

Prof. Dr. Ali Kumble installed as president of the Karnataka State Paediatric Intensive Care Chapter (Pedicriticon)

SHIVAMOGGA - It was a proud moment for Indiana Hospital when its chairman and head of paediatrics, Prof. Dr. Ali Kumble, was unanimously elected the president of the Karnataka State Paediatric Intensive Care Chapter (Pedicriticon) for 2022-2023.



Dr. Ali Kumble took over the presidency at the 11th annual conference of the Intensive Care Chapter of IAP, Karnataka, held at the Shivamogga Institute of Medical Sciences here on Nov 21-22, 2021.

Paediatric intensive care is among the young branches of modern medicine. It is an important component in reducing childhood morbidity and mortality globally. It is the section of the hospital that provides the highest level of specialised medical care to the sick children under Paediatric Intensive Care Unit (PICU).

In the PICU, sick children get intensive nursing care and close monitoring of the vital parameters like heart rate, breathing and blood pressure. The doctors and nurses who work in the PICU are experienced in caring for the sickest children in the hospital. They're the people most closely involved with the minute-to-minute care of the kids. The PICU also tends to have a higher nurse-to-patient ratio than other departments in the hospital. In other words, each nurse cares for fewer patients, which gives them more time with each child. The PICU can improve the quality of paediatric care in general and, when properly organised, effectively treat the severe complications of life-threatening conditions and high-burden diseases, such as diarrhoea, severe infections, respiratory distress, paediatric trauma etc using low-cost interventions.

Paediatric Critical Care has rapidly grown in India in the past decade but it still remains a developing branch as far as the Indian scenario is concerned. There are not many places in India where satisfactory critical care is being delivered to the needy children.

As an effort to promote this field of paediatric intensive care in India, the IAP Intensive Care Chapter was established in 1998. One of the primary missions of the organisation was to train the next generation of academically-minded paediatricians, who can help care for children with the most complex and critical conditions.

The field of paediatric critical care medicine in Karnataka has improved considerably under the able guidance of the state intensive care chapter. It has played a pivotal role in bringing the standard of care in the state on a par with the best in the world class.

The concept of an 'Exclusive critical care unit for paediatric age group' in the coastal city of Mangaluru was first conceived in the late 1990s by pioneer paediatric practitioners of the time, notably Dr. B. Shantharam Baliga, Dr. Santosh T. Soans and Dr Ali Kumble, among others, in a small private nursing home in the city. Now after two decades, Mangaluru is the front-runner among the cities in the state in providing high-quality care for sick children.

Dr. Ali Kumble is Karnataka Pedicriticon chief



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Prof. Dr Ali Kumble, taking over the reins as the president of the prestigious organization, Karnataka State Paediatric Intensive Care Chapter for 2022-2023 has brought cheers to the paediatric fraternity of Mangaluru. Dr. Santosh T. Soans was instrumental in the formation of paediatric intensive care organisation. He served as its national president before.

Prof. Dr. Ali Kumble, with more 30 years of experience in the field of paediatrics, neonatology and critical care, is highly esteemed by his colleagues for his ethical practice and service to poor patients. Also, he had earlier served as the honorary president of the IAP Dakshina Kannada.

Dr. Kumble has been heading the Department of Paediatrics at the Indiana Children's Institute for the past 10 years. The Indiana Children's Institute is a state-of-the-art facility in the region providing quality care in all the subspecialties of paediatrics. The Institute is backed by a team of experienced expert consultants and specialists including neonatologist, paediatric intensivist, paediatric surgeon and paediatric pulmonologist. The Institute is accredited with the DNB (Diplomate of National Board) in paediatrics and NNF Neonatology Fellowship with Level 3 NICU and a fully-equipped PICU. The Institute mainly serves the southern districts of Karnataka (Uttara Kannada, Udupi and Kodagu) and North Kerala (Kozhikode, Kannur and Kasaragod districts).

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Indiana Decennial Celebrations Inaugurated

MANAGLURU - The decennial celebrations of Indiana Hospital got off to a colourful start with a short inauguration held at the auditorium of the hospital on December 8, 2021. Dr. Yusuf Kumble, managing director and Dr. Dr Ali Kumble, chairman, Indiana, unveiled the logos for various groups. A colourful dance and eating competition were held on the occasion. Dr. Yusuf said a series of events are planned in the coming weeks with a grand finale (valedictory event) on January 29, 2022.



Indiana organises health awareness programme at Bhatkal



BHATKAL - Indiana Hospital & Heart Institute, Mangalore organised a health awareness talk cum interaction meet at Royal Oak Hotel here on October 16, 2021. Dr. Yusuf Kumble, managing director and Chief Interventional Cardiologist, Indiana, gave an overview of latest facilities at Indiana and how the hospital catered to covid patients for which it was praised. He said Indiana would offer financial assistance to Bhatkal patients, who are financially not sound, through its Fatima Foundation. Dr. Adithya Bharadwaj, Consultant Physician, Diabetologist & Intensivist at Indiana, gave a talk on lifestyle modification that ensures better health. Aftab Kola, head of corporate communications at Indiana, introduced the guests and compered the programme. Dr. Apoorva Srijayadeva, consultant gastroenterologist, Indiana, was also present on the occasion. Many from the audience interacted with Dr. Yusuf Kumble. The event was followed by dinner.



Indiana conducts general health and eye camp for IOCL employees

MANGALURU – Indiana Hospital and Heart Institute, in association with the Indian Oil Corporation (IOC), Mangaluru, organised a two-day general health and eye camp on the IOCL premises in Thaneerbavi here. A team of doctors, comprising of Dr. Nabeel and Dr. Jackson from Emergency Medicine department and Dr. Smruthi, ophthalmologist, examined about 100 employees of Indian Oil Corporation (IOC), Mangaluru.



HAPPY
Childrens
DAY



Children’s Day celebrated at Indiana



Fun and excitement marked the Children’s Day celebrations held on the premises of Indiana Hospital on November 14, 2021. Hosted by Indiana children’s Institute, various events were conducted. The children’s faces beamed with happiness as each of them received a gift.

Free Medical Camp At Maddadka Evokes Big Response



BELTHANGADY – A free check-up medical camp was held under the aegis of Indiana Hospital, Jamiyyatul Falah Belthangady Taluk®, and Ansarul Islam Youngmen’s Association®, Sunnatkere on December 5 at Bustanul Uloom Madarasa, Sunnatkere at Maddadka. A big team of doctors representing major specialties and super-specialties from Indiana examined more than 450 patients.



Indiana doctors pull off a rare surgery

10-day old baby with congenital heart defect saved after delicate procedure at Indiana

MANGALURU - Doctors led by Dr. Yusuf Kumble at Indiana Hospital, Mangaluru, have performed a highly complicated and rare surgery involving a 10-day old baby with a congenital heart defect.

A pregnant woman in the city was diagnosed as carrying a baby with a major heart defect in utero. The couple opted for Indiana Hospital given its reputation as the best hospital for heart treatment and neonatal care in South India.

When the baby was delivered, its echocardiogram confirmed the diagnosis of critical aortic valve stenosis, i.e., one of the aortic walls was significantly narrowed in utero itself. It was a challenge to operate upon a 10-hour-old baby for the congenital heart defect that obstructs the blood flow from the heart to the body. Such cases have a very high mortality rate and the chances of survival are just 50%. Even if the baby makes it through, it may have other complications. Nonetheless, doctors at Indiana Hospital decided to give it a try.

The baby was immediately shifted to the cath lab, the valve was opened and the procedure done to correct the defect. The baby was subsequently shifted to the neoanatology department which is not only well-equipped but is also manned by experts like Dr Abhishek. The baby spent a few days in the NICU, recovered and has been discharged.

It was yet another remarkable accomplishment by doctors at Indiana as they performed a surgery which is rarely done in a hospital.



325 patients examined at free health camp at Bhatkal

BHATKAL - As many as 350 people from the coastal town of Bhatkal were benefited at the health check camp held here at the Rabita Society building on December 12, 2021. Held under the aegis of Indian Nawayath Forum, Bhatkal and Indiana Hospital Mangaluru, four specialist doctors from the departments of cardiology, general medicine and paediatrics treated the patients with facilities like blood test, BP, ECG and echo. Dr. Ali Kumble, Dr. Sha Alam, Dr. Manjunath S. Pandit and Dr. Arun Varghese participated in the camp. Earlier, a short inauguration was held with the participation of town's dignitaries.



'Puneeth's sudden death a rare case, don't panic but take care of your heart': Dr. Yusuf Kumble

The sudden death of Kannada superstar Puneeth Rajkumar, who was as fit as a fiddle, has once again put the spotlight on the prevalence of heart diseases among the youth, about working out in the gym and silent factors like genetic disposition to certain diseases.

Dr. Yusuf Kumble, eminent interventional cardiologist and managing director of Indiana Hospital and Heart Institute, Mangaluru, provides answers to some of our most common questions and dispels myths about heart diseases. Here's a summary of what he says:



What is a sudden death?

The most common cause of a sudden death is mostly related to the heart as against accidents or other causes. From a cardiologist's perspective, a sudden or unexpected death happens within six hours of the onset of symptoms as per European standards and within 12-24 hours according to US standards.

What causes a sudden death? How does it happen?

The most common underlying cause of a sudden death is arrhythmia, or rhythm disturbance of heart. If the heart beats more than 300-400 times per minute, it's called tachycardia or ventricular fibrillation which can result in sudden death if not treated urgently.

These sudden deaths often occur due to a spontaneous rupture of plaque in the coronary artery, which supplies blood to the heart [heart attack]. This could also be due to an old heart attack which causes some scar in the heart which in future leads to ventricular arrhythmia and sudden death; some other causes include structural heart disease, a hidden family history of heart diseases, a severe brain stroke or lung issues etc.

Are there any symptoms that can be recognised by patients who had sudden deaths?

People may have some premonitory symptoms like mild chest discomfort or burning sensation within one or two days before heart attack. In most of the cases patients may not have any symptoms or may have a mild dizziness or some chest pain and discomfort, and within a few minutes patient suddenly become unconscious.

Which people are at the most risk of sudden deaths?

People who are having major conventional risk factors for heart attacks like diabetes, high blood pressure, high cholesterol, smoking and obesity are at higher chances of sudden death. Those with a family history of heart diseases or sudden cardiac death (SCD) are also at risk. Patients who had

heart attack and left with reduced ejection fraction (poor pumping of heart) are having high risk of SCD. Also structural heart diseases like HOCM, SEVERE AORTIC STENOSIS, channelopathy, drug abusers and bed ridden patients are having high chances of SCD.

What tests should be done to go for regular exercise programme?

First, getting a baseline ECG is a must. Echocardiogram and treadmill are the main tests used to detect the adequacy of blood supply to cardiac muscles. A few blood tests are also recommended. After seeing these reports, the cardiologist will prescribe what needs to be done and what kind of exercise and lifestyle modification is required. Despite all preliminary investigations, including angiograms being normal, some serious issues can still happen due to hidden diseases. These won't be revealed by conventional tests and need further high-end investigations which are not practically possible unless high suspicions are there.

Are working out in the gym and doing other exercises harmful? How dangerous are they?

The incident that befell Puneeth is a rare case. Only one person in a population of one lakh can have a sudden death. It's not very common. Some studies show that one death can happen in 15,000 people with more than 40 yrs of age. It is not very alarming but since it (Puneeth's sudden death) received widespread publicity, it sends shivers down your spine.

It's prudent to get a proper health evaluation done before signing up for a rigorous gym programme. Any excessive strenuous exercise done in a short span of time is not proper. Conditioning the body before the exercise, especially the warm-up, and cooling down afterwards are a must. An evaluation of family history and physical examination before beginning the exercise regimen are vital.

Steps for better heart health

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Any tips for working out that will not put a strain on the heart?

Anything done in moderation is good. Overwhelmingly exhausting yourself is unnecessary. You need to consider the age factor as well. Water intake should be adequate. If you are heavily stressed, do only light exercises and take some rest in-between. Warm up before the exercise and cool down after. Never work out under humid conditions as you will tend to lose electrolytes. Sudden bursts of exercise should be avoided.

Can we take Aspirin or other medicines if we anticipate a panic attack?

If a person identifies unusual symptoms or discomfort that he/she never or hardly encountered before or if he/she is not a heart patient, he/she can take Aspirin 325 mg. This pill can be kept handy at home/office or during travel. There is nothing wrong in taking chewable Aspirin tablets without the doctor's advice even if there's no cardiac cause and no major harm was done. It is safe to take the tablet before seeking medical help.

Another easy option is to call up your doctor friend and take his/her advice. In an advanced case, if symptoms are severe and the chest pain is intolerable and the patient feels the pain radiating towards the left arm, he/she can take Clopidogrel 300mg tablets which would provide an added benefit for high-risk people and those with established cardiovascular disease(s).



What can a bystander do when someone is unconscious or has a severe chest pain?

Everyone must be trained in Basic Life Support (BLS) skills, and the government should make it mandatory for senior students to get trained in Cardiopulmonary Resuscitation (CPR) techniques. Immediate CPR can save the victims of cardiac arrest. These days, social workers have been taking interest in BLS training. It's a good sign.

When a person suddenly collapses, it causes panic. In such a situation, BLS-trained people who are around can help. The next step is to seek the help of the Emergency Medical Service, which is available on the toll-free ambulance number. An EMS manned by trained paramedics should be easily accessible to everyone. The government should ensure that.

Another way to address a cardiac emergency is to install Automated External Defibrillators at important public places where there is a possibility of large gatherings. Many people are aware of the Cardiopulmonary Resuscitation (CPR), which is given physically, while ventricular fibrillation is handled with a medical device.

My message is to go for regular check-ups for high-risk people. Do not panic although certain deaths are unavoidable. But prevention is always better.

“ If you take a long break, you need to first build up a rhythm for exercise. ”

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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, M.D, DNB, DM (INTERVENTIONAL CARDIOLOGY) Gold Medalist
Consultant Interventional Cardiologist

DEPARTMENT OF CARDIOTHORACIC & VASCULAR SURGERY

DR. M.K. MOOSA KUNHI
MBBS, MS, MCh, FIACS
Director Cardiovascular Science Chief Cardio Thoracic & Heart Transplant 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

DR. MOHAMMED SHA ALAM M.B
MBBS, MD (GENERAL MEDICINE)
Consultant - General Medicine

DEPARTMENT OF PAEDIATRICS

Prof. DR. ALI KUMBLE
MBBS, MD (PAEDIATRICS)
Sr. Consultant & HOD (PAEDIATRICS), Chairman - IHHI Ltd.

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

DR. ARUN VARGHESE
MBBS, MD (PAEDIATRICS) FCCP (PAEDIATRIC CRITICAL CARE)
Consultant - Paediatric Intensivist

DEPARTMENT OF PAEDIATRIC SURGERY

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 PAEDIATRIC CARDIAC SURGERY

DR. M.K. MOOSA KUNHI
MBBS, MS, MCh, FIACS
Director Cardiovascular Science Chief Cardio Thoracic & Heart Transplant 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 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. B M ZEESHAN HAMEED
MBBS, MS, MCh (UROLOGY) FRCS, PGDHHM, PGDMLS
Professor of Urology & Renal Transplant

DR. RAJEEV T P
MS, DNB, MCh
Professor & Visiting Consultant Urologist

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. AJITH ALFRED SOLOMON
MBBS, MEM (GWU-USA)
Consultant - Emergency Medicine

DR. SHAMNA MINAZ
MBBS, MEM
Consultant

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DR. JALALUDDIN 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), NARRA (CHINA)
Consultant Orthopaedic Surgeon

DR. LATHEESH L

M.B.B.S., M.S (ORTHO), DNB (ORTHO),
FNB (HAND & MICRO SURGERY)
Fellowship in Podiatry Surgery (IPA)
Consultant Hand Micro & Reconstruction Surgery,

DR. BHAGATH L. S.

MBBS, D'ORTHO
Consultant Orthopaedic Surgeon

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MBBS, MS (ORTHO), D'ORTHO, A.O. SPINE FELLOW
Consultant Spine & Scoliosis Surgeon

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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

DEPARTMENT OF ONCOLOGY

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MBBS, MS, MCh (SURGICAL ONCOLOGY)
Consultant Surgical Oncologist

DEPARTMENT OF GASTROENTEROLOGY & HEPATOLOGY

DR. APOORVA SRIJAYADEVA
MBBS, DNB (MEDICINE), DNB (MEDICAL GASTROENTEROLOGY), FCCP
Consultant Interventional Gastroenterologist

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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

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DR. KESHAV PRASAD Y.V
MBBS, MS (GEN SURG), DNB (GEN SURG), FMAS, FIAGES
Consultant General & Laparoscopic Surgeon

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MBBS, DNB (GENERAL SURGERY), FIAGES, FACS
Advanced Laparoscopic Surgeon

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DR. MEGHANA S KUMAR
BDS, MDS
Consultant Paediatric Dentist

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DR. SIVA SIVAKANTHA
MBBS, MD (PSYCHIATRY)
Sr. Consultant Psychiatrist

DEPARTMENT OF OPHTHALMOLOGY

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




DEPARTMENT OF RADIOLOGY

DR. PRAVEEN ACHAR
MBBS, DMRD
Senior Consultant Radiologist

DEPARTMENT OF LABORATORY

DR. BHASKAR U A
MBBS, MD (MICROBIOLOGY)
HOD & Consultant Microbiologist

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

DR. MOHAMMAD SAMEERUDHEEN
MBBS, DNB, MS (CATARACT & REFRACTIVE SURGERIES & GLUCOMA)
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MBBS, MS (GENERAL SURGERY),
MCh (PLASTIC & RECONSTRUCTIVE SURGERY)
Consultant Plastic & Reconstructive Surgeon

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MBBS, MS (GENERAL SURGERY),
DNB (VASCULAR & ENDOVASCULAR SURGERY)
Consultant Vascular Surgeon

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BDS, MDS
Maxillofacial Surgeon Consultant

DR. KESHAV BHAT K
BDS, MDS
Maxillofacial Surgeon

DR. RAJESH KRISHNA
MBBS, MD (GEN MEDICINE), MRCP (UK)
FRCPath (HAEMATOLOGY), CCT Haematology (UK)
Consultant Haematologist (HAEMATO-ONCOLOGY)

DR. ASHRAF AHMED
MBBS, MS, MCh (PAEDIATRIC SURGERY)
Paediatric Surgeon

DR. SANDEEP RAI
MBBS, MS, MCh (PAEDIATRIC SURGERY)
Paediatric Surgeon

DR. NAJEEB BEHZAD MOHAMMED
Medical Oncologist-MBBS, MD-General
Medicine, DM-Medical Oncology