



## Challenges before Emergency Medicine amid COVID-19

By Dr. Salfi P. K.

When the first few cases of COVID-19 were reported in Wuhan, China, the world hardly realized that a tiny virus would shake the whole health care system. Subsequently, we witnessed the emergence of the global pandemic & from then on people had nothing but COVID-19 to talk about.

The real heroes in the battle against the pandemic were the front-liners in the field of health who just moulded themselves very rapidly to take the virus head on. The most challenging part in this scenario was that nothing about the virus was known to us. And the strangest thing about the virus itself was that it was a total stranger to us. However, we mutated ourselves aptly and

decided not to give up. The only ray of confidence we had as ER physicians was that we knew very well how to manage a disaster & COVID-19 was one kind of a controlled disaster.

The era of the deadly fight against the virus started without we knowing anything about it & ER physicians and staff have had a hard time doing it. We, the ER consultants, residents & staffs of Indiana Hospital and Heart Institute, Mangalore, decoded the triage system to tackle the virus. We, as a team, have outlined a new triage system where in patients were triaged outside the ER and suspected patients were taken to the flu clinic which had all the facilities required in a modern ER. Non suspected patients

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## MESSAGE FROM THE MANAGING DIRECTOR

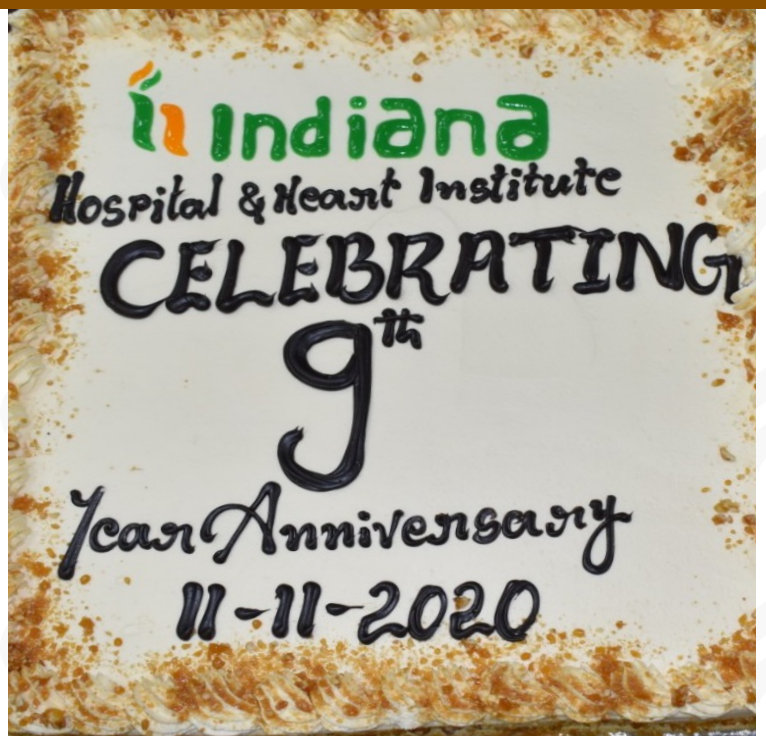
By God's grace, Indiana Hospital & Heart Institute, Mangaluru has completed 9 years of its existence & we are moving into the decennial with renewed vigour and zeal to work further for the well-being of the people.

Looking back, I can say that ours was a humble beginning & what we have achieved thus far gives us a lot of satisfaction. Today, we are one of the leading hospitals in the region with facilities that match international standards and specialists who are envy of other hospitals.

Tackling Covid-19 was a great challenge, and we were able to contain them to a great extent by putting our best foot forward. And the fight against the dreaded pandemic goes on, testing our abilities and resolve. I am sure we shall overcome.

In the coming new year, we have more plans to augment our facilities, leveraging the best of technologies and fine-tuning our services and adding more specialist doctors to our team. We are ever ready to serve our patients with a great amount of compassion and care. That is what we stand for & will continue to roll out services that are patient-friendly and of the highest quality. Through this newsletter, Pulse, we wish you all a happy New Year. May God bless you all.

— Dr. Yusuf A. Kumble



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were received on the other side of the ER.

All patients who were symptomatic, had a history of exposure or possible exposure to a positive or suspected patient, had a recent travel history or came from a containment zone & were treated as suspects & were received in the Flu Clinic with full PPE. Utmost care was taken while shifting, evaluating and managing these patients so as to prevent them from becoming a carrier of the virus. The efforts put in & the struggle faced by the front-liners in carrying out an effective triage is really commendable.

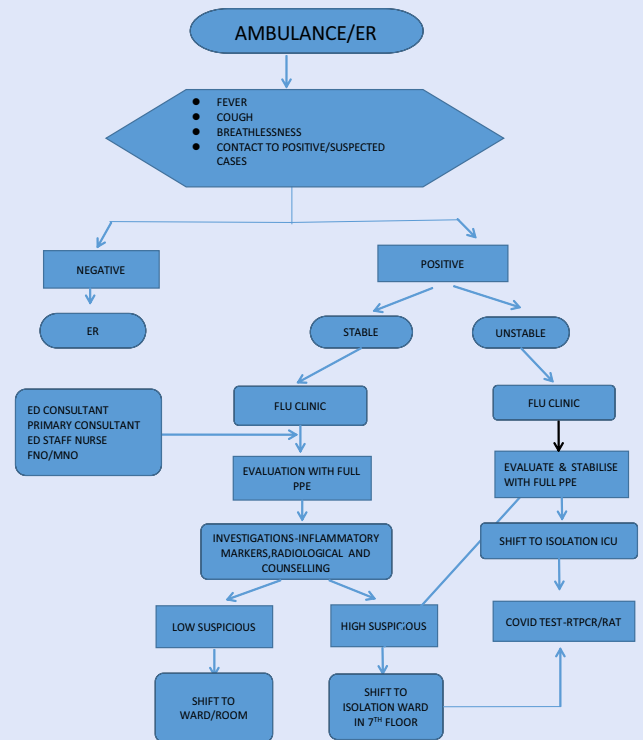
However, the real challenge before an ER physician in deciding the degree of urgency to decide the order of treatment (triage) was to distinguish the symptoms of COVID-19 pneumonia from heart failure/CKD or other causes. The challenge of decision making in such cases is very demanding and its effectiveness depends on very careful analysis of the clinical history and examination of the patient, as well as presence of mind. The sole responsibility for this lies with the ER physician, which means he/she needs to have a sound mind and body.

The unusual situation of being inside a PPE for long hours too is a challenging proposition. But even more challenging is to perform resuscitative measures and intubation on a COVID-19 patient wearing a full PPE. The triage area within the Flu Clinic has a separate donning and doffing area, which is strictly adhered to by all.

The effective management/triage of COVID-19 is carried out outside the ED also. Prior information is provided to the on-duty consultant or resident about the cases or suspects coming to our hospital, so as to keep everyone prepared. Above all this, the most important part is to reassure the patient. Even as the relatives of the patient stay at a distance, we reassure the patient by standing next to him/her. Compassionate words and affectionate touch are the only ways to reassure a patient. We can proudly say that we have been taking up all these challenges with a smile, something that only our PPE and N-95 masks would actually know.

Though being duty conscious make us professional warriors,

## EMERGENCY TRIAGE SYSTEM



we have realized that our loved ones too are equally at the risk of contracting the infection from us. So, it has become necessary to take extra care/precautions at home too. We have seen the virus emerging, and we have been dealing with a small portion of the global pandemic. Fighting the virus every day/night has been a tiring adventure. We have had our physical & emotional pains, but at the end of the day we are still here as front-line warriors with a smile, offering care and help in any kind of situation. After all, we are Emergency physicians and all we care about is ROSC (Return of Spontaneous Cheer).

**- DR. P.K. SALFI IS A SENIOR CONSULTANT  
AT THE DEPARTMENT OF EMERGENCY MEDICINE  
AT INDIANA HOSPITAL & HEART INSTITUTE, MANGALORE**





# COVID 19 : Be extra cautious as the winter sets in



## Dr. Don Gregory Mascarenhas, Consultant Pulmonologist, lists out the precautions to be taken during the winter

Winter is upon us. It might sound like an impending doom, especially in this Covid era. Even as the world is reeling under the Covid-19 pandemic, our country, it must be said, has done reasonably well in controlling the spread of the disease. We have clocked more than nine million cases at the time of writing this, however, our fatality rate is less than 2 percent, way below the world average. We are therefore moving in the right direction of recovery. But is it a time to loosen the guard, especially with the winter upon us? Winters in India are not as gruesome as they are in Europe, and in southern India it is pretty mild. However, a variety of viral and bacterial infections can threaten the health of people, especially, the vulnerable population. People with diabetes, chronic kidney disease, cardiac disease and chronic lung diseases like bronchial asthma and COPD are more prone to develop these viral and bacterial infections, which could prove detrimental to the health of these individuals. Here the elderly and children are at a higher risk owing to their low immune system.

Influenza viruses thrive especially during the winter season, and can be life threatening. Pneumococcal infections too pose a high risk. Other than these, a variety of other infections, including dengue, can worsen our immune system. Pollution can add to the declining lung function, especially in COPD patients.

### Precautions to be taken during the winter

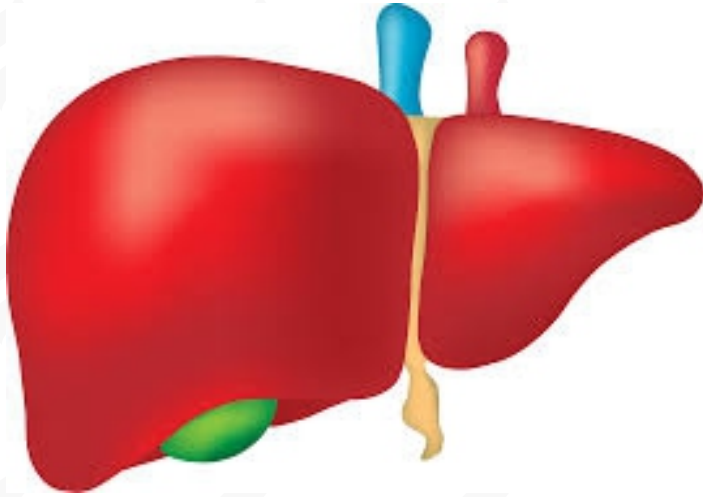
- 1) Follow the strict Covid-19 guidelines – wear masks, use sanitizers and avoid crowds. This will help us avoid the emergence of a second wave of Covid-19.
- 2) Maintain strict personal and environmental hygiene to avoid food and water-borne diseases.
- 3) Avoid refrigerated and sour food items.
- 4) Take pneumococcal and influenza vaccines, especially the vulnerable population.
- 4) Bronchial asthma and COPD patients should use inhalers as prescribed.
- 5) Avoid overuse of antibiotics; use them only when recommended by a doctor.
- 6) Adequate hydration is necessary.
- 7) Avoid fumes/dust.

By taking the above measures, we will be able to ward off most of the viral and bacterial infections, and be better health prepared for the new year 2021.

- **Dr. Don Gregory Mascarenhas,**  
is a visiting Consultant Pulmonologist at  
Indiana Hospital & Heart Institute, Mangaluru

# Indiana Hospital opens Liver, IBD and Obesity clinics

With the need to focus on gastroenterology and related ailments becoming greater by the day, the Gastroenterology Department at Indiana Hospital, Mangaluru has launched three clinics -- Liver Clinic



(Monday & Thursday); Inflammatory Bowel Disease (IBD) Clinic (Tuesday & Saturday) and Obesity Clinic (Friday).



According to Dr. Apoorva Srijayadeva, Consultant Interventional Gastroenterologist, Indiana Hospital, the Liver Clinic will screen patients for liver diseases. He said that when it came to Chronic Liver Diseases (CLD), prevention was all the more necessary because the symptoms of CLD do not appear till the liver damage is far advanced and is

mostly irreversible. The test bundle offered at the Liver Clinic includes Liver Function Test (LFT), Prothrombin Time-International Normalised Ratio (PT-INR), Ultrasound Abdomen and doctor's consultation – all for Rs. 1,700.

Inflammatory Bowel Disease (IBD) has been spreading its tentacles mainly in the urban areas of



the country, affecting those in the very active age group, ushering in economic and social problems. The Inflammatory Bowel Disease (IBD) Clinic that functions every Tuesday & Saturday, will help patients identify the problems and take necessary care. The test bundle encompasses CBC, CRP, Amylase, Serum Creatinine with doctor's consultation – all for Rs. 1099.

According to the World Obesity Federation, around 28 million children in India will be obese by the year 2030, and as of now, India has an obese population of 14 crores. Obesity has always been the root cause of many metabolic disorders like diabetes, hypertension, heart and liver problems, respiratory ailments and joint pain issues. The Obesity Clinic, that functions every Friday, will be a boon to such patients. The test bundle consists of Fasting Lipid Profile, Thyroid Stimulating Hormone (TSH), Dietician consultation – Body Mass Index (BMI) counselling and doctor's consultation—all for Rs. 1099.

**The timings at all the three clinics at the Indiana OPD will be from 9am to 6pm.**

**For appointments, call 0824- 2880880.**





## Indiana celebrates its 9<sup>th</sup> ANNIVERSARY amid lights of peace and happiness

**MANGALURU** – Indiana Hospital & Heart Institute, Mangaluru, celebrated its ninth anniversary along with Deepavali, the Festival of Lights, here on November 11<sup>th</sup>.

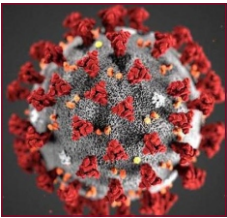
At a ceremony held at the hospital's spacious auditorium, Dr. Yusuf Kumble, managing director, Indiana Hospital, reaffirmed his belief that the hospital was on the right track. He said the institution had succeeded in building a reputation for itself as a specialty healthcare facility. Greeting the staff and their families who had assembled in large numbers, Dr. Ali Kumble, chairman of the hospital, asserted that the festival helps illuminate our minds and hearts even as it promotes the much needed peace, harmony and brotherhood. The auditorium was decorated with lamps befitting the festival. The ninth anniversary celebration was marked by cutting of a cake specially made for the occasion.

## Bonhomie marks Christmas

Christmas was celebrated at Indiana Hospital & Heart Institute with fervour and gaiety. **Pulse** captures the spirit of the celebrations.







# COVID-19 UPDATES

# ANNOUNCEMENTS

**EASIER TO SPREAD  
INDOORS THAN OUTDOORS;  
WINTER PERFECT SET-UP  
FOR CONTAGION**



It is easier for coronavirus to spread indoors than outdoors as people stay inside their homes during winter which is a perfect set-up for the contagion, according to Dr. Vivek Murthy, the top Indian-American advisor to President-elect Joe Biden on COVID-19.

The 43-year-old former US surgeon general, who co-chairs the COVID-19 advisory board of Biden, told Fox News in the third week of November that people are tired from the pandemic fatigue.

What's happening now in particular is that with winter, as people move indoors, this is actually the perfect set up for the virus because we know it's easier to spread indoors than outdoors, Murthy said.

There is one last component, which is really important, is the pandemic fatigue, he said.

We've been at this pandemic now for many months and I get that. A part of that fatigue means that people are letting others into their bubble, they're getting together for in-person dinner parties, game nights and public health departments are now tracing more and more cases back to these kinds of gatherings, Murthy, who advises Biden on COVID-19, said.

All this put together has resulted in the recent explosion in COVID-19 cases in the US, he said. The way you do that is by communicating honestly, by leading with science and scientists in the face of this pandemic and ultimately by delivering results, Murthy observed. (PTI)

## INDIANA GETS NEW CARDIOLOGIST



A young cardiologist, Dr. Manjunath Suresh Pandit, has joined the Indiana team of cardiologists.

After getting his MBBS from Basaveshwara Medical College, Chitradurga (RGUHS), Dr. Manjunath did his MD from SMS Medical College, Jaipur, which is affiliated to Rajasthan University of Health Sciences. His thirst for being a specialist was realised when he completed DM in cardiology with a gold medal from BJ Medical (UN Mehta Institute of Cardiology), Ahmedabad, Gujarat.

His internship/residency includes one year compulsory Rotary Residential Internship at Basaveshwara Medical College, Chitradurga; three years in junior residency while doing MD in paediatrics at SMS Medical College, Jaipur; and three years in senior residency pursuing DM in cardiology at BJ Medical College, Ahmedabad. His area of interest encompasses paediatric ECHO, device therapy for ASD, VSD, PDA, and complex PCI. His articles have been published in many medical journals.

## NEW PULMONOLOGIST JOINS INDIANA



Dr. Nithin K.T., a Senior Consultant Pulmonologist, has joined Indiana Hospital & Heart Institute, Mangaluru. Dr. Nithin's exceptional clinical skills have come as a boon to the covid-19 patients here.

Dr. Nithin K.T., after obtaining his MBBS from Government Medical College, Ernakulam affiliated to CUSAT University, pursued MD (Pulmonary Medicine) at Govt. Medical College, Amritsar (affiliated to Baba Faridkot University of Health Sciences, Faridkot). Besides diagnosis and management of respiratory and tuberculosis diseases, his key skills are in Spirometry, Interventional bronchoscopy and critical care, Chest X-ray and CT chest interpretations, USG chest and USG-guided pleural fluid aspiration, Basic echocardiography and chest tube placement. Dr. Nithin's stint as a senior resident at VVMC and Safdarjung Medical College, New Delhi gave him good exposure.

Dr. Nithin has presented many papers in research journals and graced many pulmonary conferences.

# Will aspirin prove to be the wonder drug to prevent heart attack?

All of us know that heart attack is one of the most common causes of death in the world, especially in India. Stroke is another devastating malady which affects a person's brain, and because of which a person dies or is afflicted with long term morbidities. Both the diseases are deadly, hence it's important to prevent them. Here prevention is of two types – primary and secondary.

Those who are already having cardiovascular heart diseases or failure stand a high chance of dying early. Similar is the case with stroke. Those afflicted with stroke too have a high rate of fatality–these come under secondary prevention.

Primary prevention is for those who have never had a heart attack, nor have had any heart related issues, or have never had any signs or symptoms of stroke after they are 30 or 40. For such people there is good news, for they can now successfully prevent heart attacks or stroke! Recently, the American Heart Association announced the results of a trial which says aspirin when added to polypill (statin and ACEI in one cap) can prevent heart attacks and stroke to a great extent. Many Indian patients participated in the study.

According to the findings in the TIPS-3 study presented on Nov. 13, 2020, people who never have had any kind of heart diseases or stroke, can reduce the possibility of a heart attack by taking a polypill with aspirin every day. Based on these findings, “aspirin should be prescribed with a polypill as a primary prevention for patients at intermediate risk of heart disease,” said Dr. Salim Yusuf, one of the researchers who also presented a paper on the aspirin aspect of the study (TIPS + ASA). “Our study results provide important data regarding the role of polypill in preventing the development of heart disease.” The study says that heart attacks, strokes and other cardiovascular incidents can be reduced through the use of a polypill, which combines blood pressure and lipid-lowering medications, taken with an aspirin. The primary analysis on this is now over.

There have been many earlier studies in this regard with mixed results, some suggesting the benefits of aspirin, while others remained unclear. Now, as per the latest findings, polypill can be of great help to those above 45-50 with hypertension or diabetes or any other risk factor. This would also



reduce the pill-burden (number of pills taken by a person) from many to one, making it easier for people to stick to their treatment regimen. And this, in turn, will benefit people prone to heart diseases, especially in India where the risk is higher than that of Europe or America. Also, this game-changer will be more useful if the person involved is physically active, sticks to a healthy diet and is a non-smoker.

In a statement, Dr. Yusuf Kumble, chief interventional cardiologist and managing director of Indiana Hospital and Heart Institute, Mangaluru, said, “This new development will have a big impact in India where aspirin is easily available at a very low cost, and thus we can prevent heart attacks by introducing the polypill model in primary health centres and other private hospitals.”

(Compiled by Indiana Marketing Team)

# DEPARTMENTS AT INDIANA HOSPITAL

## INHOUSE DOCTORS 24X7

### DEPARTMENT OF CARDIOLOGY

#### DR. YUSUF A KUMBLE

MBBS, MD, DM (Cardiology - AIIMS), (DNB Cardio),  
FSCAI, FESC, FACC (USA)  
Chief Interventional Cardiologist,  
Managing Director - IHHI Ltd.

#### DR. ABDUL MANSOOR

MBBS, MD, DM (CARDIOLOGY), MRCP, AFESC  
Consultant Interventional Cardiologist & HOD

#### DR. MANJUNATH S. PANDIT

MBBS, MD, DM (Cardiology)  
Consultant Interventional Cardiologist

### DEPARTMENT OF CARDIOTHORACIC & VASCULAR SURGERY

#### DR. SIDDHARTH V.T.

MBBS, MS (GEN SURG), MCh (CVTS)  
Consultant Adult & Paediatric Cardiothoracic Surgeon

### DEPARTMENT OF CARDIAC ANAESTHESIA

#### DR. K. MADHAN

MBBS, MD, FCCM, DM (Cardiac Anaesthesia)  
Consultant Cardiac Anaesthesiologist

### DEPARTMENT OF INTERNAL MEDICINE AND CRITICAL CARE

#### DR. ADITHYA BHARADWAJ

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### DEPARTMENT OF PAEDIATRICS

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Sr. Consultant & HOD (PAEDIATRICS), Chairman - IHHI Ltd.

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#### DR. ARUN VARGHESE

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Consultant - Paediatric Intensivist

### DEPARTMENT OF PAEDIATRIC SURGERY, PAEDIATRIC UROLOGY & PAEDIATRIC CARDIAC SURGERY

#### Prof. DR. KOCHIKAR GANESH PAI

MBBS, MS, MCh (Paediatric Surgery), FICS, FICA (USA), FIAMS, FISPU  
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#### DR. VIJAYMAHANTESH S. SAMALAD

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### DEPARTMENT OF ENT

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### DEPARTMENT OF EMERGENCY MEDICINE

#### DR. SALFI P. K.

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#### DR. AJITH ALFRED SOLOMON

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### DEPARTMENT OF PULMONARY MEDICINE

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### DEPARTMENT OF ORTHOPAEDIC & JOINT REPLACEMENT SURGERY

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MBBS, MS, D'ORTHO, MS (ORTHO)  
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#### DR. JALALUDEEN MV

MBBS, MS (ORTO), MCh (ORTHO)  
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#### DR. AHMED RIZWAN CM

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Consultant Spine & Scoliosis Surgeon

#### DR. S. SHIBLI

MBBS, MS (ORTHO), D'ORTHO  
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#### DR. BHAGATH L. S.

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### DEPARTMENT OF RADIOLOGY

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### OTHER DEPARTMENTS

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 DIETARY

## VISITING CONSULTANTS

#### DR. DON GREGORY MASCARENHAS

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Consultant Pulmonologist & Allergist

#### DR. SAFWAN AHMED

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Consultant Neurologist

#### DR. GURUNANDAN U.

MBBS, MS (General Surgery),  
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#### PROF. DR. ASHFAQUE MOHAMMED

MBBS, DNB (General Surgery), FIAGES, FACS  
Advanced Laparoscopic Surgeon

#### DR. MUSTAFA K.

BDS, MDS  
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#### DR. NIKHIL S. SHETTY

MBBS, MS (GENERAL SURGERY),  
MCh (PLASTIC & RECONSTRUCTIVE SURGERY)  
Consultant Plastic & Reconstructive Surgeon

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Paediatric Surgeon

#### DR. SANDEEP RAI

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