

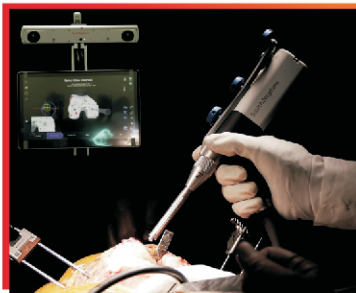
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## AHMEDABAD MEDICAL ASSOCIATION

(Branch of Indian Medical Association)

ESTD : 1902

## AHMEDABAD MEDICO NEWS

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**DR. DILIP B. GADHAVI**  
President - AMA



**DR. GARGI PATEL**  
Hon. Secretary - AMA

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

**VOL. 17**

**SEPTEMBER-2022**

**ISSUE - 5**

### HIGHLIGHTS Programme

06-10-2022 Education Seminar

### Article

Hand Foot and Mouth Disease (HFMD)

Please Save  
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of AMA to get regular  
updates on  
WhatsApp

## Visit of National President, IMA (HQs) at AMA



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

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



Dear Members

At the end of our tenure we are feeling very grateful to entire family of Ahmedabad Medical Association for the opportunities, encouragement & most importantly the huge support that we got throughout the year. It was amazing to work with this the noblest organization. We have tried our best to cover every aspect by various activities during this year.

*"Some people want it to happen, some people wish it would happen, others make it happen."*

**- Michael Jordan**

All of such people are vital to keep any organization live & its activities to happen. We convey our sincere thanks to all of them.

The tenure was started with a special drive to increase the strength of our association; & with support of all the office bearers, seniors & colleagues we created history in making maximum numbers of new members all across the nation. Then, we have organized huge numbers of scientific programmes, social events & entertainment programmes. Apart from CMEs & conferences which were pertaining to medical sciences, we also tried some related events like entrepreneurship in healthcare, financial management for doctors and activities for peace of mind for the doctors. We

kept raising our voice for the various issues like BU permission or issue related to shifting of ICU. Our unity was evident when we called a candle light rally upon unfortunate demise of Dr Archana Sharma from Rajasthan. We are sure that, in upcoming years also we will be representing loudly and democratically against any adverse law or event affecting our fraternity.

This year we invited & were fortunate to have all the three key & remarkable personalities of state health department, at our different events. Shree Rishikeshbhai Patel, Honorable cabinet minister of health visited GIMACON organized by AMA; Shrimati Nimishaben Suthar, State Minister of Health inaugurated AMACON 2022 & Shree Manoj Agrawal, Health secretary graced the occasion of 120<sup>th</sup> annual day celebration. We have approached many State & AMC authorities for number of times to represent our issues. We with other office bearers met our honorable Chief Minister twice for the same. The Chief Minister himself also invited the doctors from all over Gujarat at his bungalow at Gandhinagar for the Lunch & discussed personally all the issues.

There is a list of notable members who contributed a lot for our successful tenure. Merely thanking them all with few words will not be enough; but, we can definitely say, with contribution of all of them & all other new upcoming stars, our Ahmedabad Medical Association will achieve new heights & mile stones.

Wishing you all Happy Navratri !!

Jai AMA, Jai IMA

**Dr. Dilip B. Gadhavi**

**President**

**Ahmedabad Medical Association**

**Dr. Gargi Patel**

**Hon. Secretary**

**Ahmedabad Medical Association**



## Visit of National President, IMA (HQs) at AMA



## Visit of National President, IMA (HQs) at AMA



**CONGRATULATIONS !**

**DR. ANILKUMAR J. NAYAK**  
(Mehsana)  
Hony. Secretary General  
IMA (HQs)  
2022-2024



**DR. SUNIL B. CHENWALA**  
(Ahmedabad)  
Hon. Joint Secretary  
IMA CGP, IMA (HQs)  
2022-2024

**Healthcare Entrepreneurship Programme on 04-09-2022****Ladies Club Programme Quiz & Grand Housie on 02-09-2022**





## Ahmedabad Medical Association Cordially invites you for

### Education Seminar

#### Frequently asked questions after NEET UG

- How to select colleges ?
- How to fill choice in form ?
- Many more questions...

**Date** : 06-10-2022, Thursday

**Time** : 5.30 p.m. onwards

**Venue** : AMA House, Ashram Road.

#### Programme Co-ordinator

**Dr. Rajesh Desai**

Associate Professor of Physiology GMERS Medical College, Gandhinagar

**Dr. Jitendra H. Shah**

President - AMA

**Dr. Gargi Patel**

Hon. Secretary - AMA

### OBITUARY

May their soul rest in eternal peace.



**DR. SHIVAJI KAVAJI KOTVAL**

L-4968 M.B.B.S.

Date of Birth : 22-04-1955

Date of Death : 13-08-2022

-----



**DR. MANUBHAI V. DUDHIA**

L-237 M.D.PEDI.

Date of Birth : 03-11-1934

Date of Death : 08-09-2022

We send our sympathy & condolence to the bereaved family.

"અંગદાન, સર્વશ્રેષ્ઠ દાન"



## CONGRATULATIONS !!

1. **Dr. Parimal Desai** has been awarded the most prestigious VIIVO TORIC VISION ICL 1000 Award at Star Surgical 17<sup>th</sup> International EVO VISIAN ICL Expert Summit on 15 September-2022 at Milan-Italy
2. **Dr. Aditya Parimal Desai** has been awarded the most prestigious YOUNG ICL OPHTHALMOLOGIST Award at Star Surgical 17<sup>th</sup> International EVO VISIAN ICL Expert Summit on 15 September-2022 at Milan-Italy
3. **Dr. Vivek Shukla**, Asstt. Professor Neonatology University of Alabama, USA, S/o Dr VISHWANATH SHUKLA received this prestigious GUINNESS WORLD RECORD for intact survival of 21 week gestational age baby.
4. The World powerlifting Congress organized AWPC World Championship in Manchester UK, where **Dr. Anokhi Patel, D/o. Dr. Hemant Patel, (Radiologist) Ahmedabad** secured a gold medal for India in the Junior category and also set a new world record in the Equipped Junior Category. She is medical Intern at LG Hospital



### OBITUARY

May their soul rest in eternal peace.



**DR. NARENDRAKUMAR C. VORA**

L-1943 M.D. PHY.

Date of Birth : 13-09-1945

Date of Death : 17-08-2022

We send our sympathy & condolence to the bereaved family.

"નેત્રદાન, અંધજનને જીવનનું અમૂલ્ય વરદાન"



### **Report of Healthcare entrepreneurship programme, Date: 04-09-2022**

On 4<sup>th</sup> September 2022, AMA in association with TIE, Ahmedabad organized a knowledge session on healthcare entrepreneurship at Ahmedabad Management Association. There was good discussion on reimaging healthcare opportunities & challenges with esteemed panel of dignitaries Dr. Monaben Desai, Dr. Rakesh Joshi, Dr. Ketan Shukla, Dr Bharat Gadhavi, Dr. Shilpa Agrawal & Shri Navneetbhai Thakershy. Dr Darshana Thakkar explained about emerging technologies in healthcare. Approximately 200 participants attended the programme.

### **Report of Scientific programme on “Sepsis”, Date: 19-09-2022**

13<sup>th</sup> September 2022 been observed as “World Sepsis Day” For the awareness of sepsis, its early diagnosis & treatment. In reference of that, AMA in association with Association of Medical Microbiologists organized a CME on 19th September, Monday at Hotel Four point by Sheraton, Near Gujarat College. There was a mind storming panel discussion with esteemed panelists, Infectious disease specialist Dr Vipul Shah, Intesivist Dr Jigar Mehta & Microbiologists Dr Kamlesh Patel & Dr Bhavin Kapadia. Dr Sanjay Rathod talked on Antibiotic stewardship. Over all it was a good scientific talk on most important subject of current era. The programme was followed by lunch. Total 90 members participated.

“રસતદાતા, મદદદાતા”



**Annual activities : 2021-22**

Date	Event
26-09-21	Installation of New Team AMA
03-10-22	Women doctors wing conference: Resilience
10-10-21	Public awareness programme on "World Mental Health Day" live on facebook & you tube
02-11-21	Dhanvantari Poojan & press conference regarding doctor on call services during Diwali
03 to 07-11-2021	Doctor on call service provided by AMA, AFPA during Diwali
14-11-21	Dr N T Shah & Dr H G Jambhekar Scientific Programme – Approaching a case of Diabetes
14-11-21	Kids Carnival – 2021
17-11-21	Educational Seminar (Orientation Programme - After NEET )
24-11-21	GIMACON – 2021, Hosted by AMA
28-11-21	Diwali Get Together
Dec-21	IMA membership drive
01-12-21	Public Awareness Programme on "World's AIDS Day" live on facebook & you tube
12 to 21 -12- 2021	Yoga Shibir
25-12-21	Smt. Sumitraben Patel Scientific Programme on diabetes - online
26-12-21	Geetaben M. Desai Scientific Programme on diabetes - Offline
26-01-22	Republic Day Celebration

Date	Event
January, February 2022	On Call Services by AMA members during 3rd wave of Pandemic
04-02-22	Public Awareness programme on "World Cancer Day" live on facebook & you tube
13-02-22	Spiritual Retreat at Brahmakumaris, Ahmedabad
06-03-22	International Women's Day Celebration "Break the Bias"
7 to 11 March 2022	Health Awareness Programme & Health Check Up Camps for Women
13-03-22	Programme on Doctor as an Entrepreneur
20-Mar-22	Mr. Maneklal G. Pandejee & Smt. Hiraben Maneklal Pandejee, Scientific Programme on Tuberculosis In collaboration with AMC
22-03-22	Scientific Programme on Vector Borne Diseases, In Association with NVBDCP & AMC
27-03-22	Dr Tanumati G. Shah Scientific Programme in association with CGPA
02-04-22	Shraddhanjali to Dr Archana Sharma & Candle light March
16-04-22	Entertainment programme - Tribute to Lata Mangeshkar, "Nightingale of India"
17-04-22	Dr P P Mehta Scientific Programme on Allergy
08-05-22	CM – Doctors Meet at Gandhinagar, Organized in collaboration, Gujarat Medical Circle
14-05-22	Protest Rally by Doctors
15-05-22	Shantilal A Shah Scientific Programme "World Asthma Day"



Date	Event
29-05-22	Dr K. L. Vasa Scientific Programme on “World No Tobacco Day”
31-05-22	Public awareness programme, on world “To Tobacco Day” at Kankaria
05-06-22	AMA Senior Citizen Club scientific programme
16-06-22	Blood donation camp
19-06-22	Blood donation camp
19-06-22	AMACON 2022
21-06-22	Meeting with WHO Delegation
26-06-22	Doctorpreneur Academy Programme
01 to 03 – 07- 2022	AMA Sports Festival
01-07-22	Blood Donation Camps
03-07-22	Training programme on “Medical Oxygen Management System”
10– 07- 2022	Non-scientific programme Bioscope of Life
24-07-22	120th AMA annual day celebration
07-08-22	Dr C C Raval Scinetific programme reference to "World breast feeding week"
13-08-22	Programme with refence to Aarogya Jyoti at Gandhi Ashram
15-08-22	Independence day celebration
04-09-22	Scientific programme on Healthcare Entrepreneurship
19-09-22	Somabhai Desau Scientific programme on Sepsis



## લેડીઝ-ક્લબ

નારી સમાજસ્ય કુશલવાસ્તુક્કરા।

"તને કરેલ એક જ નમન વડે હે મારા પ્રભુ મારી તમામ જ્ઞાનેન્દ્રિયો વિસ્તરીને તારા ચરણે જગતનો સ્પર્શ કરો"

૫૮ માં વર્ષમાં પ્રવેશ કરતી લેડીઝ ક્લબના આગામી વર્ષ ૨૦૨૨-૨૦૨૩ માટેની નવી કમિટિમાં પદગ્રહણવિધિમાં આપણી શ્રદ્ધા લઈને, હૈયાની હેલીએ, સખીઓનાં સંગે, નવલી નવરાત્રિનાં પર્વની ઉજવણી કરીએ.

### કાર્યક્રમ નં. ૧ : પદગ્રહણ વિધિ

તારીખ	: ૩૦ સપ્ટેમ્બર ૨૦૨૨, શુક્રવાર
સમય	: સાંજે ૩.૩૦ થી ૪.૩૦ કલાકે
સ્થળ	: આર.એમ. ફોજદાર હોલ, એ.એમ.એ. આશ્રમરોડ
ચીફગેસ્ટ	: ડૉ. દિલીપ ગઢવી (પ્રમુખ એ.એમ.એ.)
ઈન્સ્ટોલેશન ઓફિસર	: ડૉ. મોના દેસાઈ (નેશનલ ચેરપર્સન, આઈ.એમ.એ.-એમ.પી.એચ. વીંગ)
ગેસ્ટ ઓફ ઓનર	: ડૉ. મેહુલ શાહ (સેક્રેટરી - આઈ.એમ.એ. જી.એસ.બી.)
સાંજે ૪.૩૦ થી ૫.૦૦ કલાકે ચા-કોફી નો વિરામ રહેશે	

### કાર્યક્રમ નં. ૨ : નવરાત્રી મહોત્સવ

તારીખ	: ૩૦ સપ્ટેમ્બર ૨૦૨૨, શુક્રવાર
સમય	: સાંજે ૫.૦૦ થી ૬.૩૦ કલાકે
સ્થળ	: એ.એમ.એ. નું પટાંગણ
ગરબાના કાર્યક્રમમાં વયજૂથ પ્રમાણે ઈનામો આપવામાં આવશે.	
પ્રતિયોગિતા : બંગડી શણગાર તથા દાંડીયા શણગાર પ્રતિયોગિતા રાખવામાં આવી છે. ભાગ લેનાર સભ્યોએ સાંજે ૫.૦૦ કલાક સુધીમાં હાજર થવું જરૂરી છે.	
રજીસ્ટ્રેશન : સૌ સભ્યોએ તા. ૨૬-૦૯-૨૦૨૨, ગુરુવાર સુધીમાં રજીસ્ટ્રેશન કરાવી લેવું.	
કાર્યક્રમનાં દિવસે બપોરે ૩.૦૦ થી ૫.૦૦ કલાક સુધી ફૂડ કૂપન મેળવી લેવી.	
ફરાળી ફૂડ કૂપન અલગથી લેવા વિનંતી.	
સભ્ય	: વિના મૂલ્યે
મહેમાન	: મહેમાનો માટે રૂ. ૧૫૦/- પ્રતિવ્યક્તિ
હાણી	: રજીસ્ટ્રેશન કરાવનાર લેડીઝ ક્લબની હાજર સભ્ય બહેનોને જ મળશે.
સૌ સભ્ય બહેનોએ આઈકાર્ડ અચૂક લઈને આવવું.	
ગરબાની રમઝટ બાદ સઘન નાસ્તાની વ્યવસ્થા રાખેલ છે.	

"રક્તદાન, મહાદાન"

### કાર્યક્રમ નં. ૩ : શરદોત્સવ

શરદોત્સવ પિતૃસંસ્થા એ.એમ.એ. સાથે ઉજવીશું. સમય, સ્થળ અને તારીખની જાણ સત્વરે કરવામાં આવશે.

શ્રીમતી સુષમા નયન શાહ  
પ્રમુખ  
મો. ૯૩૨૮૦૮૩૩૬૯

ડૉ. દિલીપ બી. ગઢવી  
પ્રમુખ, એ.એમ.એ.

શ્રીમતી જશનાબેન મહેતા  
માનદ્ મંત્રી  
મો. ૯૭૨૫૩૭૩૩૨૩

ડૉ. ગાગી પટેલ  
માનદ્ મંત્રી, એ.એમ.એ.

### WE WELCOME FOLLOWING NEW LIFE MEMBERS

12233 L	DR. PANCHAL KEVIN CHETANBHAI
12234 LC(Transfer)	DR. DALAL SHAIVAL SHAMIKBHAI
12235 LC(Transfer)	DR. JOSHI AHACHI ASHIT
12236 L	DR. SATHVARA RONAK BHARATBHAI
12237 L	DR. PATEL DRASHIT MUKESHKUMAR
12238 L	DR. DAVAR VISHWA SURESHBHAI
12239 LC(Transfer)	DR. SHAH SHAMIK H.
12240 LC(Transfer)	DR. SHAH TEJAL S.
12241 L	DR. PARMAR SHARAD PARESHKUMAR
12242 L	DR. THANGAPPAZHAM HEMANTH RAJ
12243 L	DR. PRAJAPATI RAVIKUMAR VISHNUBHAI
12244 L	DR. GAJERA NEVIL KIRITBHAI
12245 L	DR. CHUDASAMA TANMAY JIGNESHKUMAR
12246 L	DR. RAO SAKETH RAMNARAYAN
12247 L	DR. POTDUKHE KRISHNA VIKAS
12248 L	DR. KHAUWANI DIVYA HARESH
12249 L	DR. DAVE SMIT DIVYESHBHAI
12250 L	DR. THAKKAR PURVIN NAVINBHAI
12251 L	DR. KOTHARI RAVI KIRITKUMAR
12252 L	DR. DAVE KAVITA JITESHBHAI
12253 L	DR. SHAH NIDHI BIMAL
12254 L	DR. PATEL VISHWA NEEL

"અંગદાન, સર્વશ્રેષ્ઠ દાન"



## Hand Foot and Mouth Disease (HFMD)

Source : NCDC

Hand, foot, and mouth disease, or HFMD, is a contagious illness caused by different viruses. Infants and children younger than 5 years are more likely to get this disease. However, older children and adults can also get it.

### Case definition

#### Clinical case definition Case of HFMD:

Any child with:

- mouth / tongue ulcer and
- maculopapular rashes and /or vesicles on palms and soles
- with OR without history of fever

#### Suspected:

A case that meets the clinical case definition.

#### Confirmed:

A suspected case in which laboratory investigation confirms the presence of virus OR when cases are epidemiologically linked to a laboratory confirmed case

#### Laboratory criteria

Any case that has the clinical symptoms and positive for viruses (coxsackieviruses(Cox) A16, A5, A9, A10, B2, B5 and enterovirus (EV) 71) which could cause HFMD, isolated or detected from stool or vesicle fluid or mouth ulcer or saliva.

### Clinical Presentation

Hand, foot, and mouth disease usually starts with a fever, poor appetite, a vague feeling of being unwell (malaise), and sore throat. One or 2 days after fever starts, painful sores usually develop in the mouth (herpangina). They begin as small red spots that blister and that often become ulcers. The sores are often in the back of the mouth. A skin rash develops over 1 to 2 days. The rash has flat or raised red spots, sometimes with blisters. The rash is usually on the palms of the hands and soles of the feet; it may also appear on the knees, elbows, buttocks or genital area.

Persons infected with the viruses that cause hand, foot, and mouth disease may not get all the symptoms of the disease. They may only get mouth sores or skin rash.

"નેગદાન, અંધજનને જીવનનું અમૂલ્ય વરદાન"



### Spread :

The viruses that cause hand, foot, and mouth disease (HFMD) can be found in an infected person's:

- nose and throat secretions (such as saliva, sputum, or nasal mucus),
- blister fluid, and
- feces (stool).

An infected person may spread the viruses that cause hand, foot, and mouth disease through:

- close personal contact,
- the air (through coughing or sneezing),
- contact with feces,
- contaminated objects and surfaces.

A person with hand, foot, and mouth disease is most contagious during the first week of illness. People can sometimes be contagious for days or weeks after symptoms go away. Some people, especially adults, who get infected with the viruses that cause hand, foot, and mouth disease may not develop any symptoms. However, they may still be contagious. This is why people should always try to maintain good hygiene (e.g. handwashing) so they can minimize their chance of spreading or getting infections.

Hand, foot, and mouth disease is not transmitted to or from pets or other animals.

### Complications

- Viral or "aseptic" meningitis can occur with hand, foot, and mouth disease but it is rare. It causes fever, headache, stiff neck, or back pain.
- Inflammation of the brain (encephalitis) can occur, but this is even rarer.
- Fingernail and toenail loss have been reported, occurring mostly in children within 4 weeks of their having hand, foot, and mouth disease.

### Treatment :

Mild HFMD cases only need symptomatic treatment. Treatment of fever and relief of symptoms, adequate hydration and rest are important. Parents and care takers should be educated on hygiene and measures that they should take to prevent transmission to other children.

### Hospitalization.

#### Criteria for admission

- When the child is unable to tolerate oral feeds and there is a need for intravenous hydration;
- When the child is clinically very ill or toxic-looking
- When some other more serious disease cannot be excluded
- When there is persistent hyperpyrexia (e.g >38°C) for >48 hours;
- When there is a suspicion of neurological complications, e.g increased lethargy, myoclonus, increased drowsiness, change in sensorium and/or seizures;
- When there is a suspicion of cardiac complications (myocarditis), e.g low blood pressure, low pulse volume, heart rhythm abnormalities, murmurs, gallop rhythm, displaced apex beat;
- When parents are unable to cope with child's illness; and
- When there is inadequate family or social support in looking after the child at home.

"રક્તદાન, મહાદાન"

**Advisory on****Hand Foot and Mouth Disease (HFMD), commonly known as "Tomato Flu"**New Delhi, 23<sup>rd</sup> August, 2022**Occurrence in India:**

Tomato Flu was first identified in the Kollam district of Kerala on May 6, 2022, and as of July 26, 2022, more than 82 children younger than 5 years with the infection have been reported by the local government hospitals. The other affected areas of Kerala are Anchal, Aryankavu, and Neduvathur. This endemic viral illness triggered an alert to the neighboring states of Tamil Nadu and Karnataka. Additionally, 26 children (aged 1–9 years) have been reported as having the disease in Odisha by the Regional Medical Research Centre in Bhubaneswar. To date, apart from Kerala, Tamil Nadu, Haryana and Odisha, no other regions in India have reported the disease in their State/UT by the virus.

**Symptoms among children:**

Tomato Flu is a viral disease. The name "Tomato Flu" comes from the main symptom of this disease, the **tomato-shaped blisters on several body parts**. The blisters start as red-colored small blisters and resemble tomatoes when they enlarge. Primary symptoms observed in children with Tomato Flu are similar to those of other viral infections, which include fever, rashes and pain in joints. Rashes on skin can also lead to skin irritation. As with other viral infections, symptoms also include, fatigue, nausea, vomiting, diarrhea, fever, dehydration, swelling of joints, body aches, and common influenza-like symptoms. HFMD is characterized by fever, sores in the mouth, and a skin rash. It begins with mild fever, poor appetite, malaise, and often a sore throat. One or two days after the fever begins, small red spots appear which changes to blister and then to ulcers. The sores are usually located on tongue, gums, inside of the cheeks, palms and soles.

In children with these symptoms, molecular and serological tests are done for diagnosis of dengue, chikungunya, zika virus, varicella-zoster virus, and herpes; once these viral infections are ruled out, a diagnosis of tomato flu is considered.

Tomato Flu is a self-limiting infectious disease as the signs and symptoms resolve after a few days. It seems, the disease is a clinical variant of the so-called hand-foot-mouth disease that is common in school going children. Infants and young children are also prone to this infection through use of nappies, touching unclean surfaces as well as putting things directly into the mouth. HFMD occurs mainly in children under 10 years of age, but it can occur in adults too. There are no disease-specific medications available. Treatment is similar to other viral infections i.e. isolation, rest,

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plenty of fluids and hot water sponge for relief of irritation and rashes. Supportive therapy of paracetamol for fever and body ache and other symptomatic treatments are required.

Isolation should be followed for 5–7 days from onset of any symptom to prevent the spread of infection to other children or adults.

**Prevention:**

The best solution for prevention is maintenance of proper hygiene and sanitization of the surrounding necessities and environment as well as preventing the infected child from sharing toys, clothes, food, or other items with other non-infected children.

Following are some preventive measures we should keep in mind:

- Avoid immediate contact with the infected person
- Educate your child about the signs and symptoms and its side effects
- Tell your child not to hug or touch children having fever or rash symptoms
- You should encourage your children about hygiene maintenance and stopping thumb or finger sucking habits
- Encourage the child to use a handkerchief in case of running nose or coughing to avoid the spread of the disease
- Don't scratch or rub the blister and wash every time you touch these blister
- Try to keep hydrated your child by motivating them to drink plenty of water, milk, or juice, whatever they prefer
- If your child develops symptoms of tomato fever, immediately isolate them from other children to inhibit disease progression.
- All utensils, clothes, and other utility items (for e.g. bedding) should be separated and sanitized regularly.
- Always use warm water to clean skin or for bathing the child
- Take a nutrition-rich, balanced diet to boost immunity
- It is essential to get enough rest and sleep to promote healing

As yet, no antiviral drugs or vaccines are available for the treatment or prevention of tomato flu. Further follow-up and monitoring for serious outcomes and sequelae are needed to better understand the need for potential treatments.

**Laboratory Diagnosis:**

Hand Foot and Mouth Disease (HFMD) is one of the many infections that result in mouth sores. However, health care providers can usually tell the difference between HFMD and other causes of

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mouth sores by considering the patient's age, the symptoms reported by the patient or parent, and the appearance of the rash and/or sores. Diagnosis is largely clinical.

Samples from throat or stool may be sent to a laboratory to test for isolating the virus involved in causing the illness, which may take 2–4 weeks to obtain the laboratory results. The testing should be done for investigation of an outbreak, so that preventive measures can be initiated.

**Sample collection:**

1. Respiratory Samples : Throat and / or Nasopharyngeal Samples can be collected within 48 hours of illness
2. Fecal Samples: The sample should be collected within 48 hours of illness
3. CSF: It can also be collected within 48 hours if patient has encephalitis
4. Biopsy of Lesions
5. Skin Scraping of lesions in Viral Transport Media: Rash with vesicles (From Palm of Hands/ Soles of Feet)

**Laboratory Investigations:**

1. Real Time PCR
2. For Serology: 4-fold rise in level of neutralizing antibody in paired blood sample collected at an interval of 14 days (One Acute sample at the onset of illness and second sample after ten days of illness)

**Summary :**

*The disease will best be described as a clinical variant of the viral hand, foot, and mouth disease, a common infectious disease targeting mostly young children aged 1–10 years and immune compromised adults, and sometimes exposed immune competent adults.*

