

Bapuji Educational Association (Regd.)



# SSIMS TIMES



Official Quarterly News Bulletin of S.S. Institute of Medical Sciences & Research Centre, Davangere.

Vol: 11

Issue: 2

April-June - 2016



Plant Sapling - Sri S S Mallikarjun



Student Union 2016 Inauguration



Anatomy CME



Community Medicine Quiz



Yoga Day



Biochemistry Quiz



Physiology CME



ICH GCP Training Program





S.S. Institute of Medical Sciences & Research Centre

## NEWS BULLETIN COMMITTEE

Editorial Office : DEPARTMENT OF PHARMACOLOGY

Extn. Nos. : 08192-266345,

e-mail: ssimstimes4u@gmail.com

### Advisory Board:

**Dr. B.S Prasad**

Principal

**Dr. Kalappanavar N.K.**

Medical Director

### Editor in Chief:

**Dr. Sathisha Aithal**

Professor,

Dept. of Pharmacology

### Editor:

Dr. Kiran L J

Dr. Shivashankara murthy

Associate Professor,

### Co-Editors:

Dr. Raghu Prasada M.S

Mr. Harish Kumar V.S

Mr. Pradeep A.N

Mr. Chethan Kumar S

### Executive Members :

Dr. A. V. Angadi

Dr. Mallikarjuna.C.R

Dr. P. Shashikala

Dr. Arun Kumar. A

Dr. Manjunath J.

Dr. Jayaraj S.G.

Dr. Vijayakumar. B. Jatti

Dr. A.M. Shivakumar

Dr. Narendra. S. S

Dr. L. Krishnamurthy

Dr. Shivamurthy K.C.

Dr. Sathyanarayana M.V.V.

Dr. Dhananjay K.L

Dr. Linganagouda S. Patil

Dr. Dileep V Deshpande

Dr. Umakant N Patil

Dr. Basavarajappa. K. G

Dr. Ramesh. S. Desai

Dr. Prakash. V. Suranagi

Dr. Veerendraswamy SM

Dr. Hemant K Kulkarni

Dr. Geethalakshmi R.G

Dr. Vinod. G. Kulkarni

Dr. Prema Prabhudev

Dr. P. Mallesh

Dr. Dhanya Kumar. S

Dr. Jagannath Kumar. V

### Technical Support:

Rakesh P.M

Artist & Designer

Santhosh Kumar. D.M

Photographer

Vajramma K.G

S.D.A

### PATRONS



**Dr. Shamanur Shivashankarappa**

Honorary Secretary, BEA.

MLA, Davangere (South)

Ex. Minister of Horticulture & APMC

Govt. of Karnataka,



**Sri S.S. Mallikarjun**

Joint Secretary, BEA.

Chairman, SSIMS&RC

Minister of Horticulture & APMC

Govt. of Karnataka,

### Contents

### Page No.

Editorial Desk:

2

Departmental Activities

2 to 8

Case Report

9 to 11

Informative Articles:

12 to 15



## SSIMS&RC

NH-4, Bypass Road, Davangere - 577 005.

Phone : 08192-261805, 261806, 261807

261808, 261809 FAX : 08192-262633, 266310

E-mail : ssimsrsrc@rediffmail.com

Web site : www.ssimsrsrc.com

### Disclaimer :

Views and opinions expressed in this newsletter are not directly that of the editor or the editorial board. For any clarification, author of the article is to be contacted.

## EDITORIAL.....

*Dear friends and colleagues,*

Yoga originated in India which is five thousand years old tradition and is now regarded in the Western world as a holistic approach to health. With increasing scientific research in yoga, its therapeutic aspects are also being explored. Regular yogic practices enhance muscular strength and body flexibility, improve respiratory and cardiovascular function, reduce stress, anxiety, depression, chronic pain, improve sleep patterns, and enhance overall well-being and quality of life. United Nations General Assembly has declared 21<sup>st</sup> of June as an International Yoga Day. The increasing awareness about yoga worldwide also indicates importance of India and its culture in 21<sup>st</sup> century.



**Dr. Sathisha Aithal**  
Editor

## DEPARTMENTAL ACTIVITIES

### DEPARTMENT OF ANATOMY

The CME on “Medical Genetics & Fetal Medicine” was conducted on 2<sup>nd</sup> April 2016 under the guidance of Dr A.V.Angadi, Professor and Head of the dept. of Anatomy and Organizing Chairman of the CME. Participation of more than 380 delegates from various parts of India was observed. The CME was intended to enrich the participants with basic knowledge of cytogenetic right from chromosome analysis to the depth of advanced knowledge of molecular diagnosis in certain genetic disorders, with fetal interventional techniques & 1st trimester scanning to Genetic counseling. The main aim of the CME was to highlight genetic disorders prevailing in the society & to diagnose & council the concerned. Thus forming a bridge/platform between the PHC's & tertiary level in solving such problems.

The following topics were discussed during CME

| S.No. | Topics  | Speaker                         |
|-------|---|---------------------------------|
| 1.    | “Cytogenetic and Molecular cytogenetic investigations in patients with genetic disorders” | Dr. Jayarama S. Kadandale       |
| 2.    | “ Molecular diagnosis in genetic disorders”   | Dr. Swathi Shetty               |
| 3.    | “ Fetal intervention techniques”  | Dr. Prathima Radhakrishnan      |
| 4.    | “First trimester scanning -what can be identified”  | Dr. Raja A. Munireddy           |
| 5.    | “ Genetic counseling and chromosomal disorders”   | Dr. Meenakshi Bhat              |
| 6.    | “ When to suspect a Genetic disease? What next? ”   | Dr. Madhu Pujar                 |
| 7.    | “ Star of fluorescence- FISH ”  | Dr.Deepthi Pruthwi & Dr.Kavitha |
| 8.    | “Case reports of Genetic Lab”   | Dr Shailaja C Math              |



Demonstration and hands on training of “**Anatomage- Virtual dissection table**” was held from 12<sup>th</sup> May 2016 and 15<sup>th</sup> May 2016 in the seminar hall of Dept. of Anatomy. The staff and students from SSIMS&RC, JJMMC and other colleges participated in the program.

Anatomy Museum was upgraded and rearrangement of the specimens and models was done with addition of rare dissected specimen. It is

for display from 2<sup>nd</sup> May 2016.

Modified cosmetic Embalming Technique was used for the first time to achieve life like appearance of the cadaver in the dept. of Anatomy. The procedure was done on 16<sup>th</sup> June 2016 by Dr.Raghavendra A Y, Dr.Nagaraj Mallashetty and Dr.Veeresh Itagi under the guidance of Dr.A.V.Angadi.

## DEPARTMENT OF PHYSIOLOGY

Department of Physiology conducted a CME programme on “**Pulmonary Function Tests & Respiratory Disorders**” at S.S.Auditorium, SSIMS Hospital block, Davangere on 30<sup>th</sup> April 2016. Two credit hours was allotted by KMC for the CME

The theme of the CME was “Healthy Lung: Healthy Body”. It included the detailed description of various pulmonary function tests, their diagnostic & therapeutic role in the assessment of physiologic abnormalities & likely underlying pathology. 374 delegates participated

in the CME & took active part in the scientific deliberations. Their interactions were encouraging & interesting.

Dr. D.V.Deshpande, Prof & HOD, Dept of Physiology SSIMS&RC, was the organizing chairman. Dr.Ashwini, Assistant Professor, Department of Physiology, JJMMC Davangere was the KMC observer. Dr.B.S.Prasad, Principal, SSIMS&RC presided over the inauguration. Dr.Vidya M Nadiger welcomed the gathering. Dr.Renu Lohitashwa delivered the vote of thanks.

The following topics were discussed during the programme.

| 1 | Dr. D. V. Deshpande, Prof. & Head, Dept.of Physiology, SSIMS&RC, Davangere                                      | Overview of PFT                                 |
|---|---|---|
| 2 | Dr. R.R. Deshpande, Prof. & Head, Dept.Physiology, LTM college & SION Hospital, Mumbai                          | Pulmonary functions test and its interpretation |
| 3 | Dr. B. Vidyasagar, Prof. & Head, Chest Medicine, JJMMC, Davangere   | PFT in clinical practice: An update             |
| 4 | Dr. N K Kalappannavar, Pediatric Pulmonologist, Medical Director, Prof. & Head, Pediatrics, SSIMS&RC, Davangere | Recent trends in Pediatric Pulmonolgy           |
| 5 | Dr. Suneeta Kalasuramath, Assoc. Prof, Dept.Physiology, SSIMS&RC, Davangere.                                    | Air pollutants &Respiratory functions           |
| 6 | Dr. Anup Banur, Asst. Prof, Chest Medicine, SSIMS&RC, DVG   | Discussion of cases in SSIMS&RC                 |
| 7 | Dr. Sangeetha. Appanavar, Lecturer, SDM College of Physiotherapy, Dharwad                                       | Role of physiotherapy in lung diseases          |
| 8 | Dr. Soumya B A, Asst. Prof, Dept.Physiology, SSIMS&RC   | Research work on PFT at SSIMS&RC                |
| 9 | Dr. Bheemayya Badesab, Prof. & Head, Comm. Medicine, SSIMS&RC, Davangere.                                       | Yoga & Healthy lung                             |

## DEPARTMENT OF BIOCHEMISTRY

Department of Biochemistry conducted 1<sup>st</sup> state level Biochemistry Quiz competition “EPIGNOSIS” for 1<sup>st</sup> MBBS students on 23<sup>rd</sup> April 2016 in association with AMBKC.

Dr. B.S.Prasad, Principal SSIMS & RC inaugurated “EPIGNOSIS”. Dr. Shashikala Lamani, Assistant professor welcomed the dignitaries. Dr. B.S.Prasad, Dr. N.K.Kalappanavar, Medical Director, Dr. Manjunath M. Tembad, President AMBKC addressed the gathering.

Dr. Mallikarjuna C.R., Professor & Head, Organizing chairman briefed about the objectives of the quiz programme. Dr. Nagarajappa .K. Professor, organizing secretary proposed vote of thanks.

Quiz masters Dr. Suresh Babu, Associate Professor, JJMMC Davangere & Dr. Raghunath, Assistant professor, MIMS Mandya conducted the quiz competition assisted by Dr. Shashikala Lamani & Dr. Shakunthala Masthi. Dr. Raghu Prasad M.S. & Dr. Kiran L. J. Dept. of Pharmacology, SSIMS&RC, participated in the quiz programme as scorers. 90 teams from 20 medical colleges of our state participated in this quiz programme. This quiz programme consisted of Preliminary round (written) followed by Semifinals & Final rounds were conducted.

1<sup>st</sup> place prize won by Mr Tejesh & Shreehari - Mandya Institute of Medical Sciences, Mandya

2<sup>nd</sup> place prize won by Miss Ananya & Ankitha Rajarajeshwari Medical College Bangalore

3<sup>rd</sup> place prize won by Miss Deepashree A & Ankitha S.S.Institute of Medical Sciences & Research Centre, Davangere Consolation prizes:

4<sup>th</sup> place prize won by Bichu & Roshan from Father Muller Medical College, Mangalore.

5<sup>th</sup> place prize won by Priyanka & Maithri from S.S.Institute of Medical Sciences & Research Centre, Davangere.

6<sup>th</sup> place prize Neemi & Rajat from Mysore Medical College, Mysore.

AMBKC Rolling shield was presented to 1<sup>st</sup> place prize winners by Dr. Manjunath M. Tembad, Dr. Dattatreya, Dr. Vivian & other AMBKC members.

## DEPARTMENT OF COMMUNITY MEDICINE

On 30<sup>th</sup> May 2016, **Participatory Rural Appraisal (PRA) Activities** were carried out in Chandranahalli village. **Dr. Malatesh Undi**, Assistant Professor-cum-Medical Officer Health PHC, **Mr. Ashok**, Medico-Social Worker and **Dr. Netra**, postgraduate facilitated various PRA techniques for appraisal of health and its determinants in the village. **Dr. Madonna**, Postgraduate, **Mr. Harsha**, MSW and Interns **Dr. Vinyas**, **Dr. Gowri** and **Dr. Yogitha** participated as observers and note takers in the event. Around 30 villagers (both male and female) actively participated in all PRA techniques chosen for the village. Also present were Gram Panchayat member, ASHA worker, JHAF and School teachers.

On 31<sup>st</sup> May 2016, **World No Tobacco Day** was observed; **health check-up and health education sessions** were conducted in Chandranahalli village. **Dr. Malatesh Undi**, Assistant Professor-cum-MOH PHC, **Dr. Yamuna**, postgraduate and Interns **Dr. Subramanya**, **Dr. Nidi**, **Dr. Sushmitha** and **Dr. Shashank** conducted health check-up and provided health education (both interpersonal and mass) to the villagers. **Mr. Ashok**, and **Mr. Harsha**, MSW coordinated the program.

On 4<sup>th</sup> June 2016, **Screening for Non-Communicable Diseases (NCDs)** was done for diabetes and hypertension among villagers residing in villages coming under Turchaghatta sub centre. **Mrs. Pramila**, NCD staff nurse and **Mrs. Manjula**, JHAF conducted the screening programme. Interns assisted in the screening of villagers. **Dr. Malatesh Undi**, Assistant Professor-cum-MOH PHC, supervised and coordinated the screening programme.

On 11<sup>th</sup> June 2016, as a part of **Anti Malaria Month Campaign**, **health education session** was organized at Govt. High School, Turchaghatta. Health education was given to school children and villagers by interns **Dr. Navya**, **Dr. Gowri**, **Dr. Subramanya**, **Dr. Amoolya**, **Dr. Sushmitha** and **Dr. Shashank**. **Dr. Smitha**, postgraduate and **Mr. Ashok**, MSW organized and coordinated the session. **Mr.**



**Ramachandrappa**, Sr. Health Inspector supervised the health education session.

On 12<sup>th</sup> June 2016, **Dr. Geethalakshmi**, Professor and Head, Department of Community Medicine delivered a lecture on Yoga and health at Divya Yoga Mandir for general Public. Around 60 people participated in the event

On 21<sup>st</sup> June 2016, as a part of **International Yoga Day (21<sup>st</sup> June 2016) awareness session** was observed at Government Urdu School, Bashanagar. **Dr. Geethalakshmi**, Professor and Head, Department of Community Medicine and a trained Yoga practitioner, practicing Yoga since past 10 years, presided the session and educated the villagers regarding importance of yoga to maintain health and methods to practice yoga. Around 150 high-school students were participated in the event. **Dr. Ayesha S Nawaz**, Assistant Professor, **Mr. Harsha**, MSW, **Dr. Sindhu**, Postgraduate, and Interns were present during the session.

On 23<sup>rd</sup> June 2016, as a part of **International Yoga Day (21<sup>st</sup> June 2016) awareness session** was observed at Primary Health Centre, Lokikere. **Dr. Geethalakshmi**, Professor and Head, Department of Community Medicine and a trained Yoga practitioner, practicing Yoga since past 10 years, presided the session and educated the villagers regarding importance of yoga to maintain health and methods to practice yoga. **Dr. Ratnaprabha**, Assistant Professor, **Dr. R M Naik**, MO, **Mr. Ashok Kumar**, MSW, **Dr. Yamuna**, Postgraduate, Interns **Dr. Vinyas**, **Dr. Yogitha**, **Dr. Soha** and **Mr. Ramachandrappa**, Sr. Health Inspector were present during the session. PHC staff, ASHA workers and Villagers participated in the session.

HIV awareness programme was conducted for the students of Millath College in Bashanagar 18<sup>th</sup> April 2016. Interns posted in Community Medicine, **Dr. Sindhu** and **Dr. Deepthi** gave a health talk on HIV. **Dr. Ayesha Nawaz**, Assistant Professor, clarified the queries by the students. **Dr. Yamuna**, postgraduate student, **Mr. Harsha**, MSW and interns participated actively in the programme. The programme was organised in association with Lioness club, Davangere.

A Health education programme was organized on “No Tobacco day” for the high school students at Al-Iqra school on 5<sup>th</sup> June 2016.

**Dr. Ayesha Nawaz**, Assistant Professor and **Dr. Zoha**, intern gave health talk. **Dr. Yamuna**, postgraduate student, **Mr. Harsha**, MSW and interns posted in community medicine participated actively in the programme.

Health education on malaria was conducted as part of “World Malaria week” in the high schools of rural and urban field practice area on 8<sup>th</sup> June 2016. Health talk was given by interns posted in department of community Medicine, **Dr. Navya** and **Dr. Amulya**, under the guidance of **Dr. Kusum Mane**, Assistant Professor. The programme was co-ordinated by **Mr. Harsha**, MSW.

### IAPSM-WHD-QUIZ-2016

After receiving information regarding Quiz from various social networking sites and officially from state coordinator **Dr. Annarao Kulkarni**, departmental meeting was organized. **Dr. Aswin Kumar** was recognized as nodal officer for the organization of the quiz. Department of Medicine was roped in to make it more effective. Our principal agreed to provide the necessary support to the organization of the quiz. Department of



**Nationwide**  
Quiz Contest for MBBS students

Under the aegis of  
**Indian Association of Preventive and Social Medicine**  
With support of  
**IAPSM - KARNATAKA CHAPTER**

**IAPSM**  
World Health Day  
**QUIZ**  
7 April 2016

Theme: **BEAT the DIABETES**

|   |                                    |                                    |
|---|------------------------------------|------------------------------------|
| Last date for registration<br>3 April, 2016 | <b>Final Quiz</b><br>7 April, 2016 | Elimination round<br>5 April, 2016 |
|---|------------------------------------|------------------------------------|

**Organized by**  
Department of Community Medicine and Medicine  
SSIMS & RC, Davangere  
Karnataka

**For information & registration, contact**  
**Dr. Aswin Kumar** (9742920232)  
**Dr. Yashwanth. G** (9844004304)

Medicine supported us with the cash prize for the winners of Quiz. Posters were displayed at various prominent places like Notice boards of Department of Community Medicine,

•Department of Medicine, Principal office, hostel and also canteen. We decided to make it more competitive by a rule that each team should consist student from 2<sup>nd</sup>, 3<sup>rd</sup> and 4<sup>th</sup> year compulsorily.

Response to quiz was good with 35 teams having 105 students enrolled for quiz. Elimination round was scheduled as per instruction from state coordinator. Out of 35 teams 4 teams which did best in elimination round were selected

### Quiz Finals

On 7<sup>th</sup> April 2016 main quiz was organized in Auditorium of the college. Programme was inaugurated by our Principal, Medical director and Academic body secretary. Following the inaugural programme, Quiz finals started with four quizmasters Dr. Aswin Kumar, Dr. Ratnaprabha from department of Community Medicine and Dr. Yashvanth, Dr. Nagaraj from Department of Medicine. Different quiz masters for every round to break monotony. Dr. Ayesha Nawaz and Dr. Kusum mane executed the role of scorers. Around 200 students, postgraduates and 50 faculties from various departments attended the programme to make it successful. The cash prize was given to all short listed teams. Total of 4 prizes 1<sup>st</sup> prize Rs. 3000, 2<sup>nd</sup> prize Rs 2000, 3<sup>rd</sup> prize Rs. 1000 and consolation prize of Rs. 500 was distributed at the end of the programme.

#### Winning team

- |                       |                      |
|-----------------------|----------------------|
| 1 Miss Pragnya        | 8 <sup>th</sup> Term |
| 2 Miss Vijayalakshmi  | 6 <sup>th</sup> Term |
| 3 Miss Sumira Shastri | 4 <sup>th</sup> Term |

## DEPARTMENT OF PATHOLOGY

Dr.Kavita.G.U & Dr.Deepti Pruthvi, Professors, Dept.of Pathology participated in a CME on 2<sup>nd</sup> April 2016, as speakers on the topic “STAR OF FLUORESCENCE FISH” on “Medical Genetics And Fetal Medicine” conducted by Dept. of Anatomy, SSIMS & RC, Davangere.

Dr.Shreevidyalatha postgraduate, presented a poster on “**An Encysted variant of**

**subcutaneous pheohyphomycosis**” during 34<sup>th</sup> Annual National CME in Pathology which was held from 1<sup>st</sup> to 4<sup>th</sup> June 2016 at Department of Pathology, J.N.Medical College, Belgavi.

A Voluntary blood donation camp was organized by Actor Ravichandran fans association at MCC “B” Block, Vanita Samaja old age home MCC “B” Block on 11<sup>th</sup> June 2016. S.S.Blood Bank conducted the camp. Dr.Shwetha.J.H, Assistant Professor, spoke about the Importance of Blood Donation. Dr.Kavita Reddy & Dr.Shreevidyalatha, III year Postgraduates and interns participated in the camp.

A Voluntary blood donation camp was organized at show room of JOYALUKKAS, INDIA PVT.LTD., P.B.Road, Davangere on 14<sup>th</sup> June 2016. Employees of the show room donated blood. Dr.Shashikala.P. Professor & Head of the Department of Pathology, was the chief guest on the occasion and spoke about the importance of blood donation. Dr.Kavita G.U, Professor of Pathology along with postgraduates Dr.Shreevidyalatha, Dr.Chetan.Sagar, Dr.Nishanth, Interns and S.S.Blood Bank conducted the camp. 26 units of blood were collected.

Voluntary blood donation camp was organized at S.S.Institute of Medical Sciences & Research Centre on the occasion of the 86<sup>th</sup> Birthday of Hon. Secretary of Bapuji Education Association Shri.Dr.Shamanur Shivashankarappaji on 16<sup>th</sup> June 2016. The programme was jointly organized by students union. Junior Doctors Association and S.S.Blood Bank, Dept.of Pathology, SSIMS & RC. Staff members 33 students donated blood on this occasion.

## DEPARTMENT OF MEDICAL EDUCATION

Dr.Gayatri Patil, Professor of Obstetrics and Gynecology presented a poster titled “Utilisation of microskills method- Five step approach in bed side teaching” during onsite session of fellowship in Medical Education (FIME) conducted by MCI at the nodal centre, JNMC, Belgavi from 5<sup>th</sup> April 2016 to 7<sup>th</sup> April 2016



## DEPARTMENT OF MICROBIOLOGY

Dr. VL Jayasimha, Professor, Department of Microbiology is appointed as coordinator for a project approved by Karnataka state science and technology, VGST group under Karnataka infrastructure strengthening in science institutions (K- FIST level 2) on neonatal septicemia and its early markers. The project has been allotted a sum of 40 lakhs. The project has been allotted to Department of Microbiology, Paediatrics and Neonatology.

Microbiology quiz was conducted for 2<sup>nd</sup> MBBS Students (148 students' batch) on 25<sup>th</sup> June 2016 at lecture hall 3. The quiz was organized and conducted by students themselves under the guidance of department of Microbiology. The department congratulates the quiz masters and winners.

### Quiz Masters

1. Diksha sharma
2. Joel. V. Mathew
3. Nikhil kumar. D.g
4. Rahi gupta
5. Shruti kerudi
6. Sohan channeshappa kotigera
7. Soumya kulshreshtha
8. Sreya vemuri
9. Sumira shastry
10. Ullasa. L

### Winners

#### First place

1. Pallavi priya
2. Shaswati dey
3. Soumya. C. Akki

#### Second place

1. Shreya patil
2. Shraddha. K. S
3. Ananya vasudhar

#### Third place

1. Darshan. K. A
2. Anusha
3. Divya

## DEPARTMENT OF PHARMACOLOGY

Dr Raghu Prasada MS, Assistant Professor was guest speaker and explained about the myths and

Facts about diabetes and related complications during enrichment course on Sugar and Diabetes organized by Department of public health Dentistry, Bapuji Dental College and Hospital, Davangere on 15<sup>th</sup> April 2016

## DEPARTMENT OF DERMATOLOGY

### Vitiligo day

Department of dermatology observed vitiligo day on 25<sup>th</sup> June 2016 as a past of world vitiligo day.

The programme started with the inauguration speech by Head of the Department of Dermatology Dr.Jagannath Kumar V and spoke about Vitiligo awareness month and importance of world vitiligo day and also enlightened us about the stigma associated with the disease, later a talk about myths and truth about vitiligo was given by Dr.Prabhakar S Meti, in kannada. The programme was attended by patients, interns, postgraduates and staff members.

Postgraduates of Dermatology Department performed a skit on vitiligo entitled "ತೋನ್ನು - ಬಿಳಿತನದ ಕರಾಳತೆ" to create awareness and educate the general public. Information on vitiligo was also provided by displaying posters in the OPD premises.

## DEPARTMENT OF OBSTETRICS & GYNEACOLOGY

Dr. Prema Prabhudev, Professor & HOD gave lecture on "Postnatal care" in Continuing Nursing Education programme on the occasion of International Nurses day-2016 on 28<sup>th</sup> May 2016 at SSIMS & RC., auditorium.

Dr. Prema Prabhudev, Professor & HOD attended BSOGA PG CME 2016 in Bangalore on 18<sup>th</sup> June 2016 and conducted case discussion on 'Preterm labour'.

Final year PG's attended BSOGA PG CME 2016 in Bangalore from 15<sup>th</sup> to 19<sup>th</sup> June 2016 and actively participated in case discussion quiz and all other activities.

Dr. Ajith Sathyanad. P 'Recurrent pregnancy loss'

Dr. Seema Chigateri 'Anemia in pregnancy'

Dr. Radhika 'Anemia in pregnancy'

Dr. Pushpalatha. G General

## DEPARTMENT OF PAEDIATRICS

**Dr. K. Kalappanavar,**  
**Medical Director, Prof & Head.**

1. Delivered talk on "Recent trends in Paediatric Pulmonology" during CME on 30-04-16 held at SSIMS&RC organized by Dept of Physiology.
2. Participated & Presented Study in DCGI New Delhi on "Multi-centric Randomized control study on Hepatitis A vaccine versus Biovac V of Wockhardt pharma" on 17/06/2016.

**Dr Latha. G.S,** Professor

1. Attended as a Faculty for Training of Trainer organized by UNICEF Child Development and Nutrition [CDN] Project, Chitradurga on 23-06-16

## PULMONARY MEDCINE

Dr Anup Banur, Assistant professor gave a lecture talk on DISCUSSION OF PFT CASES IN SSIMS&RC during CME organised by dept of physiology on 30/04/2016.

Dr TPN prasad 2<sup>nd</sup> year post graduate student, won the first prize in NAPCON quiz(KARNATAKA STATE) organized by department of Pulmonary Medicine, JJMMC Davangere on 22/05/2016

## INSTITUTIONAL ETHICS REVIEW BOARD & MEDICAL EDUCATION UNIT

Institutional Ethics Review Board & Medical Education Unit of S. S. Institute of Medical Sciences & Research Centre conducted two days workshop for Ethical committee members. The theme of the workshop was International conference on Harmonization-Good clinical practice. The ethical committee members from Gadag Institute of Medical Sciences, College of Dental Sciences, Bapuji college of Pharmacy and S. S. Institute of Medical Sciences & Research Centre attended the workshop. The workshop was conducted on 30th of June and 1st of July 2016.

Dr. Vina Vaswani, Professor & Head of Forensic Medicine, Yenopoya medical college, Dr. Ravi Vaswani, Professor of Internal Medicine, Yenopoya medical college and Dr. Uma Kulkarni, Professor of Ophthalmology, Yenopoya medical college were the resource persons.

## STUDENT UNION 2016

The Union event for this year started with grand inauguration where all the Ex union members were honored and the flag was handed over to the new members. Following it, poster making competition was held on World's Environment day where the students came up with new ideas, there concern towards saving the Environment. The birthday of honorable Sri. Shamanur Shivashankarappa was celebrated enthusiastically on 16<sup>th</sup> June. Blood donation camp sideway was arranged by JDA. Sapling were planted around the campus by all the staff members and students. On the occasion of Doctor's day, a literary marathon was organized to judge the medical knowledge of students in enthralling and fun filled way.

## MARGA 2016

**1<sup>st</sup> April 2016:** A Guest lecture "Towards Powerful Personality & Stress Management" was organized by MARGA & Students Union 2016 at Hospital auditorium for all the Medical students, Nursing students, Teaching staff & Non teaching staff. Dr. Shri. Shivamurthy Murugaa Sharanaru, Basava Kendra, Shri.Murugamata, Chitradurga delivered the guest lecture. Shri. Basava Prabhu, Basava Kendra, Shri Shivayogaashrama, Davangere, Dr.B.S. Prasad, Principal, Dr.N.K.Kalappanavar, Medical Director, HODs of various departments, staff members and students were present. Dr.Latha G S, Prof of Pediatrics and Harish Kumar V.S, Asst Prof of Pharmacology coordinated the program.

**20/04/16 to 23/4/16:** Four days workshop on "Secret of Success, The Bhagavad Gita way.." was conducted by MARGA for 2<sup>nd</sup> year MBBS students. Sri. Krishna Madhav Dasa and Sri. Sampati Dasa of International Society for Krishna Consciousness (ISKCON), Bangalore were present on the occasion and delivered the special lecture. Dr. B.S. Prasad, Principal, SSIMS & RC, Dr. Shashikala P Krishnamurthy, Vice Principal, Staff members and second year MBBS students participated in the workshop. Harish Kumar V.S., Asst. Prof of Pharmacology coordinated the workshop



## CASE REPORT

### MULTIPLE HEREDITARY EXOSTOSES (MHE)

Dr N K Kalappanavar, Medical Director, Professor and Head,

Dr Chandrashekar gouli, Dr Shabareesh ,Dr Thejraj H K , Dr Prashanth S V, Department of Paediatrics

#### Abstract

Multiple hereditary exostosis (MHE) is an autosomal dominant disorder, manifested by multiple cartilage capped bone lesions mainly arising from the metaphysis of long tubular bones. Mutations of Exostosin-1 and Exostosin-2 genes cause altered synthesis of Heparan Sulfate resulting in skeletal dysplasia and abnormal proliferation of chondrocyte[8]. We present a family of MHE for three generations. The index case was a 11 year-old male presented with multiple exostoses in forearm, leg, right knee, shoulder and chest. Family history revealed similar complaints in father, grandfather and paternal uncle. Above all these generations no one has severely manifested as the index case.

#### Case report

11 year old male, the index case, presented with history of multiple, painless swelling in legs, forearm, shoulder, ribs, and right knee for seven years. First it was noted at the age of 3 years over the right leg below knee joint, initially it was of size 0.5 ×0.5 cm approximately which gradually progressive in size. Later child developed similar kind of painless swelling over both forearms, ankle, shoulders, chest and around knees and chest wall. No history of difficulty in carrying out daily activities. Slight restriction of movements of joints at the swelling site mainly knee and wrist for doing daily activities.

Past history was not significant, family history revealed similar complaints in grand father, father and paternal uncle. Radiological investigation of affected family not done. None of them have any symptoms and bony deformities also not severely affected in these people as in index case.

General examination showed multiple bony swelling over right tibia, ribs, forearm, around knee joint and ankle joint, with largest swelling of about 15cm×12cm over the posterior

aspect of Right proximal tibia.

Limb length discrepancy noted with shortage of right leg of about 2 cm compared to left leg. Valgus deformity over ankle, knee joint and great toes noted.

Systemic, haematological and biochemical investigations are within normal limits. Shortening of bilateral forearm with bony prominence over radial head noticed

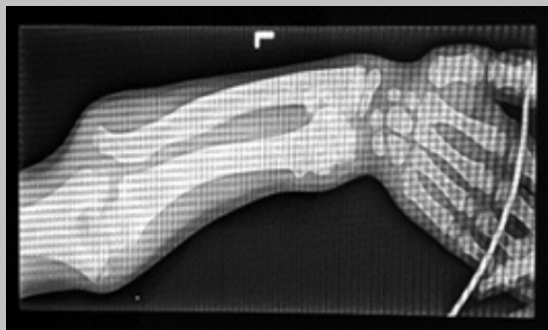


Photograph of index case showing the deformity of elbow, wrist, knee, ankle joints

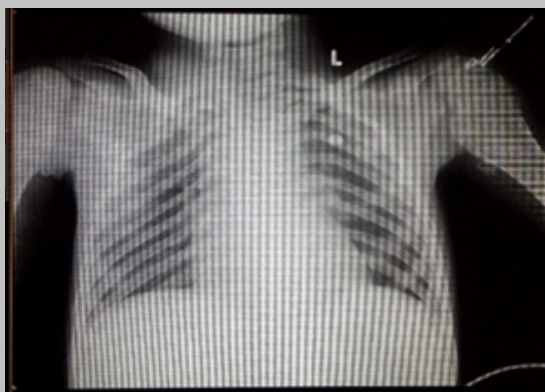


pictures shows hallux valgus deformity and short forearm of patient's father.

Radiological examination shows:

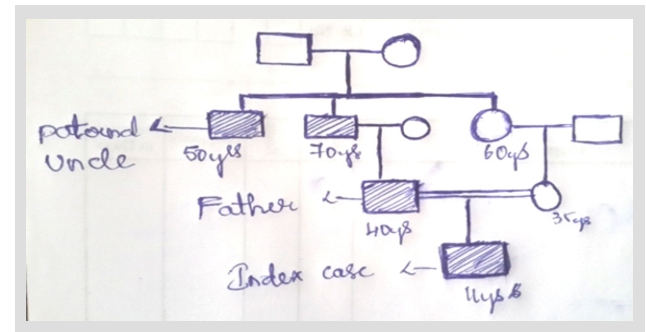


Radiological pictures of exostosis over right tibia and left radius of index case.



X ray shoulder shows exostosis arising from humerus on both side

## Family pedigree of 3 generation of HME



## Discussion

Multiple hereditary exostoses (MHE) is an autosomal dominant benign bone tumour characterized by the formation of multiple cartilage capped bone tumours arising from the metaphysis of long tubular bones. It is also called as Hereditary multiple exostoses, multiple osteochondromatosis and Diaphysealacclasis[8,4]. The first description of MHE was given in 1786[5]. The prevalence of MHE is 1 in 50,000 in general population. However, in Indian population it is very rare. Many cases are under-diagnosed because of mild symptoms and often not identified. MHE accounts for 50% of all surgically treated primary benign bone tumours. 15% of the exostoses are multiple and 62% cases have family history. The solitary form (sporadic form) is approximately 6 times more common than the MHE. Male to female ratio is 1:5:1 with male preponderance because of incomplete penetrance in females and also the fact that females tend to have milder phenotype, hence easily overlooked[3]

MHE is genetically heterogeneous with 96-100% penetrance. 90% of MHE is associated with mutations in tumour genes exostosin 1 (EXT1) and exostosin 2 (EXT 2). Mutation in short arm of chromosome 19, exostosin 3 (EXT3) is suspected. Mutations result in increased aberrant chondrocyte proliferation and decreased differentiation associated with disturbed enchondral bone formation giving rise to exostoses. In the present case karyotyping was not done[8,7] Exostoses are seen in all bones except calvaria of skull, mandible and facial bones which are formed by intramembranous ossification.

The common sites are distal femur (90%), proximal tibia (84%), fibula (76%) and humerus (72%) i.e. bones that develop from cartilage [8,3]. The flat bones like iliac and scapula are less



frequently involved. Rarely ribs, spine, metatarsals, metacarpals, phalanges are involved. Tarsal and carpal bones are not affected except calcaneus occasionally[3]. Vertebral column is involved in 7-9% of cases of which 50% arise from cervical spine[1]. In the present case, the index case has exostosis in long bones and ribs. Father, grandfather and paternal uncle had hallux valgus deformity and short forearm with stunted growth. The number, size and location of exostoses vary from a few to thousands of exostoses between and within families]. Most of the solitary exostoses are non-hereditary and 15% of multiple exostoses occur in context with MHE. The number of locations reported in MHE is 15-18[2]. Only few features were observed in the present case.

The exostoses usually presents as painless mass at the age of 4-5 y which is usually bilateral, 40% seen before 10 y of age[2]. Usually it remains asymptomatic or present as limb deformity because of skeletal dysplasia or result of local effects on adjacent growth plate. The other complications are compression effects, vascular complications, neural complication and malignant transformation[4]. Malignant transformation is seen in 10% cases of solitary exostosis and 0.5-5% cases of MHE. Secondary peripheral low grade chondrosarcoma (grade II) arising from cap is common and has relatively bad prognosis. Dedifferentiated (High grade) peripheral chondrosarcoma is extremely rare. Osteosarcoma and spindle cell sarcoma arise from stalk in 6% cases. Axial sites as ribs, spine, pelvic hips and shoulder are sites of increased risk of malignant transformation. Average age at malignant transformation in MHE is 25-30 y and for solitary exostoses is 50-55 y[8,2,5]. It is rare before 20 y of age. In the present case, the index case presented at the age of 3 years. The index case and the affected family members did not had much bony deformities.

Growth of exostoses especially after skeletal maturation, increasing pain, irregular mineralization and high thickness of cartilaginous cap ( $> 1 - 2 \text{ cm}$ ) by x-ray and homogenous/inhomogeneous enhancement of cartilaginous cap by MRI are clue for malignant transformation[8,2,6]. Cytogenetic studies helps in antenatal diagnosis and counseling the family because the affected individual has 50% risk of transmitting the disorder to their offspring.

Surgical excision of exostosis is the line of treatment, if exostosis causing compression of vessels and nerve.

Laminoplasty has reported possible treatment option for cervical cord compression from hereditary exostosis. Limb length discrepancy when symptomatic could be treated using osteotomy. However regrowth at excision site is frequently reported.

MHE does not affect life span or intellect of the person, but should be followed up for early detection of malignant transformation.

#### References:

- [1]. In-Ho Han, Sung-Uk Kuh, Cervical Osteochondroma presenting as Brown-Sequard syndrome in a child with Hereditary Multiple Exostosis *J Korean Neurosurg Soc* 2009 45:309-11.
- [2]. Judith VMG Bovee, Multiple osteochondromas *Orphanet Journal of Rare Diseases* 2008 3(3)
- [3]. Ivy Jenners, Elena Pedrini, Monia Zuntini, Multiple Osteochondromas: Mutation Update and Description of the Multiple Osteochondromas Mutation Database *Human Mutation* 2009 30(12):1620-27.
- [4]. Pannier S, Legeat-Mallet L, Hereditary multiple exostoses and enchondromatosis *Best Practice & Research Clinical Rheumatology* 2008 22(1):45-54.
- [5]. Anantharamaiah Hemalatha, Kalyani R, Kumar Harendra ML, Manohar PV, Secondary Chondrosarcoma of the lumbosacral Region: Are any bones spared in the Multiple Hereditary Exostoses? *Journal of Clinical and Diagnostic Research* 2012 6(10):1778-80.
- [6]. Vichare VV, Gangawane AR, Multiple Hereditary Exostoses A Case Report *IJRRPAS* 2012 2(5):891-98.
- [7]. Vanita V, Sperling K, Sandhu HS, Sandhu PS, Singh JR, Novel EXT1 and EXT2 mutations in hereditary multiple exostoses families of Indian origin *Genet test Mol Biomarkers* 2009 13(1):43-49.
- [8]. Hameetman L, Bovee JVMG, Taminiau AHM, Kroon MH, Hongendoorn PCW, Multiple Osteochondromas: Clinicopathological and Genetic Spectrum and Suggestions for Clinical Management *Hereditary Cancer in Clinical Practice* 2004 2(4):161-73.

## INFORMATIVE ARTICLES

### MODIFIED EMBALMING TECHNIQUE- "COSMETIC EMBALMING"

Dr.A.V. Angadi, Dr. Shailaja C Math, Dr. Raghavendra A Y, Dr. Santosh Bhosale,  
Dr. Nagaraj Mallshetty, Dr.Veeresh Itagi. Dept. of Anatomy, SSIMS&RC.

**Preamble:** Happened in 2012, Got a call from unknown and before the introduction part the voice strained at a query, are you doing the cosmetic embalming in there!!!!? Of course we do embalming but cosmetic!? Never done. But we can figure out the expectations of the person with that word in the voice.

We got an opportunity to perform an embalming procedure for a cause with dual objective of preservation for long time and presentation after a week before it gets to the cadaver tank. Though not exactly cosmetic embalming, this attempt can be called as a modified embalming technique to preserve the life like appearance.

**Introduction:** Egypt is credited with being the land where embalming began. During the period from 6000 BC to 600 AD approximately 400,000,000 bodies were mummified. Alexander Butlerov (1828-1866) and Wilhelm von Hofmann (1818-1892) are credited with the discovery of formaldehyde. Dr. Thomas Holmes (1817-1900) is generally considered the father of modern embalming. He experimented with preservative chemicals while working as a coroner's assistant in New York and later began offering his services to the public. The modern method of embalming is defined as the disinfection and preservation of the dead human body.

Embalming is accomplished by a chemical "fixation" of the cell protein. Formaldehyde basically reacts with the soluble albumins in the cell and converts them to albuminoids or gels. At the same time, the bacteria are destroyed, thus halting or at least delaying decomposition

**Methods:** Normally the procedure of embalming involves injection of a preservative and fixative into the cadaver within a stipulated period of 6 hours. This keeps the cadaver unharmed by the microbes and prevents putrefaction. The aim is to buy time to dissect, demonstrate and for anatomical research and study. Here the priority is preservation rather than presentation. In case if it's for temporary

preservation until funeral the priority remains the presentation. The period extends somewhere around a week or two, in view of the convenience of the visitors of the demise.

The outcome of embalming rests purely on the preservative used and meticulous dissection carried out to find the inlet for injection. Anatomical embalming is performed into a closed circulatory system. During the procedure of embalming for anatomical studies the preservative solution contains fixative- formalin and ethanol, phenol as fungicide, glycerine for softness & plasticity and coloring agent- eosin, a deodorant- Benzaldehyde, Cloves or Oil of Wintergreen and water as a vehicle. The formaldehyde content generally ranges from 5 to 29 percent and the ethanol content may range from 9 to 56 percent. The cadaver is positioned supine in full extension. Cotton pads will be packed into the oral and nasal orifices. The embalming fluid will be injected through the femoral or carotid artery using a total volume of 08-10 L with a mechanical pump at a pressure not exceeding 5 lbf/sq.

Anatomically embalmed cadavers have a typically uniform grey coloration and pungent odor due to the high formaldehyde concentration. The body resumes a swollen appearance due to two reasons, one, the volume of the embalming fluid being almost the double of blood volume and two, due to non letting of venous blood.

In the modified embalming procedure the same technique was used with few deviations. The negative outcomes of regular embalming technique were targeted during cosmetic embalming procedure by considering following principles:

1. Using a low concentration of formalin. A lowest of 5% was used along with coloring agents like eosin in moderate amounts, deodorant solutions like rose water, clove or benzaldehyde in the embalming fluid.

2. The volume of the fluid to be considered depending on the size of the cadaver. Volume usually ranges from 7L to 10L.



3. Meticulous dissection to approach common carotid artery and for venous bloodletting, the internal jugular vein. A short incision and step wise exposure followed by insertion of a thin but wide bore trochar were practiced.
4. Pressure of the injector was maintained less than 5 Lb. The injection of whole amount of fluid has taken less than 3-4 hours.
5. A neat and fine surgical closure of the incision was done. The area was covered with minimum skin colored bandage.
6. Post embalming make up was with proper

clothing depending on ethnicity and culture.

7. Embalmed cadaver was stored at a temperature  $<4^{\circ}\text{C}$  in the cold storage cabin.

**Result and conclusion:** At the end the cadaver was observed carefully for the effectiveness of embalming by palpation. The cotton plugging was removed from the orifices.

With this procedure we could achieve a near life like appearance of the cadaver with just modifying the actual method but using the same ingredients like that of usual anatomical embalming procedures.

## PLATELET RICH PLASMA THERAPY

Dr. Jagannath Kumar V, Prof & Head, Dr. Manjunath Hulmani, Associate Professor,  
Dr. P. Alekya, Dr. M. Harish, postgraduates

### Introduction:

Androgenic alopecia or male pattern baldness is a very common type of hair loss observed in both males and females. The main growth factors involved in the establishment of hair follicle are vascular endothelial growth factor (VEGF), epidermal growth factor (EGF), insulin 1-like growth factor, and fibroblast growth factor (FGF).

Platelet-rich plasma (PRP) has become a newer method for the treatment of various types of alopecia. Platelet-rich plasma (PRP) is an autologous preparation of platelets in concentrated plasma. Although the optimal PRP platelet concentration is unclear, the current methods by which PRP is prepared report 300-700% enrichment, with platelet concentrations consequently increasing to more than 1,000,000 platelets/L.

Activation of alpha granules of platelets releases numerous proteins, including platelet-derived growth factor (PDGF), transforming growth factor (TGF), vascular endothelial growth factor (VEGF), insulin-like growth factor (IGF), epidermal growth factor (EGF) and interleukin (IL)-1. It is hypothesised that growth factors released from platelets may act on stem cells in the bulge area of the follicles, stimulating the development of new follicles and promoting neovascularisation. The

beneficial effects of PRP in AGA can thus be attributed to various platelet derived growth factors causing improvement in the function of hair follicle and promotion of hair growth.

### Procedure:

PRP is prepared by collecting 20 cc of fresh blood in sodium citrate or acid citrate dextrose (ACD) containing vacutainers in minor operation theatre under proper aseptic precaution. The tubes were rotated in a centrifugation machine at 1500 revolutions per minute for 6 minutes. The first centrifugation is called "soft spin", which allows blood separation into three layers, namely bottom RBC layer (55% of total volume), topmost acellular plasma layer called platelet poor plasma (PPP, 40% of total volume) and an intermediate PRP layer (5% of total volume) called the "buffy coat". Separated buffy coat with PPP was collected with the help of Finn pipette in another test tube. This tube underwent a second centrifugation, which was longer and faster than the first, called "hard spin", comprising at 2500 revolution per minute for 15 minutes. This allows the platelets (PRP) to settle at the bottom of the tube. The upper layer containing PPP was discarded and the lower layer of PRP was loaded in an insulin syringe containing calcium chloride (1 part calcium chloride and 9 parts of PRP) as an activator.

One hour prior to administration of PRP, anaesthetic cream has to be applied over the bald area. Area of the scalp to be treated has to be cleaned with cetavlon, spirit and povidone-iodine. With the help of insulin syringe PRP is injected over affected area by nappage technique (multiple small injections in a linear pattern one-cm apart) under proper aseptic precaution in minor operation theatre. A total volume of 2-3 cc has to be injected. The treatment is repeated every two weeks.

#### **Side effects:**

The side effects after PRP injections are minimal pain, redness at the time of injections and pinpoint bleeding.

#### **Uses:**

1. Androgenetic Alopecia
2. Alopecia Areata
3. Skin rejuvenation
4. Acne scars and contour defects
5. Non-healing ulcers
6. Striae distensae
7. Lichen sclerosus
8. Lipodermatosclerosis
9. Periorbital pigmentation

#### **Advantages**

PRP injection for androgenic alopecia is a simple, safe, cost-effective, non-allergic and feasible treatment option for hair loss and can be regarded as a valuable adjuvant treatment modality for androgenic alopecia.

Considering its excellent safety profile and relatively low cost, PRP hair treatment is a promising treatment option for patients with thinning of hair.



Pre PRP therapy



Post PRP therapy



#### **Mr. Manjunatha HC,**

FDA, Library and Information centre

The advent of wireless technologies have permitted learners to converse universally anywhere and anytime and made it possible for learners to obtain and share information through wireless hand held devices such as Smartphone's, laptops and tablets

Wireless local area networks has grown dramatically over the last few years because it fills a real user need at a cost the user can afford (Burness and others , 2003). The word "Wi-Fi" is used in general English as a synonym for WLAN. Wi-Fi is short for "wireless fidelity is the name of a popular wireless networking technology that uses radio waves to provide wireless high-speed Internet and network connections (Webopedia, 2015). Wi-Fi is technology that facilitate the exchange of information or that allows computers and other devices to communicate over a distance without the use of wires, Wireless technology have introduced a innovative era in communication for the education community, and emergence of wireless technology use may be playing a key role on student learning (Middleton and Chambers, 2010) and it is evident in many ways: as an essential delivery format for remote access to campus learning resources and services(Mathews,2005).The wireless technology may be used to make available Internet Access to devices that are inside the wireless network that is linked to the Internet. Now a day's Wi-Fi technology is considered as part of campus experience both from an educational point of view as well as from a social point of view With a wireless network advantage, learners can now have access to a large variety of information from some given hotspots the refectory, library or a remote hostels. With this benefit universities can profit from installing a WLAN system, which



supplies a powerful amalgamation of wired network throughput, mobile access, and configuration elasticity.

A study was conducted to find out the awareness and use of Wi-Fi service by the research scholars of University of Mysore. The finding of the study reveals that majority of the respondents 79.82% stated that they use the Wi-Fi service most frequently for purpose to search information related to their field of research'. Followed by, 68 (59.65%) of the researchers use 'to search E-theses and Dissertations majority (96; 84.2%) of the respondents opinioned that they are satisfied with present Wi-Fi services. The investigator finally recommended that by increasing speed of Internet and creating awareness about use and terms and conditions of Wi-Fi service.

Today's world is globalized, information and communication technology (ICT) is diffusing its services to diverse domains. Medical and healthcare is intimately associated with human lives, ignoring of ICT in medical and healthcare is not affordable. Most medical students have some

average or advance knowledge on the basic use of computer software that is microsoft-word, excel, internet, email, etc. The computer awareness among medical students is encouraging. ICT can be a useful tool in shoving problems in medical education, but the lack of technology and resources is still a serious limitation in Library and Information Centers.

We believe that ICT in medical education is not only a tool, but a goal; in order to construct a better individual, a better doctor, there have to be a proper aware of the current need to have access to better and more information via electronic way. ICT have changed the ways in which medicine is practiced and taught.

#### Reference:

International Journal of Library and Information Science Vol. 4(3), pp. 45-51, March 2012 Available online at <http://www.academicjournals.org/IJLIS> DOI: 10.5897/IJLIS12.001 ISSN 2141 2537 ©2012 Academic Journals  
IJALIC Vol. 3(11), pp. 336-341, December 2015

## CONGRATULATIONS

The Management, Principal, Director and all HOD's and Staff of  
SSIMS & RC congratulate



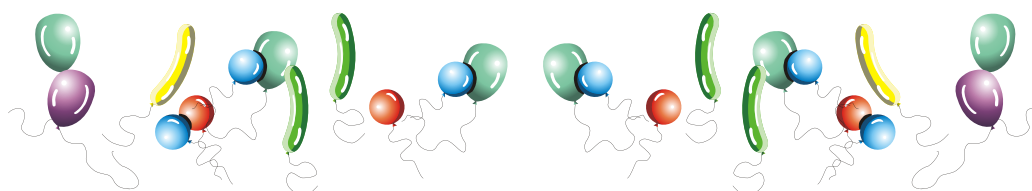
### Dr. VL Jayasimha

Professor, Department of Microbiology, for being  
appointed as coordinator for project  
"Neonatal septicemia and its early markers".

The project is approved by Karnataka State Science  
and Technology, VGST group.

### Dr. Manjunath Hulmani

Associate Professor, Department of Dermatology  
is for being elected as  
Joint Secretary of IADVL, Karnataka





## Shri Dr. Shamanur Shivashankarappaji Birthday celebration



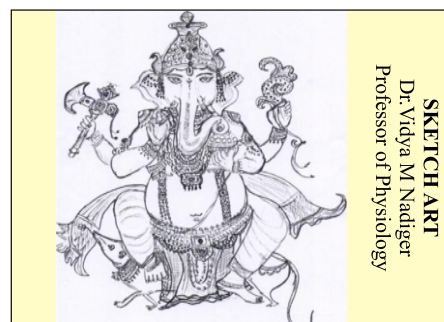
Clinical Trials Meeting



Student union 2016 Inauguration



Student union sports Inauguration 2016





Shri Dr. Nirmalanandanatha swamiji, Adichunchanagiri



Guest lecture - Shri Dr. Shivamurthy Muruga Sharanaru, Chithradurga



Workshop on Secret of Success, ISKCON



Blood donation camp



Vitiligo Day

Nursing Day

Guest Speaker @ BDCH



# Shri Dr. Shamanur Shivashankarappaji Birthday celebration



Student union 2016 Inauguration



Lamp Lighting



Inauguration



Winners: Cricket Tournament



Cultural Committee



Literary Committee



Sports Committee



Magazine Committee



I & T Committee



Kannada Balaga



Non teaching staff cricket team



Sports committee 2016



Teaching staff cricket team