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Dr. JITENDRA SHAH



Dr. GARGI PATEL

MAY - 2023

ISSUE - 1

Programme

Cyclothon on World No Tobacco Day 17-06-2023 AMA Senior Citizen Club Prog. 04-06-2023 05-06-2023 to Basic Air Rifle/Pistol Shooting Course 18-06-2023 Scientific Programme 11-06-2023

- 1. Prevention of Surgical Site Infections (SSIs)
- 2. Mindful Medition An anwer to Stress Reduction and Improved Wellbeing By: Dr. Purav Thakkar







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TOGETHER WE CAN. TOGETHER WE WILL

Message from President's & Hon. Secretary's Desk







Dear members.

It is wisely said, "The best what we can do for our next generation is to save environment for them." People across the globe observe 5th June of every year as world environment day. The aim is to create the awareness amongst the people about importance of nature & how we can conserve it. The world environment day will keep reminding us what wrong we did to our environment & what good we need to do now.

"Let's nurture the nature so that we can have a better future."

There are lots of the things we need to do for whether we are talking about the physical environment (nature) we have around us or a socio-psychological virtual environment prevailing surrounding us (in terms of human mentality for medical profession). Medical profession has always been a most noble profession & it will remain the same in future too. No matter it is being turned in a healthcare business; the nature of work we do for the business is noble, it's associated with human life & wellness. Perhaps due to many reasons the gap between doctors & patients / with general public is increasing. To preserve virtue of our profession, we shall work on reducing this gap. Aon Gaon Chale is one of the most effective way - what our leaders of IMA have identified as to serve the purpose of

closing the gap between us & community. This month on 25th June 2023, there will be a grant re-launching of programme. Every local IMA branch will be adopting a village. The Ahmedabad Medical Association being the largest association of state, will be adopting few couples of villages. There will be try to have a holistic approach for health of the people of those villages - By means of education, awareness, diagnostic camps & helping them to get better advantages of various government schemes for their health related issues. We expect maximum support of our members to participate in those activities.

Parallel we will be continuing our other activities too. The scientific programme conducted on 7th May was really good, where a common urological problem - BPH was very well covered. The medical field is growing very fast; the regular updates regarding knowledge & technologies are mandatory to give maximum benefits of those to our patients.

The monsoon season will be starting very soon. The incidences of various infectious diseases usually rise during this season. So, during this time we could have opportunities to do something better for both kinds of environments encircling us. Firstly, for nature, do the plantation & preserve them; & another, to build healthy environment between us & community, take opportunities to serve the people & better patient doctor interactions.

"Give with compassion today & to get better with gratitude tomorrow"

> Jai AMA Jai IMA

Dr. Jitendra Shah

President

Ahmedabad Medical Association

Dr. Gargi Patel

Hon. Secretary

Ahmedabad Medical Association













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IMA Membership Drive June 2023

The special offer for Membership of IMA, Ahmedabad Effect from 01-06-2023 to 30-06-2023

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Special Rate for June 2023 Rs. 12375 + 2228 (GST) = 14603- (Payment by Cheque Only)		
Couple Life Membership Fees		
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Requirement for membership:-

- * 5. Photo copy of registration number of M.B B.S. of Gujarat Medical Council and Original registration copy required for verification. For other degree only two
- * Photo copy of Registration, For Couple Life Membership, 2 copy of Marriage Certificate.
- $* \quad \hbox{After filling the form please make 3 photocopy of this form.} \\$
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PRADUT R. THAKOR SCIENTIFIC PROGRAMME

Ahmedabad Medical Association is organizing a Scientific Programme in Association with College of GP, IMA GSB

Date : 18-06-2023, Sunday Time : 10.00 am to 12.30 pm

Venue: Hotel Radisson Blue, Law Garden

PROGRAMME DETAILS

Topic : First line investigation of fever on day 1 day 3

and day 6.

Speaker: Dr. Swati Gohel,

Infectious disease specialist, Ahmedabad

Topic : Hepatic serology- what test to be done?

Speaker : Dr. Kartik Desai

MD, DNB Gastroenterology Consultant Gastroenterologist KD hospital, Ahmedabad

Topic : Use of Topical steroids in family practice Speaker : Dr. Bhavik Bhavsar MD (Skin), DVD

Panel Discussion

Topic : Evaluating a case of Anaemia - Role of

automation generated reports of Haemogram.

Panelists : Dr. Hardik Modi

Haemato-pathologist, Sterling Accuris Laboratory

Dr. Umang Patel

MD (Pathology), Green Cross Laboratory

Moderator: Dr. Mehul Shelat

Co-ordinators: Dr. Kalpita Dave Dr. Kamlesh Naik

Register your name at AMA Office

between 2.00 to 6.00 pm. on Ph.: 079-26588775

Dr. Jitendra Shah Dr. Gargi Patel President, AMA Hon. Secretary, AMA

AMA SENIOR CITIZEN CLUB & AHMEDABAD MEDICAL ASSOCIATION HAS ARRANGED A MOVIE SHOW

Date : 17-06-2023, Sunday

Time : 9.00 pm

Venue: R.M. Fozdar Hall, AMA House

Movie : Unchai - Gั่นเป

Star Cast: Amitabh Bachchan, Anupam Kher,

Dany Denzongpa, Boman Irani,

Parineeti Chopra, Sarika

- Registration Rs. 50/- on first cum first basis.

- Register your name between 10-06-2023, Saturday to 14-06-2023, Wednesday during 2.00 to 6.00 p.m. at AMA Office.

Light refreshment during interval

Co-Ordinators

Dr. K. R. Sanghvi Dr. Abhay Dixit
Dr. Ramesh C. Shah Dr. K. C. Gadhayi

AMA Senior Citizen Club

Dr. Jitendra Shah Dr. Gargi Patel President, AMA Hon. Secretary, AMA

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Report of Scientific Programme on 07-05-2023

A wonderful CME was organized by Ahmedabad Medical Association in association with Aarna Superspeciality Hospital on Sunday 7th May 2023. Topic of CME was related to Newer techniques in Management of Renal Stones and Urolift technique which is newer technique in Management of BPH; which was delivered by Dr Rohit Joshi. Apart from Medical lectures, there was a lecture on finance in which information was given when and where to invest our money, that was nicely delivered by Dr. Gaurang Kadam. More than 90 participants actively took part in CME. After lecture, there was Q-A session, which lasted for more than 45mins. Entire programme was nicely coordinated by Dr. Sahil Shah. The CME was followed by Lunch.

Report of participation of AMA in celebration of 100th episode of PM's Mann ki Baat Programme

There was a nationwide celebration of 100th episode of PM Shri Narendra Modi's Mann Ki Baat programme on 30th April 2023. A day before (on 29th April) a press conference was arranged at AMA, where around 15 media (Print & electronic media) were present. They were briefed about the programme to be held at various local IMA branches of Gujarat, Medical & paramedical colleges and Hospitals across the state. They did a wide coverage of our programme. INDIAN MEDICAL ASSOCIATION GUJARAT STATE BRANCH took the initiative to coordinate with each Local branches, Hospitals, Clinics and all Medical Colleges and other paramedical institutes of Gujarat State to join in this mission. The coordinators were designated at each of institutes, hospitals & IMA branches. More than 100 different

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HOSPITALS of each MAJOR CITY including Ahmedabad participated. Apart from these, total 35 Medical colleges, 13 Dental colleges, 86 Physiotherapy colleges & 235 Nursing colleges also participated. Total 111 Local branches of Indian Medical Association, Gujarat state organized at two different centers in their area. Over all under leadership of IMA GSB, the program was conducted at more than 1244 centers of Gujarat. At AMA, the live streaming was arranged at R M Fozdar Hall. More than 200 members attended the event. Dr. Rajesh Desai, Dr. Sahil Shah, Dr. Atul Gandhi & Dr. Kalpita Dave nicely coordinated the event at AMA. Apart from these, more than 100 hospitals, all medical & paramedical colleges arranged the live streaming at their own premises.



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''મધર્સ ડે'' ની ઉજવણી ની અહેમિયત અને આનંદ સાથે હવે આગામી કાર્યક્રમની મજા માણીએ

તા. ૦૬-૦૫-૨૦૨૩ ના રોજ ડૉ. તૃપ્તિ મહેતાએ Non-Surgical Procedure સરસ, સચોટ અને સરળ ભાષામાં માહિતી આપી. સૌ બહેનોએ આ કાર્યક્રમ ખૂબ રસપૂર્વક માણ્યો અને સંતોષ સાથે પ્રશ્નોત્તરી નો આનંદ પણ માણ્યો.

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ઃ (૧) નેચરોપથી એટલે શું ? વિષચ

(૨) શરીર બોલે છે.

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Dietician, Naturopathy Doctor

ઃ એ.એમ.એ. હોલ ട്ഷഗ

ખુબ માહિતીસભર કાર્યક્રમ છે તો સૌ બહેનોએ હાજર રહી લાભ લેવા વિનંતી.

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डॉ. अतेन्द्र शाह પ્રમુખ, એ.એમ.એ.

ડૉ. ગાર્ગી પટેલ સેક્રેટરી, એ.એમ.એ.

Prevention of Surgical Site Infections (SSIs)

Recommendations to Prevent Surgical Site Infections (SSIs):

Expertisficant on

- 1. Administer antimicrodial prophylasis according to evidence-based standards and guidelines. I Quality of evidence: HIGHI
- 2. Use a combination of parenteral and oral artimicrobial prophylads prior to sective colorectal surgery to reduce the risk of SSI. (Quality of exidence HIGHL
- 3. Decirionize surgical patients with an artificial state of the proper state setting for orthogodic and card otherwise procedures. [Quality of
- Decolorize surgical patients in other proceedures at high risk of stacky occopical SSUs, thias those involving prosthetic material. (Quality of evidence,
- 4. Use antisectic containing preoperative vaginal preparation agents for patients undergoing desargan delivery or hysterectomy. Quality of evidence:
- 5. Do not remove held at the operative site orders the presence of har will interfers with the surpical procedure. Coughty of evidence MCDERATE's
- Use alcohol-containing preparative skin preparations agents in complication with an amiseptic (Quality of evidence, FIGE).
- 7. For procedures not requiring hypothermis, maintain normathermial beinpersture > 35.5°Cl during the perioderative period. "Quality of evidence, HIGHL
- 8. Use impervious plastic wound protectors for gastro mastinal and bittery tract surgery. Quality of evidence: HKH)
- 9. Perform introderative and septic wound lawage. (Quality of evidence HODERATE)
- 10 Control pland-guesse level ouring the immediate postpoerative period for all patients. (Quality of extreme 4134).
- 11. Use a checklist and/or bundle to ensure compliance with best practices to improve surgest out entirestery. (Quality of evidence, E16H)
- 12 Perform surveillance for SSI. (Quality of evidence: WODERATE).
- 13. Increase the efficiency of surveillance by utilizing automated data. (Quality of evidence MODERGE)
- 14. Provide ongoing SSI rate feedback to surgical and perioperative personnel and leadership. (Quality of evidence MODEFATE),
- 15. Measure and provide feedback to HCP regarding rates of compliance with process measures. (Quality of evidence LOW)
- 16. Educate surgeons and perioperative personnal about 59 prevention measures. (Quality of exicence: LOW)
- 17. Ecocate patients and their families about 55! prevention as appropriate. (Quality of evidence: LOW)
- 18 Implement policies and practices to requoe the risk of SSI for patients that align with applicable exidence-based standards, rules and regulations, and modical device manufacturar instructions for use. (Quality of eviconces MODERATE)
- 19. Observe and review operating from personnel and the environment of care in the operating room and in control sterile reprocessing. Quality of evidence LOV/

Additional approaches

- 1. Perform an SSI risk assessment (Quality of evidence: LOA)
- 2. Consider use of negative pressure dressings in patients who may benefit. (Quality of evidence: VOCCRATE)
- 3. Observe and review practices in the prooperative clinic, postenest resis care unit, surgical intensive care unit and/or surgical ward. (Quality of evidence
- 4. Use artiseotic impregnated actures as a strategy to prevent SSL (Quality of evidence: VOCEPATE)

Approaches that should not be considered a routine part of SSI prevention.

- 1. Do not routinely use tancomyclin for antimicropial prophylaxis. (Quality of evidence MCCERATE)
- 2. Do not routinely delay surgery to provide parenteral numbers. (Quality of existence: HKH)
- 3. Do not routinely use antiseptic drapes as a strategy to prevent SSI. (Quality of exidence: HIGH)

Urresolved issues

- I. Optimize tissue oxygenation at the incision site.
- 2. Preoperative intranasal and pharmageal CHG treatment for patients unnergoing rand otheracic procedures
- 3. Use of gentamic n-collagen sponges.
- 4. Use of antimicropial cowder.
- 5. Use of surgical attire

Quality of Evidence			
HIGH	Highly confident that the true effect lies close to that of the estimated size and direction of the effect, for example, when there are a wide range of studies with no major limitations, there is little variation between studies, and the summary estimate has a narrow confidence interval.		
MODERATE	The true effect is likely to be close to the estimated size and direction of the effect, but there is a possibility that it is substantially different, for example, when there are only a few studies and some have limitations but not major flaws, there is some variation between studies, or the confidence interval of the summary estimate is wide.		
LOW	The true effect may be substantially different from the estimated size and direction of the effect, for example, when supporting studies have major flaws, there is important variation between studies, the confidence interval of the summary estimate is very wide, or there are no rigorous studies.		

Based on the CDC Healthcare Infection Control Practices Advisory Committee (HICPAC) "Update to the Centers for Disease Control and Prevention and the Healthcare Infection Control Practices Advisory Committee Recommendations Categorization Scheme for Infection Control and Prevention Guideline Recommendations" (October 2019), the Grades of Recommendation, Assessment, Development, and Evaluation (GRADE), and the Canadian Task Force on Preventive Health Care.

Selected Risk Factors for and Recommendations to Prevent Surgical Site Infection (SSI)

Misk Factor	Resonnerdation	Quality of Endence
Inthitsic, puniant-related (preoperati	NE)	
Unmod fiable		
Age	No formal recommendation relationship to increased risk of SS, may be secondary to comorbidities or immunosenescence	N/A
History of raciation	No formal recommendation Prior irradiation at the surgical sits increases the risk of SSI, likely due to itssue damage and wound ischemia.	NX
History of skin and soft-tissue injections	No formal recommendation. Fistory of a prior skin infection may be a marker for inherent differences in host immune function.	N/A
Vodifishie		
Glucose control	Control serum blood-glucose levels for all surgical patients including patients without diabetes.	HSH
Obesity	increase dosing of prophylactic antimicrobial agent for moroidly obese patients.	HCF
Smoking cossation	Encourage smoking cessation within 30 days of procedure.	HSH
inmunisuppressive medications	Avoid immune suppressive medications in deroperative period if possible	100
dypostouminemia	No formal recommendation. Though a noted risk factor, — do not delay surgery for use of total parenteral numbers.	NX
5 overvi nasal colonization	Descioner patients with rasal musimon or position-todice prior to surgery	NODERATE

Preparation of patient		
Hair removal	Do not remove unless hair wil, interfere with the operation i, if hair remove, is necessary, remove outside of the operating room by clipping. Do not use reports.	HIGH
Preoperative infections	Identify and treat infections remote to the surgical site (eg., urinary tract infection in the presence of prior to elective surgery. Do not routinely test or treat for asymptomatic becterior a except in urologic procedures.	U CDER4TE
Operative characteristics		
Surgical scrub (surgical team members' hands and forearms)	Use appropriate arrisectic agent to perform preoperative surgical scrub. For most products, scrub the hands and foreams for 2-5 minutes.	MODERATE
Skin preparation	Mash and clean skin around incision site. Use a dual agent skin prepion taining alcohol unless contraindications exist.	HIGH
Ant microcial prophylaus	Administer only when indicated. Select appropriate agents based on surgical procedure, most common cachagans causing SS for a specific procedure, and qualished recommendations. Administer within 1 hour of nois on to maximize a saue concentration. O scontinue antimiprobial agents after indicated cosure in the operating room.	HIGH
Blood transfusion	Blood transfusions increase the risk of SS, by decreasing macrophage function. Reduce blood loss and need for blood transfusion to greatest extent possible.	MCDER4TE
Surgeon skillytechnique	Handle tissue carefully and endicate dead space.	10!!
Appropriate gloving	All members of the operative beam should double glove and change gloves when perforation is noted.	10!!
Asepsis .	Adhere to standard principles of operating room aseosis,	10//
Operative time	No formal recommendation in most recent guidelines minimize as much as cossible without sacrificing surgical technique and aseptic practice.	HIGH
Operating room characteristics		
Vancilation	Follow American Institute of Architects recommendations for proper air handling in the operating moon.	10//
Traffic	Visiniae operating room traffic	10!!
Environmental surfaces	Use an Environmental Protection Agency (EPA) approved hospital disinfectant to clean visibly soiled or contaminated surfaces and equipment in accordance with manufacturer's instructions.	10!!
Ster Ization of surgical equipment	Sterilize all surgical equipment according the device manufacturer's traditated parameters; cycle type time, temperature, pressure, and dry time. Minimize the use of immediate use steam specification.	MODERATE

Mindful Meditation - An answer to Stress Reduction and Improved Wellbeing

Background

Depression continues to be a major health issue for older adults. It affects about 20% of adults especially the age of 65 years and older. 1 Moderate to higher levels of depression and anxiety (DAS) were also observed among approximately 45% of Indian youth especially after COVID-19. DAS was significantly higher among youth preparing for competitive examinations. Collegegoing students showed significantly higher levels of depression and stress. It can also lead to suicidal thoughts and behaviours which are important public health concerns across the globe.²

These findings indicate the need for a multispectral approach to cope up with stress and to improve psychological well-being among youth.

There are many ways to treat depression. Antidepressants and psychotherapy are the usual first-line treatments, but ongoing research has suggested that a regular meditation practice like Mindful Based Meditation (MBM) practices can help by changing how the brain responds to stress and anxiety.

MBM can improve neuroplasticity (change in brain structure) and can facilitate the process of emotional regulation which is a key component of suicidal risk in some disorders. There is evidence that MBMhave a positive effect on mediating and precipitating factors of suicidal behaviour which could potentially make them a preventive intervention for suicide risk.

What is Mindful Based Meditation (MBM)³

Mindfulness is a state of intentional, non-judgmental focus on the present moment. Mindfulness techniques are often incorporated into other practices, such as yoga or meditation. It is often thought to include the following elements:

- Awareness Being tuned in to what is happening in the present moment, including sights, sounds, smells, or physical sensations we might usually ignore.
- Focus Paying attention to the present moment, without thinking about past or future events.
- Acceptance Accepting whatever we might be feeling or thinking,

without judging it or trying to change it or our reactions.

Observation - Recognizing unpleasant sensations, thoughts, and feelings as temporary and fleeting, observing them objectively without reaction or judgment.

How Mediation impacts our brain¹

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Meditation has been found to change certain brain regions that are specifically linked with depression. For instance, scientists have shown that the medial prefrontal cortex (mPFC) becomes hyperactive in depressed people. The mPFC is often called the "me center" because this is where we process information about ourselves, such as worrying about the future and ruminating about the past. When people get stressed about life, the mPFC goes into overdrive.

Another brain region associated with depression is the amygdala, or "fear center." This is the part of the brain responsible for the fightor-flight response, which triggers the adrenal glands to release the stress hormone cortisol in response to fear and perceived danger.

These two brain regions work off each other to cause depression. The "me center" gets worked up reacting to stress and anxiety, and the "fear center" response leads to a spike in cortisol levels to fight a danger that's only in our mind. Research has found that meditation helps break the connection between these two brain regions. When we meditate, we are better able to ignore the negative sensations of stress and anxiety, which explains, in part, why stress levels fall when we meditate.

Another way meditation helps the brain is by protecting the hippocampus (a brain area involved in memory). One study discovered that people who meditated for 30 minutes a day for eight weeks increased the volume of gray matter in their hippocampus, and other research has shown that people who suffer from recurrent depression tend to have a smaller hippocampus.

Common myths around Meditation practices

There are many myths or misconception around meditation practices. Especially like, it requires sitting long time in silence with eyes closed to remove the negative thoughts from the mind. The aim of meditation is not to push aside stress or block out negative thinking, but rather to notice those thoughts and feelings, all the while understanding that we don't have to act on them. This could be as simple as closing our eyes or even keeping our eyes open and

repeating a single phrase or word or counting breaths for just 5-10 minutes to begin with. This helps provide some distance from those negative thoughts or stressful feelings, allowing us to recognize that, although they affect us, but they are not us. There are many techniques of meditation, one of the highest researched and proven one is Mindful Based Meditation.

Fewcommon Mindfulness practices³

Here are brief descriptions of a few common mindfulness exercises. We can try many of these anywhere, at home or on the go, in a few moments of quiet.

- Mindful breathing One of the simplest exercises is mindful breathing. Simply spend a few minutes focusing your awareness on the movement of your thoughts and your breath in and out, without trying to change them in any way. This can be practiced even while driving the car to clinic or during day-to-day household work.
- Body scan While seated or lying down, gradually focus your attention on one body part at a time, noticing any physical sensations without judging or reacting to them. A typical body scan might start with the soles of the feet and then progressively move awareness to the knees, hips, back, belly, chest, neck, and head.
- Mindful eating This exercise involves eating very slowly and deliberately while paying attention to the sensations of holding the item, smelling, tasting, chewing, and swallowing it.
- Loving kindness meditation An exercise in which you direct positive thoughts and wishes first to yourself, then to your close family and friends, then to more distant acquaintances, and finally to all humanity.
- Mindful movement While walking or rolling, pay close attention to your breathing, your body movements, and your surroundings. You can also practice mindfulness while doing familiar exercises, such as yoga, focusing on the physical sensations as you enter and hold each pose.

In summary, Meditation trains the brain to achieve sustained focus, and to return to that focus when negative thinking, emotions, and physical sensations intrude — which happens a lot when we feel stressed and anxious. This has been endorsed by Dr. John W. Denninger, director of research at the Benson-Henry Institute for Mind Body Medicine at Harvard-affiliated Massachusetts General Hospital.

- 1. https://www.health.harvard.edu/mind-and-mood/howmeditation-helps-with-depression
- 2. Vaidya R, Kaza SK, Gupta P, Weine SM, Nooyi SC, Chaudhury N. Depression, Anxiety, and Stress among Indian Youthduring the COVID-19 Lockdown - A Cross-Sectional Survey. J Mental Health Hum Behav [serial online] 2021 [cited 2023 Apr 23];26:153-60.
- 3. University of Washington. (2017). How to Reduce Stress Through Mindfulness [Factsheet]. Aging Well with a Physical Disability Factsheet Series. Healthy Aging & Physical Disability RRTC, http://agerrtc.washington.edu

Disclaimer: This information is not meant to replace the advice from a medical professional. You should consult your health care provider regarding specific medical concerns or treatment.

By: Dr. Purav Thakkar



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