

Indiana Hospital first to perform OCT-guided IVL angioplasty in Mangaluru



MANGALURU -- Indiana Hospital and Heart Institute, Mangaluru has been at the forefront of adopting newer technology for treatments. It has to its credit many milestones. Yet another feather was added to its cap when a team of doctors led by Dr. Yusuf Kumble, chief interventional cardiologist and managing director, has performed for the first time in Mangalore an OCT-guided Intravascular Lithotripsy (IVL) to get the blocks in the coronary blood vessels cleared on a 70-year-old lady patient from Kerala. She is now discharged and recovering well.

We are all aware that kidney and gall bladder stones, one of the most common and most painful disorders of the urinary tract, are removed by lithotripsy, which breaks apart kidney stones that are too large to pass and thus ensures its removal. But, none might have heard about stone-like fragments in a heart in the form of calcium deposits.

Historically, lithotripsy is used to treat kidney ailments but this method is now used for heart procedures as well. In the new procedure Intravascular lithotripsy IVL – there is a device which is put across the blood vessels of the heart with the laser rays breaking down the calcium. The procedure is done every ten to twenty second.

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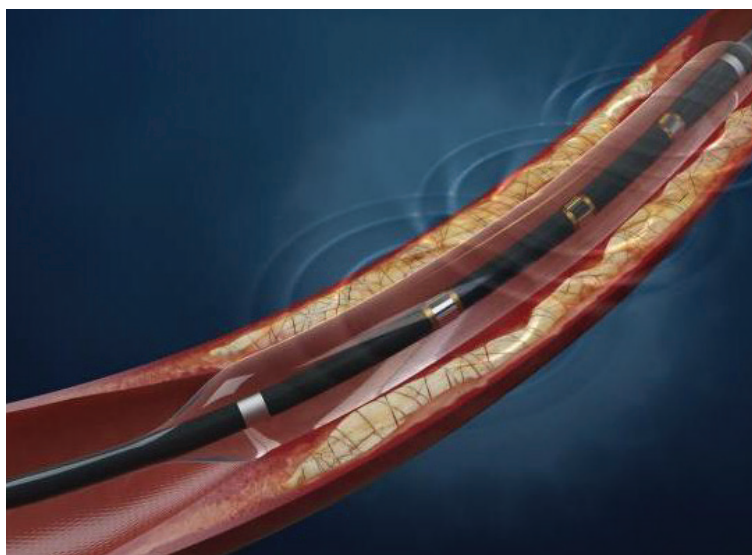
OCT - Guided IVL is a revolutionary step

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According to Dr. Yusuf Kumble, “Angioplasty is a big challenge when the walls of the arteries are accumulated with calcium build-up and becomes a nightmare for cardiologists. The innovative method enables removal of calcified deposits clogging the arteries making stent insertion smooth.”

He explained, “In order to check severely calcified vessels various methods, like CT scan, angiogram, etc are adopted. By this procedure we may not be able to find out where exactly the calcium deposits are present in the wall, whether it is outside or inside of it. In order to crush them we need to understand where the calcium is accumulated. So, traditionally cardiologists make use of high pressure balloon to remove the calcium fragments or through a new technology now in vogue called rotational atherectomy. It means there is a small revolving instrument used at very high speed, at 2 lakh per minute, that can pulverize the calcium deposit which is inside the wall of arteries but cannot crush which are in the middle or outside of it. After this procedure we try to implant the stent. In senior citizens due to calcium deposits in blood vessels, negotiating blocks and placing stents is not an easy task. The new-age treatment called IVL ensures a minimally invasive procedure that gives high success and minimal complications.”

Dr. Yusuf Kumble prescribes, “The OCT-guided coronary Intravascular Lithotripsy (IVL) system is a promising method to tackle moderate to severe calcified coronary lesions, with a high rate of success and a low risk of complications.” IVL has emerged as a novel therapy for treatment of vascular calcification.



Announcements

Dr. George Immanuel joins Indiana as Emergency Medicine consultant



MANGALURU -- Dr. George Immanuel has joined Indiana Hospital as Consultant - Emergency Medicine in the month of January 2022.

Dr. George Immanuel completed his MBBS from Sri Ramachandra University, Chennai, and subsequently did his Masters in Emergency Medicine (MEM) from the George Washington University Medical Centre, Washington, DC, USA and Post Graduate Diploma in Medical Toxicology conducted by Indian Society of Toxicology.

Armed with more than two and a half years of experience as an Emergency Consultant at Matha Mission Hospital, Manamadurai, Sivagangai, Tamil Nadu, Dr. George Immanuel will be an asset to the Emergency Medicine department at Indiana Hospital.

New radiologist for Indiana

MANGALURU -- Dr. Ranjan Shetty has taken charge as Consultant- Radiologist at Indiana Hospital. Dr. Ranjan Shetty obtained MBBS from KS Hegde Medical Academy, Mangaluru and later completed



MD – Radio Diagnosis from A. J. Institute of Medical Sciences, Mangaluru

Before joining Indiana, Dr. Ranjan Shetty worked as a Senior Resident at Christian Medical College and Hospital, Vellore.

Podiatry clinic inaugurated at Indiana



INDIANA HEAFFORD PODIATRY CLINIC

MANGALURU – Indiana Hospital & Heart Institute, Mangaluru added one more important treatment clinic to its wide range of treatment facilities. The Indiana Heafford Podiatry Clinic, which focuses on management of all foot and ankle conditions and comprehensive diabetic footcare, was recently opened on the first floor of Indiana Hospital. Two senior consultants,

Dr. Latheesh Leo and Dr. Bhagath L.S., will be available at the clinic from 10am to 1pm and from 4pm to 6pm. Diabetic complications of the foot are managed with comprehensive care. Treatment of foot related ailments like bunions, hammertoes, chronic pains, Morton's neuroma, etc are available at the clinic. For consultation and appointments, call on 9880397100.

Indiana conducts CME at Bhatkal

BHATKAL – Indiana Hospital and Heart Institute, Mangaluru, in association with Indian Medical Association, Bhatkal, conducted a continuing medical education (CME) programme at the Banquet Hall of Royal Oak Hotel, Bhatkal on February 17, 2022.

Dr. Yusuf Kumble, chief interventional cardiologist and managing director, Indiana Hospital, threw light on TAVR (Transcatheter Aortic Valve Replacement) in which local anaesthesia is used, making it simpler for patients leading to minimal intervention and early discharge. He said four TAVR cases so far in Mangalore have been done and all in Indiana Hospital. Dr. Adithya Bharadwaj, consultant physician, diabetologist and intensivist, Indiana hospital, spoke on interesting cases while Dr. Apoorva Sriyadeva, consultant Interventional Gastroenterologist, Indiana Hospital, shed light on GI interesting cases. Dr. Mohammed Samiullah, president, Bhatkal IMA and Dr. Janardhan, secretary, IMA Bhatkal, were present on the occasion. 28 doctors from Bhatkal Taluk participated.



PHOTO ESSAY: Indiana Decennial celebrations

The completion of 10 years calls for celebrations. Indiana's precincts were filled with joy and happiness as we conducted various events over 45 days to celebrate the milestone. Through these events, Indiana proved that its staff is one family. The bonhomie experienced through these celebratory events was one of satisfaction.







DIGITAL EYE STRAIN

Post-pandemic we have spent little time outdoors and too much indoors on screens. Undoubtedly, there has been an unprecedented jump in the screen time that we have all engaged in ever since the pandemic has broken out affecting our eyes. **DR. SMRUTHI**, Consultant Ophthalmologist at Indiana Hospital and Heart Institute help us lighten eye strain.

The outbreak of novel coronavirus since MARCH 2020 has changed the traditional teaching method of using black boards to digital device-assisted online classes. Digital learning has become a daily necessity thereby leading to a marked increase in digital device use among children of school-going age.

Spending long hours in front of these devices can lead to many ocular problems in children. Digital eye strain (DES) is the most common eye problem associated with prolonged digital device use, characterized by symptoms such as dry eyes, itching, foreign body sensation, watering, blurring of vision, and headaches.

The prevalence of digital eye strain is estimated to range from 25% to 93%, as reported in various studies. The most common device used for online classes was the smartphone followed by desktop and laptops. In the COVID era, children were using digital devices for >5 hours compared to the pre-COVID era. This is probably the main reason for the increased prevalence of DES .

DES symptoms can be categorized into two groups: 1) symptoms related to accommodation (blurred vision for near objects, headache, and eyestrain) and symptoms related to dryness (burning sensation, foreign body sensation, itching, watering, intolerance to light). The most common symptoms reported were itching and headache

Few independent risk factors for DES in children are: age >14 years, male sex, smartphone preference over other digital devices, use of digital devices >5 h, and use of mobile games >1 h/day, shorter screen distance of <50 cm. Continuous smartphone use leads to a decrease in the blink rate, causing dry eye-related problems. .



Smartphones are also used with a short viewing distance because of their small screens, thus causing more asthenopic symptoms. This may be due to the disparity between the screen viewing distance and the individual's convergence.

During this COVID pandemic, there are restrictions on outdoor activities for children, which has led to an increase in the time spent by these children to play videogames on smartphones. Most children play videogames for long hours with maximum concentration and without any break; this can cause a newly described condition in children known as videogame vision syndrome. Prolonged activity on smartphones while playing videogames can lead to DES and accommodative problems in children.

Saving children from the glare of screens

Shortening the duration of digital device use has a great effect on the symptoms of DES. The 20/20/20 rule has been suggested to minimize asthenopia symptoms during computer use. After every 20 minutes of digital device use, look at a distance of 20 feet for at least 20 seconds. Children should be encouraged to blink when reading text on screens. Avoid keeping the device close to the eyes, monitor screen time, and include a healthy diet rich in carotenoids and green leafy vegetables. Adequate sleep is necessary. Regular eye check-ups are strongly recommended.



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