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It is that time of the year again, when we cherish the opportunity to look back to see how far we have come. The stream of patients seeking respite from their illness continues to grow steadily. The Sri Sathya Sai General Hospital has closely integrated with the Sri Sathya Sai Institute of Higher Medical Sciences and they work in unison on the same premises to serve the patients.

Our cover story reports the 17th Anniversary Celebrations at SSSIHMS, Whitefield, at which the Honorable Minister of State for Health and Family Welfare, Sri Ashwini Kumar Choubey, graciously consented to be the Chief Guest.

Find inside a few patient's stories, which would open your mind to the quality of care provided at the Institute, through the seamless orchestration of well-honed surgical skills, high-end equipment, academic excellence, nursing care, and selfless volunteers. Each patient walking out of the Institute stands testimony to the spirit of excellence and selfless service, embodied by the doctors, nurses and support staff. Going beyond conventional treatment, to preventive and promotive health, is a new step taken up through the setting up of the Wellness Clinic.

While "Go Green" has become a clichéd phrase, read how this term has been lived at the Institute through the story of how 115 trees found their new home at the Institute, and also through the setting up of vegetable gardens on campus. We also provide updates on a related theme of energy conservation, which was initiated last year by setting up of a 100 kW solar power plant.

As we enter the Institute's 18th year of existence, we cherish the distance traveled so far, and resolve to continue our Founder's mission of providing the highest care, completely free of cost, and in the spirit of love, selfless service and compassion.

Thank you to all who have stood by and participated in the Institute's journey of growth and fulfillment.

- The Editors



### CONTENTS

- 2 Editorial
- 4 Message from the Director
- **5** Hospital Statistics
- 6 Cover story: 17th Anniversary Celebrations
- 8 Wellness Clinic
- 10 Patient Story: Unstoppable!
- 11 Patient Story: Healing Touch A Physiotherapist's Perspective
- 12 Patient Story: Brain bypass saves a Life...
- 13 Patient Story: Our life is His Message A doctor's perspective
- 14 Patient Story: I consider this a rebirth
- 15 Continuous Learning: Academic Activities
- 21 Leading Change: Training in Innovation
- 22 Infrastructure: New Equipment
- 23 Awards & Recognitions
- 24 Go Green: Nurturing Nature
- 25 Go Green: Sai Prerana
- 26 Go Green: Energy Saving Measures
- 27 Nursing College News
- 28 Sai Students Connecting to Him through His Work
- 29 Outreach Staff & Sevadal activites
- 30 Festivals & Campus Activities

#### Front cover:

Asif Eqbal, a cardiac patient with his mother and brother.

#### Back cover:

A floral decoration by the students of the nursing college, with the theme "Save Earth" Dr. D.C. Sundaresh, Director, SSSIHMS, Whitefield, Bangalore

#### Excerpts from the Director's speech delivered on the occasion of the 17th Anniversary Celebrations



#### Aum Sri Sai Ram.

I pray to Bhagwan to accept this report of gratitude for providing this opportunity to be a part of the massive Sai healthcare mission. Today we are on the threshold of adult hood, and on this auspicious occasion of the 17th anniversary of the Institute, we are gathered here to offer ourselves at his lotus feet to serve the patients of this nation.

It is my privilege to welcome the Hon'ble

Union minister of state for health and family welfare, Sri Ashwini Kumar Choubey who has graced this occasion. I think it is Swamis will that has brought him here since the desire to come here came into his mind and he is here today despite a busy schedule and also while recovering from an ankle injury. Ashwini kumar ji, aap yahan aane ka kasht kiya, isliye ham app ka bahut abaari hain aur rahenge., Bhagwan ke sankalp hee aapko Diilhi se Bengaluru thak leekeaaye hain. We are very grateful to you sir for this extraordinary love you have shown for Bhagwan Baba's health care mission.

We also have with us today the Trustees of the Sri Sathya Sai central trust who are carrying forward this sacred mission of Bhagwan Baba. It is no easy task to manage such an activity where health care, educare and socio-care is given free of cost.

To the trustees it is really homecoming since they are deeply involved in the health care mission of Baba and are a great source of inspiration for all of us.

I take this opportunity to welcome Dr. Acharya the Medical supdt. of the Sri Sathya Sai general hospital. A dynamic man of many interests in the health care area. A dermatologist by profession, he has diversified into complimentary therapies and has been instrumental in starting a Wellness clinic at our hospital which caters to a multitude of our patients and in patients.

It is my proud privilege to welcome all the invitees and my staff and the Sevadal who have put in a lot of effort to make this function a success.

I welcome the Media persons here who have come to cover this event

Such functions create an awareness that health care of high quality can be given free of cost and Bhagawan Baba has shown us the way and thrown a challenge to the rest of the world to replicate this model of health care delivery.

This hospital is on the threshold of adulthood. Having been in service of patients of our country for the last 17 years providing free care for patients with cardiac and neurological problems. To this the addition of the general specialities in July 2016 has made it possible to render a comprehensive service to the patients. The departments have been equipped with the state of the art equipment and high-quality professionals who have been here for many years. I am proud to note here that some of the doctors have been serving in this institution for over a decade and some support staff have been here since the inception of the hospital. The hall mark of the past year has been the installation of a 100 kilowatt solar power plant, housing an indigenous MRI project developed in India. To our patient treatment armamentarium we have added the Wellness clinic which has Sai Vibrionics, acupressure, crystal therapy, mind body healing etc.

We are proud to have the services of many volunteers on an on-going basis including 40 doctors from various specialities, 100 Sevadal volunteers, who come on a weekly roster from different districts of Karnataka and close to 30 counsellors, who heal the minds and souls of patients.

We have also a vibrant DNB training program in the departments of Cardiology, Cardiac surgery, Neurosurgery, Radiology and Anesthesiology. A total of 10 students for DNB and 5 students for fellowship programs are admitted each year. These students receive quality training in their respective specialities. The departments have a very rich academic program and have many presentations and publications in National and international fora.

The nursing college offers a Bachelors program in the nursing and paramedical sciences. 40 students for nursing and 10 students for the Auxillary health services are admitted each year. We also have special training programs for cardiac and Neuro critical care nursing. These programs are conducted by faculty from the USA, using online classes and certification happens after online exams.

We are grateful to the Government of Karnataka, who have enhanced the power subsidy to Rs.3 crore per annum. We however continue to invest in technologies to reduce the power consumption. In the last year energy savings to a tune of Rs.46 lakhs were effected, due to modification of the air-conditioning in the operation theatres, installation of variable frequency drives in the air-handling units, completely switching over to LED lighting and so on.

In a go green initiative, we have also started Sai Prerana - a vegetable garden, where we have harvested over 4 tons of vegetables since February, 2017. This has helped us meet 60% of our vegetable requirements in the hospital dietary kitchen and the public canteen.

We pray to Bhagawan to continue to guide us in all our endeavours and I personally look forward to the support of all my colleagues in continuing the healthcare mission of Bhagawan.



Sri	Sathya	Sai	Institute	of	Higher	Medical	Sciences
			Whitefie	eld,	Bangalore		

Statistics for the period Jan. 2001 - Dec. 2017								
Outpatient Visi	Laboratory Tests							
Cardiology	8,05,939	Biochemistry	35,58,755					
Neurosurgery	3,06,640	Blood bank	4,60,354					
Neurology	2,01,934	Haematology	49,90,520					
Total	13,14,513	Histopathology	14,617					
Telemedicine Consul	Microbiology	78,339						
Cardiology	6,327	Serology	4,25,723					
Neurosurgery	8,742	Total	95,28,308					
Total	15,069	Radiology Exams						
Cardiac Catheterization I	Procedures	CT Scan	68,990					
Diagnostics	25,260	MRI	1,45,701					
Interventions	32,701	Neurocathlab	2,576					
Pacemaker Implantations	1,254	Ultrasound	40,108					
Total	59,215	X-Ray	2,39,886					
Surgeries	Total	4,98,812						
Cardiac Surgeries	24,039							
Neurosurgeries	25,952							
Total	44,142							

### Sri Sathya Sai General Hospital Whitefield, Bangalore

Statistics for the period JanDec. 2017									
Outpatient V	7isits	Inpatients							
Dentistry	6,983	General Medicine	127						
Dermatology	1,426	Pediatrics	19						
Otolaryngology	7,230	Pediatrics (new borns)	329						
Endocrinology	1,253	Gynec day care	66						
Gastroenterology	28	Normal deliveries	206						
General Medicine	38,336	Total	747						
General Surgery	11,241	Surgeries							
Obstetrics	16,839	Gynecology	250						
Ophthalmology	4,929	Ceasarean surgeries	123						
Orthopedics	14,015	General surgery	416						
Pediatrics	7,652	Urology	158						
Psychiatry	1,036	Ophthalmology	141						
Urology	824	Orthopedics	314						
Wellness Clinic	902	Otolaryngology	422						
Total	1,12,694	Total	1,824						

### **Cover Story** 17th Anniversary Celebrations - A Report

Sri Sathya Sai Institute wore a festive look on the occasion of its 17th Anniversary Celebrations. The Trustees of Sri Sathya Sai Central Trust and Director received the Chief Guest for the Function, Hon'ble Minister of State for Health and Family Welfare, Sri Ashwini Kumar Choubey, and his entourage.

After offering his obeisance to Lord Ganesh in the Dome area, he was ushered into Swami's room for invoking Swami's blessings for the celebrations.

The Minister and the Trustees then proceeded to the venue of the function – the Reception Block - which was decked up in silver white and regal blue with the backdrop of a large LED screen, welcoming all to the 17th Anniversary Celebrations of SSSIHMS-Whitefield. The program commenced with the ceremonial lighting of the lamp by the Minister and the Trustees, as the invocation prayer was being offered by the Counselling team. This was followed by cutting the special Anniversary cake. Sri K. Chakravarthi, Member Secretary, SSSCT presented the Minister with a memento.

The Director commenced the program by delivering the Welcome address and presented the annual report of the Institute for the period 2017. This was followed by two speeches by viz. Sri S.S. Naganand and Sri R.J. Rathnakar.

The speeches were followed by a grand cultural program titled **"Thyagenaike Amrutathwamanasuhu..."** by the staff and their family members. This concluded the 17th Anniversary Celebrations of SSSIHMS-Whitefield.

Following are excerpts from the speech by Hon'ble Minister, Sri Ashwini Kumar Choubey:

Dear Trustees, Doctors, Nurses and staff ...

Om Sri Sai Ram! I offer my prayerful pranaams at the Lotus Feet of Bhagawan Sri Sathya Sai Baba.

I consider myself immensely fortunate to be present here on the 17th anniversary of this Temple of Healing. In fact, I have come here solely with His blessings and to accept His blessings.

As I have been recovering from an ankle injury, I was delighted to note that the Director of the Institute is also the head of department of the Orthopaedics department. It First time I am coming for a function after my ankle injury.

When I heard this function two weeks ago, hearing the name of Sai Baba, I immediately gave my word that I would attend this function. His very name gave me courage to step out of Delhi and attend a public function after a period of two months. It was exactly on Nov. 19, 2017 while attending a religious function in my constituency in Buxar, Bihar, that I had injured my ankle. Buxar has a rich mythological heritage, and it was where Lord Rama and Lakshmana were tutored by Sage Vishwamitra.

Exactly two months later, it happens to be another festival at this unique Hospital.

I am able to see the fulfillment of the statement from the Bhagawad Gita "Karmanyeva dhikaraste..." in this hospital, through the lives of doctors performing meritorious service to the poor and needy patients.

I am happy to know that through Sevadals are offering their selfless service to the patients. They seem to epitomize the statement 'Jana Seva is Janardhan Seva'.

It is a great sacrifice on the part of the doctors, who serve the needy patients in institutes like these and perform their actions with a sense that the ill are verily Divine. Through this attitude our country can be best in the world. This is perhaps the first and the world's only institute where treatment is offered with dedication to the Divine.

I had my first darshan of Baba at Puttaparthi in my college days. It is after so many decades that I am having His darshan

again. And that too, on an auspicious occasion such as this. Perhaps, this is the reason why Bhagawan has saved me from the Kedarnath floods in 2013.

For this occasion, I consider myself as an honoured invitee of Bhagawan Baba and not as a Minister. This is a unique hospital where you receive both grace and medicines in equal proportions.

I consider this Institute as a role model and wish to invite members from both the government and other NGOs this Institute to spend time here and draw inspiration in serving the patients.

I am also proud to announced that we have incorporated certain aspects from the Swami's teachings on healthcare in the National Healthcare Policy 2017.

Healthcare has become a commercial activity, and doctors are no longer being treated as God. Perhaps, this is the only place where healthcare is non-commercial and available to all the strata of society, and where doctors are considered verily a form of God.

I firmly believe that the outcomes in this hospital are better not only due to Baba's grace, but also due to the love the patients receive from the staff. I have referred many poor patients from my home State to this Institute for treatment, and I have heard many patients say that the treatment they received here is far more than what they received from their own family members. It is outstanding that the Trust has been providing such medical care with love and compassion for over six decades.

At the government level, we are planning to implement a healthcare system, similar to the mobile hospital/clinics. We are also open to public private partnerships, similar to the collaboration with the Tata Trust in cancer treatment centres, which are in the process of being set up in Bihar.

Drawing inspiration from you all, and irrespective of my position, I promise to come serve at this hospital every year.

Jai Hind! Jai Bharat! Jai Sathya Sai! Vande Mataram!

The Minister's speech was followed by the vote of thanks, delivered by Dr. Upendra Acharya, Medical Superintendant, Sri Sathya Sai General Hospital, Bangalore.



### Wellness Clinic

"We all know prevention is better than cure. Swami has said on numerous occasions that it is far better to prevent disease rather than treat it. It is with this intention that we

"Prevention of disease should be the goal. We should aim at a human society free from diseases. It will be a happy day when a hospital gets no patients at all."

- Bhagawan Sri Sathya Sai Baba

change. The Bars take all the considerations, thoughts, feelings, emotions, decisions, judgments, and beliefs from any lifetime, electrically stored in the brain and releases them

have inaugurated the Wellness Clinic on 23-Feb-2017, where we are providing various tried and tested alternate healing mechanisms," says Dr. Upendra Acharya, the Medical Superintendant of Sri Sathya Sai General Hospital, Whitefield. With his wide-ranging experience in alternate medicine, he has spearheaded the setting up of the Wellness Clinic, with the support of a team of volunteer practitioners of other alternate healing modalities.

Following is a brief write-up on few of the alternate healing methodologies provided at the Wellness Clinic:

#### Sai Vibrionics



Sai Vibrionics is an alternative system of healing where no physical or chemical substance is administered to the patient - only subtle vibrations are provided to the patients. A liquid or solid medium is utilized as the medium to transfer these vibrations to the patient. These

vibrations are made using a small device called 'Sai Ram Healing Vibration Potentiser', which help in restoring the balance in the body.

Practioners: Poornima Kurnool, Uma Shikaripur, Vydehi Yellai, Raghavendra Natarajan, Madhava Reddy

#### Access Consciousness Bars & Tissue Salts

Access Consciousness Bars are a series of 32 points on the head, which when lightly touched release old energies stuck in the brain and the body, allowing for tremendous and easy



when the points are touched.

Also known as "cell salts" or "biochemic tissue salts", tissue salts are the same minerals found in rocks and in soil. They occur naturally in the human body, and any imbalance or lack of certain ones opens the door for illness and disease. The ingestion of micro-doses of required potencies, to stimulate the human body to improve the absorption of the lacking minerals.

#### Practioner: Dr Shubra Pankaj

#### Acupuncture

Acupuncture is a form of alternate medicine in which fine needles are inserted in the skin at specific points along what are considered to be lines of energy or meridians which run throughout the body and transports life energy ('qi').

It is a key component of traditional Chinese medicine (TCM). It improves body's function and promotes natural self-healing by stimulating specific anatomic sites commonly referred to as Acupuncture points or Acupoints by balancing the flow of energy in the meridians.

Acupuncture is useful in pain relief and treatment of various physical and mental conditions.

#### Practioner: Dr. Revathy Ramanesh

#### Yoga

Yoga means the union of body, mind and soul, achieved through a fully rested, relaxed body and a fully awake, relaxed mind. For achieving this, a few physical postures



(asanas) are prescribed along with proper breathing, which help relax the body and activate the mind.

Breathing exercises (pranayama) with closed eyes, help the mind become lighter and clearer. This also reduces the effect of stress from disease & environment.

Practitioner: Ms. Poonam Illuri

#### Tachyon

All matter in the cosmos and beyond is made of energy and is part of an energetic continuum. As matter moves down from the source i.e. the formless zero point, tachyon is the first formed energy to emerge. Tachyon realigns and restores the subtle energy field to its natural order and balance, thereby creating good health.

Through the Tachyonization process and use of tachyon antennas, one can source free energy into one's body and mind, and feel fit, fresh and recharged.

Tachyon energy healing is useful in the relief of pain at any site in the body and can be used in conjunction with nearly all other healing modalities.

#### Practitioner: Dr. Upendra Acharya

#### Reiki

The universe is made up of energy and Reiki Energy is considered to be the primal energy. The myriad forms the universe appears to take are nothing but energy impulses impregnated with information and pulsating at different frequencies.

Reiki energy can only be used for performing noble and positive healing therapies.

#### Practitioner: Dr. Lakshmi Raghunathan

#### Crystal therapy

Crystals magnify the volume and magnitude of energy and have been used to conduct healings from many Yugas. Crystalline energy is an amazing ally when strengthening and repairing areas of imbalance or disease in all bodies: etheric, emotional, and physical. At the Wellness clinic, different types of crystals such as Amethyst, Rose Quartz, Clear Quartz, Smokey Quartz, Lapis Lazuli, Green Aventurine, Tiger's eye, Merkabahs and Himalayan quartz clusters are used. They help patients reduce their stress, anxiety, fear, trauma and pain. Chakra cleaning and balancing help patients to go into a relaxed state, feel happy, loved, safe and free.

#### Practitioner: Shivani Sinha Sola

# Testimonials of patients, who benefited from the Wellness Clinic:

"...my thinking process has changed; my outlook towards life is positive. After the first session of Access bars session, I felt complete ease...and I was more confident than before..."

"I was very depressed and dull. I used to have trouble sleeping due to bad dreams. After a Reiki attunement, I had a dreamless sleep and woke up energetic and cheerful..."

"...I was suffering for 15-years excruciating pain on my face. Within four sessions of Tachyon energy treatment, I am now virtually free of pain..."

"...I feel completely relaxed and energetic after every Acupuncture session... my digestion improved... Feeling better..."





Pictures from the inauguration of the Wellness Clinic on 23-Feb-17

### Patient Story Unstoppable!

"Mom, is this blood?" was the question 11-year-old Mohammed Asif Eqbal innocently asked his mother. Once again, it turned out that it was. The parents of this little boy were naturally worried that these episodes of coughing up blood were increasing. They recall that even as a 6-month-old baby he used to have occasional blood running down his nose. They suspected it was heat which caused the bleeding, and took some local medication.

Asif is the youngest of five children, and with only a tuck shop in interior Bihar to support the family, his parents were obviously of modest means.

Once when Asif suffered severe recurrent blood coughing episodes, they rushed him to the Patna Medical College. The doctors there suspected it was tuberculosis and put him on TB medication. Separately, while examining him they also found that he had a large ventricular septal defect (a hole in the heart). The doctors, aware of the free medical care being offered for such patients here, referred him to SSSIHMS-Whitefield.

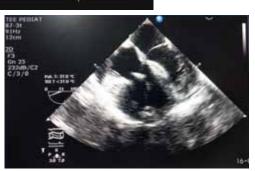
Asif and his parents thus came to the hospital in late 2017, and after the diagnostic tests were completed, the doctors found him fit for a cardiac surgery to close the hole in his heart.

On 4th December 2017, Asif was wheeled into the Cardiac OT, and as per the protocol, they attempted to arrest his heart and have the heart lung machine take over its functioning so that they could proceed with the surgery to repair the heart. Typically, 500 ml of an infusion- cardioplegia - is adequate to still the heart. The surgeons and perfusionists were in for a surprise when they found that Asif's heart refused to stop. Perplexed, but thinking on their feet, they made four consecutive attempts to arrest the heart, but no, Asif's heart would just not stop!

Dr. Krishna Manohar, Head of Dept., CTVS and the Chief Paediatric Cardiac Surgeon, narrates the experience in his own words: "It was a unique and first-of-its-kind situation for our team. We had never come across any such case, where the heart could not be arrested. Along with the perfusionists and



Pre & Post Operative TEE images



anaesthetists, we discussed the options available, but surgery was impossible without arresting the heart. It was then that we decided to call in the cardiologists, who had performed the diagnostic tests earlier and cleared the child for surgery."

Enter Dr. P.K. Dash, Head of Dept., Cardiology. After discussing with the surgeons, Dr. Dash attempted something not done earlier at SSSIHMS-Whitefield. With the guidance of a trans-esophageal echocardiogram by Dr. Anitha Diwakar, Consultant Anaesthesiologist, he confidently closed the heart with a dumbbell-shaped VSD device, introduced through a catheter into the heart. Under normal circumstances, this procedure would have been done in the Cardiac Cathlab, but given the criticality and the preparatory work already done, it was done right there in the Cardiac OT.

Dr. Dash recounts: "It was a unique experience for all of us. A condition where the heart would not arrest is very rare. The clinical reasons are unknown, but we are glad that with Swami's grace, the procedure was completed without any complications."

As this article is being written, Asif is in the post-op cardiac ward, getting ready to return home to his siblings whom Swami's hospital has thus gifted a healthy brother and playmate. Little does he know of the miracle in the OT; yet there is no doubt of how he feels when he says, "I knew that the doctors would do everything they could to keep my heart beating!"



### Patient Story Healing Touch - A Physiotherapist's Perspective

"Sunita, I am lying in a pool of blood just outside the hospital. Come soon." These were the words Nagesh remembers uttering to his wife before he passed out on the road, just outside SSSIHMS, Whitefield.

Ten minutes earlier, he left the residential quarters of the hospital to fetch medicines from a nearby pharmacy. While turning his two-wheeler into the lane leading back home, a cab appeared from nowhere and crashed into his vehicle. He was thrown off the vehicle, and landed with a thud on the road. The cab rushed away even as the helmet he was

wearing fell off in the impact; he sustained a superficial head injury. Providence seemed to play its part when a hospital staff recognized Nagesh with his signature French beard and immediately shifted him to the hospital.

Once in the emergency, the Ortho and neuro specialists assessed him and gave him first-aid. Meantime, Sunita his wife - arrived, and he was quickly wheeled in to radiology for X-ray and scans.

Nagesh joined SSSIHMS 11 years ago in 2006. He was fresh out of post-graduation in Physiotherapy, specialising in Neurosurgery. "I vividly

remember driving down to the hospital to attend the interview, the very day I gave my last exam. My interview was done in no time and I was thrilled to be selected for the post," he reminisces.

A sought-after physiotherapist known for his affable nature, Nagesh is popular amongst the staff not just as a competent professional but also as always being eager and keen to help people out with their ailments. Little did he realize at the time he made that fateful call to his wife that his life was to undergo a significant change. He was also to discover that Divine Grace is protecting him through all that he was undergoing in life.

During the CT scan, he experienced excruciating pain and soon after, he recalled something beautiful happened. "I grit my teeth hard and was praying out loud to Swami, when I suddenly felt a hand gently stroking my head. The pain slowly but surely faded away, and I was left with a deep sense of peace. When I opened my eyes, there was no one around." It was not the last time that he was to feel the soothing hand though.

The CT scan revealed a pelvic fracture and this deeply shook Nagesh. "How am I going to work with a pelvic fracture?" was the question which plagued him as soon as he was made aware of the diagnosis. For a physiotherapist, one's own mobility and strength is of vital importance. He however took comfort in the fact that there were no deep head injuries and neither were there any spinal cord injuries, both of which would have hindered his career prospects drastically, that is of course only if they did not end his career abruptly! Dr. D.C. Sundaresh, Director of SSSIHMS, Whitefield and the Head of Dept., Orthopedics, Sri Sathya Sai General Hospital, Bangalore examined his scans. Here is his narration of his clinical findings and the plan for surgery in his own words: "The CT revealed Nagesh had a complex pelvic fracture, needing acetabular reconstruction plates for the medial wall, anterior column and wall of the left acetabulum. We planned to provide traction to first realign the bones and reduce the inflammation, before we take him up for surgery. This procedure has a long rehabilitation and recovery period."



As he was being wheeled into the OT, Nagesh suffered from terrible pain. His wife applied some vibuthi on his forehead. As he passed Swami's photo in the corridor, he let out a silent prayer to Him for help. "Just before I was administered general anaesthesia, Dr. Geetanjali, the Anaesthetist, comforted me and encouraged me to say 'Sai Ram'. It was almost immediately soon after that I felt that same hand soothing my forehead, and I slowly sunk into a deep sleep. When I woke up, I was in the ward after a successful surgery."

"It was a depressing time in my life," Nagesh recalls. "Here was I, who used to give strength

to a lot of patients, and encouraging them to transcend pain, now lying helplessly on the bed. I also developed abdominal distension, and had difficulty in passing urine. Recovery took three months and I had a taste of my own medicine during this period. I fondly recall how Dr. Sundaresh goaded me to hasten my own rehabilitation during this period. I have to acknowledge the support of Dr. Kiran too, who motivated me to come out of depression.

"Because of being in bed for a long time, I developed postural hypotension, which I only theoretically knew about. I went through this very same condition myself, and was able to put myself in the shoes of the patients so well," he recollects.

I am deeply grateful to my colleagues, who were always there whenever needed. Of course, my wife was constantly by my side applying Swami's vibuthi, which seemed to have a soothing effect, whenever I was going through pain. While I have earlier undergone treatment at other hospitals, the support I received at this hospital is very unique and there were divine vibrations which are not found in any other hospital.

It's now seven months since that fateful day, and Nagesh is back at work helping patients. After being a patient at the same hospital and experiencing the care & compassion from his own colleagues, he has developed a newfound respect, compassion and empathy for the patients. "Though I never wish that anyone should ever go through what I have, this experience has enriched me far more than I ever imagined, and has helped me deeply connect with the patients, and turn into a more sensitive person."

### Patient Story Brain bypass saves a Life...

It was a routine marketing call that Sandip was making that day, as he walked into the hustle and bustle of the Kolkata market. He made a livelihood marketing air conditioners. At the client store, as he was explaining the features of the air conditioner, he suddenly felt a jolt in his head and fainted on the floor. The people around helped him relax and he regained consciousness. He was admitted in a nearby hospital. After first aid and some rest, he was back on his feet. Soon after he visited a local hospital and after listening to his history, the doctors ordered a CT scan and a DSA (digital subtraction angiography) for visualising the blood vessels in the brain.

The scans diagnosed Sandip with a rare and progressive cerebrovascular disease called Moyamoya, which is Japanese for a "puff of smoke". The first symptom of the disease is ministrokes, like the one he just had. This disorder is apparently caused due to the narrowing of the main blood vessels at the base of the brain. The body develops an intricate network of vessels, to compensate for the blockage, and these networks show up on the DSA as puffs of smoke, and hence the name of the disease, Moyamoya.

The doctors opined he would need to undergo a surgery to correct this condition. The estimate for surgery was Rs. 8 lakh. He was dumbfounded by this estimate and coming from a lower middleclass family, there was no way he could afford it. One of the doctors referred him to NIMHANS, Bangalore, where he went, but there was a long waiting list. He was referred to SSSIHMS, Whitefield for the surgery.

Meanwhile, at SSSIHMS, in 2016, Dr. Sunil Furtado, former HOD of the Neurosciences Dept., had completed a vascular neurosurgery Fellowship in the US, and had come back to train the surgeons at SSSIHMS-Whitefield on a new surgical technique known colloquially in the clinical circles as a "Brain Bypass". This technique is specifically used to treat the condition Sandip had.

Sandip was examined at SSSIHMS, and it was planned that he would undergo two surgeries to address the disease. Dr. Dilip Mohan, the present HOD of the Neurosciences, who operated on Sandip, does a deep dive into the procedure: "The condition Moyamoya is very rare and is mostly affects children. The patient usually present with repeated episodes of stroke and manifests as weakness of one side of body, seizures, memory disturbances, headache, visual disturbances. The disease is due to gradual blockage of blood vessels (Internal Carotid Artery) supplying blood to the brain. The reduction in blood supply causes temporary or permanent damage to the brain. The cause for this disease in most of the cases is not known and in some genetic cause has been attributed. The treatment normally is to either try and open up the blocked blood vessels or bypass the blocked vessels. In adults, bypassing the blocked vessel, very similar to what is done in a heart bypass, seems to have better success.

"In Sandip's case, there were two areas of the brain, which showed the blockages. In two separate surgeries, these blockages were bypassed and the blood flow to the affected areas were supplemented by diverting blood from other vessels. This helped preventing further strokes.

"The surgery needs a high degree of skill, as the vessels under question are between 2 to 4 mm in diameter and the surgery is carried out under a surgical microscope. "We have done a total of seven procedures on two adults and two children so far, and all of them were successful. Sandip is now as healthy as can be, and he can resume his normal work life."

Sandip may not be aware of the nuances of the disease or the high levels of technical expertise, which saved him from permanent brain damage, but he can rest assured in the fact that he can live a normal life, and be there for his family. "I have been extremely fortunate. I consider it Baba's grace that I received treatment at this hospital. The doctors and staff were so very loving and I received a lot of good care at this hospital," he gratefully acknowledges.



### Patient Story Our life is His Message - A doctor's perspective

An expectant mother, 26 years of age, walked in to the Hospital in labour pain. She had been previously following up with us and was only a week away from the due date of delivery. Everything looked normal. It was a low-risk case. She got admitted in the labour ward and the labour progressed smoothly. It was around 1:30 pm as she was about to give birth, that she suddenly collapsed on the labour cot and her blood pressure and pulse were not recordable. The baby was delivered in a flash, thanks to the dexterity and presence of mind of the gynaecologist on-call, failing which it would have died in the womb due to lack of oxygen.

While the baby was being resuscitated, efforts were simultaneously made to revive the mother. A Code-blue announcement was made on the PA system to alert the Code-blue team. Little did anyone in the labour room know the announcement system would not be working due to the scheduled maintenance of the Hospital's centralized UPS which was being carried out on that fateful day and the IT, Telecom and Public Announcement systems were shut down. Even the intercoms were not working. In spite of this, on that Sunday afternoon, at 1:30 pm the Code-blue announcement from the Labour Room was heard in every nook and corner of the hospital, shattering the tranquility of the hospital and rousing everyone into action. This was the first miracle of the day. Many more would be seen through the day, as Bhagawan uses His instruments - the doctors and staff of the hospital - to save the mother and child.

The Code-blue team arrived immediately, and the anaesthetist took over the resuscitation of the flaccid newborn. In parallel, a cardiac surgeon intubated the unresponsive mother and shifted her to the ICU. They were ably supported by the nursing staff and their team work was commendable in carrying out efficiently the first steps to save the baby and the mother.

Out of the blue, within minutes of shifting to the ICU, the mother started bleeding profusely. She continued to bleed and her uterus refused to contract for the next four hours despite all medications and manoeuvres. The doctors and the available staff at the hospital went beyond their call of duty and selflessly donated 14 pints of blood and byproducts to keep her haemoglobin levels and coagulation profile normal. The mother had ended up in a rare childbirth emergency called amniotic fluid embolism (AFE) in which the amniotic fluid enters the blood stream of the mother and triggers a serious reaction. This reaction results in a cardio-respiratory (heart and lung) collapse and massive bleeding (coagulopathy). The reported incidence varies from 1.9 to 6 in 1,00,000 deliveries with an extremely high mortality rate of 70% even in an institution with top-of-the-line facilities.

It was a unique moment, when despite the challenges and constraints, everyone seemed to yell out: "Help one more, heal one more, save one more...all just for nothing in return!" In that moment, we seemed to have tasted the high level of excellence Swami has set for us. He would say, "All these days it was, 'My Life is My Message' but now it's 'Your Life is My Message' and the exemplary life showcased on that day was the greatest miracle of the day.

As the mother gracefully walked out of the hospital after seven eventful days with her cute little baby in her arms, in the silence of our hearts we could hear Swami say, "I am the Power when there is no power; I am the Voice when there is no voice and I am Everybody, when there is nobody and no Body!".





### Patient Story I consider this a rebirth



"I am unable to breathe," Deeparani uttered in gasps to her husband. Residing in Kuwait, thousands of miles away from their hometown in Tumkur, Karnataka, the young couple was perturbed.

Her problem started one month prior, with difficulty in swallowing. Gradually, it progressed to difficulty in breathing. Furthermore, she started developing double vision. Visits to the local physicians did not seem to help. With no clear diagnosis in sight, they rushed back to India.

The neurologist in Tumkur diagnosed the problem as Myasthenia Gravis, a long-term neuro-muscular disease. The onset is sudden, and it requires expensive medication, specialised procedures and mechanical ventilation to manage. A surgical removal of the thymus gland is usually performed.

The diagnosis came as a rude shock to the couple, with two young children. They were referred to NIMHANS, where they received the first level of treatment. Soon after, they were referred to SSSIHMS-Whitefield for the thymectomy procedure performed by the cardiac surgery team.

It was the first time that she or her family heard about the hospital, and it came as a pleasant surprise that there was no billing department in this hospital! Deeparani was moved by the breathtaking beauty of the hospital, and it infused a lot of confidence in her and her family. She was yet to discover the extent to which the hospital would go to save her life, though.

After assessment by Dr. Joshy, the consultant neurologist, she was admitted in the cardiac ward. Dr. Joshy recalls his first consultation with Deeparani: "She was a young, active lady with a serious disease and in distress. The anxiety, panic, frustration, confusion was striking. My first thought was to seek the help of Sai Counselling to create some peace in her heart. Otherwise, I was concerned the medication & treatment might not work on a body in such a degree of distress."

The cardio-thoracic surgeons successfully completed the thymectomy surgery. Post-operative care was critical. She was on mechanical ventilation, and due to her condition, it was turning out to be very difficult to wean her off it. Dr. Kolli Chalam, HOD, Anaesthesia & Critical Care recalls: "Deeparani required intubation in the post-operative period to assist her breathing. She was transfused IV immunoglobulins to hasten recovery and augment muscle power. Over the two-weeks' stay in the ICU, she was ventilated with noninvasive ventilation with oro-nasal mask after removal of the endotracheal tube. She gradually improved and regained her own respiration. Her composed nature with self-confidence and faith in almighty sailed her through to self-independent care.

While on ventilator, Deeparani was very depressed. At this point, the Sai Counseling team, led by Gita Umesh, stepped in. Gita Umesh met Deeparani in the ICU and she recollects: "As a first step, actively listening to Deeparani's mother Jayamma helped in understanding and profiling the four dimensions of the young patient. She unburdened her concerns and took great pride in praising her daughter's selfmotivated academic excellence. She had a very supportive husband and was a young mother.

"Jayamma's narrative threw light on Deeparani's faith factor and the source of strength as being goddess Durga. Praying to the God of the patient's choice and helping patients focus on what lends meaning to their life has been part of the



counseling process. It helps patients focus and connect to their inherent strength rather than their vulnerabilities. The picture of her favourite deity was borrowed from the nurses' room as part of therapy. Deeparani was resting immobile on her bed with multiple tubes supporting her frail and listless body.

"When her eyes rested on the picture of goddess Durga, there was a spark of light. It brought about a major shift in her expression and she attempted to raise herself to touch the portrait of the source of her spiritual strength. When the hymn in praise of the goddess was played from the counselor's mobile, the prayer brought about a major shift and her mind was in a state of relaxed alertness, building her resilience.

"She was innately both religious and spiritual, and her ability to focus and connect to her source was effortless. Her belief and faith factor (triggered through the counseling process) resulted in a positive response from her, which helped her regain and restore a state of dynamic equilibrium, replacing despondency with hope."

Soon enough, in true warrior spirit as embodied by Goddess Durga, Deeparani fought back and in a matter of days, she was off the ventilator. Her turnaround was nothing short of a miracle.



In a video sharing her experiences at SSSIHMS, Whitefield, Deeparani expresses her profound sense of gratitude: "I pray to Baba to give me an opportunity to lead a normal life. I truly feel blessed at the Sai Institute, as I have never encountered such a healthy atmosphere and positive vibrations. I consider this a rebirth."

Deeparani with her mother in the hospital lawns after discharge

### Continuous Learning Academic Activities

#### **Publications: Peer-reviewed Journals**

- 01. Thakar S., Sivaraju L., Jacob K.S., Arun A.A., Aryan S., Mohan D., Sai Kiran N.A., Hegde A.S. A points-based algorithm for prognosticating clinical outcome of Chiari malformation Type I with syringomyelia: results from a predictive model analysis of 82 surgically managed adult patients. J. Neurosurg Spine. 2018 Jan;28(1):23-32. doi: 10.3171/2017.5.SPINE17264. Epub 2017 Nov.10. PubMed PMID: 29125433.
- 02. Rao A.S., Thakar S., Sai Kiran N.A., Aryan S., Mohan D., Hegde A.S. Analogous Three-Dimensional Constructive Interference in Steady State Sequences Enhance the Utility of Three-Dimensional Time of Flight Magnetic Resonance Angiography in Delineating Lenticulostriate Arteries in Insular Gliomas: Evidence from a Prospective Clinicoradiologic Analysis of 48 Patients. World Neurosurg. 2018 Jan;109:e426-e433. doi: 10.1016/j.wneu.2017.09.199. Epub 2017 Oct.7. PubMed PMID: 29017985.
- 03. Sivaraju L., Hegde V.S., Kiran N.A., Ghosal N., Hegde A.S. Pituitary apoplexy presenting as a peripheral rim enhancing parasellar mass lesion with dural enhancement along the tentorium. Neuroradiol J. 2017 Dec;30(6):561-567. doi: 10.1177/1971400917690765. Epub 2017 Jun.5. PubMed PMID: 28581357; PubMed Central PMCID: PMC5703132.
- 04. Sivaraju L., Thakar S., Ghosal N., Hegde A.S. Cervical En-Plaque Extradural Meningioma Involving Brachial Plexus. World Neurosurg. 2017 Dec;108:994.e7-994. e10. doi: 10.1016/j.wneu.2017.09.004. Epub 2017 Sep.8. PubMed PMID: 28893699.
- 05. Kumaran S.P., Abdul Aziz Z., Viswamitra S., Narayanam S.K., Ghosal N. Tree-in-bud Appearance in the Brain: Fungal Granuloma on Contrast Magnetic Resonance Imaging. Asian J Neurosurg. 2017 Oct-Dec; 12(4):741-742. doi: 10.4103/ajns.AJNS\_89\_14. PubMed PMID: 29114299; PubMed Central PMCID: PMC5652111.
- 06. Thakar S., Kurudi Siddappa A., Aryan S., Mohan D., Sai Kiran N.A., Hegde A.S. Does the mesodermal derangement in Chiari Type I malformation extend to the cervical spine? Evidence from an analytical morphometric study on cervical paraspinal muscles. J Neurosurg Spine. 2017 Oct;27(4):421-427. doi: 10.3171/2016.12.SPINE16914. Epub 2017 May.12. PubMed PMID: 28498073.
- 07. Aryan S., Thakar S., Jagannatha A.T., Channegowda C., Rao A.S., Hegde A.S. Pneumosinus dilatans of the spheno-ethmoidal complex associated with hypovitaminosis D causing bilateral optic canal stenosis. Childs Nerv Syst. 2017 Jun;33(6):1005-1008. doi: 10.1007/s00381-017-3373-6. Epub 2017 Mar.13. PubMed PMID: 28289839.

- 08. Sivaraju L., Anantha Sai Kiran N., Rao A.S., Ghosal N., Hegde A.S. Giant multi-compartmental suprasellar Rathke's cleft cyst with restriction on diffusion weighted images. Neuroradiol J. 2017 Jun;30(3):290-294. doi: 10.1177/1971400916682512. Epub 2017 Jan.6. PubMed PMID: 28059626; PubMed Central PMCID: PMC5480790.
- 09. Goel N., Aryan S., Sivaraju L., Ghosal N. Sclerosing epithelioid fibrosarcoma with brain metastases. Clin Neuropathol. 2017 Mar/Apr;36 (2017)(2):86-89. doi:10.5414/NP300975. PubMed PMID: 27737533.
- Sivaraju L., Aryan S., Ghosal N., Hegde A.S. Cerebellar liponeurocytoma presenting as multifocal bilateral cerebellar hemispheric mass lesions. Neurol India. 2017 Mar-Apr;65(2):422-424. doi: 10.4103/neuroindia. NI\_1379\_15. PubMed PMID: 28290424.
- Sivaraju L., Aryan S., Ghosal N., Hegde A.S. Clinicopathological and imaging features of lipoastrocytoma: Case report. Neuroradiol J. 2017 Jan 1:1971400917710667. doi: 10.1177/1971400917710667. [Epub ahead of print] PubMed PMID: 28644072.
- 12. Bhavnani S., Sola S., Venkateshvaran A., Adams D., Dash P.K., Sengupta P. A Randomized Trial of Smartphone Connected Mobile Health Devices in Modern Rheumatic and Structural Heart Disease Clinics. JACC Imaging 2017; in press.
- 13. Sairam S.G., Sola S., Barooah A., Javvaji S.K., Sanjeevi C., Venkateshan V., Janardhana C. The role of Lp-PLA2 and biochemistry parameters in risk stratification and as potential biomarkers for CAD in Asian South-Indians. Cardiovasc Diagnosis and Therapy 2017; in press.
- 14. The burden of urban living: Lp-PLA2 and risk markers of CAD in a South Indian population. Sairam S.G., Barooah B., Javvaji S.K., Jaipuria J., Venkateshan V., Janardhana C., Sanjeevi C.B., Sola S. Heart Asia 2017; in press.
- Dillikar M.V., Venkateshvaran A., Barooah B., Varyani R., Kini P., Dash P.K., Sola S. 3D vs 2D strain for assessment of myocardial function: A case series. J Indian Acad Echocardiogr Cardiovasc Imaging 2017;1:18-23.
- CHORDOID GLIOMA Bhavana N., DNB; Sunitha P. Kumaran, DNB; Sanjaya Viswamitra, MD; Nandita Ghosal, MD. American Journal of Neuroradiology (AJNR) Online Case of the week series; Jul 27, 2017.
- EPIDURAL ROSAI-DORFMAN DISEASE (RDD) -Bhavana N., DNB; Sunitha P. Kumaran, DNB; Sanjaya Viswamitra, MD; Neha Goel, MD. American Journal of Neuroradiology (AJNR) Online Case of the week series; Aug 3, 2017.

- 18. A Case of absent SVC in TOF Tejas, Anitha, Hiremath, Krishna Manohar, Manuscript no: ACA-164-17, Annals of Cardiac Anaesthesia, 2018 (Accepted for print).
- 19. Azygous vein to the rescue of Warden anastomosis in cases of high PAPVC - Siddharth, Yatindra, Krishna Manohar, Anuradha, Hiremath, WJPCHS-17-0233 (Under review).

#### **Publications: Book chapters**

- Sola S., Varadarajan S. "Echocardiography in Diabetes" in Cardio Diabetes Update: A Textbook of Cardiology. H.K. Chopra, editor. Cardiology Society of India, 2017.
- 02. Sola S., Viswamitra S., Kohle P. "Adenosine Stress Perfusion CTCA" in CSI Update 2017, Saratchandra Koduganti, editor. Cardiology Society of India, 2017.
- 03. Vishwamitra S., N. Sankar, Sola S. "CT for coronary artery bypass graft assessment" in CSI Update 2017, Saratchandra Koduganti, editor. Cardiology Society of India, 2017.
- 04. Dillikar M., Sola S. "Echocardiography in the Emergency Room" in *Textbook of Echocardiography*. Amuthan V., editor. Jaypee Brothers Medical Publishers Pvt. Ltd. 2017.
- 05. Venkateshvaran A., Sola S. "Physics of ultrasound" in *Textbook of Echocardiography*. Amuthan V., editor. Jaypee Brothers Medical Publishers Pvt. Ltd. 2017.

#### Poster Presentations: International

- 01. Imaging spectrum of basal ganglia pathologies: Use of advanced MRI imaging techniques in the diagnosis -Bhavana N, Sunitha P Kumaran, Sanjaya Viswamitra at ECR (European Congress of Radiology) conference, Vienna, Austria 1-5th March 2017
- 02. Imaging of intracranial pathologies with fluid levels: A radiological approach to the diagnosis - Bhavana N, Sunitha P Kumaran, Sanjaya Viswamitra at ECR (European Congress of Radiology) conference, Vienna, Austria 1-5th March 2017
- 03. Utility of Native T1 Mapping in Identifying Lipomatous Metaplasia in Ischemic and Non-Ischemic Cardiomyopathies - Krishna Kapoor; Sankar Neelakantan; Bhavana Nagabhushana Reddy; Sanjaya Vishwamitra; Srikanth Sola (Received first place as the best poster award) at North American Society of Cardiac Imaging (NASCI) Annual Course, San Antonio, Texas 7-10th Oct 2017
- 04. Dive and Discover: Neurodegenerative Disorders Revisited – Dr. Aishwarya. K Mahendrakar RSNA 2017, 103rd Annual Assembly and Scientific Meeting held at Chicago, USA. 26th Nov–1st Dec 2017
- 05. Dual Energy Adenosine Stress Perfusion CCTA: What You Need to Know- Dr. Pankaj M Kohle RSNA 2017, 103rd Annual Assembly and Scientific Meeting held at Chicago, USA. 26th Nov–1st Dec 2017

- 06. Multimodality Imaging Approach to Craniovertebral Junction (CVJ) Anomalies: A Road Map for Surgeons-Dr. Anju T Das RSNA 2017, 103rd Annual Assembly and Scientific Meeting held at Chicago, USA. 26th Nov–1st Dec 2017
- 07. The ABCs of Computed Tomographic Imaging in Post Coronary Artery Bypass Graft (CABG) Surgery Patients- Dr. Anju T Das RSNA 2017, 103rd Annual Assembly and Scientific Meeting held at Chicago, USA. 26th Nov–1st Dec 2017
- 08. Cerebral Hemiatrophy Syndromes presenting as childhood intractable seizures- Dr. Sankar Neelakantan RSNA 2017, 103rd Annual Assembly and Scientific Meeting held at Chicago, USA. 26th Nov–1st Dec. 2017.
- 09. Restricted Diffusion in CNS Neoplasms: Assumptions and Application- Dr. Sunitha P Kumaran RSNA 2017, 103rd Annual Assembly and Scientific Meeting held at Chicago, USA. 26th Nov–1st Dec. 2017
- Rare Pathologies in the Spine: Unusual Locations, Unusual Manifestations Causing Difficulties and Diagnostic Challenges. - Dr. Sunitha P Kumaran RSNA 2017, 103rd Annual Assembly and Scientific Meeting held at Chicago, USA. 26th Nov–1st Dec 2017
- Myocardial T1 Mapping: Imaging and Pitfalls- Dr. Bhavana Nagabhushana Reddy RSNA 2017, 103rd Annual Assembly and Scientific Meeting held at Chicago, USA. 26th Nov–1st Dec 2017
- Cortical Based Neoplasms and Tumor Mimics: Think Outside the Box- Dr. Bhavana Nagabhushana Reddy RSNA 2017, 103rd Annual Assembly and Scientific Meeting held at Chicago, USA. 26th Nov–1st Dec 2017
- MR Imaging of Chiasmatic Pathologies: To cross over from Common to Uncommon- Dr. Bhavana Nagabhushana Reddy RSNA 2017, 103rd Annual Assembly and Scientific Meeting held at Chicago, USA. 26th Nov–1st Dec 2017
- 14. The Road Less Travelled: MR Imaging of Rare Neoplasms of Cerebellum- Dr. Bhavana Nagabhushana Reddy RSNA 2017, 103rd Annual Assembly and Scientific Meeting held at Chicago, USA. 26th Nov–1st Dec 2017

#### Poster Presentations: National

- 01. Case report of a rare successful outcome of amniotic fluid embolism- by Dr Neekita, Dr Jyothi Shilawant , Dr Akkamahadevi C Hiremath, Dr Jaya Bhat: Annual conference of Bangalore Society of Obstetrics and Gynaecology (BSOG), GNANAVARSHA 2017 at Bangalore. 16-17th Dec 2017
- 02. A rare case of episiotomy scar endometriosis Poster presentation by Dr.Jyothi Shilawant, Dr Neekita Pradhan, Dr Akkamahadevi C Hiremath, Dr Jaya Bhat: Annual conference of Bangalore Society of Obstetrics and Gynaecology (BSOG), GNANAVARSHA 2017 at Bangalore. 16-17th Dec 2017

- 03. CPR in parturient and new born simultaneously by Dr Arya James at Obstetric Anaesthesiologists Conference at Bangalore.
- 04. Quality measurement for Total Protein and albumin reagents prepared in-house by Lipsa Sahoo, Sai Kiran J at 7th Medical Laboratory Technologists CME at Tata Memorial Hospital, Mumbai. 24-25th Nov. 17.
- 05. Antibiotic sensitivity pattern of gram negative bacteria in ICU and non-ICU patients by Charutha P, Vishnupriya S, Priscilla S at 7th Laboratory Technologists CME at 7th Medical Laboratory Technologists CME at Tata Memorial Hospital, Mumbai. 24-25th Nov. 17.

#### **Conference Presentations: International**

- Utility of Native Myocardial T1 Mapping as a Diagnostic Tool for Ischemic and Non-Ischemic Cardiomyopathy - K.S. Kapoor; S. Viswamitra;
  S. Neelakantan; B. Nagabhushana Reddy; A. Kini;
  S. Kumaran; et al at RSNA 2017, 103rd Annual Assembly and Scientific Meeting held at Chicago, USA 26th Nov. – 1st Dec. 2017.
- 02. ARVD with Biventricular involvement Cardiac MR series - Dr. Sankar Neelakantan at 73rd Annual delegate meeting of Korean Society of Radiology at Seoul, South Korea 25-28th Oct. 2017.
- 03. Posterior third ventricular lesions Imaging spectrum - Dr. Sankar Neelakantan at 73rd Annual delegate meeting of Korean Society of Radiology at Seoul, South Korea 25-28th Oct. 2017.

#### **Conference Presentations: National**

- 01. Comparison of single dose prophylactic antibiotic Ampicillin and Gentamycin vs multiple dose regimen in obstetric and gynaecological surgeries- Jyothi Shilawant, Neekita Pradhan, Akkamahadevi C. Hiremath, Jaya Bhat: Annual conference of Bangalore Society of Obstetrics and Gynaecology (BSOG), GNANAVARSHA 2017 at Bangalore, 16-17th Dec. 2017.
- 02. ARVD in the Indian population prevalence of biventricular involvement - Sankar Neelakantan -(Received fourth place best overall paper award) at Indian Association of Cardiac Imaging (IACI) Midterm CME at Chennai, 6-7th May 2017.
- 03. Lipomatous Metaplasia of the Myocardium: Imaging Characteristics using T1 mapping in Ischemic and Dilated Cardiomyopathies - Krishna Kapoor; Sankar Neelakantan; Bhavana Reddy; P. Sunitha Kumaran; Sanjaya Viswamitra; Srikanth Sola at Indian Association of Cardiac Imaging (IACI) Midterm CME at Chennai, 6-7th May 2017.
- 04. MRI artifacts and remedies Prashanth Reddy at Indian Association of Cardiac Imaging (IACI - 2017) at Mumbai, 14-16th Sep 2017.

- 05. Cardiac MRI with multisegmented, multislice, multiphase acquisition. Interplay and optimization of TR effective, TR protocol, and TR temporal resolution with image quality and scan duration- Prashanth Reddy at Indian Association of Cardiac Imaging (IACI - 2017) at Mumbai, 14-16th Sep 2017.
- 06. TAVR pre-operative planning CT Prashanth Reddy (received 2nd place best oral presentation award) at Indian Association of Cardiac Imaging (IACI - 2017) at Mumbai, 14-16th Sep 2017.
- 07. Coronary anomalies Bharath Das at Indian Association of Cardiac Imaging (IACI - 2017) at Mumbai, 14-16th Sep 2017.
- 08. Symposia on Anaesthesia workstation Kolli S. Chalam at Andhra Medical College Visakhapatnam March 2017.
- 09. CVP video presentation by Kolli S. Chalam at KISACON 2017, VIMS, Medical College, Bellary, August 2017.
- Lecture on tropical Fevers with MODF by Kolli S. Chalam at IDCCM refresher course conducted by Indian Society of Critical care Medicine, Bangalore Sept. 2017.
- 11. Lecture on Ambulatory Anesthesia by Kolli S. Chalam at APISACON 2017, Rangaraya Medical College, Kakinada, AP.
- A lecture on Sepsis by Kolli S. Chalam at BICS, Bangalore intensive care society, Bangalore in Nov. 2017.
- Rupture of sinus of valsalva a 15-year single institutional retrospective review by Anitha Diwakar at IACTA 2017, Pune Feb.
- 14. Review of 25 cases of doubly committed VSD-Intraoperative Echocardiographic diagnosis and implications by Anitha Diwakar at IACTA 2017, Pune Feb.
- 15. Large PDA feeding the descending aorta leading to miss the diagnosis of coarctation by transoesophageal echocardiography in a rare case of anatomically corrected malposition of great arteries by Anitha Diwakar at IACTA 2017, Pune FEB.
- 16. Comparision of outcomes of two techniques in Tetrology of Fallot with Doubly committed ventricular septal defect by Anitha Diwakar at IACTA 2017, Pune FEB.
- 17. Acute recurrent left pulmonary artery thrombosis following intracardiac repair of Tetralogy of Fallot by Anitha Diwakar at IACTA 2017, Pune FEB.
- 18. A double trans atrial trans pulmonary approach helps to preserve pulmonary valve better in TOF - Sudheer at IACTSCON 2017 - Bangalore.

- 19. The role of preoperative cardiac catheterisation in predicting outcomes of surgery for shunt associated PAHPooja at IACTSCON 2017 Bangalore.
- 20. A case report of unique presentation of long segment coarctation and arch hypoplasia in adult repaired with dual approach Anagha at IACTSCON 2017 Bangalore.
- 21. Airway management in an operated case of TAPVC with preoperatively undiagnosed case of tracheal bronchus Tejas at IACTSCON 2017 Bangalore.
- 22. A case report of unique presentation of long segment coarctation and arch hypoplasia in adult repaired with dual approach Anagha at CSI 2017 Bangalore.
- 23. CAD in young Choice of revascularisation PCI vs CABG (won the 1st prize) by Siddharth Amboli at IACTS Midterm CME – Pune.
- 24. Outcomes of aortic valve repair in VSD with AR -Siddharth Amboli at IACTS Midterm CME – Pune.
- 25. Academic quiz conducted by C.S. Hiremath and Yatindra Ashtaputre at IACTS Midterm CME Pune.
- Unique case of TOF with Bifid PDA giving rise to branch pulmonary arteries - Siddharth Amboli at PCSI 2017 – Mumbai.
- 27. Anomalous systemic and pulmonary venous drainage with coarctation of aorta - Unique presentation single case report - Siddharth Amboli at PCSI 2017 - Mumbai.
- 28. Anomalous left hepatic vein draining into IVC a rare presentation Siddharth Amboli at PCSI 2017 Mumbai.
- 29. Azygous vein inclusion technique for Warden's procedure in cases of High PAPVC Siddharth Amboli at PCSI 2017 Mumbai.
- 30. A unique case of successful surgical management of idiopathic LV aneurysm with refractory ventricular tachycardia C.S. Hiremath at PCSI 2017 Mumbai.
- 31. ACL Reconstruction with autologous quadriceps graft, Dr. M.K. Kiran, Gold Medal award session, Kasturba Medical College, Manipal.
- 32. Functional and Radiological outcome after Total Hip Replacement, Dr. M.K. Kiran, Karnataka Institute of Medical Sciences, Hubli.

# Conferences and Workshops conducted at SSSIHMS-WFD

- 01. The Department of Anaesthesiology hosted the 2nd Indo US Critical Care Medicine Update, in association with Indian Society of Critical Care Medicine, Bengaluru branch and international faculty from Baylor college of Medicine, Texas, USA on January 7-8th Jan. 2017 Eminent International faculty from USA including Dr. Kalpalatha Guntupalli, Professor of Pulmonology from Baylor College of Medicine, Texas and Dr. Mohan Kilaru, Trauma surgeon from St. George Medical School, New York were part of the conference.
- 02. The Department of Anaesthesiology organized Critical Care Nursing program on 7th Jan. 2017 to update the knowledge and skills of nursing staff. The program was attended by 74 nurses. The international faculty and volunteers also conducted a health screening camp for staff and relatives of SSSIHMS and examined over 100 patients on 8th Jan. 2017. Dr. Shridevi Devaraj, Medical Director and Professor of Pathology and Immunology, Baylor College of Medicine reviewed the blood investigations of all the patients.
- 03. The Department of Anaesthesiology organized CARDIAC ANESTHESIA UPDATE, under the auspices of IACTA-Bangalore on 14-15th Oct. 2017.
- 04. The Department of Radiology organized SACRED-18 CME on "MSK MRI Imaging: Case-based Structured Reporting" on 29th Apr. 2017.
- 05. The Department of CardioThoracic and Vascular Surgery organized SCORE 2017, the Annual National level conference conducted for CTVS DNB/MCh exam going students, 4-5th Mar. 2017.
- 06. The Department of Cardiology organized Clinical Cardiology CME titled 'Sri Sathya Sai Preparatory Course for Exam going DM/ DNB students (SPEED 2017)' 11-12th Mar. 2017.
- 07. The departments of Obstetrics and Gynaecology, Paediatrics and Anaesthesiology conducted a Workshop named 'Basic New born care and Resuscitation Programme - First Golden Minute' - 30th Aug. 2017.

# Training programs conducted at SSSIHMS-Whitefield

- 01. Department of Anesthesia conducted the Basic Life Support (BLS) and Advanced Cardiovascular Life Support (ACLS) training for various cadres of staff of SSSIHMS and office bearers of Sri Sathya Sai Seva Organisation multiple times during the year. A total of 367 staff were trained in BLS and 94 in ACLS.
- 02. A training program on first aid & Cardiopulmonary resuscitation (CPR) was conducted by Dr. Pankaj S. Punetha, Consultant Anesthetist for the first year students of Sri Sathya Sai Institute of Higher Learning, Brindavan campus on 7th Mar 2017.

- 03. Training on Code Blue protocol was conducted by Dr. Kolli S. Chalam & Dr. Pankaj Punetha, Consultant Anesthetists, for all the clinical staff of the hospital.
- 04. Basic life support orientation course & training on Code Blue protocol was given by Sri Mahadevan & Sri Shravan Kumar for the paramedical staff and sevadals of the hospital.
- 05. A training program of first aid & Cardiopulmonary resuscitation (CPR) for NSS students of Maharani College on 16-17th Sep. 2017 as part of disaster management program conducted at Mysore by Sri Shravan Kumar.
- 06. Trainers training program for Disaster Management Team at Brindavan by Dr. Kolli S. Chalam 10-11th Jun. 2017.
- 07. A basic surgery skills course was conducted on 29 July 2017 by Johnson & Johnson Pvt. Ltd., for 30 resident surgeons on the modules of instrumentation, skin suturing, knotting, abdominal wall closure, bowel anastomosis, vascular anastomosis, sternal closure.

#### **Reviewer, Board and Faculty Nominations**

- 01. Dr. Sumit Thakar has reviewed articles for the following journals in the year 2017: The Spine Journal, Medical Science Monitor, British Journal of Neurosurgery, Radiology Case Reports, Neuroscience Journal, Journal of Otology & Rhinology, Journal of Neurosciences in Rural Practice.
- 02. Dr. Sumit Thakar has been selected as a Rater for the McMaster Online Rating of Evidence (MORE) System offered through the Health Information Research Unit of McMaster University, Canada. (Rating includes perusing and appraising higher quality studies and systematic reviews published in health care literature or by national evidence review organizations. Raters assess peer-reviewed clinical research articles of interest within their own clinical discipline).
- 03. Dr. Srikanth Sola:
  - Editorial Board: BioMed Research International; Journal of Indian Academy of Echocardiography and Cardiovascular Imaging
  - Associate Editor: Cardiovascular Diagnosis and Therapy; Journal of Cardiology and Therapy
  - Reviewer for: Indian Heart Journal; Indian Heart Journal Case Reports; European Journal of Heart Failure.
  - Executive Committee: Indian Academy of Echocardiography; Indian Association of Cardiovascular Imaging

- 04. Dr. P.K. Dash:
  - Speaker and Chairperson CSI Annual Conference, Odisha Chapter Jul. 2017
  - National Faculty Speaker and Chairperson at Indian College Of Cardiology Annual Conference, Bhubaneshwar, Odisha Sep. 2017
  - Chairperson CSI Bangalore Chapter Jun. 2017
- 05. Dr. Prayag Ramdas Kini:
  - Faculty at1st Global Cardio Diabetes Conclave Chennai, 30th Sep – 1st Oct. 2017
  - Advanced Cardiovascular Therapeutics Madras Medical Mission, Chennai – Oct. 2017
  - Echo Beats conference at Bangalore Jul. 2017
  - Echo India 2017 at Jaipur, India 5-8th Oct. 2017
  - Indian Acadamy of Echocardiology Karnataka Annual Conference
  - Chairperson & Speaker: Aorta Cameral Fistulae at Madras Medical Mission, Chennai – Oct. 2017

#### **Research Grants**

### 01. New echocardiographic techniques to detect coronary artery disease

Dobutamine stress echocardiography (DSE) is a wellestablished non-invasive diagnostic test to identify patients with chest pain and significant coronary artery disease. Unfortunately, interpretation of DSE data is subjective and requires a high amount of expertise. This study found that a novel but simple echocardiographic technique called "layered strain" significantly improves the diagnostic accuracy of DSE compared to standard DSE methods alone.

#### Principal investigator: **Dr. Srikanth Sola** Sponsor: GE Healthcare

*Outcomes:* One manuscript submitted for publication in a peer reviewed journal; Second place, Young Investigator Award competition at the World Congress of Cardiology and Echocardiography 2017; Expected clinical product for next generation of echo machines.

### 02. Layered strain echocardiography for assessment of myocardial viability

Patients with weakness of the heart muscle (heart failure) due to coronary artery disease often require tests to determine viability of the heart muscle (i.e. muscle that is living, or too far damaged) before surgery. Unfortunately, the best techniques to assess viability (cardiac MRI or PET) are expensive and are only available at highly specialized centers such as SSSIHMS. In this study we found that layered strain echo, when added to dobutamine stress echo (DSE), significantly improves the utility of DSE for viability, compared with the reference standard cardiac MRI. The clinical implication is that layered strain DSE may be an inexpensive method to assess viability in hospitals where more costly cardiac MRI is not available.

#### Principal investigator: **Dr. Srikanth Sola** Sponsor: GE Healthcare

*Outcomes:* One manuscript submitted for publication in a peer reviewed journal; Expected clinical product for next generation of echo machines.

### 03. Novel techniques to identify cardiomyopathy by cardiac MRI

Cardiomyopathies (diseases causing weakness of the heart) have many different causes. Determining the cause of cardiomyopathy is important for planning treatment. Cardiac MRI is commonly used to help diagnose the cause of several types of cardiomyopathies. We utilized a novel MRI technique called "T1 mapping", used to identify microscopic levels of fibrosis within the heart muscle, to improve the diagnostic accuracy of traditional MRI techniques in patients with cardiomyopathies.

Principal investigators: Dr. Srikanth Sola, Dr. Sanjaya Viswamitra. Sponsor: Siemens Medical. Outcomes: Best research presentation, North American Society of Cardiovascular Imaging, Austin USA 2017; Oral presentation, Radiology Society of North America, Chicago USA 2017; One manuscript under preparation.

### 04. Development of ultrasensitive low-cost assays for biomarkers of coronary artery disease

Physicians and scientists at SSSIHMS and SSSIHL used state of the art techniques to create highly accurate assays for commonly used blood tests used to detect myocardial infarction (heart attack) at a fraction of the cost of commercially available kits.

Principal investigator: Dr. Srikanth Sola

Study sponsor: 4S Foundation, USA & Dept. of Biotechnology, India

*Collaborating institutions:* Dept. of Chemistry, Sri Sathya Sai Institute of Higher Learning

*Outcomes:* Two manuscripts in peer reviewed journals; one patent.

#### 05. Sri Sathya Sai Pure Skies Program

Air pollution causes 6.5 million deaths worldwide and economic losses of 3-5% of the world GDP each year. Researchers at SSSIHMS and other institutions have developed a novel radiofrequency transmitter which reduces levels of certain pollutants in the air by either changing the structure of certain pollutants, or causing them to deposit on the ground from the air (dry deposition). The result is an average 33% reduction in the level of common air pollutants (carbon dioxide, carbon monoxide, nitrogen dioxide related compounds, and particulate matter (PM10 and PM2.5), in a diameter of 10-20 km from a single device. This work has important implications for public health, air quality, and climate change and is in its 9th year of development.

#### Principal Investigator: Dr. Srikanth Sola

Sponsors: Ministry of Environment, Forests, and Climate Change, India; Phyllis Krystal Foundation; Masdel Corporation.

#### 06. Screening for perinatal depression using POC devices

A 3-year project titled "ANIRVID: Screening for perinatal depression using point-of-care device, metabolomics and conventional techniques" was initiated in 2017 to objectively assess/ identify depression in pregnant and post partum ladies using a standard EPDS questionnaire and hormonal markers. The project is a multi-center study.

The project also aims to manufacture a point-of-care device that could detect these stress hormones at a highsensitivity and low-cost. In the second phase of this project, it is proposed to initiate a non-conventional therapy (like Gayatri mantra chanting/ Sai Vibronics / Yoga/ Bars therapy and so on) for subjects identified as being 'depressed' and to measure the outcomes of such interventions.

#### Principal investigator: Dr. R. Sai Sathish

Study sponsor: TATA Trust. Collaborating institutions: Dep. of Chemistry, SSSIHL, Laboratory, SSSIHMS; Obstetrics & Gynaecology, SSSGH-Whitefield and Obstetrics & Gynaecology, SSSGH-Prasanthi Nilayam.

### 07. Comprehensive Molecular genetic panels for glioblastoma personalized therapy

Glioblastoma multiforme, commonly known as GBM, is one of the most aggressive cancer in the brain. This represents 15% of brain tumors. Typically, treatment involves surgery, after which chemotherapy and radiation therapy are used. Despite maximum treatment, the cancer usually recurs. The most common length of survival following diagnosis is 12 to 15 months, with fewer than 3% to 5% of people surviving longer than five years. Without treatment, survival is typically three months. The department of Neurosurgery in collaboration with IISc (Bengaluru), NIMHANS & AIIMS (New Delhi) is conducting a multi-centric study to develop comprehensive molecular genetic panels for glioblastoma personalized therapy. As part of the study SSSIHMS, will be providing clinical data and tumor samples to develop and execute assays to determine the prognostic and therapeutic status of glioblastoma (GBM) patients. The study aims to determine patients suitable for available conventional/ standard care of therapy which includes surgery, radiotherapy and temozolomide chemotherapy and also to find high risk patients for whom more aggressive/alternative therapies could be attempted.

Co-Investigators: **Dr. A.S. Hegde, Dr. Saritha Aryan** Colloboration: IISc (Bengaluru), NIMHANS, AIIMS (New Delhi) Sponsor: Department of Biotechnology, Ministry of Science & Technology, Govt. of India, New Delhi

### Leading Change Training in Innovation



Naveen Lakkur, Innovation Coach, Institute of Inspiring Innovation has developed an Innovation Competency Development Program titled 'Leading Change' for the movement of introducing innovation at SSSIHMS-Whitefield and has been conducting sessions for Managers and senior

doctors on innovation and related themes.

"Change is constant, catching up with change is stressful, that's for the ordinary. With the grace and blessings of Sri Sathya Sai Baba, extraordinary participation of the leadership team and the medical practitioners in the Innovation Competency Development Program 'Leading Change' are set to bring positive change in the Healthcare Industry."

Following are the programs led by Naveen at the hospital. A Little Extra expanded one's perspective and explore the potential to contribute.

**Out of Box Thinking** introduced the participants to the four styles of thinking - Experimenting, Exploring, Modifying and Visioning, and helped identify their own style of thinking and then go "out of the box" to get a fresh perspective.

As part of the **Inspiration & Innovation as Inseparable Twins,** the participants underwent a Human Values selfassessment and identified their own unique human values orientation and received the tools to use it to find the inspiration to innovate.

**Ideation Bootcamp** introduced the team to the basics of innovation and the FOUND framework.

As part of the sessions, Naveen has invited entrepreneurs and innovators to present their innovation journey to the hospital team, which motivated the team in their own innovation journeys.

With the inputs from him, a few innovation challenges, as below, have been taken up:

- Prioritized patient consultation
- Providing great customer experience
- Workforce innovation
- Value from Waste

The Director Dr. Sundaresh explains the motive behind these sessions: "Innovation is the need of the hour, especially in an organisation like ours, where we strive to go the extra mile and treat more number of patients with the available resources. We are grateful to Naveen for the time he has invested in developing the program and volunteering his time in coaching our staff in such a valuable competency."





### Infrastructure New Equipment

#### Digital Displays with content management software:

During this year, the hospital acquired through donation from the Sri Sathya Sai Karnataka Trust a digital signage display system. A total of twenty five 43-inch and one 85-inch displays are installed primarily in various patient waiting areas like registration block, OPDs, in-patient wards etc. primarily to keep the patients and their attendants engaged during the process of receiving treatment.

The content being streamed through the displays is managed with the help of a dynamic, content management software, through which videos could be programmed to be played as per a set schedule from a central location. The displays are divided into zones and videos can be selectively played in the chosen zones.

These displays are currently being used primarily to stream Swami's videos from across the years and are interspersed with patient information videos on hand hygiene, healthy living, blood donation etc. These displays can also be used to air any live telecast of programs streamed from Puttaparthi or any other location, through the Internet.

#### Centralized UPS Systems:

The 16-year old 2 nos. 320 KVA APC make centralized UPS systems have been

UPS systems have been replaced with 2 nos. Emerson-make 120 KVA UPS systems. Due to the ageing of the older UPS and underutilization of its capacity, the efficiency of the UPS had significantly reduced, increasing the power



consumption. The new, energy-

efficient, UPS systems have been sized closer to the current load and features an IGBT rectifier/inverter with inbuilt isolation transformer for providing the power of high quality and reliability.

#### Steam and ETO Sterilizers:



The Institute has procured a steam sterilizer and an ETO sterilizer from Sun Sterifaab, Ahmedabad, to replace in part the 16-year old steam and ETO sterilizers in use, which are reaching / have reached their serviceable life. This equipment is energy-efficient, utilizes less water, and their consumables are less expensive, in comparison with the previous generation of equipment. Considering the charitable nature of services being offered by the Institute, the company offered the equipment with a life-time warranty.





#### Pressure Injector for Cardiac Cathlab:



The Institute has procured an Angiomat Illumena contrast delivery system for use in the Cathlab, to replace one of the older units. The injector comes with a heater jacket to deliver the contrast at the body temperature, to aid patient comfort and safety. The contrast delivery system also has an interface with the Cathlab which ensures contrast delivery happens when the x-rays are generated. This synchrony

reduces radiation dose to the patient, operator and helps provide quality images. It has many protocols to automate contrast delivery and intelligently adjust its delivery pressure.

#### ABG analyzers:

The Institute has procured through a reagent-rental contract 2 nos. Siemens make of ABG analyzers for use in the cardiac intensive-care units, to replace the older Roche-make ABG analyzers. These are critical point-of-care equipment, which the clinicians rely on heavily for managing the patients both peri- and post-operatively.

#### Aesculap-make MINOP Invent:



SSSIHMS has acquired a new Aesculapmake MINOP Invent neuroendoscopic system with

which intra-ventricular pathologies in the brain can be treated. We are one of the two centres in the country to have procured the Invent sheath, which helps remove more complex tumours within the brain in a minimally invasive manner. The system has been used in cases like congenital hydrocephalus and intraventricular tumours.

### Awards & Recognitions



Dr. Pankaj S. Punetha was adjudged the "Best student" of Diploma in Hospital Management conducted by National Institute of Health & Family Welfare.



On the occasion of **World Anaesthesia Day**, **Dr. Kolli S. Chalam** was felicitated for his academic achievements by the **Indian Society of Anesthesiologists (ISA)** on 16th Oct, 2017.

**Dr. Srikanth Sola** won the first place in **best research abstract**, North American Society of Cardiovascular Imaging, San Antonio, TX USA in 2017.

He also won the second place and was the finalist (in two separate presentations), and he also won the **Young Investigator Award** during the scientific sessions of Indian Academy of Echocardiography held at Jaipur, India in Oct. 2017.





During the **All India Medical Conference** held on 19-20 Aug, 2017, **Dr. D.C. Sundaresh**, Director, SSSIHMS-Whitefield and **Dr. P.K. Dash**, HoD, Cardiology Dept were honoured with the 'Sri Sathya Sai Dhanvantari Seva Award' for their outstanding contributions in the medical mission of Bhagawan Sri Sathya Sai Baba.



Smt. Sai Meera was honored with an Achievement Award at the 8th All India Sri Sathya Sai Bal Vikas Alumni Meet held at Prasanthi Nilayam on 6-Jan-2018.



Dr. Prayaag Kini won an award for the 3rd Best Case Presentation during the World Congress of Echo, held in Jaipur in Oct, 2017.



Dr. Aditya Atal, Resident, Dept. of Neurosurgery won the NSI Award for Best Paper in Neurosurgery at the 66th Annual Conference of the Neurological Society of India held at Nagpur in Nov-Dec, 2017.

Dr. Arun S. Rao, Jr.

Consultant, Dept. of Neurosurgery won the **NSI Award** for Best Paper in Cost Effective Management at the 66th Annual Conference of the Neurological Society of India held at Nagpur in Nov-Dec, 2017.

Dr. Nalini Kiran won second prize in poster presentation at KSC-ASICON, Belgaum, Feb. 2017. Topic: Rare case of acute appendicitis causing small bowel obstruction.

### Go Green Nurturing Nature



Normally, trees are seen as providing shelter. We decided to turn this statement around and have our institute shelter 115 trees that would have otherwise been lost to development! These beautiful Indian Beech and Indian Tulip trees were about to be chopped down to make way for the Metro Rail project in Whitefield. Some of these trees, standing tall just beyond the walls of SSSIHMS-Whitefield, have brought shade and comfort to our patients, attendants and visitors for over 15 years now.

#### So, how did the trees find a new home?

Staring out of the window from his office, Ram Kanala, a software architect at IBM, noticed some workers were cutting down trees across the road. During lunch, he walked across to them and enquired why the trees could not be transplanted instead of being cut down. His questions went unanswered, and he was told that transplantation was not in their scope.

Ram did not give up easily. He opened up discussions with the officials in BBMP (Bruhat Bangalore Mahanagara Palike) and BMRCL (Bangalore Metro Rail Corporation Limited). Apparently, it was being projected the trees were not transplantable. Ram took the support of some tree experts and contested this decision. After a long-winded struggle, but with the support of Sri H.C. Patil and some other higher-ups in BMRCL, it was agreed that BMRCL would provide the machinery to transplant 115 trees, identified as transplantable. However, Ram Kanala had to arrange the space for the uprooted trees; also, their survival was his responsibility.

Now, Ram's hunt for space began. He approached all top corporates in EPIP Area, with a case for hosting the trees. He was very disillusioned as, all of them refused to host them, citing lack of space as an excuse.

Driving past the expansive stretch of SSSIHMS one evening, he thought he could make one last effort at the hospital. Without much hope in his heart, he addressed a mail to the Director, requesting help in hosting the 115 trees.

SSSIHMS has close to 600 trees of more than 30 species and is a green lung-space in the highly-congested EPIP area. And it was only a few months earlier that there was an internal discussion about planting more trees inside the campus. The Director was prompt in responding to Ram's mail, giving his consent to provide the necessary space to host the 115 trees. Ram was thrilled to receive his prompt and positive response. He considers this nothing short of a miracle. The transplantation work commenced soon after. The work involved in transplanting a tree is mind-boggling and is as intricate a procedure as the surgeries performed inside the hospital. The photos here explain the steps involved after marking the transplantable trees.

Ram's love for trees was such that it went beyond arranging the transplantation. He personally spent over Rs. 45,000 procuring chemicals, sand, red soil and tankers to water the plants at least twice a week. Inspired by him, there are many more volunteers, including some alumni of Sri Sathya Sai Institute of Higher Learning, who have come forward to offer their support for the project.

Ram spent long hours on weekends, supervising the transplantation. At times, he supervises during the work days and then works late into the evening to catch up on his office work. "It was a tough task, but a very fulfilling one," he says. "I have some very cherished memories from this exercise. I recall one evening, we did not have adequate water for the freshly transplanted trees. Along with Nagaraj, the hospital landscaping supervisor, I personally went in search of a tanker. It was almost at 9 30 pm that we located one near the Vydehi hospital. When we explained the urgent need for the water, the tanker owner readily agreed to provide a tanker of water free of cost."

Out of a total of 115 trees, close to 60 trees have already been relocated inside SSSIHMS. The remaining trees would be transplanted within a month. It is heartening to note that on the auspicious eve of Sankranti, the harvest festival, some of the trees have developed fresh, green shoots.

Learning from this episode, now BBMP and BMRCL have started proactively transplanting trees, which are on the Metro rail route.

115 trees will soon stand testament to the spirit of selfless service of Ram Kanala and numerous other volunteers, who took upon themselves to save the trees and question why infrastructure development cannot be in harmony with nurturing our environment. Seeds of change sown in fertile minds can make a big impact.



Stages in the tree transplantation

### Go Green Sai Prerana

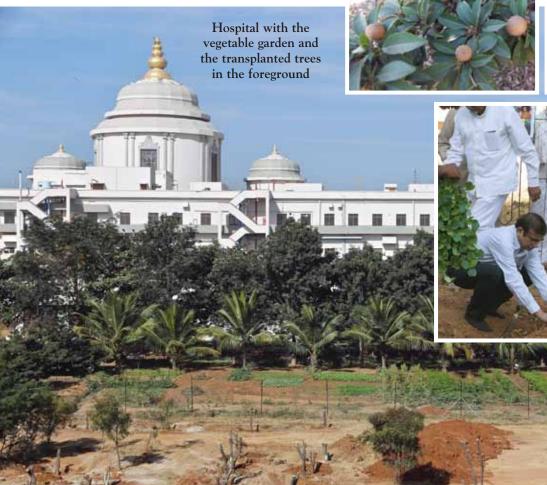


Through encouragement and support of the Director, Dr. D.C. Sundaresh, a vegetable garden "Sai Prerana" has taken root in the residential campus of the hospital. The produce from this garden is utilized in the hospital dietary kitchen, serving a wholesome and nutritious diet to the inpatients.

In a period of five months since the plants took root, almost 1500 kg of vegetables were produced.

Basing on the success of this garden, a Nutrition garden has been started by the SSSIHMS-Whitefield Welfare Society in a larger, open space between the hospital block and the residential campus. The fenced-up area measured less than an acre but in a period of four and half months, the yield of vegetables has been over 2,000 kg. A variety of common, daily-use vegetables are grown including various types of gourds, greens, tomatoes, carrots, brinjals, radish, pumpkins, cabbage, capsicum. The earlier planted sapota trees are now part of this garden and with some tending have begun to yield a good crop of sapotas. The vegetables are used in the common kitchen preparing food for the out-patients and their attendants, and also serves the staff canteen.

With the in-house gardens, there is a substantial drop in the purchase of vegetables from outside and is a positive step in effectively utilizing the available space and becoming self-sufficient in meeting the vegetable requirements of the campus.







### Go Green Energy Saving Measures

#### Solar Plant Update

The 100 kWp "Sri Sathya Sai Aarunya" Solar Power Plant was formally inaugurated on 19-Jan-17 on the occasion of the 16th Anniversary of the Institute. During the 12 months after the inauguration, it has generated over 1,40,000 units of energy. At a commercial rate of Rs.7.5 per kWH, the commercial value of the power generated is over Rs.10.5 lakh. The daily average power generation is approx. 400 units. The plant has run for 4,434 hours till date and this investment has saved over 100 tons of CO2 emissions.

Gaining experience from this investment, the Sri Sathya Sai Central Trust has embarked on setting up a 2.1 MW solar plant in Puttaparthi in the campuses of Sri Sathya Sai Institutes of Higher Learning & Higher Medical Sciences, Sri Sathya Sai General Hospital and Sri Sathya Sai Archives.



#### Energy Saving Measures Continue at SSSIHMS-Whitefield

In keeping with the dictum, "Energy saved is energy generated", the Institute continues to take steps towards conserving energy for the nation. Awareness towards energy conservation continues to be made across the Institute.

A few significant concrete steps taken in this direction are as follows:

- 3000 LED tubelights have been procured and replaced across the hospital and residential campus, causing a minimum of 60-70% power saving on the lighting load.
- The 15 kW motors in two air-handling units of the HVAC system serving the cardiac & neuro intensivecare units have been equipped with suitable variable frequency drives, which are reported to reduce the power consumption by a minimum of 30-40%. Basing on the success of this measure, orders are being placed for four more drives for use in areas where the air-handling units are running continuously.
- In addition, the ducting of the ICUs have been interconnected in such a manner so as to provide adequate comfort air-conditioning while using only one air-handling unit, when there is less load.
- The HVAC system in the four multi-specialty operation theatres has been altered from a 100% fresh air system to a re-circulated air system, which led to significant power saving, with no compromise on the stringent air quality standards required.
- The electrical energy saving from the above measures amounts to over 10,000 units per month. We may have saved energy on this front, but are driven even harder in our goals to promote health among the needy.



### Nursing College News

#### Lamp Lighting Ceremony for the 9th batch of students 28th Feb. 2017 Guest of Honour: Dr. P.K. Dash

Head of Dept., Cardiology, SSSIHMS-Whitefield.

Sri Sathya Sai Education in Human Values Program 30th Jun. 2017

**In-service Training on "Promoting Wellness in Healthcare"** 22nd Jun. 2017 Guest Speakers: Dr. Upendra Acharya. Topic: Application of Wellness Dr. Shubra Punetha. Topic: Body, Mind & Spirit

World Breast Feeding week 1st - 7th Aug. 2017

### Graduation Ceremony for the 4th batch of B.Sc. Nursing & Allied Health Sciences

21st Aug. 2017 Chief Guest: Ms. Manjula V., IAS, Addl. Chief Secretary to Govt., Health & Family Welfare Guest of Honour: Dr. N.S. Nagesh, Director-Institute of Gastroenterology Services & Organ Transplant, Bangalore Medical College.

Sai Samskruti Vaibhavam (The Glory of Sai Culture) 2-day orientation for new batch of Nursing students 1st - 2nd Sep. 2017

World Mental Health Day 10th Oct. 17

World Arthritis Day 12th Oct. 2017

Freshers' Day 23rd Oct. 2017

World Immunization Day 10th Nov. 2017

Gita Jayanthi Program 29th Nov. 2017 Chief Guest: Smt. Pushpalatha Pothugunta, Gita Orator

Internal Sports & Cultural Meet 23rd Oct. 2017 to 2nd Nov. 2017

**Student Nursing Association (SNA) Carnival** 2nd Dec. 2017 Theme: TALENT ATLANTIC

State Level Conference on "Complementary Therapies: An Approach to Holistic Healing"15th Dec. 2017Chief Guest: Dr. R.C. Chetan, Director (Finance), BESCOM

**Sports & Cultural Meet - 2018** 11th Jan. 2018













# Sai Students Connecting to Him through His Work

#### Sai Bandhan - A bond of love continues to grow



Sai Bandhan - A Bond of Love was conceived in 2015 as a way to have the students of Sri Sathya Sai Institute of Higher Learning (Brindavan campus) experience the transformation caused in patients' lives through the hospitals set up by Bhagawan.

The program was executed in the summer vacation of the students and involved visiting the homes of patients discharged from the hospital and residing in the students' own home towns or states. 86 students from 14 states of the country participated in the program.

In the words of the students, the program, termed as Sai Bandhan, was a very touching experience for them, where they experienced the gratitude the patients had towards the doctors and staff of the hospital and also showed their reverence for Swami, who founded these temples of healing, which gave a new lease of life for the patients and their families. Seen as a representative of Bhagawan, the students expressed that they were a recipient of the patients' love and affection.

A team of 15 students presented their experiences from this project at the hospital on 27-July-17 for the benefit of all the hospital staff, which was very well received.



#### SSSIHMS Whitefield Hospital Seva Summary

By the Grace of Divine Mother Sri Sathya Sai Baba, The Hospital Seva that commenced in 2015 has grown in manifold to beautiful dimensions and has included many more hands to serve such as office colleagues, team members and devotees from all over Bangalore. All join hands to get over any limitation and complete the tasks assigned to please our Loving Lord.

#### Sai Volunteers involved in below listed activities:

- 1. Shifting/fixing ISRO antenna to get proper coverage.
- 2. Sorted old MRD records and salvaged 6 month cost efficiency to regular activities.
- 3. Cleaning Solar panels to add more efficiency,
- 4. Cleaning AC filters.
- 5 Taking part in hospital restructuring such as painting/ shifting departments, etc helps in improving efficiencies.
- 6. Pharmacy has seen a major change with optimal resourcing and ordering of medicines in a very systematic manner.
- 7. Serving food to patients occasionally.
- 8. Patient interviewing and transcribe the text and audio files for further sharing of Hospital on social platforms.
- 9. CSR teams from few organizations are impressed with the Hospital Seva and join hands to Serve.



No matter what is the nature of service all the needs were met by Swami's Grace. An average of 15 volunteers were available monthly once on 3rd Saturday between 9.30 am to

4.30 pm covering a minimum of 1200 Man Hours of Service.

All through the year whenever there is a requirement for blood donation Swami's Instruments play a pivotal role to ensure needs were met. The year 2017 has been a memorable one with increased participation,



more opportunities to Serve, and above all Volunteers were blessed to visit Swami's room and offer Prayers during hospital Seva each time. Each volunteer post hospital seva goes back with complete satisfaction looking for the next opportunity & very happy to be part of the Divine Mission and continue to serve.

Humbly offer at His Lotus Feet His Instruments Hospital Seva Volunteers

### Outreach Staff & Sevadal activites

### Primary health checkup conducted by SSSIHMS staff

With the blessings of Bhagawan Sri Sathya Sai Baba and coordination and support from the Hosur Sri Sathya Sai Seva Samithi, a team of doctors, nurses and admin staff from SSSIHMS & SSSGH, Whitefield conducted a medical camp on 26-Nov-17 in a school in the remote villages of Tholavubetta and T. Pazhayur of Hosur District. Close to 130 boys and girls were examined and oral hygiene kits, food supplements and clothes were distributed to each and every child. The children were very enthusiastic in learning stotrams and the village community showered the team with their love and gratitude.







#### Sai Rehabilitation Program expands

The Sai Rehabilitation Program (SRP) is a unique outreach program of SSSIHMS, both at Whitefield and Prasanthigram, which aims to connect post-operative Cardiac patients, to a local guardian doctor, whom he or she can consult on a regular basis to monitor their heart condition and drug dosages. The guardian doctors would not charge patients any consultation fees. Where possible, the diagnostic tests are also provided free or at nominal charges. The running of the Sai Rehabilitation Program is taken up by the Sri Sathya Sai Seva Organization of that particular state.

The program started in the year 2004, is currently active in five states of the country viz. Karnataka, Andhra Pradesh, Telangana, Kerala and Tamil Nadu. In 2017, the state of Odisha joined the bandwagon and introduced this program in all the districts of Odisha.

There was also an orientation given to the office bearers of the Sri Sathya Sai Seva Organization of West Bengal and Maharashtra, and it is planned that in 2018, the SRP program would be extended to these two states.

The Institute takes this opportunity to thank the State Presidents and all the office bearers of the Sri Sathya Sai Seva Organizations for their energetic and enthusiastic participation in the SRP program, which immensely benefits the patients in providing them the continued care, postdischarge from SSSIHMS, Whitefield and Prasanthigram.















Glimpses from Balvikas Summer Camp





### SRI SATHYA SAI INSTITUTE OF HIGHER MEDICAL SCIENCES

(A Unit of Sri Sathya Sai Central Trust)

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