AHMEDABAD MEDICO NEWS Registered under RNI No. GUJENG/2006/17532 Published on 27th of Every Month under Regd. No. GAMC / 1548 / 2022-2024 issued by SSP Ahmedabad. Valid upto 31-12-2024 and Permitted to Post at without Prepayment No. PMG/NG/099/2022-2024 Valid Upto 31-12-2024 Ahmedabad PSO on 27th Date of every Month













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NAME OF THE PRINTING PRESS & ADDRESS -: **HITESHKUMAR & COMPANY** AMRUT INDUSTRIAL ESTATE, DUDHESHWAR, AHMEDABAD - 380 004. M. 77780 11951, 92288 85157 | 📴 77780 11951 | E-mail : hiteshkumarandco@gmail.com

Month Face Value Rs. 08=00 - Yearly Face Value Rs. 96=00

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 PATEL Hon. Secretary - AMA

Imm. Past President - DR. KIRITKUMAR C. GADHAVI

VOL. 17

AUGUST-2022

ISSUE-4

15-08-2022, Celebration of 76th Independence Day



120th Annual Day Celebration



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

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







Dear members.

Wishing you wonderful greetings of this festive season Apart from festivals, we have back to back celebrations of two different events, which made us to feel very proud..... as always

On 24th July 2022, we celebrated 120th Annual day of Ahmedabad Medical Association, in its own traditional way & with some more add-ons. The guests Shree Manoj Agrawal, Additional Chief Secretary, Government of Gujarat & Shree Ajay Patel, Chairman of Indian Red Cross Society, Gujarat State Branch, have graced the occasion with their esteemed presence. We felt extremely humble honoring the admirable personalities of our profession; in spite of heavy rain on the day, all those meritorious were regarded with great applaud from huge crowd. Appreciation of medical students for their achievements in different exams is another good gesture of our annual day programme. Presence of dignitaries, senior members with marked presence in the hall, made the event memorable.

'Har Ghar Tiranga' - a campaign under the aegis of "Azadi Ka Amrit Mahotsay" - The festival, which was celebrated nationwide & we also did so with great enthusiasm. Our national flags were hoisted by us & our members, as per Tiranga trivia laid by Government of India. This day even after 75 years of

Independence, gave an immense patriotic feelings with great honour for our great nation.

Keeping in mind the proverb, "Never step over one duty to perform another", we moved on fulfilling our other duties as well. On 22-07-2022, a strong protest was called upon by Indian Medical Association, Gujarat State branch, & Ahmedabad Medical Association against impractical notices issued by the government authorities i..e moving ICUs on ground floor. We, the AMA have revealed our unity & strongly opposed such impractical & non-scientific approach of Government.

To coincide with International & national health awareness campaign, we tried to keep scientific or public awareness programmes on or around the days / period which observed as particular health related awareness. 1st to 7th August is observed as world breast feeding week; AMA organized a scientific programme on same subject in association of Academy of Paediatricians of Ahmedabad on 7th August. 6 different speakers including paediatricians, Gynecologist & representative of public health from Ahmedabad Municipal Corporation, nicely presented different aspects on breast feeding.

We are thankful to all the members who are actively participating as resource persons for the scientific programmes organized by AMA & humbly request to all members to actively participate the events organized by AMA. If we work together with motto of "Secret to success is the result of unity, hard work & perseverance", we as an organization will definitely be unsurpassed for ever.

Jai AMA

Dr. Dilip B. Gadhavi **President**

Dr. Gargi Patel Hon. Secretary

Ahmedabad Medical Association

Ahmedabad Medical Association

















Programme on 13-08-2022

TWO SYMBOLIC FLAGS AND THE LIT TORCH been carried by a Junior Medico, Dr. Aishwarya Nair, as she is feted by WHO for **Covid 19 Country Preparedness**

She was carrying from Mumbai to Sabarmati Ashram, Ahmedabad to New Delhi and hand it over to Her Excellency Smt.Droupadi Murmu

President of AMA Honoured her by handing over National Flag & a Lit Torch called AAROGYA JYOTI (Mashaal type) that would be handed over to the President & PMO.

Place: Gandhi Ashram, Ahmedabad





Glimpses of Humanitarian Services of Gujarat Red Cross



Red Cross is the largest humanitarian organization in the world. Indian Red Cross Society established in 1920 under the Parliament Act "Indian Red Cross Society Act-1920". Hon'ble President of India is the President of Indian Red Cross Society, National

Head Quarter, and Hon'ble Governor of the State is the President of State Branch. Gujarat Red Cross has been actively doing several humanitarian activities since 1960. Gujarat State Branch is the strongest state branch in the country and got "Best State Branch Award".

Gujarat Red Cross has the strength of 33 district branches and 79 taluka branches in the state. The brief about several humanitarian activities are as follow:

- 1. Blood Transfusion Services.
- 2. Thalassemia Prevention and Control Programme.
- 3. State of Art Pathology Laboratory.
- 4. Radiology Services (Digital X-Ray, Sonography & Mammography)
- 5. Physiotherapy and Cerebral Palsy Centre.
- 6. Artificial limbs centre.
- 7. Youth Red Cross and Junior Red Cross Programme.
- 8. TB Prevention Programme.
- 9. Disaster Management Programme.
- 10. First Aid training.
- 11. BLS Training
- 12. Home Health Care Attendant programme.
- 13. "Vatsaly", Senior Citizen Home.
- 14. DMLT in affiliation with Gujarat University.

Blood Transfusion Services: Indian Red Cross Society is the pioneer in blood transfusion services in the country. Total 21 Red Cross run blood banks have been providing adequate and safe blood supply in their concerned areas. 7 More Red Cross blood banks will be functional within a year. Red Cross is committed to ensure availability and accessibility of safe and quality blood and blood components through network of blood banks and blood storage centres. Our 4 blood banks have got NABH Accredited and others are in process.

Our Red Cross Blood Bank run by Ahmedabad District Branch is the largest Blood Bank of Gujarat State. It is NABH Accredited blood bank and having NAT testing facility. Ahmedabad Red Cross Blood Bank is the first blood bank in India and second in the world which received AABB certification.



AHMEDABAD MEDICO NEWS 27-08-2022

Thalassemia Prevention Control Programme: Gujarat State Branch has started Thalassemia Prevention Programme in 2004. Prenatal Diagnosis Programme also has been carried out since 2009. This is the largest prevention programme in South-East Asia. Its glimpses are as under;

- 36 lakh Youths Screed for Thalassemia.
- 7.5 lakh Pregnant Women Screened.
- 580 Prevented birth of Thalassemia Major child.



Radiology Services: To support the poor patients, Red Cross has been providing following services on subsidies charges.

> 200 Rs. Digital X-Ray:

> Sonography: 400 Rs.

Mammography: 1500 Rs.

Pathology Laboratory: Gujarat State Branch has been running pathology laboratory since 2009. Its features are as under;



- State of Art Laboratory.
- NABL Accredited since 2010.
- Equipped with Ultra-Modern Equipment.
- Team of Doctors and Technical Staff.
- Zero Human Error as result directly transfer from equipment.
- Trusted largest Laboratory.
- 50 Sample Collection Centres.
- Home visit facility for sample collection.
- Subsidised Charges.
- 24 x 7 working.

The charges of tests and profiles are:







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AHMEDABAD MEDICO NEWS 27-08-2022

MONTHLY NEWS BULLETIN

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WEWELCOME FOLLOWING NEW LIFE MEMBERS

=	12220	L	DR. PATEL BAIJU MUKESHBHAI
	12221	L	DR. DAVE KRISHNABEN KETANKUMAR
Ξ	1222	L	DR. JAGADA URULA VASANTBHAI
<u> </u>	12223	LC (Transfer)	DR. BHUVA KANDARP JAYANTILAL
=	12224	LC (Transfer)	DR. BHUVA MEERA KANDARP
	12225	L	DR. JOSHI JAIMIN MUKESHBHAI
<u> </u>	12226	L	DR. UMRETIYA NIDHI KEYUR
=	12227	LC	DR. DADHANIA DIVYESHKUMAR RAMNIKLAL
=	12228	LC	DR. DADHANIA DRASHTY DIVYESHKUMAR
<u> </u>	12229	L (Transfer)	DR. PATEL YOGESH CHHAGANLAL
Ξ	12230	L	DR. DHAKADIYA NILESHKUMAR MANUBHAI
Ξ	12231	L	DR. THAKKAR NISARGKUMAR BHARATBHAI
=	12232	L	DR. SHAH NIDHI MEET

7		nΕ		-1	 В	н	Ю	

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DR. GADHAVI DILIP B.

9898047505 VICE PRESIDENT

DR. SHAH URVESH VIPINCHANDRA

9228233441

DR. SHETH MAULIK SURESHCHANDRA

9825915464

HON. FINANCE SECRETARY

DR. DAVE KALPITA M.

9924558450

HON. SECRETARY

DR. PATEL GARGI MAHESH

9824343744

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9825210880

HON.JOINT. SECRETARY

DR. SHAH SAHIL NITINKUMAR

9428501412

HON. LIB.SECRETARY

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9725753032

IMM. PAST PRESIDENT

DR. GADHAVI KIRITKUMAR C.

9998370353

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SOLA

BODAKDEV

MANINAGAR

NARANPURA

GHODASAR

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9825174671 DR. PARIKH RUTVIJ BHARATBHAI ELLISBRIDGE

9898097604

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Dr. SHAH SUNIL NAVINCHANDRA 9824068716

DR. SHAH VISHAL RAJESHBHAI 9979607072

DR. BHANSALI PIYUSH MAFATLAL 8320365392

OTHER THAN P.G.

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DR. KHARSADIYA KIRIT HEMCHANDBHAI SHAHIBAUG 9825528788

DR. MAHESHWARI AMRATLAL KIRPALDAS ISANPUR 9426285940

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DR. RATHOD BALKRISHNA N. NARANPURA 9879569954

DR. SHAH HETALBHAI GUNVANTLAL BODAKDEV

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DR. SHAH JAGMOHAN MUSADILAL RAKHIAL 9377403230

DR. SHAH JAYESH CHINUBHAI NARANPURA 9426274536

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INSTALLATION CEREMONY

All the members are invited to grace the occasion of Installation Ceremony of Dr. Jitendra Hargovandas Shah as President of Ahmedabad Medical Association and the team of Office Bearers & Managing Committee Members for the year 2022-2023.

Date	02-10-2022, Sunday
Time	10.00 am Onwards
Venue	Dr.R.M.Fozdar Hall, AMA House,
	Opp.H.K.College, Ashram Road,
	Ahmedabad.
Chief Guest	Dr. Anil J. Nayak
	M.S.(Ortho)
	Member, National Medical Commission
	${\bf Exe. Committee Member, Dental Council of India}$
	${\it Exe.} Committee {\it Member,} Indian {\it Nursing Council}$
Guest of Honour	Mr. Jaxay Shah
	Managing Director of Savvy Infrastructure Pvt. Ltd.
	Ex-Chairman of CREDAI National (Confederation of Real Estate Developer's Associations of India)
	Chairman of ASSOCHEM Gujarat Chapter
Installation Officer	Dr.Yogendra Modi
	Dean, GCS Medical College, Ahmedabad

NOTICE

Dear Members,

The Annual General Body Meeting of the members of the Ahmedabad Medical Association will be held on Wednesday, 14-09-2022 at 3.30 p.m. at our premises to transact the following agenda.

N.B. For the want of quorum the meeting will be held after 15 minutes.

AGENDA

- 1. To read and confirm the minutes of the previous Annual General Body meeting.
- 2. Anything arising out of it.
- 3. To pass the Annual Report for the year 1-10-2021 to 30-9-2022. (The Annual Report will be available in office from 7th September, 2022 To 12th September 2022, 5.00 pm)
- 4. To pass the Income & Expenditure A/C for the year 2021-2022.
- 5. To pass the Audited Report for the year 1-4-2021 to 31-3-2022. (The account will be available in office from 7th September, 2022 To 12th September 2022, 5.00 pm)
- 6. To pass the estimated budget for the year 2022-2023.
- 7. To appoint Auditors for the year 2022-2023.
- 8. To pass the resolution to operate Bank A/C.
- 9. To elect members for State Council for the year 2022-2023, post 105 (103+2) Nomination Forms will be available from the office from 7-9-2022. Last date for receiving the form is 10-9-2022, before 3.00 p.m. Last date for with drawals is 13-9-2022 before 3.00 p.m.
- 10. Election of the following sub committees:
 - (1) Scientific (2) Sports & Entertainment (3) Building
 - (4) Library (5) Rules (6) Benevolent (7) Ethical (8) Insurance
 - (9) Family Planning (10) Public Relation. The nomination Forms will be available from the office from 7-9-2022. Last date for receiving the form is 10-9-2022, before 3.00 p.m. Last date for withdrawals is 13-9-2022 before 3.00 p.m.

GENERAL RULES FOR ELECTION:

(a) The Nomination form of candidate should be duly

- proposed and seconded.
- (b) Photo Identity document is required to cast the vote (AMA Identity card, IMA Identity card, Identity card issued by Election Commission. Driving License. Passport etc) whenever asked for.
- (c) The attendance register will be closed at 4.00 p.m. sharp.
- 11. Any other business with the permission of the chair.

Dr. Gargi M. Patel Hon. Secretary

NOTICE

Annual General Body meeting will be held on Wednesday 28-9-2022 at 3.30 p.m. at our premises.

N.B. For the want of quorum the meeting will be held after 15 minutes.

AGENDA

- 1. To confirm minutes of proceeding of the Annual General Body meeting held on 15-9-2021.
- 2. To delegate powers of Annual General Body to the Managing Committee till next meeting of the Annual General Body except those relating to changes
- 3. Any other business with the permission of the chair.

Dr. Gargi M.Patel

Hon. Secretary

CONGRATULATION

Name : Adit Nair
NEET Marks : 701/720

Parents Name : Dr. Balakrishnan V. Nair

: Dr. Geeta B. Nair

IMA Membership No.: LM/GUJ/31828



Adit taken admission at JIPMER, PONDICHERRY

Scientific Programme

AMA in association with TiE Ahmedabad is organising a knowledge session on Healthcare Entrepreneurship.

Date: 4th September 2022, Sunday

Time: 10.00 am to 12:30

Venue: H.T.Parekh Hall, Ahmedabad

Management Association, Atira

Program Highlights

Health in Wallet : Emerging Technologies in Healthcare

by Dr Darshana Thakker

Panel Discussion: Reimagining Healthcare-

Opportunities & Challenges

Esteemed Panel

Dr. Bharat Gadhvi President AHNA & HCG

Dr. Rakesh Joshi Medical Superintendent

Civil Hospital, Asarwa

Dr. Mona Desai President, IMA, Women Doctors Wing

Dr. Ketan Shukla Aarogyam HospitalDr. Shilpa Agrawal Medilink Hospital

Mr. Navneetbhai Thakershy Thakershy Charitable Hospital

Legal Advice for : Mr. Rajesh J. Goswami

<u>Sudden Death of Patient</u> (Advocate Gujarat Highcourt)

The Programme will be followed by Lunch.

Kindly Register your name at AMA Office between 2 to 6 p.m.

Dr. Dilip B. Gadhavi Dr. Gargi M. Patel

President - AMA Hon. Secretary - AMA

Report of 120th Annual day celebration 24 – 07 - 2022

120th Annual day of Ahmedebad Medical Association was celebrated on 24th July, Sunday. Shree Manoj Agrawal, Additional Chief secretary, Health & family welfare, Govt of Gujarat was the Chief Guest. Shree Ajay Patel, Chairman of Indian Red Cross society, Gujarat state branch was the guest of honor. The programme was started with Dr B N Mehta oration by Dr Hemang Bakshi, Uro-oncologist. The guests were heartedly welcomed & they addressed the audience with their wise words. The prestigious awards were distributed for various categories by the dignitaries. The prizes were distributed to the students who topped in different medical exams. The prizes were also distributed to all the winners of sports events & quiz. Dr. Ashish Bhojak nicely managed the event on the stage as master of ceremony. The auditorium was full with almost 270 attendees. The celebration was ended with wonderful lunch & lifetime memories.

Report of Scientific programme

Period of 1st August to 7th August 2022, was observed as "World breast feeding week" to protect, promote & support breastfeeding across different levels of society. A scientific programme was organized on breast feeding in association with Academy of Padiatrics, Ahmedabad on 7th August, Sunday at R M Fozdar Hall, AMA; Dr Riddhi Shukla, Consultant Gynecologist talked on "What should mother know regarding Feeding the baby?". The renowned paediatricians, Dr. Manish Mehta, Dr Prachee Shah, Dr. Vaibhav Patel, & Dr. Sunil Patel talked on different topics including importance of breast milk, trouble shooting in breast feeding, kangaroo mother care & various other aspects. Dr Sagar Panchal, nutritional incharge, AMC provided his valuable inputs. Over all it was a good scientific talk on otherwise neglected subject. The programme was followed by lunch. Total 35 members participated.

OBITUARY

May their soul rest in eternal peace.



DR. PRAVINCHANDRA K. MAKWANA

L-2564 D.P.H.

Date of Birth : 07-02-1948 Date of Death : 08-08-2022

We send our sympathy & condolence to the bereaved family.

(163)

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લેકીઝ-કલલ

नारी समाजस्य कुशलवास्तुकारा।

૨૦૨૨-૨૩ કમીટીના સભ્યોના નામ

ઃ શ્રીમતી સુષમા નયન શાહ પ્રમુખ

: શ્રીમતી યશોદાબેન અમીન, શ્રીમતી પુષ્પાબેન બાવીસકર **ย**ีนหมูพ

: શ્રીમતી જશનાબેન મહેતા માનદ્ મંત્રી

: શ્રીમતી પ્રતીમાબેન મહેતા. શ્રીમતી શોભનાબેન મહેતા સહમંત્રી

: શ્રીમતી મયુરી વછરાજાની ਅજਾਰચੀ ઃ શ્રીમતી તૃપ્તીબેન ભાલાશી સહખજાનચી

શ્રીમતી હર્ષાબેન પંચાલ. શ્રીમતી શીલાબેન ચૌધરી. કારોબારી સભ્ય :

શ્રીમતી અનસુયાબેન લાડોલા, શ્રીમતી રજનીબેન મહેશ્વરી,

શ્રીમતી રાધા શાહ

કાર્ચક્રમ નં. ૧ પદગ્રહણ વિધી

: ૩૦ સપ્ટેમ્બર, ૨૦૨૨, શુક્રવાર

: સાંજે ૩.૩૦થી ૪.૩૦ સમય ട്ഷഗ

તારીખ

: એ.એમ.એ., આશ્રમ રોડ

નવરાત્રી મહોત્સવ કાર્ચક્રમ નં. ૨

તારીખ : ૩૦ સપ્ટેમ્બર, ૨૦૨૨, શુક્રવાર

ઃ સાંજે ૪.૩૦થી ૫.૦૦ સમય

ચા-કોફી અને રજીસ્ટ્રેશન

સાંજે ૫.૦૦ થી ૭.૩૦ ગરબા

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- સભ્ય વિના મુલ્યે, મહેમાન રૂા. ૧૫૦/- પ્રતિ વ્યક્તિ
- સૌ સભ્ય બહેનોએ આઈકાર્ડ લઈને આવવું.
- બંગડી-શણગાર તથા દાંડીયા શણગાર પ્રતિયોગિતા રાખવામાં આવી છે. એમાં ભાગ લેનાર સભ્યે પ.૦૦ વાગ્યા સુધીમાં હાજર થવું જરૂરી છે.
- ગરબામાં વય જુથ પ્રમાણે ઈનામો આપવામાં આવશે.
- ગરબા હરિકાઈ પછી સઘન નાસ્તાની વ્યવસ્થા રાખેલ છે.

રજીસ્ટ્રેશન તા. ૨૬-૦૯-૨૦૨૨, ગુરૂવાર સુધીમાં કરાવી લેવું.

શ્રીમતી જશનાબેન મહેતા श्रीमती सुषमा नयन शा&

માનદ્ મંત્રી

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Souce: WHO

Antimicrobial Stewardship Program Guideline

1. Introduction

Antimicrobial resistance (AMR) has emerged as a major public health problem all over the world. Infections caused by resistant microbes fail to respond to treatment because of limited therapeutic options resulting in prolonged illness and greater risk of death. Treatment failures also lead to longer periods of infectivity, with increased numbers of infected people in the community. This in turn exposes the general population to the risk of contracting a resistant strain of microorganisms. As they become resistant to first-line antimicrobials, the forbidding high cost of the second-line drugs may result in failure to treat these diseases. Most alarming of all are the diseases caused by multidrug-resistant microbes, which are virtually non-treatable and thereby contributes to a "post-antibiotic era". Inappropriate antimicrobial use is associated with the emergence of resistance. In addition, the misuse of antibiotics contributes to the growing problem of antimicrobial resistance and is considered as a most serious threat to public health.

An effective antimicrobial stewardship program with appropriate

- drug selection
- dosing
- route of administration and
- duration of antimicrobial therapy

coupled with comprehensive infection control program has shown to limit the emergence and transmission of antimicrobial resistant pathogens. Patients who are exposed to inappropriate/unnecessary antibiotics are placed at risk for serious adverse events with no clinical benefit. Moreover, to restrict the misuse or unnecessary antibiotic prescription, the Policy Statement on Antimicrobial Stewardship by SHEA, IDSA, and PIDS strongly encourages healthcare institutions to develop stewardship programs. In 2015, the English surveillance programme on antimicrobial utilisation and resistance (ESPAUR) have published a report on prescribing patterns of antimicrobials in different healthcare settings between 2010 and 2014. This showed that i) the total consumption of antibiotics in primary and secondary care increased from 21.6 to 23.0 defined daily doses (DDD)/1,000 inhabitants/day between 2011 and 2014, ii) 11.7% of increased antibiotic prescription

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in in-patient, iv) 8.5% of increased prescription in hospital outpatients settings. Overall, 6% of increased antibiotic prescription in both community and hospital was seen.

In 2006, CDC guideline "Management of multi-drug resistant organism in health care setting stated that emergence of multi-drug resistance can be controlled in paying great attention to judicious antimicrobial use. Similarly, in 2009, CDC launched "Get Smart for Healthcare Campaign" to promote improved use of antibiotic in in-patient settings. In 2015, the White House published the National Action Plan for Combating Antibiotic-Resistant Bacteria with five main goals to: 1) curb antibiotic resistance, 2) strengthen antimicrobial resistance surveillance, 3) advance development of rapid diagnostics, 4) accelerate research targeting novel therapeutics, and 5) collaborate with other countries to strengthen prevention, development, and surveillance efforts

Antimicrobial stewardship program (AMSP) helps clinicians to improve:

- · The quality of patient care
- Patient safety
- Reduced treatment failures
- Increasing frequency of prescribing appropriate therapy and prophylaxis
- Reduces the CDI rates
- · Reduces antimicrobial resistance

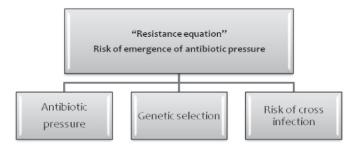


Figure 1: Emergence of resistance and hospital cross-infections

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About: Inappropriate use of antimicrobials:

Causal associations between antimicrobial use and emergence of antimicrobial resistance

- Changes in antimicrobial use are paralleled by the prevalence of resistance
- 2. Antimicrobial resistance: more prevalent in HA infection than CA infection
- Health care-associated infections are more likely to be caused by resistant strains especially in those who have received prior antimicrobials
- 4. Hospitals that have the highest rates of antimicrobial resistance also have the highest rates of antimicrobial use
- Patient exposed to longer duration of antimicrobials have an increased risk of colonization with resistant organisms

2. Mortality rate correlates with the presence of multi drug resistant organisms

- Association between development of antimicrobial resistance in Staphylococus aureus, Enterococci, gram negative bacilli and mortality
- Enterococcal infections have been associated with mortality rates exceeding 30%
- A Meta-analysis of published studies have found that patient with methicillin resistant Staphylococcus aureus (MRSA) bacteremia had a increased risk of mortality compared with methicillin susceptible Staphylococcus aureus (MSSA)

3. Stop killing the beneficial bacteria

 Consensus about antibiotics focus on bacterial resistance but permanent changes to our protective flora have more serious consequences

4. Collateral damage

- Average child receives 10-20 courses of antibiotics before 18 years of age
- Antibiotic affect our resident microbiota and may not fully recover after a course of antibiotics
- Over use of antibiotics may be contributing to obesity, DM, IBD, allergies and asthma

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5. Why we need to improve antibiotic use

- Antibiotics are the only drug where use in one patient can impact the effectiveness in another
- Improving antibiotic use improves patient outcome and saves money
- 3. Antibiotic misuse adversely impact patient and society
- 4. Antibiotics are misused across the continuum of care
- Inappropriate use of antibiotics in animals
- Improving antibiotic use is a public health imperative-WHO considers AMR an emerging threat to global health

6. What can the individual physicians do

- Obtain appropriate cultures before starting antibiotic
- 2. Review antibiotic use after 48 72 hours: does it need to be continued?
- 3. Stop antibiotic in patient with alternative non-infectious diagnosis
- 4. Optimize dosing and duration of antibiotic therapy
- Avoid unnecessary use, especially in viral upper respiratory tract infections (75 %)

Antimicrobial prescribing facts: The 30% Rule

- 30% of all hospitalised in-patient at any given time receive antibiotics
- Over 30% of antibiotics are prescribed inappropriately in the community
- · Up to 30% of all surgical prophylaxis is inappropriate
- 30% of hospital pharmacy costs are due to antimicrobial use
- 10-30% of antimicrobial cost can be saved by antimicrobial stewardship programs

Antimicrobial resistance in health-care associated infections (HAI)

AMR is of great importance in health-care settings. Further, there is an association between the development of resistance and an increase in mortality, length of hospitalization and the cumulative cost of health care, which attributes to

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inappropriate, inadequate or delayed therapy. In 2010, WHO recognized antimicrobial resistance as one of the three great threats to human health.

About 50% of antimicrobial use has been found to be inappropriate (WHO). Hence, strategies to prevent the emergence and spread of health-care associated antimicrobial-resistant organisms are essential. Implementation of an effective strategy need to include components of:

- Effective clinical antimicrobial stewardship
- · Meticulous hand hygiene
- · Surveillance and monitoring of antimicrobial resistance, especially MDR organisms

Antimicrobial stewardship must include the evidence based education of physicians about appropriate drug, dose, dosing interval and duration. De-escalation and optimization campaigns should also be undertaken to educate and inform the public about the specific indications for antibiotic use, origin and spread of antimicrobial resistance and what needs to be done to control it.

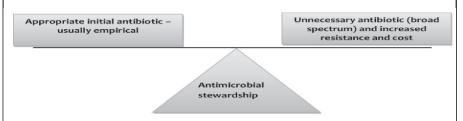
Availability of new antimicrobials

The situation in the development and approval of newer antimicrobial agent is not encouraging. The solution to the current approaches to antimicrobial resistance is to preserve the effectiveness of the drugs which are presently available by antibiotic stewardship and to maximize hospital infection-control practices to limit the spread of resistance.

"Drug resistance follows the drug like a faithful shadow"

2. Definition of antimicrobial stewardship

Coordinated intervention is designed to improve and measure the appropriate use of antimicrobial agents, by promoting the selection of optimal antimicrobial drug regimen including dosing, duration of therapy and route of administration (SHEA, IDSA, PIDS – April 2012).



A Balancing ACT

Figure 2: Balancing act of antimicrobial stewardship program in healthcare settings.

- 3. Purpose of antimicrobial stewardship program
- 3.1 Primary goal

To optimize safe and appropriate use of antibiotics to improve clinical outcomes and minimize adverse effects of antibiotics.

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3.2 Secondary goal

- To reduce health care costs without adversely impacting quality of patient care
- To reduce the incidence of antibiotic induced collateral damage
- 4. Strategic approaches to antimicrobial stewardship
 - 1. Appropriate antimicrobial therapy.
 - 2. Optimizing antimicrobial prophylaxis for operative procedures.
 - Developing and implementing an antibiotic policies and standard treatment guidelines (STG).
 - Prospective auditing and providing feedback and timely intervention in streamlining the antibiotic prescriptions.
 - 5. Formulary restriction/ pre-authorisation.
 - 6. Improving antimicrobial prescribing by educational and administrative means.

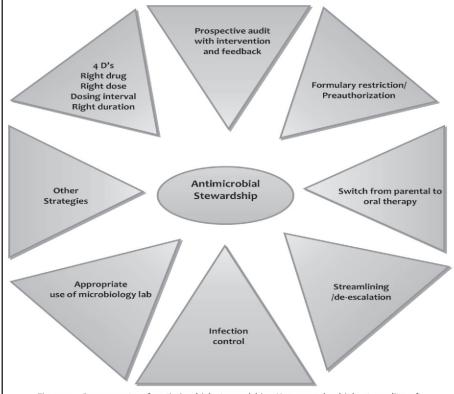


Figure 3. Components of antimicrobial stewardship. However the highest quality of evidence in prospective audit with intervention and feedback and formulary restriction/pre-authorization.