Posterior pituitary
 - (C) Hypothalamus
 - (D) Adrenal glands
- (9) The bones of the ear from the outside to inside are :

• Incus • Stapes • Malleus

 - (A) True
 - (B) False

(10) Which of the following should be avoided when weaning a child of 7 months ?

- (A) Honey
- (B) Formula Milk
- (C) Breast Milk
- (D) Wheat
- (E) Meat-containing products

WE WELCOME FOLLOWING NEW LIFE MEMBERS

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10330	L	DR. DALAL TEJANSU SAMIR
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10332	LC	DR. PATEL SATVIK PRAVINBHAI
10333	LC	DR. PATEL PANKTIBEN SATVIK
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10335	L	DR. KHADDAR SATVIK DEVENDRA
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10353	L	DR. PATEL VINIT HARSHADBHAI
10354	L	DR. PATEL ROHITKUMAR VASUDEVNBHAI

Report of Installation ceremony

The installation ceremony of the new team AMA - managing committee and the office bearers, under leadership of President Dr. Dilip Gadhavi was held on 26th September 2021 at Ahmedabad Medical Association.

The programme was started with prayer by Dr. Shubhangiben Shah. Then the outgoing president Dr. Kirit Gadhavi welcomed all. The felicitations of all the invited guests & installation officers were done with nice mementoes; it was followed by lamp lighting by all the dignitaries on the dais. The outgoing honorary secretary Dr Dhiren Mehta gave brief report of the activities done by AMA during year 2020-21.

In presence of large crowd in the hall, Installation officer Dr Mehul Shah, installed all the new managing committee members & office bearers. The new President Dr. Dilip Gadhavi then installed by installation officer; followed by ceremony of exchange of presidential crest & chairs from outgoing President Dr. Kirit Gadhavi to newly installed President Dr. Dilip Gadhavi. The oath was pledged by entire new team AMA as recited by installation officer Dr. Mehul Shah. Afterwards in his speech, Dr. Mehul Shah, the installation officer, specifically mentioned this was the first instance in history of AMA when the women are holding two key posts the secretary & the finance secretary. He congratulated the outgoing team for their good contributions & gave best wishes to the new team. He briefed about the facts, how various stalwarts contributed the association to bring it to such a height; he also advised new team to stick & follow the principles set by all of these mentors. He also suggested to follow the administrative tips suggested by

Chankakya, which are being highlighted in the book, the installation officer presented to everyone during installation.

Dr. Supriya Dalal Introduced & gave brief about the new President.

The new President Dr. Dilip Gadhavi, accepted the responsibilities in his speech & he promised the crowd to give his full devotion to the association acknowledging every senior & eminent persons present over there.

The special invitee, Dr Jitubhai Patel (Past president of IMA) gave his blessings to the new team & advised to work together for betterment of fraternity.

The Guest of Honour Dr. Malay Mahdeviya (Director, Adani ports & CEO of Adani Airport India) congratulated President Dr. Dilip Gadhavi & his entire team & highlighted certain fields where they need to explore & work further – as the future prospective.

The chief guest, Dr. Abhijat Sheth (President – National board of examination) gave the blessings to newly installed team. He also assured the new team AMA, under leadership of President Dr. Dilip Gadhavi will definitely bring the association to new heights.

Presence & Blessings from “જગદ્ગુરુ શ્રી વલ્લભાચાર્ય વંશાવતંસ વેષ્ણવાચાર્ય ગોસ્વામી શ્રી મધુસૂદનલાલજી (શ્રી તિલક બાવાશ્રી) શ્રી ગોપીનાથજી દીપક પીઠ - અસારવા બેઠક” gave divine touch to entire event.

Finally the programme ended with vote of thanks by newly installed Honorary secretary, Dr. Gargi Patel.

The entire programme was nicely managed on stage by Master of ceremony Dr. Darshana Thakkar with her enthralling way of presentation.

લેડીઝ-ક્લબ

SASHAKT KISHORI SASHAKT NARI SOCH BADALO KHUDKO BADLO DUNIYA BADLO

My Dearest Ladies club friends you Believe in me & Support and select as PRESIDENT For new Tenure 2021 - 2022.

I am very Thankful to you all members of AMA Ladies club Wing from my bottom of heart our 9 October Saturday Installation ceremony was Amazing Great fabulous Grand success of Event of Creative Activities competition Aarti, competition, Matli competition, Dandiya competition Decoration and Garba Ras DJ Amazing we invited Dorimon & Elephant Character for Ours Children of AMA family was Excellent.

All together we Njoyed , we all are in one Roof as AMA Ladies club Wing Family .

I Am very Thankful to our

Chief Guest Dr. Kamini Patel Vani IVF Center

Guest of Honour Dr. Nirmala Wadhvani Minister Ex MLA women and Child Development &

Guest of Honour Dr. ANUJA Desai Academy Director of KD Hospital.

Installation Officer Dr. Hemant Bhatt

Special Invitees our own AMA President Dr. Dilip Gadhavi, Dr. R. R. Patel Additional Superintendent of Civil Hospital

Dr. Alpesh Gandhi FOGSI President

Master of Ceremony by Dr. Mukesh Bavishi

Prayer by Dr. Falguni Shashank

Blessing by Dr. Janak Desai Sir

I m very Thankful to you all Degniteries

From my bottom of heart

I'm very Thankful to our Team, Secretary Mrs. Khushboo Doshi & Whole team.

Thanking to my AMA Ladies Club friends & Invited guest & Family friends

Thanking To our office team

Mohanbhai, Amitbhai, Jayrajbhai, Harsh

Printing Naimishbhai, Decoration Bababhai

Thanks to all our's Sponsors

- Vani IVF Center
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સેક્રેટરી

અમદાવાદ મેડિકલ એસોસિએશન

“The dietary & holistic approaches to blood glucose management”

By Dr. Banshi Saboo, Diabetologist

A combination of physical activities & dietary modifications is integral to manage high glucose.

All forms of physical exercise are critical foci for blood glucose management and overall health in individuals with diabetes and prediabetes. Exercise improves blood glucose control in type 2 diabetes, reduces cardiovascular risk factors, contributes to weight loss, and improves well-being.

The approach to physical activity must be holistic in nature, only walking is not sufficient. You must stretch everyday, and practise Yoga Pranayama and meditation thrice a week. You should also do Aerobics upto 40 minutes a day. Aerobic exercise involves repeated and continuous movement of large muscle groups and includes activities such as walking, cycling, jogging, and swimming.

Along with exercise, diet consisting of low carbohydrate and high protein is essential. In addition to vegetables, fruit and nuts, casein protein supplements rich in essential amino acids are important components of balanced diet for diabetes patients.

Such people should also avoid prolonged sitting which increases the risk of heart disease. When in office, they should keep the laptop at a height and spend some time working and talking while maintaining a standing position.

Diabetes is a critical disease. But very few know that

with the help of an optimal diet, it can be prevented and even managed.

Eating healthy, diverse, and balanced diets based around whole and fresh foods is one of the essential ingredients for promoting overall health and quality of life. It is also the most important component, along with living actively and mindfully, to preventing type 2 diabetes, and managing both type 1 and type 2 diabetes through an integrated approach.

The approach to a balanced diabetic diet is to have less carbohydrates, high fibre, and protein-based foods. Dietary recommendations can often be vague and convoluted when broken down into their constituent macronutrient and micronutrient parts.

The fact of the matter is that all these macronutrients are important, and the focus should not be principally on cutting out one or the other but making sure to consume them from healthful sources of food as part of a balanced diet.

Eating whole grains supplies abundant quantities of carbohydrates (as well as adequate quantities of protein and fat), which provides energy to the mind and body, but they are absorbed in a healthy and gradual way because of their high dietary fibre content.

The authentic protein diskettes available in the market constitute all this, and they integrate required supplements in our everyday diet in a very simple way. Protein can provide the body with essential amino acids for tissue building in the muscles, organs, bones, and blood.

INSULIN GLARGINE IN TYPE 2 DIABETES

By Dr. Banshi Saboo, Diabetologist

Type 2 diabetes mellitus (T2DM) is characterized by relative insulin deficiency, decreased peripheral and hepatic sensitivity to insulin and raised plasma glucose levels¹. T2DM treatment begins with lifestyle interventions, before progressing to pharmacological interventions with advancing disease. Despite the introduction of numerous anti-hyperglycemic medications, many patients with T2DM require insulin, and basal insulin continues to be frequently used either as first-line insulin treatment or as part of multiple daily injection regimens². Oral hypoglycemic agents are effective agents for diabetes management, although secondary drug failure rates of 5-10% are bothersome. The disappointing results with monotherapy especially the worsening metabolic control is often seen within five years after the initiation of an oral hypoglycemic agent, with more than 50% patients requiring shifting to the insulin-based regimen to achieve optimal glycaemic control³. Basal insulin therapy is recommended if lifestyle modifications and oral antidiabetic agents fail to maintain HbA1c levels <7.5% and has been shown to improve glycaemic control⁴. This highlights the fact that adequate basal insulin levels are an essential component of diabetes management. The ideal basal insulin should provide a sustained level of insulin, mimicking physiological basal insulin secretion, reproduce physiological basal insulin secretion, thereby restoring glycaemic control, without hypoglycemia¹. Such therapy should have relatively flat/constant insulin concentration profile over time, no pronounced peak, duration of action of at least 24 h, low within-patient variability in fasting plasma glucose (FPG), a favorable safety profile, including low risk of hypoglycemia and weight gain, and be easy to administer and titrate². However, traditional

insulin does not fully accomplish this goal. This stimulated the search for insulins with a more prolonged duration of action that could better replicate the physiological basal insulin secretory response⁵. This eventually led to the development of basal insulin-like, Neutral (porcine) protamine Hagedorn (NPH) insulin, Lente insulin, insulin detemir, etc. Still, all these variants are also not able to achieve the desired therapeutic insulin levels. For instance, NPH insulin, intermediate-acting insulin, has a duration of action that is considerably less than 24 h and an activity profile that peaks 3–5 h after administration. NPH insulin administered at bedtime results in high insulin levels when insulin requirements are low. This activity profile is not ideal as it increases the risk of nocturnal hypoglycaemia¹.

A greater understanding of the protein structure of insulin and the roles of key amino acids has opened up new avenues for the rational design of insulin analogs with more predictable absorption and time-action characteristics. Insulin glargine (IGlar) was the first long-acting basal analog to be introduced into clinical practice in 2000 and was a breakthrough in the field of insulin therapy. It continues to be a gold standard of basal insulin treatment and a benchmark for new injectable anti-hyperglycemic treatments, including newer basal insulin analogs². IGlar is a biosynthetic, long-acting, clear human insulin analogue with an acidic pH. Upon subcutaneous injection, IGlar is neutralized and forms microprecipitates that release insulin in a constant profile over 24 h⁶.

STRUCTURE OF IGLAR

IGlar differs from human insulin by the replacement of A21 asparagine with glycine and the addition of two arginine residues at B31 and B32 (GlyA21, ArgB31, and ArgB32). These mutations endow glargine with an isoelectric point of 6.4–6.8, implying that it is easily soluble at acid pH and less soluble at neutral pH. As a result, upon subcutaneous injection, IGlar

forms an amorphous precipitate in the subcutaneoustissue, which slowly dissociates, providing a sustained release of insulin into the circulation⁵.

Once injected, IGLargets immediately metabolized into two main active metabolites M1 (GlyA21) and M2 (GlyA21, des-ThrB30). The M1 metabolite accounts for approximately 90% of the daily plasma insulin available. This protracted release of glargine from the subcutaneous depot translates into longer bioactivity than either human NPH or human ultraLente insulin. Thus, IGLar can be administered once daily, unlike the earlier 'intermediate'/'long-acting' insulin preparations⁵. IGLar once daily has been shown to achieve superior glycemic control with equivalent or lower rates of hypoglycemia compared with NPH insulin in patients with T2DM⁴.

CLINICAL EFFICACY OF IGLar

Usage of NPH insulin is most often limited due to the high risk of nocturnal hypoglycemia when taken at bedtime, as its peak of the action occurs 4–6 h post-injection. In contrast, the smoother activity of the long-acting insulin analog, IGLar, allows more flexibility in dosing, and its administration is less strictly bound to the time of injection. This is especially important for certain patient populations where hypoglycemia poses a greater risk, such as the elderly⁵. Hence, IGLar is approved for administration at any time of day, provided it is at the same time each day⁷. To confirm the non-occurrence of hypoglycemia post-IGLar administration, Porcellati et al., carried out a study in T2DM insulin-treated patients⁷. The study was carried out in 10 T2DM insulin-treated persons who were studied during 24-h euglycemic glucose clamp, after glargine injection (0.4 units/kg s.c.), either in the evening (2200 h) or the morning (1000 h). It was concluded from the study that, the pharmacodynamics of insulin glargine differs depending on the time of administration. With morning administration insulin activity is

greater in the first 0–12 h, while with evening administration the activity is greater in the 12–24 h period following dosing. However, glargine pharmacokinetics and plasma C-peptide levels were similar, when analyzed by 24-h clock time independent of the time of administration. Thus, insulin sensitivity in T2DM is affected by circadian rhythm rather than glargine per se⁷.

Diabetic kidney disease is one of the most frequent microvascular complications related to diabetes mellitus and is the leading cause of end-stage renal disease. Kidneys play an important role in the regulation of glucose homeostasis, because they release a significant amount of glucose in the post-absorptive state, and they are responsible for approximately one-third of insulin degradation. The progressive loss of kidney function, and its consequent reduction in parenchyma and blood flow, has been associated with a lower capacity of renal glucose release, drug metabolism, and excretion and insulin extraction, resulting in prolonged half-life of some oral anti-hyperglycemic agents and insulin, besides an impaired response to hypoglycemia. Thus, glycemic control in patients with chronic kidney disease (CKD) is particularly hard to achieve because of a slower insulin degradation by the kidney. It might modify the long-acting insulin analogue pharmacokinetics, increasing its time of action and the risk of hypoglycemia⁸. Betonico et al. examined the efficacy and safety profile of long-acting basal analogues in patients with significant loss of renal function. A comparison of the glycemic response to treatment with IGLar U100 or NPH insulin in patients with type 2 diabetes mellitus (T2DM) and CKD stages 3 and 4 was done in 34 patients. After 24 weeks, mean HbA1c was found to decrease on IGLar U100 treatment (–0.91%; $P < 0.001$), however, this benefit was not observed for NPH (0.23%; $P = 0.93$). Moreover, the incidence of nocturnal hypoglycemia was found to be 3 times lower with IGLar than with NPH insulin

($P = 0.047$). Thus indicating the potential of IGLar U100 in patients with T2DM and CKD stages 3 and 4⁸ without resulting in significant hypoglycemia.

Traditionally, basal insulin is initiated on the failure of a standard therapeutic oral anti-diabetic regimen and is given as an additional hypoglycemic agent along with oral anti-diabetics. Eliaschewitz et al., compared the efficacy and safety of IGLar and NPH insulin, both in combination with a once-daily fixed-dose of glimepiride, in terms of glycemic control and incidence of hypoglycemia in an open-label, 24-week randomized trial in ten Latin American countries⁴. It was found that IGLar and NPH insulin achieved similar HbA1c reductions (adjusted mean difference 0.047; 90% CI 0.232, 0.138; per-protocol analysis). However, confirmed nocturnal hypoglycemia was significantly lower with IGLar vs. NPH insulin (16.9 vs. 30.0%; $p < 0.01$; safety analysis). Patients receiving IGLar were significantly more likely to achieve HbA1c levels $< 7.0\%$ without hypoglycemia (27 vs. 17%; $p = 0.014$; per-protocol analysis). There was a more pronounced treatment satisfaction improvement with insulin glargine vs. NPH insulin ($p < 0.02$; full analysis). Thus, once-daily IGLar plus glimepiride is effective in improving metabolic control with a reduced incidence of nocturnal hypoglycemia compared with NPH insulin⁴.

Another major complication of diabetes is the occurrence of cardiovascular complications. Cardiovascular disease is the leading cause of mortality in T2DM. Hyperinsulinemia has been reported to be associated with increased cardiovascular risk. Progression of atherosclerosis has been proposed to be associated with hyperinsulinemia. However, the effects of exogenous insulin on cardiovascular disease progression has not been well studied. The ORIGIN trial is the only study to date dedicated to investigate the effects of IGLar on cardiovascular outcomes. ORIGIN enrolled 12,537 patients with a mean age of 63.5 years, cardiovascular

risk factors and impaired fasting glucose, impaired glucose tolerance or type 2 diabetes. Patients were randomized to receive IGLar with a target fasting glucose of less than 95 mg/dL or standard glycemic care. At the end of the study, 83.6% of patients in the glargine group were on insulin compared with 11.4% in the standard care group. The HbA1c in year 7 was 6.2% in the glargine group and 6.5% in the standard care group. However, the study found no difference in co-primary outcomes of nonfatal MI, nonfatal stroke or death from cardiovascular disease after a median follow-up of 6.2 years⁹. Further, a meta-analysis of outcomes from ACCORD, ADVANCE, and VADT found that intensive therapy of older adults with type 2 diabetes, the majority of whom were insulin-treated and followed for a mean 3.5–5.6 years, resulted in a 10% reduction in microalbuminuria, but no significant change in other microvascular complications⁹. Thus, although insulin has been shown to have both cardioprotective and atherosclerosis-promoting effects in laboratory animal studies, human trials have not shown insulin to increase cardiovascular events and need further in-depth study.

CONCLUSION

Hypoglycemia is considered to be one of the major barriers in initiating insulin therapy and is often a deciding factor while selecting an insulin regimen. Therefore, it makes clinical sense to adopt a treatment regimen that minimizes this risk. IGLar has been shown to result in fewer hypoglycemic events than NPH insulin, along with comparable glycemic control. Thus, IGLar is the benchmark basal insulin and may continue to be an important part of treating T2DM.

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હિરેન શાહ મો. ૯૯૭૪૦ ૬૩૭૨૪

ઘરની
શોભા વધારો

ગણેશ કન્સ્ટ્રક્શન

ફ્લેટ, બંગ્લોઝ, ઓફિસમાં તમામ પ્રકારનું
રીનોવેશનનું કામ વ્યાજબી ભાવે અને
સંતોષકારક કરી આપવામાં આવશે.

- POP, કલર, ઇલેક્ટ્રીક, બાયરૂમ, કીચન,
બારી દરવાજા, વેધર સેડ, MS ગ્રીલ
- દરેક રૂમમાં પ્લાસ્ટીક પેઇન્ટ કલર સાથે બધા
રૂમમાં એક દિવાલ સ્ટ્રક્ચર ખીન્ડ કરી આપવામાં આવશે.
- ગ્રોનાઈટની ફેમમાં બારી અને દરવાજા વુડન ફ્લેટ ડોર
- એલ્યુમીનીયમ સેકશન બારી
- કમલેટ નવા બાયરૂમ C.P. ફીટીંગ અને સેનેટરી આઈટમ સાથે
- ઘરના તમામઊંચાણનું નવું ફ્લોરીંગ
ઉંઘઈની ટ્રીટમેન્ટ સાથે
- મોડ્યુલર કીચન & બારબેટ સાથે (PVC અને વુડન)
સ્પે ક્વિલ્ડ નાં માથ મુજબ
- તમારા મકાનને (Complete રીનોવેશન) કામ માટે મળો.

પ્રાઈમ પ્રોપર્ટી ડૉક્ટર્સને અનુકૂળ

ફર્સ્ટ ફ્લોર પ્રાઈમ લોકેશન
65 ફીટ રોડ સાઈડ ફ્રન્ટેજ,
4334 સ્કવેર ફીટ,
કોમર્શીયલ બિલ્ડીંગ (BU) સાથે,
3 એન્ટ્રી લિફ્ટની સગવડ સાથે,
2 અલાયદી સીડી,
પાર્કિંગની ફુલ સગવડ,
સોલા ભાગવતની સામે,
એસ.જી. હાઈવે પાસે.

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સંપર્ક
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