



VOL. 3 ISSUE NO. 11 & 12 MAY-JUNE 2021 & JULY-AUG 2021

A Bi-Monthly Newsletter

First time in Mangaluru

Indiana Hospital opens Advanced Cardiac Surgery & Heart Transplant Centre



PRIDE MOMENT: Dr. Yusuf Kumble, second from right: Dr. M. K. Moosa Kunhi, third from right; and Dr. Ali Kumble, second from left, seen with others at the inauguration

& Heart Institute has ventured regarded as one of the best System in beating heart surgery. His into yet another life-saving hospitals in south India. services' domain. On the occasion The Advanced Cardiac Surgery child heart surgery has given many of Doctor's Day, the hospital and Heart Transplant Centre is children a new lease of life. inaugurated an Advanced Cardiac headed by Dr. M. K. Moosa Kunhi Surgery and Heart Transplant (MBBS, MS, Mch, FIACS), a Centre in its Department of renowned heart surgeon with an Cardiology. The Centre promises unparalleled track record world-class heart surgery at having performed over 16000 Railway Headquarter Hospital, affordable cost.

Said Dr. Yusuf Kumble, chief rate of 99.6%. interventional cardiologist and managing director, Indiana on the occasion, Hospital, "Taking into account the need for heart transplant, we had envisaged some time back a multi disciplinary approach to End Stage Heart Failure, and today it has become a reality."

Heart transplant remains the gold standard for the treatment of endstage heart failure.

Performing a multitude of treatments and procedures in cardiology and cardiothoracic surgery is yet another feather in

TIDBITS

- Christian Barnard performed the first successful human heart transplant in 1967, in Cape Town, Africa.
- A group of surgeons led by P. Venugopal successfully performed India's first heart transplant at the All India Institute of Medical Sciences (AIIMS) on 3 August, 1994.

Eminent heart surgeon joins Indiana Hospital



Dr. M.K. Moosa Kunhi, MBBS, MS, M.Ch, FIACS, an eminent heart surgeon, has joined Indiana Hospital as the head of its Advanced Cardiac Surgery & Heart Transplant Centre. Dr. Moosa is a pioneer in modern artificial heart technology, bileaflet MANGALURU - Indiana Hospital the cap of Indiana which is heart valve and Octopus Stabilizer immense contribution to the field of

> alumnus of Calicut Medical College, Kerala, Dr. Moosa spent a considerable period of his professional life in the Indian heart surgeries with a success Madras, contributing immensely to treating defective hearts. As the Chief Cardiac Surgeon in this renowned institution, he was involved in more than 10,000 open heart surgeries, many of which were path-breaking operations. With his skill set, Dr. Moosa has been pivotal in furthering Paediatric & Neonatal Cardiac surgeries in India. Before joining Indiana, Dr. Moosa served as the Sr. Consultant & HOD, Cardiac Surgery & Heart Transplantation, at City Hospital, Kochi. Having performed over 16,000 surgeries with a success rate of 99.6%, Dr. Moosa is bringing with him the expertise and experience that will stand cardiac patients in Indiana Hospital in good stead.

How well do antibodies work against the Delta variant?

We spoke to doctors to find out what they have found so far.

Can antibodies in recovered Covid patients protect against Delta variant?

Dr Vikas Maurya, director and HOD, Pulmonology, Fortis Hospital Shalimar Bagh, says, "Patients who have recovered from Covid of the Delta variant will definitely have antibodies against it. Those who have been infected by a different variant will also have antibodies but we do not know if they will be able to protect the person from the Delta variant." "However, we have seen that those who were infected last year have not come down with infection from the Delta variant this year. Either because they have taken extra precautions or because they have sufficient antibodies to take care of the delta variant," he adds. Monoclonal antibodies (proteins that mimic the ability of the immune system to fight off harmful pathogens), on the other hand, took care of the variants last year as well as this year, which is the Delta variant, adds Dr Maurya. "But it is yet to be determined if they will work against the Delta plus variant."

Can Covid vaccines help?

A recently published study found that the Delta variant is eight times less sensitive to antibodies generated from Covid vaccines. The study was conducted by several Indian scientists and those from the Cambridge Institute of Therapeutic Immunology and Infectious Disease.

(Indian Express)

Indiana at the forefront in providing vaccination

MANGALURU -- Indiana Hospital & Heart Institute, Mangaluru, has been at the forefront in creating awareness among people on the need to get inoculated against Covid-19, and following it up by arranging vaccination facilities at the hospital. The hospital has circulated a series of creatively-crafted social media messages in this regard. It may be recalled here that in the month of April, Indiana Hospital administered vaccines to about 2000 people, aged over 45, free of cost. It was the only private hospital to do so in Dakshina district. This was highly appreciated by the district administration and the people of the district.

As people began realising the need to get the jab, and began crowding government hospitals and centres, Indiana Hospital procured 12,000 doses of Covishield vaccine and administered them at its premises over a period of two weeks in the month of June-July.







In the midst of the second wave of Covid-19 pandemic in India, there are great many speculations doing the round about a third wave emerging. Parents are worried about their kids getting infected, and have various questions in this regard.

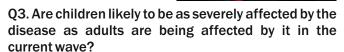
Q1. Is there any possibility of a Covid-19 third wave striking in the coming months?

A: Historically, it is well known that pandemics tend to occur in waves, and each wave affects a large number of people. Eventually, most of the population may become immune through asymptomatic or symptomatic infections (herd immunity). Over time, the disease may die out, or may become endemic in the community with low transmission rates. Yes, there is the possibility of a third wave emerging, but it is difficult to predict its timing and severity.

Q2. Are children at a greater risk in the third wave as being discussed in the media?

A: The first wave primarily affected the elderly and individuals with co-morbidities. In the current (second) wave, a large number of individuals in the younger age group (30-45 years) have also been affected severely, as also those without co-morbidities. After the second wave subsides, if we do not continue following CAB (Covid-19 appropriate behaviour), a third wave, if and when it occurs, is likely to infect the remaining nonimmune individuals - that may include children also. The latest sero survey (Dec 2020, Jan 2021) shows that the percentage of infected children in the 10-17 age group was around 25%, the same as that of the adults. This indicates that while children are being infected as much as the adults, they are not being affected as severely as the adults. And it is highly unlikely that the third wave will predominantly or exclusively affect children. However, it is important to prepare ourselves for it with caution, but without panicking.

By Dr. Abhishek K. Phadke



A: Fortunately, children have been relatively less affected so far due to several factors. A very small percentage of infected children may develop moderate to severe disease. If there is a massive increase in the overall numbers of infected individuals, a larger number of children too might be affected in a similar manner. There are many guidelines available on the modalities to manage Covid-19 among children, which is slightly different from the protocols to be followed for adults. Apart from infection, parents should watch out for mental health issues in children and keep a watch to prevent child abuse and violence. Also, it will be worth limiting screen time and preparing children for taking care of themselves while attending classes once schools reopen.

Q4. Are there any post Covid-19 issues that can occur in children?

A: Yes. In some cases, after 2-6 weeks of asymptomatic or symptomatic Covid-19 infection, 'Multi-system inflammatory syndrome (MIS-C),' may set in due to immune dysregulation; some of these cases could be severe. However, it is a treatable condition, and if diagnosed early, the outcome is unlikely to be

Is a third wave to be expected? Covid-19 in children & neonates: Current perspectives

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complicated. Also, most children suffering from MIS-C will not transmit the infection to others. We have so far seen more than 15 such cases in our hospital, and the recovery rate has been 100%.

Q5. What should be the preparations in case a 3rd wave strikes and affects children?

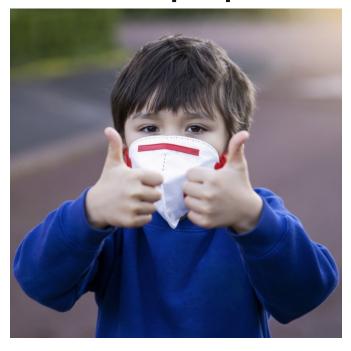
A: Fortunately, most children getting infected may develop only a mild fever, and would only need home care with monitoring. We have learned a lot about the Covid-19 illness from our shared experiences in adult medicine in the last 15 months. IAP guidelines on the management of Covid-19 in children are in place, and paediatricians have been sensitized and trained on Covid-19 management. There is however a need to educate parents on the illness and its symptoms on different platforms. Also, there is a need to set up more Covid-19 wards equipped with high-dependency units (HDU) and intensive care units (ICU) for children. It may turn out to be a challenging task; we just hope the third wave does not occur! Also, please note that preventive behaviours like mask etiquette, hand hygiene and social distancing apply to children also.

Q6. If a woman is diagnosed being Covid-19 positive during or around the delivery time, can she breastfeed her baby?

A: As per World Health Organization, the benefits of breastfeeding outweighs the risks involved. A mother can breastfeed her baby after taking adequate precautions like wearing a mask and sanitizing before and after handling the child, etc. The risk of vertical transmission (transplacentally from mother to baby) is very low.

Q7. Are pregnant and lactating women eligible for Covid-19 vaccine?

A: As of now, lactating women are eligible to get vaccinated as per the MOHFW, Government of India. With regard to pregnant women, the committee and the government are yet to take a firm decision. Moreover, as of now, there is not enough data on the vaccine's impact on pregnant and lactating women. As per the preliminary studies, the benefits of vaccination surely outweigh the risks involved.



Q8. Please give an updates on Covid-19 vaccines for children.

A: To date, the world over, priority has been to vaccinate those in the high-risk elderly age group as they are considered more prone to the disease than others. Next in the list comes the adult population who are far more vulnerable compared to children. As there is a remote possibility of children also getting affected, some countries have been considering vaccinating children and adolescents also along with adults. However, vaccinating children with the same vaccines used for adults should be considered only after adequate trials. One of our India-made vaccines is already undergoing clinical trials in children, and if proven immunogenic and safe, it could be fast-tracked for mass vaccination of children.

To sum it up, there are no clear indicators to suggest that the third wave will predominantly or exclusively affect children. However, it is always good to be proactive and prepared for any eventuality. Along with taking adequate precautionary measures, we hope and pray that the third wave just doesn't occur. I am reminded of a dialogue from my 'all-time-greatest' movie, Shawshank Redemption: "Hope is a good thing, maybe the best of things, and no good thing ever dies."

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To sum it up, there are no clear indicators to suggest that the third wave will predominantly or exclusively affect children. However, it is always good to be pro-active and prepared for any eventuality

Please contact phadke18@gmail.com/9945629232 for any queries or suggestions.

(Reference: Indian Academy of Paediatrics Covid Task Force 2, 2 May 2021). Dr. Abhishek K. Phadke is a Consultant Neonatologist at Indiana Hospital, Mangalore

Story of a pre-term baby that

Indiana nurtured

MANGALURU -- This is an amazing story of a baby born in Indiana Hospital, Mangaluru. The year was 2019. A baby was born pre-term at 26 weeks of gestation even before completion of six months of gestation. The infant weighed 600gm at birth. The baby had a stormy neonatal course requiring breathing support & artificial life support. The baby was discharged after two anda-half months of intensive care from the neonatal care unit of the Indiana Hospital NICU, hale and hearty.

The said baby, now a two-year-old, surprised the doctors here when he turned up at the Indiana OPD recently.

Says Dr. Abhishek K. Phadke, a Consultant Neonatologist at Indiana Hospital, under whose supervision the baby had been cared for: "Seeing him healthy brought a smile on to our faces. He is now able to walk, jump, talk and engage in all activities like any other child. Pre-term babies are real fighters. He reminded us of life's wonders, and what joy means to those in healthcare



services."

"Usually such babies have multiple issues when it comes to long-term development. But this child has had a normal neurological development just like other babies born after a nine-month gestation period," Dr. Abhishek added.

To salvage a baby of this size is always a challenging task. This case was one of the many successful stories of extreme pre-term babies being nurtured to a normal, healthy life by the medical staff at Indiana Children's Institute.

NDTV features Dr. Yusuf Kumble He answers queries on vaccination

MANGALURU -- NDTV English, one of India's frequently asked questions such as, 'Is the leading TV channels, featured Dr. Yusuf Kumble, managing director, Indiana Hospital & Heart Institute, Mangaluru, on June 2, 2021 on its India Vaccinates show. Dr. Yusuf was seen answering

Covid-19 vaccine safe'; the side effects of Covid-19 jab; 'what painkillers are okay to consume', etc. This was followed by another short interview of Dr. Yusuf Kumble on NDTV English.



Impact of Covid-19 on cancer patients

Why it is important for cancer patients to take extra care

Data from different countries show that cancer patients are slightly at a higher risk than others. Such patients are thought to be immunocompromised, that is their capacity to fight back against the diseases is not enough as that of an average person. The presence of other comorbidities like heart diseases and diabetes also reduce a person's capacity to fight back, making people with such diseases more vulnerable.

If a cancer patient develops Covid-19 infection, the chances of organ-related complications arising increase, as some of these patients might have undergone radiation therapy, or chemotherapy, or some may have had their kidney removed, which automatically suppress their immunity.

Dr. Dharma Kumar K.G., MBBS, MS, M Ch (Surgical Oncology)

As Covid-19 pandemic evolves, scientists are learning more and more about the corona virus and how it affects us. From almost the beginning, medical experts have recognized that the elderly and people with certain medical conditions including a few of the major ailments like heart disease, cancer, etc., are at higher risk than others. The recent outbreak of the new corona virus (Covid-19), and the rate at which infection is spreading could be more worrying for patients afflicted with such diseases, and their caregivers. However, there is nothing to worry about, as corona virus infections can be prevented if sufficient precautionary measures are taken.

Should cancer patients follow the same precaution as normal people?

Cancer patients should also take general precautions — washing hands often with soap and water for at least 20 seconds; using hand sanitizer that contains at least 60% alcohol; wearing a mask; avoiding touching eyes, nose and mouth with unwashed hands; practising social distancing; cleaning and disinfecting frequently-touched surfaces, etc. However, along with these precautions, their treatment pattern also may change.

Cancer patients are divided into 3 categories:

- · Patients under maintenance therapy.
- · Patients under active therapy.
- · Patients being got ready for treatment.

Impact of Covid-19 on cancer patients

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Are patients who have completed treatment and are cancer-free, like in the case of breast cancer patients, but are on hormonal therapy more at risk of getting infected?

No. There is no such incidence, or any study saying that such patients suffer more, or are at a higher risk. They can follow their normal routine, but should take proper precautions, and eliminate such fears.

Patients undergoing treatment in the induction phase of blood cancer which kills the entire bad cells in the blood, cannot postpone their treatment. So, extra care and precautions (using personal protective equipment, etc.) must be taken while continuing their treatment. In the case of patients planning to undergo breast screening programs, or if the oncologist feels that there will not be any benefit in giving chemotherapy at an early stage, then you can delay such procedures by 4 to 5 months, or till that time when everything becomes normal. The government is trying to flatten the curve of this pandemic, which means reducing the number of cases, or controlling it altogether.

Can patients skip regular visit to their doctor to avoid exposure?

One can avoid moving out for the regular check-up and screening. But instead can communicate with the doctor through teleconsultations or virtual internet consultation, which has become legal now.

What if a patient skips chemotherapy in this lockdown? Ideally, a patient should never skip a chemo procedure, and if a person misses it due to the lockdown, nothing can really be done. Normally, you can postpone the treatment for up to 3 months. If the gap between two consecutive sessions increases by more than 3 months, then the therapeutic benefits will be lost. So be in touch with your consultant and try arranging the chemo procedure at a nearby hospital as per his guidance.

Cancer surgeons are taking precautions

Cancer surgeons prefer that their patients undergo Covid-19 tests. Droplets are taken from the patients' mouth and nose, and then tested by specialists. These tests have up to 60-70% accuracy. Also, various modifications have been made in the treatment of patients, which all cancer specialists are aware of. There are some special procedures where chemotherapy is done at a much higher degree, and

such patients are at a higher risk, and hence doctors take extra care in such cases.

Hence, do not fear if you get tested Covid-19 positive. You can definitely recover, but will have to take extra precautions and treatment compared to normal people. You are at a higher risk, and should follow Covid-19 protocols — washing hands frequently and maintaining social distancing; using alcohol-based hand sanitizer frequently, especially if you have to go out.

There are lots of ways to deal with isolation even as you make sure that you are not physically close to people. These are the most vital elements to reduce the spread of corona virus. Besides, stock medicines and other household items including swipes, sanitizers, etc. Call your doctor or contact the nearest healthcare center immediately if you feel you have some Covid-19 symptoms.

If I have cancer now or had it in the past, can I get vaccinated?

The Centers for Disease Control and Prevention recommends that everyone 12 years and older get vaccinated. That includes people with underlying medical conditions such as cancer, and people who are participating in cancer trials, although those taking part in trials should talk to their clinical trial research team and follow their guidance.

If you have recently received cancer treatment that suppresses the immune system —such as chemotherapy, stem cell or bone marrow transplant, or cell therapy — doctor may suggest that you wait until your immune system has recovered before you get vaccinated. Or your doctor may suggest that you wait until 2 weeks after the vaccination to get immunosuppressive treatment.

Covid-19 vaccine trials have shown that the safety and efficacy of the vaccines are similar in people with underlying medical conditions as in people without those conditions. And vaccines for other infections, like the flu, are safe and recommended for people with cancer.

However, most Covid-19 trials have excluded people with cancer; so more data are needed on the safety and efficacy of Covid-19 vaccines in these individuals. There is some evidence that people treated for cancer and others who are immunosuppressed may have a weaker response to the vaccines. To help protect people with cancer from Covid-19, it is important that family members, loved ones, and caregivers get vaccinated.

Dr. Sapna Chauhan joins Indiana as Consultant Obstetrician & Gynaecologist



Dr. Sapna Chauhan, MBBS, DGO, DNB (OBG), has joined Indiana Hospital, Mangaluru as Consultant-Obstetrician & Gynaecologist. Dr. Sapna did her MBBS at Dr. D.Y. Patil Medical College and University, Navi Mumbai, and subsequently did DGO from YCM Municipal Corporation Hospital, Pune, and DNB from Kerala Institute of Medical Sciences, Thiruvananthapuram, Kerala. After completing her education, Dr. Sapna worked as a Resident doctor in the OBG department at YCM Municipal Corporation Hospital, Pune and she served as a Registrar doctor in the OBG department, KIMS Hospital, Thiruvananthapuram. Later she worked as a Registrar doctor at Disha Fertility Centre, Indore. Her clinical expertise and academic experience at K.S. Hegde

Medical Academy Hospital, Mangalore, first as a Senior Resident and later as Assistant Professor in OBG department will come in handy for her as she starts her new stint at Indiana. She has many publications to her credit in international journals and has also presented many papers at national medical conferences.

Dr. Smruthi, the new Eye Surgeon

Dr. Smruthi recently joined Indiana Hospital as a Consultant Ophthalmologist. She obtained her MBBS from K.S. Hegde Medical Academy, Mangaluru, and did her MS (Ophthalmology) at S. S. Institute of Medical Sciences and Research Center affiliated to Rajiv Gandhi University of Health Sciences. She is also an IOL Fellow (Cataract) of Sankara Eye Hospital, Coimbatore. Dr. Smruthi's five years' service at Manav Charitable Hospital, Bangalore will stand her in good stead in treating patients at Indiana Hospital. She has successfully performed 4000 cataract operations using SICS technique, and over 600 using Phacoemulsification technique.



Her other areas of specializations include glaucoma, diabetic eye care, neuro ophthalmology, squint evaluation, minor lid surgeries, and Pterygium surgery, yag laser capsulotomy and peripheral iridotomies.

Dr. Zulfiya Shabnam is another addition as Specialist, Obstetrics & Gynaecology Dept.



Indiana Hospital welcomes Dr. Zulfiya Shabnam as Consultant/Specialist in its Obstetrics & Gynaecology department. Dr. Zulfiya completed her MBBS from Justice K.S. Hegde Medical Academy, Mangaluru, and later did her DNB in OB & GYN at Bangalore Baptist Hospital, Bangalore. Armed with a wide range of surgical and clinical exposure and skill, Dr. Zulfiya is a new addition to Indiana's Gynaecology Department. After MBBS, she served as a as a Casualty Medical Officer at K.S. Hegde Medical Academy, Mangaluru and later as a trainee and Resident Obstetrics and Gynaecology at Gunasheela IVF Centre, Bangalore. She has presented many papers at conferences and CMEs.

CUTANEOUS MANIFESTATIONS OF COVID-19

Along with the common symptoms of Covid-19, a few dermatological manifestations have also been reported among a few people affected by the virus. The pathophysiological changes on their skin leading to different kinds of rashes range from vasculitic changes to formation of microthrombi obliterating the dermal vessels.

Although cutaneous presentations of Covid-19 are infrequent, it is of great importance that all clinicians become aware of these manifestations. as it may help in faster as well as better diagnosis and management of the disease, even among asymptomatic patients. However, they might not be an indicator of the severity of the disease in every case.

Cutaneous rashes appearing before the onset of the typical Covid-19 symptoms are important indicators of this infection. There are skin rashes like maculopapular/morbilliform, urticarial. pityriasis rosea like rash, which appear during the course of the milder form of the disease. Whereas other rashes like acral ischemia, necrosis and hemorrhagic rash appear in patients with critical disease, thus signifying poor prognosis.

1) Maculopapular rash(Morbilliform)

Maculopapular rash, with or without pruritus, is the most common cutaneous manifestation of Covid-19, and it is mostly observed during the active phase of the disease. This rash appears in patients belonging comparatively to the younger age group; and is seen late in the course of the disease, and among those affected less severely. These rashes appear predominantly on the trunk of the body as an erythematous rash. These lesions are pruritic and/or painful.

2) Urticaria

Urticarial lesions have been detected more commonly among the elderly. They appear simultaneously with other symptoms of Covid-19. These lesions are seen as erythematous weals associated with itching.

3) Chilblain or Pseudo Chilblains

Pseudo Chilblains have generally been seen



By Dr. Shubha Dhanprakash

among the less-severely affected and the young,

and appear late in the course of the disease. These lesions are painful and itchy, and appear as patches of erythematous papules and edema. Vesicles and pustules with purpuric spots have also been detected. Chilblains are painful inflammation of the small blood vessels on the skin, Dr. Shubha Dhanprakash and occur in response to



repeated exposure to cold. However, the lesions that appear on the skin of Covid-19 patients are only similar in appearance to chilblains that appear due to exposure to cold, and hence have been termed 'pseudochilblains'. Moreover, in contrast to other cutaneous manifestations, which appear mostly in the active phase of Covid-19, chilblain often appear in the later phase of the disease, and they appear, usually, on the acral parts of the body, with heels and toes being affected more significantly than fingers.

4) Vesicular lesions, Papulovesicular eruption

These lesions are seen more among middle-aged patients. They appear before the onset of other symptoms of Covid-19, and are mostly seen in cases with moderately-severe disease. These lesions appear in the form of papules and vesicles, mainly on the trunk of the body and at times on extremities. They itch. Vesicular lesions, usually manifested like chicken pox, are pruritic papulovesicular rashes that appear mostly on the trunk.

5) Livedo reticularis

The lesions of livedo reticularis appear as reticulate erythematous rash on trunk, thighs and legs. Cutaneous necrosis has also been reported among some patients. They appear among relatively older patients who have been severely affected, and are associated with higher mortality rate. Livedo reticularis is caused by certain conditions, including disseminated intravascular coagulation (DIC), that reduce blood flow through the cutaneous



CUTANEOUS MANIFESTATIONS OF COVID-19

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microvasculature system, leading to deoxygenated blood accumulation in the venous plexus. Micro thromboses that manifest in other organs (e.g. cardiopulmonary), and as DIC in critically ill Covid-19 patients, are the most plausible reason for livedo reticularis appearing in such patients.

6) Necrotic-acral ischaemia, haemorrhagic macules & cutaneous necrosis, acral ischemia appearin more severe cases and manifest themselves as gangrenous lesions on toes, possibly because of the hyper-coagulation state in Covid-19 patients. Hemorrhagic rashes have also been found in Covid-

19 patients who have been severely affected and with high mortality rate. These appearas small-to-big purpuric lesions.

7) Petechiae

Covid-19 cases have been seen to present signs clinically suggestive of small blood vessel occlusion. And, these can be in the form of petechiae or tiny bruises, transient livedoid eruptions, or acral ischemia, presenting themselves as perniosis-like lesions.

Dr. Shubha Dhanprakash,

MBBS, DDVL (DERMATOLOGY, VENEREOLOGY & LEPROSY), is the Consultant Dermatologist at Indiana Hospital, Mangaluru

DOCTORS DAY CELEBRATIONS AT INDIANA



Indiana's medical fraternity's service during Covid-19 comes in for high praise



Mangaluru – The frontline warriors who have been serving corona virus-infected patients were felicitated here on the occasion of the Doctor's Day, which was celebrated at Indiana Hospital on July 1, 2021. The Sunni Yuvajana Sangha (SYS) praised the medical fraternity of Indiana hospital who epitomised selfless service beyond the call of duty during the pandemic.

THE BASICS

Complex heart surgery at Indiana Hospital saves an elderly person's life



HALE & HEARTY: Patient Ahmed Khan is seen third from right with the team of doctors, led by Dr. Yusuf Kumble.

MANGALURU – A high-risk, complex Transcatheter Aortic Valve Implantation (TAVI) procedure to treat Aortic stenosis along with angioplasty to remove coronary blocks was successfully performed on an elderly person, Ahmed Khan, hailing from Goa, by a team of doctors led by Dr. Yusuf Kumble, managing director and chief interventional cardiologist, at Indiana Hospitals and Heart Institute, Mangalore recently.

The patient, who had been suffering from severe aortic valve stenosis with multiple blocks in the coronaries, approached the hospital complaining of chest pain, breathing discomfort and issues related to heart failure. He had earlier approached many hospitals in the region to get treated, but after being told that Indiana is a pioneer in treating such patients, approached Indiana hospital.

He had already undergone two heart operations to change the valves and remove the blocks in the past. To eliminate the current problems that he faced, he needed to undergo two more operations. That was the challenge to perform another two operations on him. Hence the risk factor was high, especially as he was an elderly person. Dr. Yusuf Kumble hence, as an alternative, suggested replacing valve replacement by TAVI without surgery along with removing the blocks by angioplasty. Says Dr. Yusuf Kumble, who is the first in coastal and Malnadu Karnataka region to

perform TAVI: "This TAVI procedure was more complicated than normal procedures because a new valve had to be deployed near the old artificial one."

Dr. Yusuf, who advocates non-surgical option for aortic stenosis in the elderly, took up the challenge of performing TAVI and coronary angioplasty. It may be recalled that Indiana Hospital was the first to perform TAVI in coastal and Malnadu Karnataka two years ago, and since then has performed TAVI on several patients. However, this was the first time that such a complex TAVI was performed at Indiana Hospital, thus creating a milestone in treating highly complex heart diseases.

The patient underwent a 90-minute procedure under local anaesthesia without any pain and was shifted to the ICU, and was there only for 24 hours. He was discharged in two and-a-half days. He now leads a normal life, and is hale and healthy.

The patient exuded happiness over the successful procedure, and the members of his family conveyed their gratitude to Dr. Yusuf Kumble, Dr. Manjunath Suresh Pandit, Dr. Siddharth V.T., Dr. Latha Sharma, Dr. Prachi Sharma and the entire team of Indiana Hospital for successfully conducting such a complex heart intervention procedure.

Aortic stenosis

Aortic stenosis is the critical narrowing of the valve guarding the main outflow chamber of the heart, a condition which can occur in ageing patients. It results in breathlessness, fatigue and treatment is usually a high-risk surgery.

TAVI

TAVI (Transcathether Aortic Valve Implantation) is a minimally invasive non-surgical procedure where an artificial valve is implanted in the heart most commonly through an artery in the leg (transfemoral approach) & delivered to the heart.

OUR IN-HOUSE DOCTORS - 24x7

DEPARTMENT OF CARDIOLOGY

DR. YUSUF A KUMBLE

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

DR. MANJUNATH S. PANDIT

MBBS, MD, DM (Cardiology)

Consultant Interventional Cardiologist

DR. PRACHI SHARMA

MBBS, MD (Gold Medalist), DNB, DM Cardiology (Gold Medalist) Consultant Interventional Cardiologist

DEPARTMENT OF CARDIOTHORACIC & VASCULAR SURGERY

DR MOOSAKUNHI

MBBS, MS (GEN SURG), Mch Director Cardiovascular Science, Senior Consultant Cardiothoracic Surgeon

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 &CRITICAL CARE

DR. ADITHYA BHARADWAJ

MBBS, DNB (MED), MRCP (U.K.), MRCP (LON) IFCCM Consultant Physician, Diabetologist & Intensivist

MOHAMMED SHA ALAM M.B

MBBS, MD (GENERAL MEDICINE) Consultant - General Medicine

DEPARTMENT OF PAEDIATRICS

Prof. DR. ALI KUMBI F MBBS, MD (PAEDIATRICS)

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

DR. ABHISHEK K. PHADKE
MBBS, DNB (PAEDIATRICS), FIAP (NEONATOLOGY) Consultant Neonatologist

DR. ARUN VARGHESEMBBS, MD (PAEDIATRICS) FPCC (PAEDIATRIC CRITICAL CARE) Consultant - Paediatric Intensivist

DEPARTMENT OF PAEDIATRIC SURGERY & PAEDIATRIC CARDIAC SURGERY

DR. VIJAYMAHANTESH S. SAMALAD
MBBS, MS, Mch (Paediatric Surgery), PGIMER - Chandigarh
FELLOW IN PAEDIATRIC UROLOGY Consultant Paediatric and Neonatal Surgeon and Paediatric Urologist

Prof. DR. KOCHIKAR GANESH PAI MBBS, MS, Mch (Paediatric Surgery), FICS, FICA (USA), FIAMS, FISPU Senior Paediatric Surgeon & Paediatric Urologist

DR MOOSAKUNHI

MBBS. MS (GEN SURG), MCh

Director Cardiovascular Science, Senior Consultant Cardiothoracic Surgeon

DEPARTMENT OF RHEUMATOLOGY

DR. ARIFA HALEEMA SIDDIQUI

MBBS, DNB (General Medicine) MRCP (Rheumatology) UK Consultant Rheumatologist

DEPARTMENT OF ENT

DR. PALLAVI PAVITHRAN

MBBS, MS (ENT), DNB (ENT) Consultant ENT Surgeon

DEPARTMENT OF PULMONARY MEDICINE

DR. NITHIN K.T.

MBBS, MD (Pulmonary Medicine) Consultant - Pulmonary Medicine.

DR. DON GREGORY MASCARENHAS

MBBS, MD DNB Consultant Pulmonologist & Allergist

DR. PRASHANT VAIJYANATH

MBBS, MS (PGI), MCh (CVTS - AIIMS), FACS, FCS Senior Consultant Cardiothoracic, Vascular & Heart Transplant Surgeon

DR. MOHAMMAD SAMEERUDHEEN

MBBS, DNB, MS (CATARACT & REFREACTIVE SURGERIES & GLUCOMA) Consultant Ophthalmologist

DEPARTMENT OF NEUROLOGY

DR. ZK MISRI MBBS, MD (MED) DM (NEURO) Associate Professor & Sr. Consultant Neurologist

DR. SAFWAN AHMED

MBBS, MD, DM (NEUROLOGY) (NIMHANS) Consultant Neurologist

DEPARTMENT OF NEURO SURGERY

DR. ELVIS RODRIGUES

MBBS, MS (GENERAL SURGERY), MCh (NEURO SURGERY) NIMHANS Sr. Consultant Neuro Surgeon

DEPARTMENT OF NEPHROLOGY

DR. PRADEEP K.J.
MBBS. MD (GENERAL MEDICINE). DM (NEPHROLOGY) Sr. Consultant Nephrologist & Kidney Transplant Physician

DEPARTMENT OF UROLOGY

DR. ABHIJIT SHETTY

MBBS, MS (SURGERY), DNB (UROLOGY) Consultant Urologist & Kidney Transplant Surgeon

DR B M ZEESHAN HAMEED

MBBS, MS, MCh (Urology) FRLS, PGDHHM, PGDMLS Professor of Urology & Renal Transplant

DEPARTMENT OF PAEDIATRIC UROLOGY

DR. VIJAYMAHANTESH S. SAMALAD
MBBS, MS, Mch (Paediatric Surgery), PGIMER - Chandigarh
FELLOW IN PAEDIATRIC UROLOGY Consultant Paediatric and Neonatal Surgeon and Paediatric Urologist

DEPARTMENT OF EMERGENCY MEDICINE

DR. SALFI P. K.
MBBS, MD (EMERGENCY MEDICINE), FICM Consultant Emergency Medicine

DR. K. ASHOK KUMAR MBBS, MEM (GWU-USA)

Consultant - Emergency Medicine DR. AJITH ALFRED SOLOMON

MBBS, MEM (GWU-USA)

Consultant - Emergency Medicine

DR NABISATHA SHAMNA MINAZ MBBS MEM

Consultant - Emergency Medicine

DEPARTMENT OF ORTHOPAEDIC &

JOINT REPLACEMENT SURGERY DR. JAI AI UDDFFN MV

MBBS, MS (ORTO), MCh (ORTHO) Sr. Consultant Orthopaedic Surgeon (Spine & Joint Replacement)

DR. NAVEEN CHANDRA ALVA MBBS, MS, D'ORTHO, MS (ORTHO)

Sr. Consultant Orthopaedic Surgeon

DR. AHMED RIZWAN CM

MBBS, MS (ORTHO), Mch (ORTHO), D'ORTHO Fellow in Deformity Correction - Ilizarov, (Russia)
Baltimore (USA), NRRA (China)
Consultant Orthopaedic Surgeon

DR BHAGATH L.S. MBBS, D'ORTHO

Consultant Orthopaedic Surgeon

DR. HASHIR SAFWAN U

MBBS, MS (ORTHO), D'ORTHO, A.O. SPINE FELLOW

Consultant Spine & Scoliosis Surgeon DR. S. SHIBLI

MBBS, MS (ORTHO), D'ORTHO

Children & Young Adult Orthopaedic Surgeon

DR. NAVANEETH S KAMATH

MBBS, MS (Ortho), HBNI - Orthopaedic Oncology (Tata Memorial Hospital, Mumbai) Consultant Orthopaedic Onco Surgeon

DEPARTMENT OF DERMATOLOGY

DR. SHUBHA DHANPRAKASH

MBBS, DDVL (DERMATOLOGY, VENEREOLOGY & LEPROSY) Consultant Dermatologist

VISITING CONSULTANTS

DR. GURUNANDAN U. MBBS, MS (General Surgery),

DNB (Vascular & Endovascular Surgery)

Consultant Vascular Surgeon

DR. MUSTAFA K. BDS, MDS

Consultant Maxillofacial Surgeon

DR. NIKHIL S. SHETTY MBBS, MS (GENERAL SURGERY),

Mch (PLASTIC & RECONSTRUCTIVE SURGERY) Consultant Plastic & Reconstructive Surgeon

DEPARTMENT OF ONCOLOGY

DR. DHARMA KUMAR K.G.
MBBS, MS (GENERAL SURGERY), MCh (SURGICAL ONCOLOGY) Tata Memorial Hospital, Mumbai Consultant Surgical Oncologist

DEPARTMENT OF GASTROENTEROLOGY & HEPATOLOGY

DR. APOORVA SRIJAYADEVA

MBBS, DNB (MEDICINE), DNB (MEDICAL GASTROENTEROLOGY), FCCP Consultant Interventional Gastroenterologist

DEPARTMENT OF GYNAECOLOGY

Prof. DR. BHAVANA SHERIGAR

MBBS, MD, (OBG), FICOG Sr. Consultant Obstetrician & Gynaecologist

Dr Zulfiya Shabnam MBBS, DNB (OBG)

Consultant Obstetrician & Gynaecologist

Dr Sapna Chauhan

MBBS, DGO, DNB (OBG)

Consultant Obstetrician & Gynaecologist

DEPARTMENT OF GENERAL SURGERY

DR. KESHAV PRASAD Y.V

MBBS, MS (GEN SURG), DNB (GEN SURG), FMAS, FIAGES Consultant General & Laparoscopic Surgeon

PROF. DR. ASHFAQUE MOHAMMED

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

DEPARTMENT OF DENTISTRY

DR. MEGHANA S KUMAR

BDS, MDS

Consultant Paediatric Dentist

DEPARTMENT OF PSYCHIATRY

DR. SIVA SIVAKANTHA MBBS, MD (PSYCHIATRY)

Sr. Consultant Psychiatrist

DEPARTMENT OF OPTHALMOLOGY

DR SMRUTHI

MBBS, MS Ophthal IOL Fellow(Cataract) Consultant Ophthalmologist

DEPARTMENT OF ANAESTHESIOLOGY

DR. SEEMA ALVA

MBBS, DA (ANASTHESIA) Consultant Anaesthesiologist

DR. SHANFAR MBBS, MD (ANASTHESIA)

Consultant Anaesthesiologist
DR. K. MADHAN MBBS, MD, FCCM, DM (Cardiac Anaesthesia)

Consultant Cardiac Anaesthesiologist

DEPARTMENT OF RADIOLOGY DR. PRAVEEN ACHAR

MBBS, DMRD Senior Consultant Radiologist

DR. SUNIL H.C. MBBS, DNB (RADIO DIAGNOSIS)

Consultant Radiologis DEPARTMENT OF LABORATORY

DR. BHASKAR U A

MBBS, MD (MICROBIOLOGY) **HOD & Consultant Microbiologist**

OTHER DEPARTMENTS PHYSIOTHERAPY SPEECH THERAPY DIETARY

DR. ASHRAF AHMED MBBS, MS, Mch (Paediatric Surgery) Paediatric Surgeon

DR. SANDEEP RAI

MBBS, MS, Mch (Paediatric Surgery) Paediatric Surgeon