

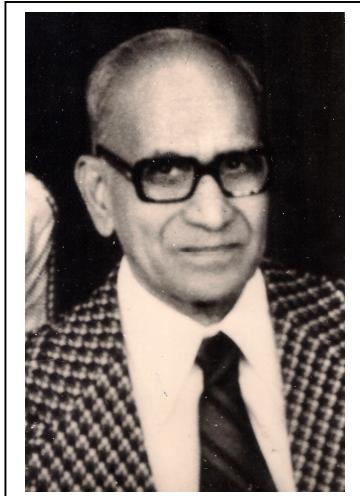
# **REFLECTIONS**

**a peep into the past**

**by**

**Dr. P.G.Raman, M.D, FRCP (Edinburg)**

## **DEDICATED TO MY PARENTS**



(Late) Dr.P.Gopal Ratnam  
(1910-1982)

(Late) Smt.Rajalakshmi  
(1924-2005)

## **PREFACE**

This book has two parts. Part 1 deals with my thoughts and experience with my family members. Part 2 deals with articles on health as well as some general topics. These general topics are like priceless gifts to parents, make believe word of Ads, buy two and get one free and so on. I have written my own thoughts and feelings on these general topics. You may agree or otherwise. I have written what I experienced and happening in the present time. You may share your views on my email ID drpgraman@yahoo.com.

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## **1. AMMA AND APPA (MY PARENTS)**

My mother was born on 27th May 1924. She passed away on 28th May 2005. Completed 81st and entered into 82 years. She got married in 1938 at a very young age. Today it will be an offence to marry a girl at such a young age. My father was about 13 years older. So he was not only her husband, her guide and Guru. She was so dependent on him not like today's liberated women. She took care of home, family and husband. Actually this is a tough job. She only studied upto 6th or 7th class. But she knew Tamil, Oriya, Telugu, Hindi and can understand English. She used to read English Newspaper Hindu. She had more common sense, was worldly wise and used to advise my father during difficult times. She understood human behaviour better than my father.

I was born in 1939 September. My father after completing MBBS from Government Medical College, worked for a year or two as Assistant to Senior Physician and then joined Indian Army in short service. During those 5 years initially my mother lived at her in-laws house then with me at her mother's house. Both the families were at Madras. During last one year or so when my father was posted at Bangalore, Jhalahali, mother joined my father and lived at Bangalore. Then my father left army came to Madras. He was captain in Army.

After army my father joined Madras Ophthalmic Hospital at Egmore as Honorary and was practicing in the evening at Puraswakam. In those years, my sisters Chitra and Geetha were born. So we were three children to our parents. Mother was busy in house hold work and taking care of three children. My father passed DOMS and further P.G. training was completed. In 1950-53 he had difficult time financially. Practice was not very good. So he joined the post of Eye Specialist a Central Government Post and came to Rewa. It was a part C state and in 1957 merged with Madhya Pradesh.

In 1953, my parents left me at my grandmothers house (Nani's House) because I was studying in 9th Class. I had to do 9th, 10th 11th that is SSLC (Secondary School Leaving Certificate). I was studying at Sir MCT Muthaiya Chettiar school. My parents along with sister left Madras by GT Express. I was there with my uncle and still I remember that scene when my mother started weeping. She never left me alone. I was 13 years then. She was quite unhappy and had to leave me. My father was regularly sending money to my grandmother. My mother was very particular that I drink Horlicks.

From 1953, I got separated from parents and visited them once or twice a year. This went on till date. I am now 65 years almost 52 years I lived away from my parents. It is unfortunate I did not care personally my parents during their old age. They never wanted to leave Madras and live with me. There were many reasons for it, like language problems, change of place, away from their relations and fear of maladjustment with daughter-in-law. How lucky are those sons who live with their parents!

During 1955-57, I studied at Loyola College, Madras - last batch of intermediate. After that, I joined at Indore, M.P., M.G.M. Medical College for MBBS as my father wanted me to be near home.

I used to go to Rewa during Diwali vacation and summer vacation. My father will ask my mother to prepare good South Indian dishes for me. He will say that in the medical hostel, I will not be getting good food. My mother prepared South Indian snacks and food for me. She will give Namkin Mixture and sweets when I go back to hostel.

Rewa Hospital was upgraded and medical college was started. My father went to Datia as Civil Surgeon. He was in a better position at Datia. While at Rewa my parents used to go to Chennai once a year during summer and stayed at my grandmother's house. During my P.G. period father was at Datia and after M.D., I went to Gwalior. My parents shifted to Khandwa when I was at Gwalior as RMO. My parents with my sisters from Khandwa left for Badrinath prior to retirement. On way at Gwalior, I met them and got the night gown specially chosen by my mother. In 1968, my father retired and went back to Madras built his own house. Two sisters got married in 1970 and 1975.

I married Ansuya. It was my own choice. My parents resented and felt that they may find difficulty in getting a good match for my sisters because of my intercaste marriage. My parents had lot of mental tension during this period between 1970 and 1972. In 1972, I left for Boston, USA, stayed there till June 1975. My father used to write detailed letter about Chennai, my sisters and mother. In his old age, he worked alone constructed the house, got my sisters married. He was an active Lion club worker in his last days of life.

During my college days as well as school days whenever I came to Rewa, my mother will insist for my hair cut, saying that I have grown lot of hairs and I need hair cut. I had the luxury of hair cut at my house backyard. The barber will cut my hair and when I get in my mother will inspect me and tell the barber he has left lot of hair on my scalp

and will ask him to cut some more hair. She wanted to get maximum hair cut for the amount she paid. Those days, I never argued with her and will do whatever she likes.

I was selected by M.P. PSC and got the post of Lecturer in Medicine in 1967. My father was very proud of me on two occasions namely when I passed MD at the age of 26 years and when I became Assistant Professor at the age of 28 years.

My mother never wanted me to become ophthalmologist after seeing my father's failure in life and his economic difficulty. I chose medicine of my own accord. After joining medicine I informed my father. He was happy and did not comment. Today, I realize I must have asked him his opinion. He would have definitely recommended ophthalmology.

In 1982, my father died after myocardial infarction. He was admitted from 12th January to 19th January and died on 19th January 1982 around 7:00 pm. I was attending him from 12th to 19th. On 19th my mother and myself went to see him at the hospital. He wanted that Amma gets the cardiac checkup. Dr. Raja Gopal treating physician and cardiologist of my father gave time and appointment we left by 6:00 pm and waited for 2 hours and got the checkup of mother. She had her ECG, X-ray Chest, TMT. Except for hypertension, border line cardiomegaly and obesity other parameters were good. We came around 7:30 pm and got the news of death of my father from hospital. I rushed with my brother-in-law Mr. Gopalaswamy. My father received heparin, but streptokinase was probably not available in our country in 1982. My father had no risk factors for acute myocardial infarct except the age.

My father was honest, straightforward, hardworking, responsible, duty conscious and disciplined person. He liked to read ophthalmology books and journal. He will never like to do chamchagiri. He kept distance from seniors. From heart he was good, although he was strict and stern to outside world.

My father had several other interests. He was well informed of our mythology, astronomy in addition to medical subjects. I remember at Vellala Street, Madras when we were living in early childhood we used to lay down on Verandah in summer months at night. My father will look at the stars and identify the stars and tell us the stories related to those stars.

He was lean, active and used to walk a lot. He used to go to hospital by bus at Madras. He purchased a small car standard which he used to drive at Khandwa (1967-68). He never allowed me to learn driving in that car. I learned driving at Indore later on in 1980, when I got my old fiat. My father was a man of principles.

I am proud and happy to say that I was born to such parents who were ideal to me. Who shaped my life in childhood so that I can achieve and come up to such position in life. I never faced failures. Even if such things happened, I faced them boldly and came out of such calamities in life. I am lucky to have such parents. My father was the first doctor in my family, then I became and now children also took same line and are successful doctor. It is all because of God's grace and parents blessings.

## **2. MY EDUCATION (PRIMARY TO PROFESSIONAL)**

I really do not remember much about my primary education. One thing, I know is that I joined 1st class at MCT Muthiah Chettiar School, passed out 11th Class or SSLC without any break. In those days, there was no Pre-nursery, nursery, KG-I or KG-II. At age 5, I joined 1st class. Some of my relatives criticized my father as I joined late (at age 5 years) in school. It was a private school. But not a convent school. I was shy. After long holidays and vacation when the school reopened, I was bit nervous to go to school, but this I never complained or told to my parents. It was unfortunate or today I feel it was fortunate that I never had any tuition in any subject. Neither my parents approached any teacher for favour nor did they gave costly gifts. There was no parent teacher association then. In 9th and 10th I wanted to take part in debate and sports. I could not perform well. So I did not get any prizes. I was good in studies, but never topped the list in my batch. After Metric, I joined Loyola college for 2 years in intermediate science section. In 1953, when I was in 9th class my father shifted to Rewa State of Madhya Pradesh as Eye Specialist. So I came to my maternal grandmother's house with my uncles and grandma. I remember the parting day when I went to station to send off my two sisters and parents. My mother almost wept as she was leaving me alone at Madras for the first time. Father never showed any emotions, but mother cried for me.

I, for the first time came out of my parents care and home at 13 years. That is the beginning since then, I never stayed with my parents. It was hostel life. Except for vacation and short holiday when I used to go to parents and stay with them. Anyhow, I had good environment and I was not spoiled. I had to take many independent decisions on my own. That gave me confidence to face the world. I was fooled sometimes, but I learnt in life between a crook and good person. In life you have to boldly take action and face the consequences.

In the hostel at Loyola I met many students good and bad. I joined social service league. I was a leader and used to collect clothes and distribute to slum dwellers. American Ghee was given to us which the students used to distribute to the poor. I with my team did lot of activities in slum areas in those 2 years.

In hostel, I started playing table tennis. I was good in indoor games like table tennis and carrom.

During this period, I met SS Badrinath who was a good friend of mine during our college days. Then I lost his whereabouts when I came to Indore for medical education. Again in 1979, I knew about Badri and called him on telephone. He was kind enough to come to our house and meet me. He took me and wife to Shankar Nethralaya and showed me in detail the newly developing hospital, medical record section, etc. He also showed me his future plans and developments.

In 1957, I left Chennai and joined M.G.M. Medical College, Indore (M.P.). My father was an ophthalmologist (Eye Specialist) at Rewa. So I got the domiciliary certificate and joined at Indore. My father wanted me to be near to him in M.P. So that I can frequently visit him. Further it was thought that Brahmins will have no scope at Madras. For medical admission and job it was a big handicap on being an upper caste fellow. In 1957, itself there was reservation for lower caste and Brahmins got few seats, so much so general category seats were closed as high as 90-92% aggregate. I was at 75% aggregate. So I can never get a medical seat in South India, Chennai.

Today, also the situation is same. Reservation has spread to all other states. But still 50-60% seats are available to general category (unreserved group). Other option now available is private colleges. They have merit quota, as well as management quota where you pay heavily and get a seat.

I remember one incidence that a Punjabi boy got him adopted by a sweeper and showed himself as category-schedule caste and got a seat at Indore in P.G. entrance. He passed out. He also got the advantage in job placement. He is now professor at a Delhi Hospital and medical college. All cannot be so smart and get things done this way.

I joined medical college at Bhopal first then within a month got transferred to Indore. Indore college was established but Bhopal Medical College building was under construction, when I joined we had a common building for polytechnic and medical.

At Indore my father had his friend Mr. R.K. Dixit who was working in Industries Department. I stayed in their house for 15 days thereafter I got my transfer to Indore. I joined hostel. R.K. Dixit had a big family 3 sons and 3 daughters. But he was quite good with me.

When I joined hostel there were few senior students of Rewa who helped me to a great extent. But still I faced little bit of ragging in first year. Those days we had

Teachers - professors of excellent repute who took interest in teaching. Some of the teachers (professors) whom I remember are Dr. Sachdev, professor of Physiology, Dr. B.C. Bose, Professor of Pharmacology and Principal of the College, Dr. M. Rangam, Professor of Pathology, Dr. Akbarali, Professor of Medicine, Dr. B.B. Ohri, Professor of Surgery, Dr. Jungalwala, Professor of Obstetrics & Gynaecology and Dr. Pohowalla, Professor of Paediatrics, when I came in clinical posting in Medicine as a student, Prof. S.K. Mukherji was retired and became Emeritus Professor.

I will like to show my gratitude with few words about my teachers.

Dr. Sachdev was very regular in taking classes. Every time he started the lecture he will go through attendance register pick up few names and ask them questions from previous lecture to know whether the students are following him and understand. This is a good way of evaluating the students. Dr. Bose was the Principal as well as Pharmacology Professor. He made our subject interesting. As a principal he was strict. He used to come at 8 a.m. to check that classes are regularly taken. He will go round in car between 8 am to 9 am, during theory class period. If students were wandering he will call them and ask why they are not attending the lectures. So much so as a student we were afraid to face him in the campus. He used to call the staff member if he has not taken a class and find out why he has not taken the class. Now-a-days Dean has no control over the staff or students. This is a sad situation in medical education.

Prof. Rangam, Professor of Pathology, was a good orator. He appreciated students who excel in extracurricular activities like sports, indoor, outdoor games and NCC. He will speak for one hour. Many jokes, anecdotes, stylish way of speaking at the end of lectures, I will wonder how little he has told about the subject (topic). But nobody used to miss his lectures. During Pathology theory examination, I developed measles (Viral fever) with rash. I was made to sit in a separate room and gave theory subsequently, when I went for practical also, Dr. Rangam stood far away from me and took my viva voce. It is said that in measles the infectivity is during catarrhal stage before the rash appears. My examination was held in March / April 1960. Sometime in June he had a tragic death. He was with his little son at Yeshwant Club and was showing him how to swim. He dived in the pool. He had cardiac arrest. I felt sad at his premature death.

I was a topper usually in sessional examination and pre-university and in most of the subjects at the time of university examination, I was pushed down to 2nd or 3rd position.

During my viva in pharmacology examination, professor Bose was worried about his son's distinction. He left the pharmacology department and went to physiology department and sat down during his son's viva. His presence made a difference and his son got distinction and topped in physiology.

I knew more of clinical medicine as a postgraduate student. The modern investigations like Echo, CT Scan were not available. It was more clinical acumen and diagnosis. Medicine department doctors were more hardworking and straightforward compared to surgical and orthopaedic counterparts. In medicine you have to differentiate various conditions, while arriving at a diagnosis. A surgeon's doubts are clear on opening surgical area and he sees and knows what is wrong. A surgeon needs more skills of doing the operation while physician has to be good academically and able to come to final diagnosis by applying his knowledge and getting appropriate tests. Once diagnosis is established the treatment is given in a standard way. After passing MBBS in 1962, I passed MD (Medicine) in first attempt in 1965. In 2005 after 43 years, I feel there is tremendous advancement in medicine. Many diagnostic tests have come, newer books, specialities have grown. It is difficult to be abreast with all the advancements in medicine. Several superspeciality associations have come up, CME, Annual Conferences, Workshops, are held almost throughout the year in every field of speciality. Now the medical graduate prefer to choose a minor subject like Radiology or Orthopaedics or Anaesthesia, Ophthalmology, as one can complete the study in short time and settle in life early.

My college was the best in those days in Madhya Pradesh. I learnt from my teachers whom even today I respect. Now students number has increased to 200. Big classes, less staff. There is no student teacher relationship. There is more competition. Students want to get the best results quickly by any means.

### **3. PURCHASED AN OLD CAR MARUTI 1986 MODEL**

It was in 1980 for the first time. I purchased a second hand fiat. I learned driving for the first time at the age of 41 years. In contrast my children learnt driving in their school days when they were studying in 10th class. That is generation gap. Still my driving is not satisfactory. My reflexes are poor. My wife sitting on the back seat goes on commenting and advising me. It seems as though she is driving from back seat. She will shout "see the red light and stop". Look at the oldman crossing the street. Look the children are on the middle of street. Look the children are playing cricket on the road. I am used to all these comments and advises. My daughter says, you drive very slowly. She will ask me to get down and will sit on the driver seat.

My drivers have been Late Shaukat, Habib and now Dilip and many more whom I have forgotten. They advised me not to keep the foot on clutch. Use clutch only when you change gear. But whenever I slow the car, I will press both clutch and brake. So that the clutch is worn out in less than 6 months and I have to change it. First time when I was driving in rainy season and when I crossed the pool of water as though crossing a pond on the M.Y. Road my car stopped. I got the mechanic and he said that the water has got into Delco point. This problem I faced several times in Rainy season. I changed many cars between 1980-2002, from old fiat to new fiat from fiat to maruti 800. Totally so far I have changed four cars. Now I have V2-Indica Diesel.

One day suddenly car did not start. I found that 'self' is not properly working. Your horn may stop functioning or light may not glow either. Fused bulb or fuse has gone out.

Whenever I get a new car with in a week some body bumps at my car or I hit a scooter. So that dent is usual. My driver advised me not to repair the dents. He said leave it as such. Since then no more accidents.

I had difficulties in going up a steep street. You have to drive in first or second gear. Many times the car will roll back down the street. I asked my wife to get down and put a stone on the back of the wheel to block the car from falling. Now I am better in driving. But today the roads are filled with two wheelers and cars. Everyone has car. Thanks to bank loans and other credit policies. Everybody purchase a car today and pay EMI for next five years. Some three or four decades ago car was a status symbol for a doctor like me. Today, it is a necessity. Every professional has a car, mobile and a

dream house of his own - all are purchased on bank loan. When I purchased a car I have to save money and then go for a car. Bank loan was not so easily available. I always felt how I will pay back the loan whether it was a car loan or a house loan. I had sleepless night after taking loan. Today's youth are carefree they are brave, better placed economically, probably they know how to earn money.

Never purchase an old car. Due to necessity, I had to keep two cars, one for me and another for my daughter. After retirement and at age 65 years, I will not get a car loan and further new car means spending more money. I got a old maruti 800. It is now far the last one year with me. I have almost replaced all parts gradually. Now I have learned all the machinery of the car at the cost of spending lot of money and time.

## **4. ON MY RETIREMENT**

I retired from government service finally on September 2002 end. It was a great day for me I started counting down months almost a year ago and then in September I started counting days. Finally that Red Letter Day was before me. I remember how during my young days I celebrated with joy my birthday, then came the wedding anniversary day, which I can never forget otherwise my wife will stop talking and fight with me. We were busy celebrating our children and subsequently our grandchildren birthdays. When I passed my MBBS, and then MD in first attempt with minimum time my happiness had no limit Getting retired is a different story though at heart I was sad, worried about future yet I kept a bold and smiling face.

My good friends and colleagues came and met me. It appeared that they showed sympathy to me and at the same time encouraged me to take up some hobby, go to club, start gardening, do some social work and join social organisation and do yoga, exercise, go for long walks, some even suggested that I should be more religious, attend bhajans and hear religious discourses.

While going on the street I saw the hoarding "You are retiring only from job and not from life". It gave me some consolation.

In my workplace some of my colleagues and students previously were around me all the time, ready to obey me were gradually avoiding me now. I being a Professor previously was surrounded by inquisitive students in my ward rounds. Now they know I am retiring and will not be anymore useful to them in passing their examinations.

My LIC agents and agents from Banks also started visiting before retirement. They all gave me different plans and investment ideas. So that when I get gratuity, GPF, they wanted I must invest through them so that they get their commission. They gave wise suggestions.

On the day of retirement I had a farewell from the Department. As I am a doctor my ward nurses, ward boy, postgraduate students, other doctors - staff members of the department were there. Lot of garlands, gifts and speeches some of them literally wept during my farewell. There were at least three farewell functions arranged for me. They wanted to throw me out of the institution.

I asked myself have I become so old that I cannot do anything now? Has the society rejects me now because I am retired! Nobody needs me anymore! Will I not be able to do some useful work to society. Economically will I have to face problems because when you get pension it is almost 50% of the pay which you drew before retirement. Will I now become sick and bedridden? Will my son and daughter care for me now! Will my relatives and friends who used to come to me before for favours. Will they come and meet me. Will I have to be lonely! One thing I am sure whatever I am today even after retirement. My wife will not let me down. She is my Arhangini she is with me for the last 36 years and seen me coming up in life from a young man to a big professor to day. She does not care for my designation. She care me as her husband whom she married 36 years ago. She is with me all the time during my solitude, sadness and retirement. She is there to encourage me. She is my true friend all others whom I met are passerby in my life, co-passengers as you see during travelling in train. They may not be for longtime with you and support you. They were my friends because I was in power and helped to get their work done. Now I am postless, powerless, authorityless, but I am the same man with all those good qualities which they admired while I was occupying the seat.

Next to my wife probably the money which I saved is going to come to my rescue.

Even the thought of getting heart attack makes me feel nervous. These are the days when the doctors don't allow you to die peacefully. They make you spent 3-4 lacs and make you live for few years and die. So I must have mediclaim and also good bank balance.

I stared at the majestic building of M.Y. Hospital, where I worked for over 28 years. Now I have no entry. Those familiar faces like Patrakar, Nethaji's various political workers, social workers and retired IAS officers come to my mind. I have obliged so many persons, helped in diagnosing and giving free treatment to those poor patients, giving them duplicate slips to get hospital medicine. Got them free investigations. I am sure they will catch over another person to get their work done. I am forgotten, my identity has gone.

Again hope kindles in my heart. I will show my usefulness to society. I will work for more hours. Help the poor without thinking for petty gains. I will follow the motto that

"work is worship". I have no time to relax or rest I have many years to go and spent my time in serving the sick, poor people with my medical knowledge. May God give strength in my endeavour.

## **5. FAREWELL SPEECH TO DEPARTMENT OF MEDICINE, SEPTEMBER 2002**

You are praised, your good deeds are remembered on two occasions - Retirement and when you die. Today is the first occasion.

If I tell you about my achievements, it will be self praise. My failures and mistakes I committed in past which are buried with my thoughts. I will not like to spoil such a nice meet by talking about my failures.

If I tell you what my young doctors should do, it will be a sermon.

Somewhere between these lines I will talk to you to-night. I am shy of long-boring speeches. I always try to keep it short and sweet which is comfortable to audience.

I got lot of love, affection, respect from my patients, students, colleagues and my senior staff members of the Department during all these years.

I came to Indore city, first time in 1957 as a first year medical student and after passing MBBS and MD in 1965. I left this city and worked at different places (Gwalior, Rewa, Boston USA) and came back after 13 years to Indore in 1978. Since then for almost 24 years I am here and I feel I am an Indorian.

### **To my residents**

I felt very young while taking rounds with you (my RMOs). I will miss you and feel old suddenly. A teacher teaches but he is also learning many things from the PG students. I also learn from my PG students.

PG students should use their 3 years in bedside medicine in seeing carefully patients, I want an average diligent PG rather than a superintelligent boy.

These are the days of Hi-Tech. Our RMO should learn all techniques in medicine. Be sincere, participate in discussion and take interest in UG teaching. Have group discussions and group study. Make use of library and internet for next 3 years of their residency.

If you are good and knowledgeable in your subject, willing to work hard and sincerely, if you have no political pulls or recommendations, you are quite sincerely wanting to do something. You are not in the habit of doing Chamchagiri then you establish your practice or join private institutions.

### **My Staff members**

I am happy to note that Department of Medicine is peaceful. No internal conflict. I have found very good academician and scholars like A. Pauranik, A. Bharani. Excellent clinician like A. Bajpai. Good administrators and disciplined personality like R. Hussain and A. Vishnar. Faithful workers like S. Bhargava, D. Jhavar and AD Bhatnagar. I admire V.P. Pandey for his ever enthusiasm and he is always ready to suggest new ideas. They all worked with me as a team. For future HOD I have a word of suggestion. In today's context, you have to take the whole team and think each one is HOD in their own field and avoid bossing. Appreciate the good things in each individual, forget their shortcomings and never try to pull down somebody and show that you are the boss.

I am lucky to be the student and now retiring from the same college from the post of HOD and Professor of Department. This distinction goes to Professor Sepaha and I am the next. I have been impressed by philosophical attitude of Professor Sepaha, politeness and personality of Dr. D. Singh and the clinical acumen of Dr. R.S. Mehta. I have tried to pick up good things in each one of my senior teachers.

### **Honesty**

We are all honest. There may be various shades of honesty. Never say, other doctor is dishonest and you are honest. Do what your conscious says. Always think the other man is good and honest unless proved otherwise.

I wish our staff members be more academic and everyone participate in various conferences, CMEs and seminars. We must have passion to work. Love our subject.

It is time we take OSCE in teaching and examination system for that staff members start preparing.

### **Patient-Doctor Relationship**

Many things have been written about patient-doctor relationship. When a patient comes to a Consultant he has come by choice and not by chance. He comes with lot of expectations. Do not disappoint him. Use kind words show that you are really interested in him. Carefully hear his story. Avoid unnecessary investigations. Explain to the patient about the diagnosis and in critically ill patient tell the attendant about the prognosis.

### **About our Dean**

I have no words to express my gratitude to him. He has been quite good to me. Probably we are lucky to get a Dean like him, who sincerely wants to improve diagnostic facilities in M.Y. Hospital, Indore and also wants to give better patient care and more facilities to undergraduate and postgraduate students. I wish him all success in his endeavour.

I wish you all goodbye. I would like to interact with the staff members whenever I get opportunity.

## **6. LIFE AFTER RETIREMENT**

2 years of my retirement will be over by September 2004. I see my colleagues and other retired persons as 'Feel Good', Happy, No responsibility to perform, monetarily comfortable. Some of them whose children are at USA, UK or Australia go every year for 2 or 3 months to abroad and live with their children. How happy they are? How comfortable are they? How peaceful they are?

Yesterday 4/6/2004 Manju celebrated our Marriage Anniversary. Went to President Hotel in Dosa Festival and costly cake was cut at Mohan's house, Manju spent for us.

I am working more in retired life. Going to Aurobindo leaving home at 9:00 am and coming back by 2:30 p.m. 6 days a week. Earning more money. The hospital has teething problems. Junior doctors are not there to help. At present OPD / ICU and ward round only. Students are not there for teaching, waiting for MCI approval. Twice inspection has been done. If I compare any private medical college with government medical college, I can say that the private college building and equipments are good. You can buy and equip the department. No money shortage. But teachers and junior doctors are deficient. This state will improve when the college produces their own doctors. As most of the private colleges are situated far from city. Patient attendance is also less. You have to attract them by keeping camps, free investigations and free drugs. Waiting for the students to come. They will come to medicine after completing first professional course after 1 year. I admire Dr. Vinod Bhandari for his enthusiasm and his capacity to work, his ability to get the work done and his power to go forward and think bigger and biggest. He may be a controversial figure, he may have jealous enemies, but yet I am sure he will be successful.

I feel my wife is getting aloof, not mixing with anybody, busy with grand-daughter and home front. I am not able to make her busy get her job or any work except for one hour OPD at Robert's Nursing Home in the evening.

I also feel alone. Do not have any good family friend. Except Mamaji, not able to attend the pharma meeting and dinner. Used to be chairperson in all meetings while in job. Now nobody calls. Nobody remembers. No one comes in Diwali, Holi. I must meet

youngsters or call them in parties. Both of us myself and my wife now has to become more social. Otherwise loneliness will haunt us.

After my retirement, I got associated and worked in 2 private medical colleges namely RD Gardi Medical College and Sri Aurobindo Institute of Medical Sciences, Medical College. After I left the Gardi Medical College, I worked for sometime at Modern Dental College. MCI Inspection is a great event Everything is prepared, false statistics to show admission in Indoor, OPD, etc. Quite often staff position is deficient. Practically from Indore and Bhopal retired doctors who have teaching experience, and junior doctors from city, most of them are general practitioners are called on the day of inspection. They are there for head counting. MCI inspectors just count the head of each departmental staff and see that staff members are adequate or not. Once they leave the doctors who came for head counting disappear. They are paid well for this by the management. Probably this is happening in all private medical colleges and I am sure MCI is also aware of these facts.

About the usual type of students who are admitted I have a few words to say. They are the boys and girls by bad luck. Could not manage to come in Merit. Their parents are rich, may be doctors, running a nursing home. They want their only son should become doctor and run the nursing home. Hence they spent 15-20 lakhs and make their son or daughter doctor or dentist. Some of them may be sort of "Munna Bhai MBBS". They are arrogant about their money power which can purchase anything. They do not study or attend classes and hope to pass the final examination. How good doctors they will be? How devoted and hardworking they will be ? How good will be their clinical acumen? What will be the fate of patients in the hands of such novice? This is going to be a big problem for the future. Here I will include doctors passing and graduating from Russia. Most of them are quite poor in their performance.

## **7. LOOKING BACK AT GOVERNMENT SERVICE (FROM 1966 TO 2002 - 36 YEARS)**

In 1966, I became Resident Medical Officer and posted in Gwalior. This was my first government job. I was M.D. that time my friend S.K. Sethi, who is now settled in USA and my self went to Gwalior with all belongings. I took my cycle with me we went from Indore to Gwalior by bus. We were accommodated in P.G. Hostel at Gwalior. I reported to Superintendent and then to Professor of Medicine Dr. P.N. Laha. He was a disciplined person, academician, punctual, task master and he knew price textbook by heart including page numbers. He was a terror to postgraduates as well as under graduates. He was my examiner in MD and I was Lucky to pass in first attempt.

Subsequently, he selected me in PSC as Lecturer. He had good impression about me. He is no more. I still thank him and grateful to him otherwise in today cut-throat competition, political interference and job reservation. I would have found no place in medical college of M.P. Firstly, I am from different state. Secondly, belongs to unreserved category.

When I joined as RMO, JA Group of Hospitals, Gwalior, first six months I was made Medical Officer-Incharge, Madhav Dispensary. Since it was an administrative post I had no idea of administration. All these days as a P.G. Students, I was involved in Patient Care. I was to see the OPD arrangement of sisters and compounders and I was asked to sit in Medical OPD with consultants like Dr. P.N. Laha, Dr. Hazratji and Dr. R.L. Agrawal. Each one were memorable personalities. Dr. P.N. Laha when he admitted a case it was my duty to take him to ward and admit so that patients are not waylaid or lost. He was famous for writing prescription in paediatric dose, example Tab. Sulphadizine  $\frac{1}{2}$  tds. Hazratji was more Royal. Use to wear good dress. He was quite conscious of his dress. Used to go to club and play tennis. Fond of friends and parties. He was rich. Had a very good practice in the town. He was popular for TB patients. He used to over diagnose tuberculosis. Every patient who sees him will invariably get Inj. Streptomycin, Isonex and PAS. Those days other new potent drugs like Rifampicin, Pyrazinamide and Ethambutol were not available.

Dr. R.L. Agrawal behaved like a joker. Very cunning and knew how to get the work. He was short. He took me in one of his private consultation. Old Jain lady had a

problem, by mistake she drank milk which had a fly in it. Because she has accidentally consumed milk with fly, she felt some doctor has to take the fly out of her stomach. Dr. R.L. Agrawal put a Ryle's tube into her stomach washed the stomach with water and brought out the water and fly out into the bucket. Actually he threw a dead fly which he brought with him into bucket. This trick made the old woman happy and feel comfortable.

My stay at Gwalior was for 13 months only. My stay at Gwalior was memorable in two ways. I met my wife Ansuya at Gwalior and I got promoted as Lecturer in Medicine (Assistant Professor) and shifted to S.S. Medical College, Rewa.

Rewa was familiar to me. Although no medical college staff preferred Rewa posting. The place is cutoff from the other cities including the Capital Bhopal. There was no railway at that time. Now railway travel is possible. Climate is also extreme. People there are ungrateful. They care for two castes Thakur (Singh) and Brahim (Tiwari). All the posts are occupied by these two groups. Often they fight amongst themselves. Every other is an outsider. Notable politicians are Srinivas Tiwari who can get anything done, Jamuna Prasad a blindman - PSP. Most of them are not honest.

The Rewa politicians, local people and the hospital para-medical staff knew me very well. My father was an ophthalmologist for nearly 10 years (1953-63) at Rewa. He had good reputation for his honesty. Only drawback was his knowledge of Hindi. He had tussle with Dr. Shri Khande. When the G.M. Hospital got upgraded to Medical College, my father went to Datia as Civil Surgeon.

I got settled at Rewa. My stay initially was for 5 years from 1967 to 1972. Ansuya got transferred to Rewa because of me and we got married in 1968 at Rewa. It was a Civil Marriage and a party was given to all friends, relatives and college colleagues. We got for Rent Maharaja's Driver's flat Surya Kiran. As both of us were going to Gandhi Memorial Hospital, my wife's Mausi was at Rewa, she was kind enough to send food in tiffin initially till we settled down. We went on purchasing all basic items for the family I had good practice at Rewa. So much so that my colleagues used to call me Dr. S.K. Mukherji of Rewa. My initial posting was in TB Ward and Infectious Ward. I found that Keralites had high incidence of Measles, chickenpox in Summer months April / May. I found Rabies patient dying in front of me. I was helpless. I used to see Tetanus cases which also carried high mortality. It is sad that inspite of high incidence of all infectious diseases in our country we do not have a well equipped comfortable ward for patients

with infectious disease. Usually these wards are isolated and away from the main hospital and nursing staff are not well trained. At times it is difficult to get good suction machine in working order. After few years, I was absorbed in medical ward. It is customary to give infectious ward to new comer - Lecturer. As soon one more Lecturer Junior to me came, I was taken into medical wards.

Out of all branches cardiology is alluring and every physician dreams to be cardiologist.

In 1972, both myself and my wife took study leave for 2 years and left for USA. I joined Joslin Clinic Boston, USA as Fellow in Diabetes. It is equivalent to Third Year Fellow. When I left India, Manju was already born and was 18 months. We all three went to USA. Raju my son was born in 1972 December. I joined Joslin Clinic on 1st July 1972. Dr. Goldstein the coordinator met me. My Id Card, Blue Shield Medical Insurance Card, Apron everything were ready. I was posted in Diabetic Teaching unit. It was my first visit to USA. I found myself in heaven. No dirt, good weather, good rich food and comfortable life.

Joslin Clinic patients are admitted in New England Deccness Hospital. I had rotation after 2 months in emergency where diabetic ketoacidosis is managed, hospital teaching unit where uncomplicated patients are admitted and taught self-monitoring, diet and injection technique. Daily patient had classes on different aspects of diabetes. Complicated patients are admitted in New England Hospital like those with Nephropathy, Hypertension, CAD and Neuropathy. As fellow, I used to attend Grand rounds at New England Hospital on Tuesday where renowned medical personalities used to discuss cases of clinical interest. Endocrine classes are held from 12:00 to 1:00 pm. Once or twice a week on Monday fellows used to present cases admitted on previous emergency on Sunday. In foot rounds once a week, foot problem in diabetics are discussed by Physician, Surgeon and Podiatrist together. It was a memorable experience for me. I worked there for 3 years.

Ansuya was busy with Manju. In December 1972, Raju was born at Boston lying in. So for almost one year she was looking after kids. Going to park, mixing with local people and making friends. Now I realize she did a great job by taking care of two young children. Saturday was half day. She will wait for me and we will move out to Departmental Stores for purchases or beach or park or any place of interest. I have

taken maximum photographs both still and movies during this period of life. In 1972, July we left USA and came back to India. Many still wonder why I cam back to India. Why did not I stayed back at USA. Some feel it was by foolish decision.

Again back at India, I was posted at Rewa. My wife had to wait over 6 months to get the posting. She was posted as Assistant Surgeon and worked as Anesthetist in G.M. Hospital. Used to get emergency calls. At times she had problem with Dr. Arora, Professor of Anesthesia. During my second posting I had problem in getting accommodation. Dean Arora made me U.G. Hostel Warden. Managing the undergraduate medical students was a tough job. But being a clinician I got work done in hostel by P.W.D., etc. My children were hardly 5 and 3 years. So we could manage.

My wife missed the chance of becoming Lecturer in Obstetrics & Gynaecology as PSC was held during our USA visit. It was difficult to continue as Assistant Surgeon and doing night duties as she has to give time to children. She appeared in Public Service Commission for the post of Gynaecologist and got selected. One year she was posted at Satna and used to go by bus, a hectic life. Going by 8:00 am coming back by 4:00 pm.

After 1 year, I approached Health Secretary and requested to post us together at one place. In 1978, my wife joined ESIS Indore as Specialist and I joined at M.G.M. Medical College at Indore. I was working with Dr. R.S. Mehta, good clinician. In 1982, I became Associate Professor. While Ansuya was Superintendent in ESIS Hospital for sometime. Finally she was Director of ESIS Services and retired.

The best cities in M.P. are Indore and Bhopal which are well developed with lot of facilities. I struggled for practice gradually it improved. Between 1978 to 2002, many things happened. We lost in a row my sister-in-law Vimla, Father-in-law and finally my father between 1980-82. It was mental torture to us. Children grew up. Joined medical college.

Director period brought lot of administrative work and she had to visit Bhopal to see Secretary or Minister. She faced lot of problems, suspension and court case, etc. My life in the college was peaceful with other staff members and students both PGs and UGs. I was involved in writing books, attending conferences, chairing sessions in conferences. Practice was average.

Postgraduate students respected me but usually they are busy in keeping the head of the department happy. In undergraduate attendance is a problem. Clinical practice has, vastly changed from 1967 to 2000. More nursing homes, more laboratories had come. With the introduction of consumer protection, doctors wants to play a safe role. More unnecessary investigations are done. More drugs are used. All these have happened due to commission, cut-practice, etc.

A patient spends 50% on investigations, 30% on cost of drugs and about 20% as doctors fee. Who are gaining monetarily, the pharmaceutical industries and laboratories. Pharmaceutical companies fool the doctor by giving cocktail parties and spending on doctors travel expenses and stay at hotels during conferences. All these money has to come from poor consumer patient.

I will shortly enumerate some problems, I faced during service. Seniors of my time showed Dadagiri. They may not be knowledgeable, they were not attending conference or Update with relevant journal but they looked down on juniors and pretended to be all rounder. Having a good practice and earning lot of money is not equivalent to doctor's knowledge and good clinical acumen. Even a quack earns a lot. A Panwala may be making more money than a devoted, sincere good doctor.

Most of the work was left to Resident Doctors and Senior Consultants just went round the ward without giving much attention to the patient. This was true in Surgical Practice. This lead to dissatisfaction and patient came to consultants house and paid fees so that he will be looked after better.

VIP got free drugs and other benefits while ordinary patient suffered. The wards are not clean, no facility to patients, the common toilets in a general ward is horrible and not clean. Taps are broken, water supply is deficient. Nursing care is inefficient. Partly because there is a great shortage of nurses, urine pot and bedpan. Stretcher trolley and wheel chair are always short, unavailable. Lift system is always a failure - due to fault in lift or power failure. All said and done, it is the best place for a poor, serious patients where diagnosis is made and treatment is given.

That is why in 1990 - Proliferation of nursing home occurred at Indore to give better care to patients. Today, high class, middle class and even at times poor people prefer to go to nursing home where they get neat and clean wards. Investigations are quickly made and results are true. In government hospital days are fixed for some tests

and reports are given next day. So there is delay in getting test results and delay in decision making. If you pay you definitely get better service. Mediclaim Insurance is also there to give coverage.

Then came the era specialization. My own students got DM and M.Ch. with superspeciality degrees and came to Indore for practicing in the field of Cardiology, Gastroenterology, Pulmonary Medicine and Endocrinology. Then came big Hospitals like CHL-Apollo, Bhandari Hospital, Choithram Hospital and lastly Bombay Hospital. Intervention Cardiologist came into the field. They were ready for angioplasty in CAD. At times, ethics of medical practice was forgotten in mad rush for making money.

### **Examination, Examination System and the Examiner**

36 years of my teaching to medical students make me to write something on medical education. I have been examiner for MBBS, BDS, MD, BPT and DNB Medicine. Only 25 to 30% of students are really interested to learn and study seriously medical profession. Other study before examination and try to pass somehow. Examination system is outdated from long questions, now we ask short questions. MCQ is not a routine way of testing in universities. Examiner is not serious in evaluating. He tries to pass maximum candidates in spite of poor performances. In practicals also we are lenient. So much so 60 to 70% students pass only those candidate who do not write anything and leave blank answer books or never utter a word in viva fail. There is lot of recommendations and pressure from parents and friends. DNB Examination is comparatively better and fair. MD examination is again fair but local politics, pressure and recommendations are also working in postgraduate results. Giving 100% results are in vogue in some departments. I do not agree with this philosophy. This makes even good students frustrated and he may also not prepare upto the mark. Good students, diligent and intelligent students should pass in first attempt and others should pass subsequently after few attempts.

There are group of personalities who daily go around the hospital; show patients. Ward boys and compounders may take money on behalf of a popular doctor and pocket it and show a patient saying the patient is a relative. Sisters and medical students genuinely show their relatives. The nuisance group is third grade politicians, journalists, particularly that of yellow journalism may daily come and pester the doctor for favours

like free medicines, free investigations and admission. They pose themselves to be influential in Government circle and get their work done.

### **The Transfer Seasons**

May and June are most disturbing months for a government servants. There is fear of one being transferred. In medical profession because of established practice no one wants to leave the place. Even if they are transferred they cancel it by giving huge amount of money. The corruption is everywhere. The district service in M.P. is not well organized. Doctors are deficient, not willing to work in remote villages. Even in Primary Health Centers, the doctor sits in his house take money and admits in wards of hospital. He hardly sits in outpatient department. Many of the statistics are manipulated. Government money is wasted.

In Government job promotions are delayed. It took me 19 years to become Reader from the post of Lecturer, nine years to become a Professor and finally for 11 years I served as Professor. It is at the end of my career Pay scale improved. By the time, I was to retire I got a consolidated pay of Rs. 20,000.

Government job you are secured. You get a fixed salary. Lot of time is wasted in unproductive meetings and other works. Investigations are delayed. Frequent strikes by Nurses, Students leads to disruption of hospital care.

Your abilities, ambitions are not glittering in Govt. service. You lead a monotonous life. No challenge in professional work. Most of the doctors are not interested in improving academic career or their medical knowledge. There is no way of improving the quality of staff members. Even if you identify a staff member to be poor and inefficient you cannot do anything. You cannot punish or remove.

Only way to control the staff members is by writing their confidential report which is reviewed during their promotion.

It is necessary that a young postgraduate after M.D. works in a reputed college to get good training in his speciality. I am happy to note that young doctors are ambitious or probably it is the survival of fittest hence many go out for superspeciality courses like DNB and DM. Work in Delhi, and Mumbai, come back with best qualifications and

practice in the city. Good doctors who have aptitude for teaching should be taken up in medical college as Honorary Staff, and utilized for teaching students.

I have no regrets. I have neither attained great heights, professionally or academically. I came out of Government service without any stigma or complaint.

### **GOVERNMENT SERVANTS - BHOPAL TRIP**

A government servant has to make trip to Secretariat, Vallabh Bhawan or Minister's house either alone or with his Neta of the town. I have also made several trips to Bhopal during these 36 years. This is in connection with transfer, promotion and study leave sanctions. It took almost 8 to 9 months for my wife to get posting at Rewa after we came back from study leave from USA. Similarly in 1981, I got selected in PSC as Reader in Medicine. It took almost one year for the government to give promotion order. My wife's promotion as Specialist at Satna, I had to go to Bhopal to see the Health Secretary every month and eventually we got posting together at Indore. "Beggar's are not choosers" is true for a Government Servant. I have to go and beg for transfer, postings and promotion. I have to speak and request to arrogant IAS fellows and the greedy politicians. It is very humiliating to go and beg for your pending Government works. No routine work in Government moves unless you know somebody and you are recommended by influential personalities. This is a sad state of affair in Government Service.

### **COURT CASES DURING MY CAREER**

I have faced on several occasions court cases. After my marriage and after my promotion as Reader. My colleague at Gwalior Dr. S.B. Gupta went to court challenging my promotion. It was traumatic experience. My advocate Mr. J.P. Gupta used to call me to Gwalior for each hearing. Though I lost the case in single bench, eventually, I won in double bench. I appreciate J.P. Gupta for helping me and not taking a penny from me. It was mental tension for my family.

## **8. WE HAVE BECOME SENIOR CITIZENS**

Both my wife and myself have become senior citizens as we are 65 years. Railways consider you senior citizen at 60 years while for air flight you must be 65 years. Why this disparity and bank gives 0.5% extra interest to senior citizens. But you have to give proof by showing voters ID card or any such authentic proof is needed.

As you grow older, your mobility decreases, I am sure I was going out more as examiner or attending conference in the past, now I am not traveling much. So I am not using much of these concessions. Further, there is a condition that you must purchase return ticket and minimum stay of week or so. Sometimes you have to go for 2 or 3 days only then you are not eligible.

In bank also there should be a counter separate for senior citizens. Same in cases of cinema theatre, bus, etc. I am happy in railway booking, there is a separate counter for senior citizens.

In the society or in the colony you are called Dadaji. Some may respect you for your age. In the house you are supposed to go for morning walk and then have your tea or coffee. Your son and daughter-in-law may be getting ready to go to their office. So do not disturb them. Wait till they go out then you can have bath, pooja and breakfast. Do not irritate them by going for bath first. Newspaper you can read after they leave for their work.

Some of your children may need you because you can take care of their naughty children (your grand children) when the school is closed or when they go out in the evening.

At this age, you are supposed to be more religious, going to temple, going for religious discourses. Look out for friends of your age group who can mix with you. Stop advising your children if you stay with them that irritates them. No comments, no advise on childrearing, child feeding, etc. They are grown up and they will do the way they like it. Your ways of living are out of date, remember there is generation gap.

Start involved in social service activity if your health permits. If you know hobbies like palmistry and horoscope reading that can bring lot of people attracted towards you.

Will keep you busy and also can earn some money to boost your pension and have comfortable living economically.

Your savings FD, Recurring Deposits, Savings bank account will shrink in the next ten years and will have less buying capacity. It is said that inflation rate in our country is around 5% every year so either you have to be supported by children or invest in plots, share, mutual funds, etc. with care so that your money with time grows.

Are you willing to go to ashram, home for aged in old age? You must have money.

You will need mediclaim policy and extra money for your illness. You are supposed to have blood pressure, diabetes, osteoporosis, spondylosis, depression and prostate problem at this age. Many of the diseases are not covered by mediclaim policy.

Thought of old age makes me shiver. Ageing cannot be prevented or reverted. One has to boldly face it and live with dignity and grace.

## **9. PRIMARY SCHOOL EDUCATION IN OUR COUNTRY**

I am not an educationalist to discuss on the above subject. But as I grew older and saw in and around I have developed my own views.

I do not exactly remember about my primary education in school. I have a vague recollection going to school walking from home and back again to home. I was a timid, shy, and afraid of teachers. Those days, in 1945 or so, school fee was not much and teachers were devoted. There were no tuition practice. I vividly remember my children schooling at Indore. My daughter attended a girls school and son attended boys school. It was ritual for me to purchase all their books (new). Even in KG-I there were bagfull of books and copies general knowledge, science, mathematics, english, social studies, for each subject there were a home work and class work copies, copies for hand writing, cursive writing, rough copies and so on. I used to religiously put cover to all books and copies and paste the name sticker every year until they came to bigger classes. My children used to go by Tanga (Horsecart) at 7:30 a.m. so as to reach school in time.

Morning hour it was all confusion. My wife has to get up prepare morning tea and nashta (breakfast) for children and me and also to give them bath, arrange their books in bag and send them in time. I do not much remember how much I helped her. The problem with her is even if I help her she will be never satisfied. Breakfast time was a sight to see. My wife will shout at the children who were not keen to take breakfast. My son being younger was quiet and my wife will stuff in his mouth boiled egg pieces and ask him to swallow. My daughter was more clever. She used to take bread and egg for eating. One day to our surprise while cleaning the room behind a big storage tin box we found lots of bread and eggs. It seems my daughter quietly used to throw the food in the corner behind the box. We both, myself and my wife leave for hospital and come back again at 2:00 p.m. to reunite for lunch.

I used to pity that my children carry lot of books and also do lot of homework. Many a times, I used to solve and ask them to write down without wasting time. (This is a bad practice). Unfortunately, in a school most of the time Gandhiji's dream was never fulfilled. Many schools have no playground for games and extracurricular activities.

Now-a-days parents are in hurry to put their child at age 2 years in nursery. We want to teach the child English, Nursery, Rhymes, Mathematics, Numbers, days and seasons, school take lot of money by way of fees. The school provides snacks, lunch and milk. But the children, most of them are poor eaters. Big saving to school authority. The quarterly, half yearly and annually school authority gives reports as good, fair or poor. Parents are anxious to see the report. Rush to class teacher, worried and ask how to improve their child in those activities where the child got poor grades. They are ready to start tuitions for the child, may be pleased to call the class teacher for tuition.

There are mock interviews held in nursery so that the child can face the interview well when to face for KG-I admission. What is wrong with the modern parents? Both husband and wife go to job. It is a nuclear family. No grandparents living with the child. So when parents are working in their jobs child is with Aya Bai. She gives bath, changes clothes, changes diper and give milk and food from time to time. If she is sincere and loves the child, she will do the work. Many may not work. Half the milk and child diet will be eaten by the servant.

It happened long back at Mumbai that the Aya Bai so cruel that she donated the child's blood to a private blood bank frequently and collected money. Parents found their child anemic and were wondering and eventually the Aya's blood donation came to light. The child although saved suffered from anemia.

Now parents feel safe, comfortable, carefree and send the child to school. At least for some hours or half a day the child is cared in school. That is one reason why I think children are sent to school too early. Another problem is competition and rat race. In today's world, everyone wants their child should come forward in their study and career.

I feel parents and grandparents should give time to the child. Moral science, Hindu mythology. Prayer, Religion, History on life of National Leaders, Animal World, Traffic Signals, Nutrition, many such topics are to be covered as per the age and understanding of child. Games are neglected. Many schools have no playgrounds. Child should learn, indoor and outdoor games. Must understand the role of exercise in good health.

Now after several years my granddaughter Amisha joined nursery and in 2003 July she joined KG-I. School admission is a big issue. To be on safer side we applied in three reputed schools. Application forms were filled in each school, 2 photographs of the

child to be pasted. We rehearsed with the child about common questions to be asked, taught few poems, nursery rhymes. Some questions in English like what is your name, where do you live? so on and so forth. In addition to child's interview, parents are also interviewed. Both parents should visit, in some schools this is insisted. If one parent visits, child admission will be denied. How about defense personnel, who may not be getting leave. Many parents doing job at different places. What about those unfortunate couples who have estrange relationships or divorced. Such persons can never hope to get admission in certain schools who insist for both parents interview.

I still do not understand why a child of 3 ½ years has to undergo this interview procedure. We took Amisha my granddaughter for interview. All our efforts were in vain at the moment of interview. When she was called she clinged to her mother and started crying. She did not reply to any questions. She went to three schools for interview nowhere she made any effort to reply or identify any colours or toys. She is intelligent and at home she used to answer all questions correctly. We were all upset with her performance. Luckily, she got admission to two schools. The girls school which is near my home which has a longstanding, good record. But I am sorry to say that inspite of collecting fat fees the facilities are not there. I see the students during lunch break, sitting on the ground and eating. Why can't they build a dinning hall so that children can sit in the hall and eat from their tiffins. I see KG-I girls with bags full of books at least it must be weighing 5-8 kg in weight. These youngsters spine bend because of the load of books and bag. In addition, they carry water bottle and tiffin box. I have not visited the toilets to see how clean it is ! I am not yet clear about the staff members and their teaching ability.

School education is now commercialized. Too many English medium schools have cropped up and they charge fat fees. Regarding syllabus some follow State Board, CBSE, ICSE or IGCSE - (International General Certificate of Secondary Education.)

Our children need backup in the form of home tuition. For overall development, I have to get a music teacher, dance teacher and language teacher who will teach Hindi, English and Tamil. Sports indoor and outdoor games are neglected. I wish Amisha get all the facilities and shape into intelligent all-rounder. Most important thing is she should behave in such a nice way that everyone admires her. She should be beautiful, knowledgeable not only in her subjects, but on worldly affairs. She should have winning manners, gentle in talking and pleasant in habits. She must be a good cook.

My dream of making my son and daughter par excellence has failed. Now I am dreaming for my granddaughter. May god bless and shower all good things on Amisha. I feel it is not only genetics, but the environment which plays a great role in shaping the child. If you give all opportunities to your child the child will learn and improve.

## **10. CONSTRUCTION OF HOUSE 'MANJUL'**

It was after coming to Indore in 1978. We felt that a own house is a necessity. When we came to Indore, Director ESIS allotted a house in ESIS Colony. Probably it was F-type quarter. We came first from Rewa and the luggage took few days to come by truck. My father-in-law gave letter to my wife's chachaji who was at LIG at Indore. We all the four myself and wife and two children landed in LIG at Shri Shivnarayan Saxena's house. The family members welcomed us and were quite hospitable. In next 3 or 4 days I got a HIG house for rent. We did not like the ESIS quarter. We dumped the luggage in that house. Our dog Julie also came from Rewa along with a servant Ramayan. As soon as the HIG was ready for occupation, we shifted from Chachaji's house to HIG Ravishankar Shukla Marg.

I stayed there fore about six months. Then shifted to a house at Jaora Compound. After 18 months of my arrival at Indore. I got the government quarter at 15/6, KEH Compound and finally I stayed in that house for over 13 years. Last shift was to my own house at 72, Dhar Kothi in 1991 March. Hence, at least 5- times we have shifted luggage through Matador.

It is a great experience to some extent lot of trouble in packing and unpacking and again repacking the household item and shifting. Luckily there were no damages.

During these years Indore went through lot of projects, new colonies, nursing homes came up. Quite often doctors constructed house and called the colleagues for house warming ceremony and gave lunch or dinner.

We saw several houses of our colleagues. We got ourselves interested in getting a permanent house. I asked brokers to show me the constructed house. None of the houses shown were satisfactory many a times the budget was beyond capacity. The broker who was showing several houses at last became tired and annoyed with me and said, "Doctor! Are you looking for Tajmahal".

We changed our mind and decided that we will purchase a plot and construct the house. The plot at 72, Dhar Kothi was purchased in 1982 and house was constructed in 1990-1991.

Our architect was Mr. K.V. Natu a well balanced person. He took a note of our demand and budget. He sent his team of workers. All characters of Mahabharata were there. Srikishanji was doing the construction work, Arjun Das was taking care of electrical fitting. The cost usually goes much higher than the budget because of inflation and increase cost of all the items. We kept a chawkidar to lookafter the house and material. Usually there is pilferage and loss of cements and some material. Usually workers take away some item. Very difficult to manage. Pilferage and stolen items may cost 10% of total construction.

For tubewell installation, I called an expert to tell me the most ideal place for digging. Luckily from one site itself water was tapped. By the time house construction was completed, I have almost exhausted all my resources. I had no money even to purchase Parda for doors and windows. No money for celebration and house warming ceremony. We did ordinary pooja with a priest. We constructed a big house, now my wife feels difficulty in maintenance and cleaning, in spite of the fact we have at least three servants. We feel now the house is big.

When we become old and children leave usually only two persons live and one feels it difficult to manage the house.

## **11. HAPPY BIRTHDAY TO YOU**

I completed 65th Birthday and entered into my 66th on 12.9.2004. My daughter, grand-daughter and wife greeted me as soon as I woke up on 12.9.2004 Sunday. I really do not know how many birthdays I will celebrate in future years. I can't imagine what is written in Chitragupt's diary about me. As I move in the streets, stores, cinema hall and shopping mall, I feel I am surrounded by youngsters. There are hardly few of my age group seen at these places. No doubt in a park or in morning walk I find more companions of my age group.

These old men and less of women are health conscious go daily for morning walk or evening walk, sometimes in a group. At times, they go on loudly laughing - so called laughter club members. I really do not know does laughter increase your age and confirms longevity.

Do you have to diet and reduce weight and live long. Because I know a wise man told that "longer the belt shorter the life". But then I remember the saying "Eat and drink for tomorrow you will die."

I feel confident that I will live longer inspite of medical problems. My father died at the age of 72 years and my mother is 80 years and is still alive though unable to move much. She lies down and sits in a chair due to severe arthritis and obesity. I always feel that though I have not inherited anything from parents and grandparents but I am sure that I will inherit their longevity. (My mother died in 2005 at 82 years.)

I am happy that my parents have inculcated good habits in me and emphasized on work is worship. Told me to be truthful and not greedy. To respect elders and obey them. Will their ideals are useful in today's world. Will a person with these qualities be able to live peacefully and enjoy life today. Will he be considered fool and eccentric instead.

I was told to reduce my needs and desire. My Physiology Professor in 1958 told to my class you must deserve first and then desire and now it is otherwise. You desire many things in life eventhough you do not deserve them.

The city has become more polluted - air pollution, noise pollution and water pollution. We must move towards villages - rural areas. Shift from urban to rural side. I feel the retired person must move to villages. But many may not take my advise because there is no good hospital or qualified doctor to take care if a senior citizen falls sick. Such is the condition of health services in our state as well as in our country.

I feel I must change my profession of seeing patients and treating them. I must change my hobby. But I have to choose some hobbies. I wish youngsters adopt a village and work there in all spheres. Help the poor and down trodden. Noble thoughts came to my mind. But where is the fund or money. Who will sponsor my plans ! Who will join hands with me.

Until such time let me do my own job with all sincerity and enjoy my left out time.

## **12. MY VISIT TO U.S.A.**

Everyone in my family including me are excited about my US trip. I am 63 years old I am invited by the University of Florida for 2 weeks to exchange our views on AIDS/HIV.

I am going to USA after 31 years, I was at Boston between 1972-75 things must have changed a lot now. My wife told me to get few full sleeve new shirts. She said, "nobody in USA wears Safari Suit. Further you have old half sleeve shirts. Better get full sleeve shirts and ties." In 1972, I paid for a return ticket of \$420. Now I have paid over \$1000. Inflation even in USA. I purchased good shirts and few pants. I got stitched as the . ready made pant is not available of my size 42".

That reminds me about my doctor friend who visited USA. Now his dress code is shirt, pant and tie. I can't imagine myself to wear a tie in this summer weather in our country.

I felt in those 15 days, I will reduce my weight by dieting taking black coffee and missing lunch. Taking low calories, soft drinks. I was prepared to loose waist line at least by 2-3 inches. Now it is 42 inches. You know that longer the belt, shorter the life.

My daughter was good enough to give a new suit case as a gift, which had an imported look.

It was time, for me to go for VISA interview. Some friends, my travel agents and even professional people with whom I contacted told me what questions are anticipated and how I should answer and behave. Many assured me that there will be no problem in getting VISA at my age 63 years. There is a fear that only young persons between 25-40 years are rigorously interviewed because they may not come back from USA to India.

I went to Mumbai one night earlier. Next morning at 8 a.m. was the interview. I carried with me the passport, letter of invitation from USA. I reached at 7:30 a.m. The security personnel though Indians behaved as if they are foreigners. They asked me to go and stand across the road. I saw a big crowd standing across the consulate. Lot of gujaratis young, old, children. Around 7:45 a.m. the security personnel came near us

and said to make two Queues - one for immigrants and another one for non-immigrants. There were no middlemen, helpers, no politicians to recommend, no brokers to fool me.

In the queue, I entered the building, there was a security checking, no mobile, no weapon-pistol, knife the man said, "No Gutka / tobacco. I think they know the Indian mentality. People eat tobacco, pan and spit near corridor or while climbing the stairs during each curve and turning, people spit. It is a habit with Pan eaters just like a dog which rises the leg and micturate at every pole or corner, our men spit at every corner.

My friend opened a hospital and nursing home. How to prevent the spitting menace, she got excellent idea at every corner of the stairs she kept photographs of the Hindu Gods. Pasted on the wall Shiva, Hanuman, Ganesh, Saraswati, Lakshmi and Rama and so on. This made a definite impact. People lighted agarbattis and threw some coins. One who was spitting no longer is spitting. Men can be changed in their habit and attitude.

Coming back to VISA, the man at the other side of counter asked few questions. I answered them properly. He said go home. You will get the passport, VISA by courier in 2-3 days at your address.

I smiled as though I achieved a great thing. Those who were rejected VISA came back with the passport, draft of VISA fees. They looked terribly disappointed.

The hall was full with men, women and children. Everyone wants to go to USA! Why ? Good life, earn in dollars, hassle free life and job satisfaction. It is said Indians are underpaid. But, still we are happy. We work hard and impress our boss at USA.

Why in India, we do not work, we spent time on gossip. How many holidays government servants enjoy in our country. You visit to any government office in working hours, most of the time, officer has gone outfor meeting. The clerk has gone for tea and not available at his seat.

This is the state of affairs. When will our country be like America ? When will the time come when 1 dollar = 1 rupee. I pray God that let my country be rich, strong with no corruption. Climactically and by population we have setbacks, but Indian brains are quite good. We can do anything.

Let us be honest, hardworking, think of country first, then about ourselves. I hope some day my dream will come true if not during my life time may be during the life time of my grandchildren.

**Postscript:**

I came back from Tampa, Florida on 3.07.2003. A memorable trip for 2 weeks. But could not enjoy alone. Missed my family. Eknath on arrival spoke about cultural shock. Course on HIV/AIDS was for 2 weeks from 15.06.2003 to 30.06.2003. Break for 3 days in between to attend AAPI (Association of American Physicians of Indian Origin) from 20-22nd June at Orlando. One-and-a-half hour drive from Tampa. In Orlando is situated Disney Land, Universal Studio and so many sight seeing areas. Got a concessional ticket from Indian who has come from Nigeria. He sold the complimentary tickets for \$40 (Saved \$20 in each ticket). So many rides. Safari, Animal Planet, Animal World, Magic World, so on and so forth. One cannot see many things in a day. Needs to stay for one week at least.

Teaching aids have changed now. All lectures are given by laptop through LCD projectors. I realized a clinician also must know statistics, epidemiology, about grant writing and research methodology. Our first year RMO should be taught on all these topics. One should be conversant with computers, so that one can project their presentations at a short time. Amisha and Manju have to learn computer. Rest of the life in USA is as usual, no change from 72-75 Indian communities live together, celebrate festivals. Not much of mixing between Indian and US citizens. Dollar is falling and Euro is taking the higher order.

A country's (USA) economic growth and richness can be judged by the cleanliness of rest room (Toilets). They were spotlessly clean in USA.

## **13. PRIVATE PRACTICE**

Clinicians have an edge over non-clinical teachers in medical college - that is private practice. That make you stay and stick to one city. You avoid transfers. I know some senior teachers of mine who paid money to the politician to stop transfer from one place. That is how corruption breeds. If one doctors pay money, politicians expect others also to pay. So much so the saying goes that nothing works without money. You have to bribe the Government machinery to get your things done. I belong to such a generation who got the work done without paying money.

In 1967, I become assistant professor at Rewa. Rewa was quite backward and nobody wanted to join. Everyone of the doctors, nurses and ward boys knew me because my father worked as an Eye Specialist from 1953-66 at Rewa.

So, I had good practice. In the department of medicine, doctors never stayed at Rewa. They will join and proceed on leave. I was constantly present and available hence I had good practice. Those days, I was taking Rs. 10 as consultation. I used to get 7 to 10 new patients. Around 9:00 p.m., I will move out with my wife in Rickshaw pulled by man. Visiting friends, going to temple, visiting my wife's relations. On long weekend we used go to Jabalpur where my wife's sister was staying. We were getting net salary of Rs. 500 each and the private practice. We were quite comfortable in 1967. Got all household things and those days I had cooler, fan, gas, scooter, sofa sets. I used to send some amount to my retired father. Entertain guests and friends. I used to help my father-in-law and brother-in-law financially when they needed.

When you start private practice you are new, patients may not come to you. It is customary to tip the hospital ward boys and make them bring cases to you. The ward boys, sweepers, chemists, rickshawalas' are paid some amount from practice and they bring cases. The nursing homes in our country also pays commission to BAMS, DHB doctors. So called barefoot doctors. They treat and spoil case and bring it to you. I was told about a young MD at Indore having flourishing practice. How he established the practice. He will charge Rs. 150 (in 2003) and give the whole amount to his agent (BAMS, Ayurvedic and DHB doctor). Admit the case in a Nursing Home. Charge his visiting fees and earn. A bright idea for young practitioners.

My fees started increasing from Rs. 10 to Rs. 50, from 50-100-150- 200. At present I charge Rs. 200.

Another way doctors earn is through investigations. The laboratories give you 15-20% cut from the laboratory investigation. You have given to particular laboratory. You get in the first week of every month the envelope containing money and all the details. Big tests like CT scan, MRI, get a bigger share. So today all the doctors write maximum investigations. Patient has to suffer and incur lots of expenditure. If a lady becomes pregnant every month ultrasonography has to be done. How were we managing pregnancy prior to availability of USG?

Unnecessary admissions, keeping the patient for a long time in hospital, unwanted tests have become part of private practice.

But on the other hand the fear of consumer care makes a doctor physician / surgeon to practice with care, caution and hence he gets unnecessary investigations. Doctor wants to save his skin.

Inter-speciality referral is a common practice. You want to oblige your friend like surgeon, ENT specialist. Skin specialist. Cardiology specialist and you refer your patient to them.

In rural areas, BAMS, Ayurvedic doctors and compounders are competing with MBBS new entrants in primary health centers. Lot of physician samples are sold by these para-medical staff. How it reaches in rural areas. Does the doctor sell his samples or medical representative sell it to them ?

Less, we talk about it better it will be.

After 36 years of private practice I can say one thing to my junior, young doctors, settling in practice. Do your job sincerely. It is the patients whom you treat and cure will be your agent, your tout, he brings another patient to you. So gain his confidence and goodwill. That is a long-term method to establish ethical practice.

## **14. BACK TO CHENNAI AFTER FIVE DECADES**

I was born in Chennai on September 1939. Left Chennai in 1957 after my intermediate at Loyola College, Madras. I came to Madhya Pradesh in 1957 and joined as First Year Student at M.G.M. Medical College at the age of 17 years. In 2007, I have completed 50 years of stay in Madhya Pradesh. Most of my life has been spent at Indore. My contacts, colleagues and most important my patients, who are my old customers are from Indore and parts of Madhya Pradesh. Some patients are coming for over 25 to 30 years. I have a strong root in Indore, Madhya Pradesh.

My son Rajiv, his wife Sonali; Akshai and Ayushi my grand children are at Chennai. Rajiv has job satisfaction at Sankar Nethralaya. He is VitreoRetinal Surgeon and daughter-in-law is an anesthetist in the same institution. I have two younger sisters and brother-in-laws at Chennai. My father died in 1982 and mother died in 2005. Previously, I was visiting Chennai with my family during summery vacation in May or June and stayed with my parents. Now we visit to see Rajiv and his family.

Suddenly, I thought in July 2007 that I must go back to Chennai and live. I must go back to my birth place. When I die I wish to die at Chennai, where my parents died. I realize that one has no choice in birth and death. It is God's will. I cannot decide when and how death should take place? That is the mystery of life and fact of all living things of universe.

With a strong wish we both my wife and myself went to Chennai and lived almost six months there.

At Chennai, though I worked as part-time consultant there was no job satisfaction. I found life difficult. At Indore, I was comfortable and get all things done quickly and day to day life was comfortable. But at Chennai, labour is costly, difficult to get day-to-day work done. Climate is hot, hotter and hottest. For us transport was auto whenever we have to go out. No friend or people to meet or speak except for my family and sisters. South Indians are more reserved. Only bother for themselves. Not in the habit of mixing or helping others. Some times they are quite indifferent. No doubt they are very regular in their habits, god fearing and they strictly follow the saying "Early to bed and early to rise makes the man healthy."

For six months we enjoyed South Indian food and snacks both at home and hotel. The food in hotel is tasty and hygienic and usually cheap.

At Chennai, I lost my identity. At Indore I am a popular figure. Many know me and wish to say namaste. At Chennai, I was an unknown identity. I was known as father of RRN (Short form for my son). I am not jealous, but I am elated that my son is achieving great success in his career and at his institution. But though I am active, I was unable to utilize my time at Chennai usefully. To establish private practice at a new place for me is a big problem. Where to sit? How patients' will come! Whom to contact? So many uncertainties. Further my wife became isolated, she had language problem. She cannot converse with servants in Tamil. She had no job.

So, finally I thought I must be back at Indore and start working. While at Chennai, I heard lot of phone calls on my mobile from my patients enquiring when I will be back from Chennai. Due to all these reasons I came back on February 11, 2007 at Indore.

## **15. SANKARA NETHRALAYA - TEMPLE OF EYE**

It is an institution of par excellence. One man vision that is Dr. S.S. Badrinath. I wondered how a single man erected the empire! Why many of us are unable to achieve anything in our life time! It is because of his dedicated work, honesty, masterly knowledge, above all his humility and god fearing attitude.

This ophthalmic institute and research center is a Mecca for all blind persons. All difficult cases, rejected cases, cases complicated after surgery else where come to Sankara Nethralaya with a hope to get vision. If a blind man can get 10-20% of vision back he is happy. Patient's are referred not only from various parts of the country but also from Sri Lanka, Mauritius and Bangladesh. There are private wards and general wards and free wards. Patients are to pay for various services like surgery and investigations, and laser for retinopathy. But for free patients everything is free of cost. Free treatment is decided by some documents like income certificate etc. There are about 120 ophthalmologists, 19 anesthetists, and 10 physicians who are working. All the ophthalmologists are highly qualified and work from 8 am to 6 pm or even more till they finish their work. The hospital has OPD, operation theater, their own biochemical and histopathological laboratory. Ultrasound and laser facilities. Hospital has one main building at college road and another hospital building is placed at JKCN (Jayadgur Kanch, Sri Chandrasekarendra Saraswati, Nethra Nilayam) at Pycrofts Road. Other units of the hospital are Navasuja Sankar Nethralaya, SNSSC (Sankara Nethralaya Super Speciality Clinic) and elite school of optometry, CV Shah Rural Eye Hospital. There is a Medical Records Office at Greams Road, Chennai. In addition Sri Narayan's Hospital and Research Center at Vellore and Sankara Nethralaya Bangalore outpatient care are also functioning. The Bangalore center has outpatient care, tele-ophthalmic consultation and collection of specimen for rapid molecular diagnostic tests are done.

In Calcutta, there is Rotary Narayana Sankara Nethralaya and Sankara Nethralaya, Sri Lanka.

On platform 6th of Central Railway Station, Chennai Sankara Nethralaya Information Center is there.

President and Chairman of Medical Research Foundation is Dr. Badrinath S.S. President Vitreous Research Foundation and Director e-Learning is Dr. Lingam Gopal.

Different divisions - specialists of ophthalmology are there namely Refractive Surgery, Clinical Laboratories, Uveitis, Glaucoma, Cornea Services, Cataract and IOL implantation, Community services, Neuro-ophthalmology, Oculoplasty and Trauma Clinic, Squint, Paediatric Ophthalmology, Vitreoretinal and Medical Retina.

Special procedures in ophthalmology like optical coherence tomography, photodynamic therapy, ultrasound biomicroscopy and ultrasonography are also done in the hospital by speciality trained staff.

Support department include biomedical engineering, biostatistics, commercial, development, elite school of optometry, house keeping, human resources, library, maintenance, medical record, electronic communication, ophthalmic photography, optical services, optometry, DBR, Electrodiagnostic and optical coherence tomography, perimetry, low vision Aids, othroptics, refractive surgery diagnostics, patient relations and patient services, projects, transport, security, printing and insurance. There is a Sankara Nethralaya women auxiliary (Swan) which help in maintaining cretch for staff children.

There is internal shuttle trip free by bus between S.N. Main and JKCN almost every hour. Staff bus services are provided to pick up staff from important point of city.

There are only 10 (ten) holiday in a year. Staff members can take Medical leave, are earned leave or leave without pay.

### **Nethralaya's Philosophy**

"Let the word Sankara of Sankara Nethralaya ever remind me and my associates His Holiness command that there be missionary spirit in the project. Let the word Nethralaya remind that the work place is an alaya. Work will be our worship which we shall do with sincerity, dedication and utmost love.

Sankara Nethralaya is a fine example of self sustaining Charitable Organization. Revenue expenditure is met mostly by Hospital collection from paying patients. Most of the capital expenditure for new projects come from the community and donations from both national and international sources. There are many donation schemes for hospital and all of them are exempted under Section 80 G 35C of I.T. Act. Fund collection from

USA is under Sankara Nethralaya Om Trust, and from UK is done by Sankara Nethralaya UK Trust.

On every Thursdays, clinical meeting, PG clinics and staff meeting are held. All the specialities of ophthalmology hold meeting once a week.

There are plenty of paramedical staff namely Secretaries, Nursing Staff, OT boys, etc.

In Jaslok Community Ophthalmic Center (JCOC) eye camps are conducted, concept of eye camps for cataract is bit different from conventional camps. Patients are selected from camp area brought to JCOC kept for few days. Surgery is done and they are sent back to their villages. Transport, food, stay and surgery are done free of cost, operating in hospital setting reduces postoperative infections and blindness.

Every patient who needs surgery has to get fitness clearance from physician. The physician examines, gets routine tests done. The reports are ready in 1 to 2 hours. Then again go through tests and finally the same day between 9-2 pm fitness is given. If patient is not fit due to hypertension or uncontrolled diabetes, physicians writes medicines and calls the patient for review after 2 to 3 days. If fit he is taken for surgery after 3 to 4 days. The main hospital has a big canteen and JKCN has a small canteen. Patients, doctors, residents, nursing and paramedical staff visit canteen. Canteen provides in subsidized rates breakfast and lunch only to the staff and patient attendants.

Blindness can be due to cataract, glaucoma, corneal opacities, retinal and vitreous lesions. If retina is damaged badly or optic nerve is damaged it is difficult to get back vision. Except in detachment of retina, vitreous hemorrhage, retinal hemorrhage surgery is done. Vitreoretinal surgeries are time consuming and results are not excellent always. But if corneal or lens disorder is there and if corrected patient has perfect vision.

### Protect your Cornea

There are many ways one can get corneal lesions. Watching Diwali crackers is fun, but many times it is the one who watches gets eye injury than the one who lights the crackers. Contact lens users can get corneal infection and damage. One of the most cruel way of taking revenge is throwing acid. Cheated lover throws acid on the face of

his sweetheart. A student throwing acid on the face of a teacher, are some examples. Persons working in coal mine many get coal dust over the cornea.

Another example is Steven Johnson syndrome which is a drug reaction. It affects skin, mucous membrane and cornea. At times the mother's cornea is injured due to nail of the child, while playing. Some of the chemicals and antiseptics, used in dish washing and in kitchen while opening the bottle if it spills may go into the eyes. Whenever you instill eyedrops see the label and use it. One may use the wrong bottle and put the drops in eye. One recent example is that the husband asked his wife to get the tube containing eye ointment and the wife brought the tube of fevifix which the man put on his both eyelids without knowing what it is and this lead to both the upper eyelids getting glued and severe irritation of cornea. These corneal injuries are preventable. If the cornea is damaged at Sankara Nethralaya keratoplasty - putting a donor cornea is done. Patient has to wait till the cornea is available. Many times corneal transplantation is rejected and patient needs another surgery.

There is a cordial relationship between doctors, secretaries and paramedical staff. They are punctual. Each one keep a check on another. In case you have come late or go between the working hours permission from superior has to be taken. On Diwali, all the members get sweet packets and a stainless steel vessel as a gift. On Founder's day, 15th August or during such important days, functions are held. The staff member's children who are needy are given merit scholarships. Once a year the entire staff goes out for picnic near Chennai have lunch. Nethralaya bears all the expanses.

Almost every week visiting Professors, Guests or VIPs visit Nethralaya. If such personalities visit, usually their guest lecture is kept. Lot of publications are contributed in various international ophthalmic journals by the staff members. If a paper is accepted in International Conference then Nethralaya pays all expenses of travel, stay for the conference to their staff members.

It is a good example that how a private institution of international standard is managed. How patients are treated so that they go back with great satisfaction.

## **16. I AM PROUD OF YOU**

Today is Fathers' Day. When you were born, I was 30 year old young man. I remember how your mother watched each day of your growth. She said, when you spoke you first uttered the word 'papa'. When you started walking we were worried because you used to fall. So I purchased a carpet so that you may not hurt yourself. We used to run behind you and hold your frock in case you stumble. While we were at Boston, you started to go to school at age 3 at 'Child Study Centre'. There were trainees and teachers for every 5 children, there was one teacher. We would peep through the glass door to see children playing in a big hall. You used to play with colours, paints, crayon etc. and make your dress absolutely dirty. When you grew up and started going to school, your mother was particular about your breakfast but you were a poor eater and used to throw half of the breakfast below the table or behind a box and tell your mother you had completed your breakfast. When you were 9 years or so, you started cycling around the colony. I used to be upset and worried till you came back. Now, you can drive scooter and car very nicely. The day you fractured your forearm bone and suffered quietly in the school campus, I still remember. Your mother noticed the elbow swelling when you came from the school and we rushed to orthopedic doctor who plastered and immobilized your right forearm. That day you suffered and your mother was also in tears.

You have bee hardworking, sincere and honest and disciplined child. These qualities are good and will always help you in life. Do not get perturbed when you see around dishonest persons, lazy persons who climb up due to their money power or political connection. One day they will go down and will have troubled life. Be good, human, kind and be satisfied with what you have. Do not be much materialistic. If you go behind the material word, your needs will never be over and you are always unsatisfied and depressed. Now you are a doctor. Try to gain and build reputation.

Marriages are made in heaven. One has to adjust with partner and family. No one is perfect. You have to fill up your partner's deficiency. Now you have a child, inculcate all good things in her and make her work hard and be regular in her activities.

You have to play many roles in this world. You are a wife, mother, my daughter and doctor for your patients. Each role has to be played successfully. I know, it is tough, tiresome and difficult. But do it with all sincerity.

You have been brought up with too much care and protection. Probably this is the big mistake I committed. You have to face the world boldly and alone. You are easily provoked and get anger. Be calm, even in such situations when you get angry. Never say any harsh word to others in anger. Because it hurts and the person will always remember while you forget.

You want to do many things in life but due to lack of time you are not able to consistently do. For your health, at least give one hour a day for exercises, walking, playing games like badminton. Health is wealth. It is time to you to care for your body. I wish you have a happy, healthy, wealthy, progressive years ahead. Our blessings are always with you.

## **17. CHILDHOOD MEMORIES OF R.R.N.**

You are popularly known as RRN at Sankar Netralaya. Now you are a budding VITREO RETINAL surgeon. I am happy you are well groomed academically and professionally in the last 10 years at the institute by efficient and hardworking seniors.

I remember your childhood anecdotes and penning it in this column. You were in KG-1 and there was a rumour that skylab will fall anywhere on the earth. You knew this from our discussion at home. On that day around 12 noon your mother received phone call stating that you were not in the classroom or in the school. You left the school without the knowledge of the school authorities. Your mother started crying. We went to school and started searching with the help of Chowkidar. The chowkidar suggested to see you on the road towards our home. Still, there was no clue. You used to come to school in Tanga with your sister. So we thought of checking at St.Raphael's school. We went to your Didi's classroom and to our surprise you were sitting back in the classroom of Manju. When we asked why did you do like this, you replied with fear that you were afraid to sit in your classroom because of fear of skylab falling.

You are fond of eating as well as sharing your Tiffin with your friend, specially Chadda. Your mother used to keep snacks for 2 persons in tiffin box. Every now and then you lose your bottle, tiffin box in the school and I had to get you the new one.

In Senior St.Paul, you started going alone by bicycle to school. Those days, traffic was not much. Cars and two wheelers were much less. If you were late in coming home, I would rush to school to find why you are late and often see you watching badminton or table tennis match. Around age of 3 or 4, you made us mad by not recognising colours. When your mother showed you a green card, you called it black. This made us quite nervous and we thought you may be colour blind. Next day we took you to Ophthalmologist. He checked you with charts and declared that your sight is perfect and you are just teasing us by not properly naming the colours.

Every Saturday, you had extracurricular activities in the school like games, music, extempore speech, etc. I remember, I was very much involved in selecting music. I got for your audio-cassettes of Mukesh and Kishore songs and prepared you so that you could participate in music competitions. You have won prizes for several years in fancy dress competition. All of us, your sister, mother and me will consult stage

artistes, bring dress material from Rambagh store, called make up fellow and sent you to school for the event. You dressed as PanditJi, Shivaji, PrithviRaj and so many other characters. I remember after the event, I used to take to photographer and get your picture in the fancy dress.

Your Didi was learning Guitar and she left harmonium. Then I asked you to learn Harmonium from Ringe sir. He taught you the basics of classical music. Now because of this background, you can play Harmonium and Casio little bit. Due to lack of time and load of studies, you stopped instrumental music eventually.

I am glad you are settling well in life. Be less workaholic. Other than hospital, patient, research and conference, there is life elsewhere also. Take care of your health. Play games and exercises. Spend more time with the family.

All the best for you, Sonali and Children.

## **18. LAST DAYS OF MY PARENTS**

It was 6 a.m. on 12/01/1982. My father was experiencing chest pain from the previous night. He kept quite tolerating without informing my mother. Early morning he told regarding the chest pain. My uncle came rushing. Father was taken to Government Royapetta Hospital and diagnosed to have extensive anterior wall myocardial infarction - heart-attack. He was taken to ICCU. The standard therapy was given. He was looked after by (Late) Dr.Rajagopal. That time, fibrinolytic therapy (streptokinase) was not available in our country. This drug is given to dissolve the clot in the blood vessels. He received injection Heparin twice a day. He was recovering and was shifted from ICCU to recovery ward because they needed bed on 19th January 1982 morning. On 19th evening, father probably had recurrence of attack or some fatal arrhythmia which took him away around 7 p.m. He was optimistic and was talking to me that he will go home and take rest. He had many plans for me. He was keen that I come down to Chennai to take job and work. He was an active Lion's club member and was involved in many health projects. He had many contacts with Lion members and was confident that he will manage to get a job for me. But his dreams shattered and he died on 19/01/1982 at the age of 72. His suffering in ICCU was less as he lived exactly one week after heart attack.

My mother had to suffer a lot in her old age. She lived upto age 82 and died on 28/05/2005. She lived for 23 years after the death of my father. Those years, I feel, must have been of pain, loneliness, neglect and financial insecurity. She was all the time in the house. In 2002, she was diagnosed to have carcinoma breast on both the sides. I rushed to Chennai. She had an operation for 5 hours - Radical Mastectomy. My two sisters and their husbands were also present. She came home and was put on anti-cancer hormone therapy - Tomoxifen. Due to her age, radiation and chemotherapy were withheld. She had a huge ventral hernia and was obese. So after the surgery, she was almost bedridden. Eating less, drinking less. By this time, Rajeev, my son, was at Chennai. He joined Shankara Netralaya with his wife. He was useful to my mother and was a great consolation in my absence. At this point, I must thank my sister - Chitra, for taking care of my mother, helping her in day-today activities. My parents stayed with Chitra and her husband since early 1996 onwards. My sister lived upstairs with her family.

In May 2005, one day, mother started having breathing trouble and felt down in bathroom. My son got her admitted in Apollo, Chennai. He informed me of the same and I left Indore and went to hospital at Chennai next day. Doctors at Apollo were seeing her in ICU. She developed diabetes during her last admission. Chest x-ray, CT chest, MRI chest were all done. Doctors were confused between lung infection, pulmonary emboli and cancer spread to lung. Chest specialists, infectious disease specialists, diabetologists, nephrologists and oncologists were attending her. They did bronchoscopy and put her on ventilator. She did not recover from coma and her breathlessness continued. Oxygen was also given during her hospital stay. She had developed acute renal failure. It was probably multi-organ failure. In spite of two weeks intensive therapy, I lost my mother on 28/05/2005 around 6 a.m.

I asked the Nephrologist about his diagnosis of my mother's case. He replied me that he can't say without a kidney biopsy. All most more than 5 super-specialists attended her every day and they charged their individual fees. They never sat together to discuss the line of therapy. Neither they told me what they are doing. It is unfortunate that big corporate hospitals charge fat fees, get lots of tests done daily, do unnecessary referral to various specialists. They never meet together to discuss about the patient. My experience at Chennai Apollo was very painful. Aim of these hospitals is only to earn money and not the care of the patients.

## **19. FIFTY YEARS OF FREEDOM (1998)**

Our country is celebrating 50 years of freedom this year. As a common man's reflection on this year, I want to say a few words.

In 50 years of freedom rupee value has come down. Prices of food, clothing and housing cost have gone up. One cannot live with the pay he is getting in his job. Either he has to do malpractice for earning his livelihood or he has to do a second job or business to supplement his income. We in last 50 years have deteriorated in many fields. We are producing white collared youngsters with degrees who are roaming without job. Young one has to look at the private organization or to establish own private jobs. Our country is not able to provide education, jobs, safe drinking water, and improve the health conditions in rural areas. Not even uninterrupted electricity is provided. Roads are not in a good condition. Corruption and competition is seen in all fields. If there is one post, there are 100 candidates for it. People want to get their things done by hook or crook. Politics is every where. Politician's are corrupt and interfere in day-to-day administration. Education standards have come down. Everybody wants easy money and all the modern facilities of life.

Casteism, religion are on the top in every walk of life. We have become narrow minded. We help our caste, our religion and our mohalla fellow and we do not care for quality and fail to help deserving candidates.

Hospitals have become a hiding place for criminals and prisoners from jail. They manipulate to come to hospital with non-existing complaints. It is the doctor who has to prove whether the prisoner is sick or not by investigation. During this time, the prisoner gets bail. They get admitted either by threatening the doctors or by politicians repeated requests. You cannot annoy the politicians. Every month about a dozen of prisoners with variable crime record are admitted in government hospital.

The remedy for prisoners of jail who get frequently admitted in government hospitals is to strengthen and upgrade jail hospital and dispensaries. Appoint specialist with postgraduate qualification and let them take decision. If they want to consult they

can consult medical college staff, so that our staff see the prisoners in the jail itself or in jail hospital. Instead of admitting in medical college hospital.

Government servants enjoy lot of holidays, gazetted holidays and optional holidays, etc. If in a week there are 4 to 5 holidays, government servants take two CLs and enjoy the whole week as holidays. Officers in any office is most often seen how to delay the file. How to harass and humiliate a person. Work can be done either by recommendation or money power. Instead of helping and solving a problem the baboo is clever enough to prolong and delay the work. They will put up silly notes or queries so that officer cannot take any further decision.

Public are aware of various diseases, through media they have learned more. In media doctor's are crazy for their publicity and appear in TV, write articles in newspapers on medical problems. Some want to get name and fame hence claim themselves as pioneers in some new techniques and therapy. Many of them are false claims. VIP when sick wants to go to best place in country. Hence he wants the government doctor to refer them to Delhi or Mumbai. They are not willing to get treatment in local hospital, even if good physicians and surgeons are available. There is misuse of government funds and facilities. A lot of money is wasted in referring government servants to other centers or abroad.

In the last 50 years, there is increase in the number of God Man, Baba's modern saints in Saffron clad clothes. Their followers are many. Most of them are VIP, Gundas, Politicians and innocent weak minded men. Some of the Babas are of National and International repute. These Babas have accumulated lot of wealth and black money.

There is erosion in moral value of Indian Administrative Service persons. We as public have great expectations. They are the watch dogs of democracy. They are between the leaders i.e. politicians and ministers on one side and the common public on the other. If they are honest, administration can improve. They have to guide, advise the Ministers, at times must be stern and refuse to do wrong policies directed by the Ministers. It is unfortunate today politicians and administrators are in hand and glove. Both are friends and in some instances eat and drink and share the booty.

Inspite of gloomy features there are good things also. All festivals are enjoyed in a grand and gala way by the public may be Holi, Diwali, Christmas or Navratri. Our people block the road and all functions are held on the road side by the community.

Lot of money is collected by way of Chanda and wasted in celebrating the festival. We are united in this although we are disunited in every other field.

Telecommunication has improved tremendously. Every nook and corner STDPCO shops are there. Computer has flooded the market. Banks, Shops, Officers, Post-Offices and Railways. All are utilising it and lot of time and energy is saved. Every one is willing to mail their letters through courier and speed post. Living standards of Urban Indian has improved. Fast food shops in Urban Areas have increased. Recreational facilities have also increased. There are many good, honest, hard working men and women in India, but they are blind to what is happening. They are disinterested in the state of affairs going in the country. Unless they come forward and take active interest in decision making in our country, there is no salvage to problems of the country.

## **20. FIFTY PLUS - BEWARE !**

Someone said that youth is a blunder, manhood a struggle and old age a regret. Age 50 is between struggle and regret. Age 50 is the most disturbing period in one's life. It is a time of transition of intense questioning when fantasy collides with reality. To most of us it is the time to stop and take a stock of past life. You realise already much years have gone and less years are ahead. You can no longer dream. The time before you is limited. You do not ask what am I going to do ? But what I have achieved ? Am I happy ? Am I successful ? Is that what I want to do and be ? Many such questions come to our mind at the age of 50. The decade of 50 years comes as a time of questioning and making choices. By 50 years one is at his peak or as far ahead as he is likely to be. He has everything going for him, power, money and status. If you have not achieved these, you feel frustrated at life. At times you realise the mistakes committed by you in the past, but it is too late to correct them now.

You are seen as a wise elderly man and many may like to take your advise as you are a mature man. In the house, you are the head of the family. Your failures, your inability are criticized by your relatives and friends. Everyone is happy if things go smoothly. But failures are not tolerated. You are blamed for everything. Family economic needs have increased. You have to fulfill the needs of your children, wife and old parents, it is your duty.

At 50 years you look at your children and see that they have grown up faster. Today's child has learned many from television, video, computer and magazines. You realise that they are more smarter than you. Your son at age 20 years, wants to be independent. He stops considering you as a hero. They become your critic rather than your friend.

Mirror shows that you are growing old, grey hair, tired eyes, slower reflexes have developed. The body does not fit into the old suit as you have gained weight. It is the time when overweight, arthritis, heart problems, high blood pressure, high cholesterol and diabetes creeps in. For a woman the crisis is more of a biological one related to menopause. Children are no longer clinging to the mother and the mother feels empty and lonely. It is the period when youthfulness is taken over by old age. One feels that he is not so energetic, active as he was in his younger age. Hence one looks for a miracle pill or drug, which will infuse vitality in the body. This fact is well exploited by

pharmaceutical industries and tall claims are made for restoring vitality by certain products.

This is the point of maximum pressure. The man in fifty is being pulled from all sides. He has to care for his old sickly parents, settle the career of children. It is difficult to make new friends at this age. At job, he is given more responsibilities and the boss is demanding. If promotion is delayed, he is frustrated. The stress of workload both at home and office is terrible and at times this makes you less efficient.

To survive in your business or work you have to constantly acquire new skills and after fifty you are in no mood to learn new skills. If you are type-A personality you are ambitious, always running against time, face hostility at work and are more prone to heart attacks. Neither they take holiday nor they have hobbies. These persons are more prone to accidents, heart attacks, divorce, depression, alcoholism and job failures.

At 50 years you see deaths in the family - death of near and dear elderly persons. You start attending these ceremonies as you are being the eldest. Naturally fear of death comes to your mind.

The 50th birthday is depressing, but it can also culminate in second flowering. Several other qualities can reopen during the process - wisdom, compassion and understanding. Be calm, be satisfied with your achievements in life, stop rat racing, relax, take holidays and go out. Liberate your self from envy, hatred and malice. Try to develop interest in other fields and in others. Stop thinking all the time about you and your family. Develop some hobbies, help the needy and underprivileged. Take interest in religion. To keep fit start doing exercise like brisk -walking. Keep your weight ideal and avoid overeating. Regulate your life style. Start searching for a cause that will give life a new meaning.

## **21. PAIN MANAGEMENT**

Pain is perhaps the most common human suffering. Who has not had pain? May be headache, tooth ache, tummy ache, leg cramps, back ache, neck pain and joint pain, so on and so forth. In all age groups young, middle aged or old get pain due to different causes. Pain threshold - the ability to tolerate varies from person to person. Headache may be simple due to sinusitis or refractive error. May be recurrent in female like migraine, which is a half headache. Attacks of migraine are common in young females which tends to become infrequent as the lady gets older and by the time periods are over migraine disappears. Tooth ache is so unbearable that it compels you to visit a dentist. Abdominal pain may end up like ulcer perforation, pancreatitis, and appendicitis which calls for urgent surgical intervention.

Cancer pain is the worst. It is persistent it is there till death. Medicines are given to reduce the pain so that patient can sleep.

Arthritis is curse in old age. Particularly if knees are affected. Walking becomes difficult, Pain killer, physiotherapy, finally knee replacement. No doubt it is a marvel of modern medicine, heavy fee has to be given for surgery. After surgery you can walk pain free, but you cannot sit on squatting position. How far the artificial knee works? After how many years it gets worn out? When it needs another replacement? It is luxury for rich. By the time, man dies he has imported lens implant in both of the eyes. After cataract surgery, artificial teeth - denture, both knee replaced and one kidney transplanted.

Various pain killers are used in the market. Some of them are addictive. Most of these drugs are not kidney friendly. All the more, if one has diabetes and mild kidney problem usage of pain killer may increase kidney disease. Same is true in old age. Hence, one should be careful in selection of pain killer. Use it only for a short time in adequate dose. Take it with milk or after food. Check urine and some kidney test like creatinine, to make sure the drug is not damaging kidneys. Pain killers like aspirin can irritate stomach lining and produce bleeding. In patients who have asthma, there can be aggravation of asthma by using aspirin and other non-steroidal anti-inflammatory drugs. Non steroidal anti-inflammatory drugs (NSAIDs) include aspirin, ibuprofen, naproxen, naproxen acid, diclofenac sodium, piroxicum, indomethazone and phenylbutazone. There are Cox2 inhibitors like nimesulide, meloxicum and celecoxin which are used as pain killers which produce less side effects compared to NSAIDs, hence they are used in

patients who are unable to take NSAID because of gastric irritations. The safest drug for all purposes is paracetamol. In children large dose of paracetamol may be harmful to liver.

#### Non-pharmacological treatment of pain

Hot and cold packs, massage, physical therapy are helpful in musculo-skeletal pain. Bio feedback, acupuncture, meditation, music therapy, cognitive behaviour therapy are also helpful. Mood and psychological issues play an important role in the perception of pain and response to pain in an individual. Psychotherapy, support groups, counseling can help.

## **22. TEN COMMANDMENTS FOR THE OVER FIFTY**

### **I. ACT AND BEHAVE YOUR AGE**

Face and accept the reality of getting old, its consequences, and the limitations which growing old brings. Quit fooling yourself by trying to look like you were in your youth.

### **II. MOVE ON**

Focus on enjoying people and not on indulging in/or accumulating material things. Enjoy life and meet new people. Do the things you have always wanted to do but was unable to do so, Follow your dream and your hearts' desire.....

### **III. PLAN TO SPEND WHATEVER YOU HAVE SAVED**

You deserve to enjoy it and the few healthy years you have left. Travel if you can afford it. Don't leave anything for your children or loved ones to quarrel about. By leaving anything, you may cause even more trouble when you are gone.

### **IV. LIVE IN THE PRESENT**

Live in the here and now, not in the yesterdays and tomorrows. It is only today that you can handle. Yesterday is gone, tomorrow may not even happen.

### **V. SPOIL YOUR GRANDCHILDREN**

Enjoy and spoil your grandchildren (if you are blessed with any) but don't be their full time baby sitter. You have no moral obligation to take care of them. Don't have any guilt feelings about refusing to baby sit anyone's kids, including your own grandkids. Your parental obligation is to your children. After you have raised them into responsible adults, your duties of child-rearing and babysitting are finished. Let your children raise their own offsprings.

### **VI. ACCEPT YOUR HEALTH**

Enjoy whatever your health can allow. Accept your physical weakness, sickness, limitations and other physical pains. It is a part of the aging process.

## **VII. RETIRE**

Enjoy what you are and what you have right now. Stop working hard for what you do not have. If you do not have them, it's probably too late.

## **VIII. LOVE YOURSELF**

Accept yourself for what and who you are. People, who truly love you, love you for yourself and not for what you have or for what you can give them. Anyone who loves you for what you have will just give you misery.

## **IX. FORGIVE AND FORGET**

Forgive and forget all those who have wronged you. Forgive yourself and others. Forget the slights, hurts, and misfortunes of yesterday. Look towards the future. Enjoy peace of mind and soul.

## **X. BEFRIEND DEATH**

Don't be afraid of death. It's a natural part of the cycle of life. Death is the beginning of a new and better life. SO, prepare yourself not for death but for a new life.

## **23. GET TRIM AND SLIM**

Everyone wants to be smart and feel healthy. Awareness about healthy life style and food has increased at least in urban people, partly through media i.e. newspaper, TV channels. Lots of advertisements are in newspapers. These are mainly two categories. How to get the lost power in sexual life? How to reduce weight? Anar Dana, aerobics, ayurvedic massage or those tiny sweet small pills and yoga as preached by Ramdev Maharaj may help. There are many true gurus as well as pseudo yogic gurus ready to come to your home and teach. They charge a fat amount to teach. If you do not want to spend, you can go to clubs or join summer camps where yoga is taught free of cost or at nominal rates. Kerala oil massage and drug treatment to reduce weight and pain of arthritis is there. Gym, Treadmill exercise you can do under guidance of trainer. Dietetic drinks are available by which you can replace one meal, restrict calories and loose wieght. One of my yoga teachers said by taking ice water bath or wrapping the abdomen soaked in ice water you can loose your abdominal girth. You shiver and loose calories.

For old men like me it is a simple walking for 30 minutes for 5 days a week because it is dangerous to do Treadmill as hidden heart trouble may become overt. Running and other strenous exercises are good for youngsters.

I do not know how the sauna belt can reduce the abdominal girth. There are cosmetologists who use local laser over abdomen to reduce the circumference. Can acupressure, acupuncture reduce weight? One of my colleagueus swears it works wonder. Of course, the last resort is to go for Lipo Suction or bariatric surgery which can be associated with fatal complications at times.

I am walking for last 20 years, reduce diet and the weight scale shows a weight of 75-78 kgs. It fluctuates but never below this. I am frustrated. How the heroes and heroines keep their weight down and show Six Ab. I read in a newspaper that some filmy heroes carry with him gym machines when they go for shooting.

When I go out some good friends comment - 'Hello, you have lost weight' - that makes me happy but when I went to Chennai my brother-in-law greeted me and said 'you have put on weight'. I frowned on his comment and kept quiet. Most of us mantain weight and fluctuate marginally. Unless one is very obese and do dieting and exercises

regularly, one cannot maintain the lost weight throughout life. Once exercise and dieting is stopped, the individual gains weight again.

I will advice, if you are not very obese and do not have hormone problem see that you do not gain weight. Try to reduce some weight or maintain weight and be healthy. It is frustrating for someone to try losing weight and not achieve it. It is our gene to be blamed and not you if you cannot lose weight.

## **24. TAILORS, STYLES & DRESSES**

My wife has changed several tailors in the last 40 years. She is not yet satisfied with any tailor. To stitch a blouse, she will give a piece of cloth and a stitched blouse, which fits as a sample, to the tailor. She will tell the tailor first to stitch exactly like the blouse which she has given, but at the same time she will make few comments like make the neck a bit smaller, slightly increase the length of arm, also increase the length of body so that eventually when the tailor brings the blouse, it will look entirely different. She will be upset and shout at the tailor and ask him to alter the blouse again.

I have found a roadside tailor for minor works like stitching the torn shirt or gown, putting button or altering my pants. Every winter, when I take out the winter clothes, I find my pants have become tighter. So I will get it loosened until a time will come when no longer the pant be altered. Then, I will go for a new pant.

We men have very little choice in selection of colours. It's black, white, grey, blue or brown and nothing more. Ladies can wear many colourful designed, printed clothes.

My daughter always carries a polythene bag with clothes, either to get newly stitched or altered. She will bring her old saree or the one she dislikes and make it a frock or gown for her daughter Amisha. She has few modern tailors where she gives clothes for stitching.

Now-a-days I go for a ready-make shirt or T-shirt which is well fitting. No botheration with tailor.

My son-in-law is allergic to polyester. He wears 100% cotton only. But to maintain it wrinkle-free, needs care and good ironing. My son finds it difficult to get ready-made pant and shirt of his size. The largest size is often difficult to get. Now-a-days lot of ready-made dresses for kids and newborn are available but they are costly. I think one can make lot of money in ready-made children wear. Parents are ready to bear any amounts for their dear child on birthday and other auspicious occasions. School uniform is a booming business. School ties up with a shop and ask the children to get uniform from a particular shop. School authorities may have some self interest. At least 2-3 sets are needed and for PT, separate white dress is also to be purchased. Only parents sending children to private schools and convents can afford such luxury.

It is necessary for a doctor to wear tie, shirt, suit even in hot climate. With this western dress code, we may not be comfortable in tropical climate. Styles change with time and filmy hero. Now-a-days, safari suits are outdated but I still wear as they are not yet torn. I give my old clothes to servants or to the poor when the colour is fading or size is smaller. My daughter is generous. She goes on distributing shoes, chappal, old clothes in good condition to roadside hut dwellers.

My wife hates the idea of exchanging clothes in return of stainless steel utensils. It is time consuming, frustrating and irritating. The vendor will come and ask to show the clothes, frocks, pants, shirts, pajamas, salvar-kameez all are taken out from the cupboard. Then the lady vendor demands few sarees. My wife will bring two more sareers. Now the vendor will ask for a jaree saree and after giving that also, a small tumbler or a small size vessel will be given. My wife gets furiated and collects all the clothes back and keep them back in the cupboard without bargaining any vessel. She must have a wasted two hours on a Sunday morning. Now we are wise. We love to give it free as Vasthradan to needy poor people.

## **25. NARWANI COUPLE - MY NEIGHBOUR**

They are in a flat next to my bungalow. Even before I came to 72, Dhar Kothi, they have been living there. Mr.Narwani retired from Railways and Mrs.Narwani is housewife. They have two sons and a daughter. Sindhi's are great entrepreneurs and are successful in business. From scrap to gold, they may sell and get money. After partition, they came to India and settled down in various parts of the country. I have yet to see a Sindhi beggar. Every member in the family work and earn money. Mostly they are in business.

My friend Narwani is an exception. He was in Government service. His children, after studies, went to Spain and were working with a businessman on readymade garments. Now they have their own business. The daughter is at Dubai and her husband is also in business.

Mr.Narwani is a pensioner. At present, he gets pension of Rs.9,000/- per month. Out of this, at least one month pay he gives to various institutions like CRY, etc. as charity. This is commendable.

He proudly says that the flat was purchased by his sons and given to him. He moves on a Luna-Scooty around the town. He is meticulous in keeping accounts and files. You ask for any help, he is ready to help. Whenever anyone visits his house, his wife will entertain with nasta, laddu, namkin or sindhi sweets. When she talks, she will never allow others to speak. She will go on speaking about servants, about guests coming to her house. When we leave, Mr.Narwani will give toffee.

The man is energetic. Morning he will clean around the flat, take-out the rubbish polythene, etc. and burn them. They regularly go for walking for an hour in the evening. Mr.Narwani is not fond of TV, neither he attends much of functions like marriages. He is healthy, he lives in his own world, happily and satisfied.

50 years of marriage was celebrated by Narwani's children in July 2007. When I had some problem, I asked him what to do. He said, 'be happy, leave the problem to God and he will do the best'.

## **26. MOBILE MENACE**

During the last decade, mobile has come to our life and it has become essential, inseparable from us. We have become more talkative or say expert conversionist. I used to think only women talk more on telephones. Now men are also not behind the fair sex. How did we manage without mobile 10 years back? Even when STD facilities were not there, I remember, I used to depend on telephone operator. Book a call and he will connect you to the desired number. He will be moody. If I know the telephone operator, I will get the call quickly. Otherwise, you book in morning and get the call connected in the evening. Now with mobile phone, no more such harassment. My maid servant, driver, milk vendor, plumber, electrician all have their mobile. At Chennai, every autorickshaw fellow has a mobile. So it is no longer a luxury but a necessity. School students and college students have a mobile and a two-wheeler as minimum requirement for most of the people. If you shell money on mobile, you can get camera fitted in it. You can misuse the camera to take pictures of young girls without their knowledge. SMS is another great discovery. Youngsters send jokes and messages through SMS. They circulate jokes among themselves. Marketing people send an SMS to you about their products and how much you can save money on their product.

I read a newspaper report that a particular girls' college discouraged their hostellers from keeping mobile. This resulted in strike by the girl students and I don't know what happened thereafter.

There have been news from scientists that mobile phone is the cause of accidents. Never go on talking in mobile while driving. But who bother? Brain tumour can develop in individuals who use mobile phone for a long time. This needs further research to justify. Mobile phone can cause deafness.

But it is well known that one should not use mobile phone in ICU where electronic machines, pacemakers are used. Mobile phone may interfere with their gadgets can cause trouble if patient is on the electronic gadgets.

Where are we going in the 21st century. Moderation is needed in use of mobile phone. One must know that mobile phone is for communication and not for useless conversation.

## **27. DIL CHAHTA HAIN KI AWARD MILE**

Man wants to become immortal or at least he is remembered in the society where he lives. In this love for perpetuation of his name, he wants to get award. Other than academic awards, every one will like to get social recognition award. There are many awards other than government awards like Padma Shree and Padma Bushan. Someone has to lobby for you. Your name should come in the media as most suitable person. Government awards are given by recommendations. One should know the political top leaders or administrators.

In your town or city, your caste person give you an award. Agarwal Samaj, Jain Samaj, etc. often recognize their elderly outstanding personalities by suitably awarding. If you join a social organization, like Rotary or Lion's Club, you can get awarded through them during their yearly award ceremony. You can hope to get an award for meritorious social service activity by this organization sometime or another. There are many filmy awards. Previously I knew filmfare awards and now so many awards for film personalities so that every every Tom, Dick and Harry is sure to get an award. Poor school teachers get a farewell on their retirement with Shreephal and Shawl . That is the last time he/she is remembered.

Person's name is given to a street or road and he is remembered. Politicians often get this honour posthumously. Statues of politicians are installed on the road squares. Usually the statues are neglected piece in the course of years, crows and birds sit on them and make them dirty. During riots or communal fights, some statues are disfigured and chopped by mischievous persons.

I hope, people should be remembered by their good deeds which they do to others. If you are a writer, your novels and books will make you immortal. Shakespeare, Wordsworth and Rabindranath Tagore are some who belong to this category. A singer is remembered by his melodious songs. Kishore Kumar and Mukesh are two playback singers of my time who I still remember and love to hear their songs. Try to outshine in your profession and people will remember you for ever.

It is unfortunate that some of whom by their bad deeds are remembered for ever like Hitler and Charles Sobhraj.

I have not received any awards or rewards on any of these above categories. I am satisfied with what I am and will try to do my job with sincerity and devotion. Let's not be mad for getting awards. Be satisfied with what you are.

## **28. ANGER MANAGEMENT**

Anger is enemy of mankind. It is negative feeling and is like a whirlpool in the mind lake. Irritation, frowning, resentment, indignation, rage, fury and wrath - are all varieties of anger according to the degree of intensity. It is a strong emotion of displeasure and antagonism excited by a real or fancied injury. There is a desire for taking vengeance. It is a fire you kindle for your enemy which burns yourself. It is a sin and makes you slave, victim, breaks friendship and destroy reason. Under influence of anger, man abuses and insults. Anger at time sweeps into uncontrollable violence. Anger is the most formidable enemy of peace, knowledge and devotion. If some one wants to correct another person and show slight anger then it is righteous indignation 'Spiritual Anger'

### **What happens to body during anger?**

The nervous system is shattered by an outburst of anger. There is stimulation of sympathetic nervous system and release of adrenaline which increases the heart rate and blood pressure. There is palpitation. Eyes become red, body quivers, legs and hands tremble.

### **Anger in mythology**

Among Hindu Gods, Shiva opens his third eye only in anger, and the offender is burnt to ashes. Saints are also not without anger, Vishvamitra was an angry man. One of Vishwamitra's chief faults was his short temper. He was very quick to anger and sometimes uttered curses on helpless victims, thereby depleting his yogic powers obtained by much penance. People feared his temper and prayed that their actions might not get misconstrued by the touchy sage. Once Durvasha Muni cursed the king Ambarish, who was a devotee of Lord Krishna, for no fault of the King.

When Lord Shiva returned from a battle, baby Ganesha could not identify his father and stopped Shiva from entering Parvati's chamber. Shiva, enraged by Ganesh's impudence, drew his trident and cut off Ganesha's head. Parvati emerged to find Ganesha decapitated and flew into a rage. Shiva, in an attempt to pacify Parvati, sent his men to find a child whose mother is facing away from the child in negligence, to cut off the child's head and return quickly with it. The first living thing they came across was an elephant facing north, so they returned with the head of the elephant. Shiva placed it on the headless body of Parvati's son and breathed life into him.

Srikrishna tells Arjun in Gita Upanishad that "Lust, Wrath & Greed are three gateways to Hell. Therefore, let man renounce these three".

### **How to control Anger?**

Check anger even if there is provocation. Be tolerant. Control your mind. Stop conversing and observe 'moun'. Leave the place and take a brisk walk. Drink cool water. It cools body and mind. Chant 'Om' for 5 minutes. Meditation and prayers are useful. Satsang, Yoga work at time in reducing once anger.

Forget and forgive, don't argue and control emotions because anger hurts you more than the others.

## **29. FOOD & MOOD**

Why do we have mood swings? Why at slightest provocation we get irritated or depressed? We pass through too many emotions like anxiety, depression, sadness, anger and happiness during a day.

Is our food anything to do with our mood? Hippocrates the Greek physician said, 'Let food be Thy medicine' This statement to some extent is true. Food may not be so powerful - a 'magic bullet' as drugs but they definitely modulate and tune our mood.

Starchy food increase tryptophan in brain which is converted into Serotonin. Persons become calm and sleepy. Fruits do not have this effect. Jam, potato, dry cereals have the above effect. Carbohydrates regulate blood glucose. Our brain constantly needs glucose. If one restricts too much of carbohydrates blood glucose can drop to lower level and make you feel weak and with less energy.

There are neurotransmitters like Serotonin, nor epinephrine, acetyl chlorine and dopamine. These neurotransmitters are derived from the food we eat. Dopamine and nor epinephrine keep us alert, attentive and mentally energetic. Serotonin relaxes, decreases stress, tension and makes you feel sleepy. Acetyl choline is formed from choline. Egg is rich in choline. This is good for concentration and memory. It's bad effect is that it raises cholesterol. The list of food and their effect on mood is summarized below:

## **30. NOISE POLLUTION**

Noise is defined as unwanted sound. Sound which pleases the listeners is music and that which causes pain and annoyance is noise. At times, what is music for some can be noise for others. A decibel is the standard for the measurement of noise. 60 db is normal conversation, 80 db is the level at which sound becomes physically painful. The nosiest Indian cities are - Chennai (89 db), Kolkata (87 db), Bombay (85 db) and Delhi (80 db).

Noise is a component of air pollution. With advent of industrialization and urbanization, noise pollution has increased in all metros of our country. It is displeasing to human and animals. It is an environmental pollution and differs from air and water pollution in that the noise disappears fast and does not remain in environment for long periods.

### **Common Sources of Noise Pollution**

Transport system like rail, motor vehicles and aircrafts are some examples. Car alarm, emergency service siren, factory machinery, construction work, barking dogs, power tools, audio entertainment system, loud speakers and noisy people also add to noise pollution. Acute noise pollution occurs during Diwali by crackers, during wedding season, loud speakers, bands and dancing barathi all create lot of noise.

Although industrial noise is one of the less prevalent community noise problems, neighbors of noisy manufacturing plants can be disturbed by sources such as fans, motors, and compressors mounted on the outside of buildings. Interior noise can also be transmitted to the community through open windows and doors, and even through building walls. These interior noise sources have significant impacts on industrial workers, among whom noise- induced hearing loss is unfortunately common.

### **Levels of Noise Pollution**

Noise is measured in decible (dB) scale. WHO recommends 75 dB as explosive limit for an individual. Acceptable noise limits are 45 - 60 dB. Generally, four zones are there in a city viz. industrial, commercial, residential and silence zones. Noise levels permissible at day time for these 4 different zones are 75, 65, 55 and 50 dB respectively. Hospitals should be in silent zone.

## **Effects of Noise on the body**

Noise disturbs concentration, raises blood pressure, increases stress. High sound level exposed pregnant women may give birth to low birth-weight babies and birth defects. It causes hearing loss, sleep disturbances, forgetfulness, severe depression.

- \* Noise pollution makes men more irritable.
- \* It decreases the efficiency of a man
- \* Because of noise pollution, people cannot concentrate on their work and hence, they have to give their more time for completing the work and they feel tiring.
- \* Temporary or permanent deafness

## **Rules & Regulations regarding noise pollution**

In Motor vehicle Act rules regarding use of horns and engines are made. In order to curb the growing problem of noise pollution, the government of India has enacted the noise pollution rules that include the following main provisions:-

- \* The state government may categories the areas in the industrial or commercial or residential
- \* The ambient air quality standards in respect of noise for different areas have been specified.
- \* State government shall take measure for abatement of noise including noise emanating from vehicular movement and ensure that the existing noise levels do not exceed the ambient air quality standards specified under these rules.
- \* An area not less than 100 m around hospitals educations institutions and court may be declare as silence are for the purpose of these rules.
- \* A loud speaker or a public address system shall not be used except after obtaining written permission from the authority and the same shall not be used at night between 10 pm to 6 am

\* A person found violating the provisions as to the maximum noise permissible in any particular area shall be liable to be punished for it as per the provision of these rules and any other law in force.

There is need for creating general awareness towards the hazardous effects of noise pollution. Particularly in our country, people generally lack consciousness of the ill effects of noise pollution. The target area should be educational institutions and more particularly school. The young children of impressionable age should be motivated to desist from playing with firecrackers, use of high sound producing equipments and instruments on festivals, religious and social functions, family get-togethers and celebrations etc. which cause noise pollution. Suitable chapters can be added into textbooks, which teach civic sense to the children and teach them how to be good and responsible citizen.

## **31. MEDICAL ASTROLOGY**

Medical Astrology is the branch of astrology that deals with the workings of the human body. A competent medical astrologer can analyze a person's birth chart and determine bodily strengths and weaknesses, proneness to various disease states, and nutritional deficiencies. In the event of illness or disease, a medical astrologer will use predictive methods to try to determine the severity and duration of the disease. Sometimes a medical astrologer can help determine the course of a disease by the use of a chart called a decumbiture chart. Medical astrology associates various parts of the body, diseases, and drugs as under the influence of the sun, moon, and planets, along with the twelve astrological signs. Each of the astrological signs (along with the sun, moon, and planets) is associated with different parts of the human body. Some may consider medical astrology as pseudo science or superstition.

This type of astrology has its basis in ancient astrology when the astrologer rarely knew the exact time of birth of a subject. Now-a-days, the discomfiture chart can be set up for the time of a diagnosis by a doctor or for the time a person "takes to his bed."

The system of medical astrology has been used to codify the associations of the signs of the zodiac with the parts of the body as follows:

Aries - head, face, brain, eyes

Taurus - throat, neck, thyroid gland, vocal tract

Gemini - arms, lungs, shoulders, hands, nervous system, brain

Cancer - chest, breasts, stomach, alimentary canal

Leo - heart, chest, spine, spinal column, upper back

Virgo - digestive system, intestines, spleen, nervous system

Libra - kidneys, skin, lumbar region, buttocks

Scorpio - reproductive system, sexual organs, bowels, excretory system

Sagittarius - hips, thighs, liver, sciatic nerve

Capricorn - knees, joints, skeletal system

Aquarius - ankles, calves, circulatory system

Pisces - feet, toes, lymphatic system, adipose tissue

The twelve signs cover the body from head (Aries) to toe (Pisces) because Aries is the first sign of the zodiac while Pisces is the last.

The planets are also associated with certain portions and functions within the body:

Sun - heart, spine and general vitality

Moon - stomach, digestive system, female organs, lymphatic system

Mercury - brain, central nervous system, thyroid gland, five senses, hands

Venus - throat, kidneys, thymus gland, sense of touch, ovaries

Mars - muscles, head, adrenal glands, senses of smell and taste

Jupiter - liver, thighs, feet, growth, pituitary gland

Saturn - skin, hair, teeth, bones, the body's defenses, spleen

Uranus - parathyroid gland, neural activity, aura

Neptune - pineal gland, psychic healing

Pluto - pancreas, metabolism, elimination

After examining an individual's natal chart, a medical astrologer gives advice to the client about the areas of the body in which they are most likely to experience trouble.

For instance, an individual with the Sun, Moon, Ascendant, or many planets in the sign of Aries is presumed to have more headaches than other people because of the association of Aries with the head. A person with Taurus strong in the natal chart is predicted to have sore throats and problems with the voice because of the Taurean association with that particular part of the body.

Medical astrology is also helpful in elective surgery. The medical astrologer can pick the best date(s) and time(s) for an elective procedure. Although it is always best to have the time of birth of the person, if this is not possible, the medical astrologer can still help the client pick the most fortunate times for the procedure.

You may be able to determine a tendency toward various types of illnesses, and you can usually see periods of stress or lowered vitality when one could have health problems; but it is not possible nor should one attempt to diagnose illness from the birth chart.

However, once a medical doctor has diagnoses a particular illness, the medical astrologer may be able to ascertain from the birth chart the severity or duration of the illness. It is always helpful to know exactly when an illness began or was diagnosed as then the medical astrologer can ascertain what planetary influences the client was under at that time. And as stated previously, if the moment of the diagnosis is recorded, a medical astrologer can set up a decumbiture chart for that time and gain more information about the course the illness.

Medical astrology is gaining recognition among the public, but it has its own limitations.

Needless to say, one should not try to use elective astrology in a medical emergency. Medical astrology should not be used to diagnose illness. The only person who can diagnose illness is a medical doctor. And even a medical doctor who is also versed in medical astrology would not try to diagnose illness from a birth chart. Predicting the disease on a future date and revealing the same to the patient may have adverse psychological effect on the patient.

## **32. PRICELESS GIFT TO YOUR PARENTS**

Are you surprised to see this caption? It is inevitable that every one has to become old and do you know how old men and women, our senior citizens feel and live in the evening of their lives. Unfortunately, at age 30, we have no time to think about them, no time to share with them, their frustrations, joy, pain and past achievements. Our young men and women should be sensitized to problems of old age.

Senior citizens, if they are pensioners, have some financial support. But, if the bread earner is non-pensioner and wife is dependent on him, then he has to do some job after retirement or depend upon his worthy son for day-to-day expenses. If the children are not worthy and do not help, it is a great problem. For failing health and hospital visits, doctors consultations, they have to approach their children. For expenses and also for taking them to clinic and laboratory as they may not be able to go to them due to disability. The son or grown up grandchildren have to take their work off and accompany them. If they do not have medical insurance, it is difficult for serious health related emergencies which needs ICU admission in a hospital.

Often, elderly are lonely. If one of the partners has died, often the male dies early, then women are left at the mercy of daughter-in-law and son. It is very difficult for a women to live along. She is caretaker of grandchildren. She is busy in cooking, pooja and other daily rituals. Does the family member have time to ask her needs? Can they take her out to meet her old friends and relatives? Do they take her out for recreation, movies, shopping and restaurant? Is she only to be inside the four wals of house and do the household work or if lucky, supervise the maid servants? Does she have to spend time only in Bhajan, pooja and Satsang? In modern days, let's treat our elder women with liberal outlook.

I remember about my neighbour, Dr.Rao, who is 88 years old. He is diabetic and he is on insulin twice a day. He has stopped driving and going to his pathology lab. One day I saw him in the car seated by the side of his son. I happened to pass by and he smiled with beaming face, he said, 'I am going out with my son just for a change'. Such a small act by children make the elderly happy.

I want to quote the following lines from a famous personality. He told his parents one day - 'I am now rich and has all the facilities and I want to gift you something. Please tell me what you want?'. His father called him and asked him to sit by his side and told

him, my son, at this ripe age we need nothing from you. I have only a simple request. If you can spare 10-15 minutes daily and sit with us and talk to us that is enough. This is a priceless gift from you.

So, my young friends, take out time and talk to old folks in your house. This enrich your bond with elders. Your son is watching you. Remember, whatever you do to your parents, same will be given to you in return by your son.

## **33. COMPLEMENTARY AND ALTERNATIVE MEDICINE**

Alternative medicine is any form of practice that is outside the realm of conventional modern medicine. It covers a broad range of healing philosophies, approaches and therapies. Most of these treatments and health care practices are not taught in medical schools. For eg. naturopathy, chiropractic, ayurveda, homeopathy and acupuncture. If the treatment or therapy is done along with or in addition to conventional medicine it is referred to as complimentary medicine, as the two practices compliment each other: For example many Chinese hospitals use acupuncture to reduce the pain during the surgery instead of anaesthetics, use of sesame oil as a complimentary in treatment of cancers, life style changes to combat heart disease.

Complimentary medicine and alternative medicine is a broad domain of healing disease that encompasses all health systems, modalities practices and accompanying theories and beliefs other than those practiced as conventional care in a particular society or country. The alternative medicine is becoming increasingly popular in our country as well as western world. According to WHO between 65 per cent and 85 per cent of the world health care services are classified as traditional medicine. In Europe and Australia it ranges between 20-70 per cent. Many times during the course of illness patients seek an alternative medicine. Why are people going in for alternative medicine! Patients are tired and exhausted in taking allopathic (Western) Medicine for their chronic diseases and find them more costly, more side effects and less effective in curing diseases completely.

Ayurveda is applicable to every living thing, as implied by its name, the science of life. Vedic sciences attribute life to more things than we do- the things such as air, wind, fire, earth, planets, stars etc are all thought to possess conscience like living beings. The basic premise of Ayurveda is that the entire cosmos or universe is part of one singular absolute. Everything that exists in the vast external universe (macrocosm), also appears in the internal cosmos of human body (microcosm). The human body consisting of 50-100 million cells, when healthy, is in harmony, self-perpetuating, self correcting just as the universe is. The ancient ayurveda charka says, 'Man is the epitome of the universe. Within man there is as much diversity as in the world'.

Chiropractic is a form of spinal manipulation, which is one of the oldest healing practices. Spinal manipulation was described by Hippocrates in ancient Greece. In 1895 Daniel David Palmer founded the modern profession of chiropractic in Davenport, Iowa. He observed that the body has a natural healing ability that he believed was controlled by nervous system. He also believed that subluxation or misalignments of the spine, interrupt or interface with the nerve flow. If an organ does not receive its normal supply of impulses from the nerves, it becomes diseased. This line of thinking led him to develop a procedure to 'adjust' the vertebrae, the bones of the spinal column with the goal of correcting subluxations.

Homeopathy: The term homeopathy comes from the Greek words homeo meaning similar and pathos meaning suffering or disease. Homeopathy seeks to stimulate body's defense mechanism and processes, so as to prevent or treat illness. Treatment involves giving very small doses of substances called 'remedies' that according to homeopathy, would produce the same or similar symptoms of illness in healthy people if they were given in larger doses. Treatment in homeopathy is tailored to each person.

Homeopathic practitioners select remedies according to a total picture of the patient, including not only symptoms, lifestyle, emotional and mental states and other factors.

Acupuncture is one of the oldest, most commonly used medical procedures in the world. Originating in China more than 2000 years ago. The term acupuncture describes a family of procedures involving stimulation of anatomical points on the body by a variety of techniques. The acupuncture technique that has been most studied scientifically involves penetrating the skin with thin, solid metallic needles that are manipulated by hands or electrical stimulation.

Laughter therapy: Laughing is found to lower blood-pressure, reduce stress hormones, increase muscle flexion and boost immune function by raising levels of infection fighting T cells, disease fighting proteins called gamma interferon's and B cells which produce disease destroying antibodies. Laughter also triggers the release of endorphins, the body's natural pain killers and produce a sense of wellbeing. Best of all it is free from and has no known side reactions.

Aromatherapy: means treatment using scents. It is a holistic treatment of caring for the body with pleasant smelling botanical oils such as rose, lemon, lavender and peppermint. The essential oils are added to the bath or massaged into the skin, inhaled directly or diffused to scent a whole room. Aromatherapy is used for the relief of pain, care of the skin, alleviate fatigue and tension and invigorate the entire body. Essential oils can effect the mood, alleviate fatigue, reduce anxiety, and promote relaxation. When inhaled they work in the brain and the nervous system through stimulation of the olfactory nerves

Reiki is a Japanese form of healing. It incorporates elements about every other alternative healing practices such as spiritual healing, auras, crystals, charka balancing, meditation, aromatherapy, naturopathy, homeopathy. Reiki involves the transfer of energy from practitioner to patient to enhance the body's natural ability to heal itself through the balancing of energy. Reiki utilizes specific techniques for restoring and balancing the natural life force energy within the body. It is a holistic, natural, hands-on energy healing system that touches on all levels: body, mind and spirit.

Hydrotherapy is the use of water in the treatment of disease. Hydrothermal therapy additionally uses its temperature effects, as in hot baths, saunas, wraps etc. A Bavarian, monk, Father Sebastian Kneipp helped re-popularise the therapeutic use of water in the 19th century. There are dozens of methods of applying hydrotherapy, including baths, saunas, douches, wraps and packs.

Yoga was developed and preferred over the centuries by philosophers and mystics in India. It is basically a method by which we increase the body's supply of energy and remove any interference to the transmission of energy throughout the body. Yoga has specialised in this subject for thousands of years, and streamlined the methods to attain this aim.

Biofeedback is a conscious control of biological functions such as those of the heart and blood vessels normally controlled involuntarily.

Imagery: patients are guided to seed themselves in a different physical, emotional or spiritual state. For e.g. patients might be guided to imagine themselves in a state of vibrant health and disease organisms as weak and destructible.

- I) Major Domain: Alternative Health Care Systems

Example: Ayurvedic Medicine, Unani Medicine, Chiropractic Homeopathic, Traditional Chinese Medicine, Native American Medicine, Acupuncture, Chinese Herbal Medicine, Granny's Medicine

II) Major Domain: Mind Body Intervention

Example: Mediterranean, Hypnosis, Bio-fees Bark, Dance Therapy

Magic Therapy, Laughter Therapy, Art Therapy, Proper and Mental Healing

III) Major Domain: Biological Therapies

Example: Herbal Special Diet Therapies Ortho-Molecular Medicine Aroma Therapy

IV) Major Domain: Therapeutic Massages, Body work and Somatic Therapies

Example: Body Message Alexander technique Hydrothera Reek Therapeutic Token Magnetic Therapy

V) Major Domain: Energy Therapies

Example: Reek, Therapeutic Token

VI) Major Domain: Bio-electromagnetic

Example: Magnetic therapy

Risk of alternative medicine:

1. No large scale study or research as compared to the conventional medicine.
2. Safety and efficacy not known.
3. Although they have low risk but require practitioner's competence.
4. Botanical preparations can be toxic and produce herb drug interactions.

5. Ayurvedic bhasms contain heavy metals and their use can cause bone marrow, liver and kidney toxicity
6. Contamination and poor quality control is there
7. Complementary and alternative medicine is not evidence based medicine.
8. Not useful in emergency treatment, in critically ill patients and in acute conditions.

Potential benefits:

1. Acupuncture to treat depression, attention-deficit hyperactivity disorder, osteoarthritis and post-op dental pain.
2. Hypnosis for chronic low back pain. and accelerated fracture healing.
3. Ayurvedic herbals for Parkinson's disease.
4. Biofeedback for diabetes, low back pain, and face and mouth pain caused by jaw disorders.
5. Electric currents to treat tumors.
6. Imagery for asthma and breast cancer.

## **34. MEDICAL TOURISM**

Medical tourism is when patients go to a different country for either urgent or elective medical procedures. It is fast becoming a worldwide, multibillion-dollar industry. The reasons patients travel for treatment vary. Many medical tourists from the United States are seeking treatment at a quarter or sometimes even a 10th of the cost at home. From Canada, it is often people who are frustrated by long waiting times. From Great Britain, the patient can't wait for treatment by the National Health Service but also can't afford to see a physician in private practice, hence seek medical advice elsewhere. For others, becoming a medical tourist is a chance to combine a tropical vacation with elective or plastic surgery. And more patients are coming from poorer countries such as Bangladesh where treatment may not be available.

Medical tourism is actually thousands of years old. In ancient Greece, pilgrims and patients came from all over the Mediterranean to the sanctuary of the healing god, Asklepios, at Epidaurus. In Roman Britain, patients took the waters at a shrine at Bath, a practice that continued for 2,000 years. From the 18th century wealthy Europeans travelled to spas from Germany to the Nile. In the 21st century, relatively low-cost jet travel has taken the industry beyond the wealthy and desperate. Countries that actively promote medical tourism include Cuba, Costa Rica, Hungary, India, Israel, Jordan, Lithuania, Malaysia and Thailand. Belgium, Poland and Singapore are now entering the field. South Africa specializes in medical safaris-visit the country for a safari, with a stopover for plastic surgery, a nose job and a chance to see lions and elephants.

Health care business is the world's largest after retailing. Global health care revenue is 2.8 trillion US \$, India's health care industry is worth 1.7 billion US\$. This is to grow by 13% per annum for next 6 yrs. In 2004, India treated 1.8 lakh patients. This is to grow substantially at the rate of 25-30%. Medical tourism could account for 3-5% of total health care delivery market. India is rated amongst the world's "must see top ten destination" by Conde Nast (international magazine). A study by CII McKinsey estimated that country could earn 5000-10,000 crores by 2012. Health procedures across world show 200-800% cost difference.

India is emerging as a leader in medical tourism because of large pool of doctors, nurses and paramedics. There are over 650,000 doctors, highly skilled experts who possess English speaking skills. They provide "First World Treatment At Third World

Cost." Complicated surgical procedures are possible at 1/10th the cost. There is increase in use of Computerised Hospital Information System. Software technologists facilitating technology revolution in healthcare, state-of-the-art medical establishment of great repute have come up in our country. There is also strong pharmaceutical sector gaining world recognition. strong generic drug business, low cost of drug development in India. Also India has 5000 years old civilization; renowned for historical, cultural and religious diversity. diverse geographical landmarks, vast coastlines, traditional arts and crafts and vibrant democracy, where there is freedom for citizens and empowerment of women, all these draw tourists to India. Another jewel in the crown is ancient Ayurvedic stream of medicine. rejuvenation alternatives, Kerela's health retreats, naturopathy and yoga. There is also changing consumer pattern in India. Doctors and surgeons post their skills and specialties, pricing on the websites to overseas patients. Media is showcasing India's ability to treat overseas patients in a comparable environment as the West. India is proactively talking to foreign insurance companies to treat their beneficiaries in India by hassle-free cashless benefits.

From consumer point of view, there are negative perceptions like pollution, hygiene, poor sanitation. There is no uniformity in accreditation. Medical insurance provides inadequate cover, there are no global players in insurance companies. Insurance frauds are there and some overseas companies refuse reimbursement. Also there is fear of terrorist attacks, communal unrest and poor connectivity in terms of flights and roads.

As medical men, we must not forget that it is the skills of our colleagues and the administrative acumen of our medical administrators who have managed to provide the technology to support that skill, that has seen India reach a stage from where we are able to provide world class medical care. We have set the benchmark these must not only be maintained but the bar must continue to be raised. So far we have followed standards, soon we must set them.

### **Cost Comparison - India Vs United Kingdom (UK)**

<b>Procedure</b>	<b>UK (USD) approx</b>	<b>India (USD) approx</b>
Open Heart Surgery	USD 18,000	USD 4,800
Cranio-Facial surgery and skull base	USD 13,000	USD 4,500
Neuro-Surgery with Hypothermia	USD 21,000	USD 6,800
Complex spine surgery with implants	USD 13,000	USD 4,600
Simple spine surgery with implants	USD 6,500	USD 2,300
Simple Brain Tumor		
- Biopsy	USD 4,300	USD 10,000
- Surgery	USD 1,200	USD 4,600
Parkinsons		
Lesion	USD 6,500	USD 26,000
DBS	USD 2,300	USD 17,800
Hip Replacement	USD 13,000	USD 4,500

## **35. AJAI IS NO MORE WITH US**

Mr. Agnihotri is our family friend. He is an Ayurvedic Doctor in one of the local Ayurvedic College. After doing the job now he retired. He practices in his house. At times when he sees problem cases he refers it to me. His daughter Shilpa was batchmate of Manjula my daughter. Both of them studied at St. Raphael's H. Sec. School. That is how I am intimate with Agnihotri one more point is his sister Nirmal who died during a childbirth due to anaesthetic complications was actually my wife's roommate while she was at the Hostel in Gwalior doing P.G. Course. They were together in Obstetric & Gynaecology Department.

Mr. Agnihotri has two children a boy Ajai and Girl Shilpa. Shilpa after her high school joined Pharmacy and then got married with a businessman and settled at Mont Abu, Rajasthan.

Unfortunately, Ajai had a problem from birth. At the age of 3 months he was found to have posterior urethral valve which lead to obstructive uropathy. He used to get frequent urinary tract infections. For this birth anomaly some surgery was done at Mumbai may be around 1975. I suppose it was failure and the boy ended with chronic renal Failure and dialysis was opted initially subsequently he had kidney transplantation. His bold mother donated a kidney for her dear son. Transplantation was successful. But then he had to take steroids, antihypertensives, cyclosporine. These drugs are needed to treat hypertension and prevent kidney rejection.

They also stunt the growth and produce short stature. He had moon like face due steroid effect. Years passed, he became a Homeopathy Doctor. One day the transplanted kidney failed and he had to go for another kidney transplant. This time it was his father's turn. Ajai's father gave his one kidney to his son. Again operation was successful, he lived till the age of 31 years. One day prior to the fateful day, he had severe headache. Taken lo choithram and a CT brain showed subdural haematoma. I was told he was again on dialysis and in haemodialysis heparin is used and this might have lead to bleeding.

Efforts were made to drain hematoma but nothing helped finally he died on Sunday the 17th August 2003.

Medical science has advanced and is able to keep Ajai alive till the age of 31 years at the cost of his parent's donating one kidney each, with the agony of seeing their son growing and will die one day. There is tremendous cost of preventing kidney rejection by using immunosuppressive around Rs. 20,000 per month.

Agnihotri has faced all problems to see their only dear son Ajai alive. Modern science failed to give him his full life. Eventually he died at youthful age.

He married 4 years ago a girl from his own relatives. This was not liked by the relatives around. It was a love marriage. Parents approved. In a way they were boycotted and isolated from rest of the family members. Now that girl is a young widow. She married Ajai even though she knew about Ajai's health! That is what I feel a bold but a blind step!

Media men highlight in newspaper about rape, hanging, death by shooting, dowry deaths of married women and chain snatching. Nobody came forward to write about Ajai's real life story, which will tell public about the struggle and emotional trauma you face when you have a sick child in the family.

Ajai's parents are to be congratulated for their bravery, sacrifice and moral support, they gave to their only son who at the end left them forever. Such parents are to be honoured by the Government organization or non-government organization.

## **36. ABHISHEK AND HIS TRAGEDY**

Abhishek, a 24 years young engineer with computer qualifications, got a job at Tata at Calcutta. Only son to his parents. This family is distantly related to my wife. Trouble started 6 months ago probably in January 2005. He had rectal bleeding. He consulted at Jabalpur where his parents are there. He was treated for dysentery. After going to Calcutta he started his job and he had the problem. In April 2005, he showed the doctors at Calcutta and was diagnosed as ulcerative colitis. He was hospitalized for 2 weeks. The parents contacted at Indore and showed to surgeon and got admitted in a Nursing Home. He received steroid therapy orally, by injection route and also by enema. He was seen by DM Gastroenterologist. Abhishek lost lot of weight and became anemic and bedridden. He received 8 to 9 bottles of blood transfusion. At last surgeon decided that he needed pan colectomy that is total removal of colon. Patient was not willing for surgery, but that was the only choice to save his life. Eventually the surgery was done. Ileostomy, opening in intestine made and brought to abdomen. So that fecal matter came out directly through the opening. Not aesthetically acceptable to patients. Ileostomy was covered by a bag. Small bowel was brought down and anastomosed to anal canal. Last portion of intestine was made as pouch and that worked as Rectum. A major surgery. I was told surgeon took about 1 lakh for this surgery. Hospital stay, doctors fee, investigation, blood transfusion, medicines, all worked out and a bill of about 3 lakhs was paid by the family. They left for Jabalpur and in less than one week came back with fever and jaundice. In between once or twice the operated anastomosis blocked. Ileus developed and Abhishek used to vomit and get abdominal pain. Patient was readmitted for enteric fever and jaundice. Again investigations, viral markers for hepatitis, thrice ultrasonography of abdomen, once MRI of abdomen were done. Second hospitalization was for a month. Several consultations were made. Jaundice cleared in a month's time. But he used to get fever and his total WBC count was as high as 24,000. Somehow, after 6-8 weeks, he was discharged when fever settled down for 4 days. He went to Ujjain at his uncle's house. This time again another 3 lakhs expenditure incurred. The surgeon will come daily once, at times twice and say hello to him and go away his consultation daily was Rs. 500, if he comes twice Rs. 1000 was charged.

He needed a second surgery to close the ileostomy that costed around Rs. 56,000/- Till now he must have spent six lakhs.

I thought only CABG and bypass surgery costs 3-4 lakhs. But even ulcerative colitis costs a lot. Abhishek is from a upper middle class family. His father is government servant. How can one spend so much money for illness.

The surgeon is a modern day dacoit. Usually surgeon charge a flat fee for surgery, they do not take money for daily visit. Once the surgery is done. It is surgeon's responsibility to take care of his patient until he comes out from postsurgical phase.

The nursing homes also loot the patients. Charges for investigations are hiked. Room rent, oxygen, service tax are added.

Who will control and check such surgeons and nursing home. These days, there is proliferation of such nursing homes and doctors. Mediclaim and other insurance does not cover fully.

There should be some body, committee, government or non-government agencies to check such doctors and nursing home. So that unnecessary investigations are not done. Doctors fees are not exorbitant. In nursing home rate list should be displayed. If extra money extracted, the management is to be asked to repay the cost paid by the patient.

Government hospitals are not good in patient care, cleanliness of wards and investigations are not reliable. So patients go to private hospital and are looted. Senior doctors, government and citizens should come out with some formula to check such greedy miscreants.

## **37. LIBRARIAN - MY FRIEND**

Mr.Saxena was working in Central Library at Indore. He knew my wife from Gwalior from where he got completed his education. His wife was working at Girls' Degree College as Librarian. They had only one son and two daughters. Sanjay, his son, had many friends and go for party etc. and used to come late in night. One night he was riding a scooter without light and hit against divider on the road and got head injury and died. It was a great shock to Saxena family. Little precautions, carefulness and not coming from part at late night would have saved this youngster from premature death. Both the couple will come to me for treatment for their ailments. Because they were in government service, my hospital prescription was reimbursed and further they had the advantage of taking sick leave from me. Some minor favours from me. I never charged from them even at my consulting room. I was helping them. Years passed and Mr.Saxena retired. One day he came to me with many x-rays. He had back pain, lumbar vertebrae pain. It was more on lying flat. He lost appetite and he has lost considerable weight. The surgeon who saw him took x-ray of spine and it was normal. He was treated with painkillers for lumbar spondylosis/ arthritis. To me, this diagnosis of arthritis was not acceptable. This man who used to be obese, hefty, has lost weight. Pain over first lumbar on lying, pain relieved on sitting and bending, weight loss - all pointed to me on something serious. This sort or a clinical picture can happen with pancreatic carcinoma. Pancreas has three parts - the head, body and tail. Tail contains insulin secreting cells, and if there is a lesion, there it produces diabetes mellitus. Head contains bile duct and pressure over it produces jaundice - obstructive jaundice. While body produces excruciating pain on back pointing to first lumbar vertebra. I asked Mr.Saxena to get CT scan of pancreas, USG of abdomen. Next evening he came with his wife with all the results. I was correct. There was malignancy of pancreas mainly over body with secondary deposit in liver and also there was suspicious growth over right side of colon.

When cancer has spread to liver, colon, the possibility of cure or full recovery is bleak. Patient is destined to die. If a cancer patient is in the family, the whole family is upset emotionally and financially. Lot of money is spent on surgery and chemotherapy.

I was not bold enough to tell the truth to my patient. His son-in-law is a practicing pathologist. I took his mobile number and called him. I told him to meet me immediately.

When son-in-law came, I told him the diagnosis and asked him to go to Tata Memorial Hospital at Mumbai for further treatment.

The family was not ready to take my advice. They felt cancer treatment will make the patient still weak and sick. They went back to their previous surgeon who has treated him. The surgeon advised liver biopsy and colonoscopy and colon biopsy. Lot of time was wasted in these procedures. Then he was admitted in the surgeon's nursing home, where he was taking palliative treatment like IV saline, IV glucose, pain killer, injections and sleeping pills. These type of vague, general practitioner's treatment continued. After 3-4 weeks, when I was looking into the morning newspaper, I saw the photograph of Mr.Saxena in the obituary column.

I was sad and next day I rushed to their home to console the wife and daughter. Wife was sobbing and was praising my surgeon friend for taking care of her husband till the end. My wife and myself came back. I was wondering about this world and the type of patients. I made the correct diagnosis and gave them correct advice. But they neither accepted the diagnosis of cancer nor prepared to take proper therapy for cancer. Whereas the surgeon first of all never diagnosed the case properly. Afterwards, got unnecessary investigations like liver biopsy and colonoscopy biopsy which are of no use once the cancer has spread to different organs. Early cancer therapy would have prolonged his life. Surgeon only gave IV fluids and terminal care treatment. In our country, doctor is highly respected. If he talks politely and pleases the patient, that is enough. No one bothers about doctor's diagnosis and treatment. A good patient-doctor relationship is needed that will mask the doctor's ignorance. I want to emphasise this to our junior doctors who often face problems, abuses and even minor fights. All these can be reduced if as a doctor you give time to patient and talk nicely to him.

## **38. MAKE BELIEVE WORLD OF ADS (Customer Se Jhoot Mat Bolo)**

Consumer products are advertised and false claims are made. Customers are fooled by various ad agencies through media. The print-media (newspapers, magazines) and electronic media (TV and Radio) must have responsibility in selecting ads and publishing. But unfortunately because it is primary source of income, nobody bothers the contents of advertisements. We, as customers, are to be cautious before selecting a product.

For e.g. for weight loss there are many products like fruit seeds extract from Anar, pine-apple, etc. False claims are made by stating that one can lose 5-30 kg weight by consuming the above product. Many Ayurvedic products are also advertised for weight loss. Even Allopathic doctors claim themselves as masters in reducing weight. Photographs of the patient who is overweight is printed and how he became slim after the treatment is shown in the adjoining pictures. Public is impressed by these advertisements and may reach the doctor to purchase a particular product. These ads are not showing the true picture. Weight can only be reduced by eating less or missing a meal and by doing exercises which help in burning calories. There is nothing short-cut to it.

Daily a quarter page ads for a nutritional capsule is given which claims to prevent hair-loss, increase energy, stamina, memory, sight and prevent ageing by removing facial wrinkles - the real rejuvenator. How can a single capsule containing vitamins, minerals and anti-oxidants can serve you all these benefits? We have learned in school about a balanced diet containing adequate calories, carbohydrates, proteins, fats, minerals and vitamins to keep us healthy. There is no need for extra tablet in healthy state. If you have chronic disease or on antibiotics, you may need supplement vitamins.

VITILIGO - Leucoderma (white patch) is a disorder causing cosmetic problem if present on exposed skin. There are many quacks who come forward claiming that they can cure the white patch. Patient becomes poor victim for these quacks and loses lots of money.

Same is for diabetes. Allopathic treatment only controls and never cures diabetes. One has to take treatment namely diet, tablets or insulin lifelong. Patients are

lured hence they rush to the advertised doctor for a cure for diabetes. That disease becomes still worse by stopping the regular treatment and they end up with complications.

Lot of fraud is there in the treatment of sexual problems. Patient is shied to talk to doctor and goes to unscrupulous persons who practice alternate medicine. There is oil, ointment and oral tablets to improve vigor and potency during sex. Lots of money is looted from the patient on the pretext of restoring sexual power.

There is a medicine claim to improve memory of children (specific capsule) so that they will do well and obtain good marks in maths and science (as per ad). Parents are fooled by this advertisement.

Height of a child depends on their parents. If the parents are short stature, child will also be short. During growth period, child should receive good diet and high protein and vitamins. If any serious illness occurs, that can also retard the growth and height. I still do not understand how a particular nutritional powder increases height by 2 inches in 2 months time. The mother in the advertisement tells her child was short-statured and his classmates used to ridicule him. Now because of nutritional supplement height has increased. Normal diet, milk, etc. to a healthy growing child if given will take care of his height. There is no need to give high speed height tablets.

In yoga, there are many extraordinary claims. Many types of yoga like power yoga, dynamic yoga, mud yoga, couple yoga, pranayam and meditation are taught in classes by charging heavily. Today yoga is a panacea for all illness.

Lots of false claims are made for growth of long and thick hair for ladies. Special oil and shampoos are available. Whitening cream, moisturizers, cream for removal of sear, acne are available in market for men and women in separate bottles. Ads are given where a male uses cream of a lady as he is told to use men's cream for fairness. For breast enlargements, capsules are available.

New thing is body shaping garments to make you slim. Life me naya josh laya hai - walker.

These items, cosmetics, health products, facial creams and weight loss are ever increasing. These products are advertised by popular film stars and sportsmen. Because they get money they lie to public and talk highly about the products.

For a healthy life, adequate nutrition, exercise and sleep are necessary. Avoid alcohol, tobacco in all forms. Be regular in your habits. Avoid junk foods. All these precautions will take care of your health and body.

These quick-fix solutions are not really helpful. Sometimes, they are harmful. Some of the herbal ayurvedic medicines can damage kidneys, upsets the hormone system and may suppress bone marrow. Raw plant material so called herbal medicines may be polluted by fungus or other chemicals used as insecticides and may be harmful.

Manufacturer should not give false statements about their products. How can we stop this trend? Media should avoid showing such ads even at the cost of losing their income. Government should come forward with some policy and rules. Until that time customer should be vigilant before going to buy such products.

## **39. PAAN MASALA - TO CHEW OR NOT TO CHEW**

Tobacco's health hazards are well known and established scientifically. It causes heart attack, paralysis, lung disease and narrowing of leg vessels leading to pain during working. During pregnancy, smoking or chewing tobacco causes intrauterine growth retardation. Varieties of cancers involving oral cavity, larynx, oesophagus, urinary bladder, kidney, stomach, pancreas, cervix as well as blood cancer can occur.

Long-term British study on 34,439 male doctors for 40 years concluded that 50% of smokers will die 7.5 years earlier compared to non-smokers. Decrease in survival will depend on the amount and number of years of tobacco consumption.

How about smokeless tobacco use in the form of 'Gutkha' - a variant of paan masala which contains flavoured tobacco in addition to other substances. This has same ill effects as smoking on our body.

Paan masala is a combination of nutmeg, areca nut, catechu, clove, cardamom and lime along with flavoring material and perfume. In 1970, paan masala with all the ingredients hit the market in convenient sachets. These products portable, cheap and has long shelf life. Due to high profile advertising campaign and aggressive marketing, paan masala has become popular with all sections of Indian society. School children, teenagers, college students and even women have become addicted to paan masala. Both urban and rural population is using paan masala. It is available every where, near school, offices, paan shops, provisional stores and some restaurants. Scientific studies do not support the view that paan masala without tobacco is safe or less dangerous. Currently, the paan masala industry is estimated to be over 1000 crore rupees, and has more than 50 brands of products marketed in the country.

What paan masala can cause?

The habit of chewing paan masala can cause oral sub mucosal fibrosis - an incurable, irreversible disease which results in shrinkage of mouth cavity. These persons with mucosal fibrosis carry risk of developing oral cancer (400 times more compared to non users). Allergies and breathing problems with Betel nut (Areca nut)

are known to occur. It can dilate pupil, blur vision, salivation, sweating, diarrhoea and feeling of euphoria can all develop. Heart beat becomes irregular, blood pressure variations occur after ingestion of Areca nut. Paan masala stain teeth, mouth, lips and causes burning and dryness of mouth. There is higher risk of cancer, liver, mouth, stomach with regular paan masala use. If Betel nuts are contaminated with Aflotoxin or Lead then there is risk of carcinoma. It is not recommended during pregnancy and breast feeding due to risk of birth defect or spontaneous abortions. There is reported depletion of thiamine. Use of alcohol with Betel nut causes increased risk of oral cancer. Genotoxic potential namely chromosomal aberrations have been reported with chronic use of paan masala with as well as without tobacco.

#### How to prevent use of paan masala in teenagers and youth?

- \* Ban on the sale of item - Parents and teachers should watch and discourage students from chewing paan masala.
- \* Manufacturer should stop producing in spite of revenue loss which is more unlikely. At least they can come out with least toxic, less addictive formula of paan masala.
- \* Regular counselling and dental check are needed for those who are regularly using paan masala. This will help in detecting early leucoplakia or oral cancer lesion.
- \* Media should stop advertising these products.
- \* Paan masala should not be sold near school and college campuses.

Paan masala is a Wolf in Lamb's disguise. It poses a bigger challenge in current society than smoking. There is need to disseminate the information that Areca nut and essential ingredients of paan masala are addictive and potentially carcinogenic. The myth zero percent tobacco products are safe needs to be re-evaluated.

## **40. PROFILE OF A PROLIFIC WRITER**

Dr.L.C.Gupta passed MBBS from G.R.Medical College, Gwalior. He was one year junior to my wife. He did MD (PSM), DMRE, MD (Radiology) and D.Sc.(Hons.). Subsequently, he served in Medical Set-up of Boarder Security Force in different ranks and retired as Director, Medical Head of Medical Set-up. He had many publications to his credit. He wrote more than 100 medical books and got entry in Limca Book of records. He took keen interest to make public aware an preventable disease through print media and TV. For his socio-medical relief, he was awarded prestigious B.C.Roy National award in 1988. He was awarded Millennium medical author of SAARC nations award in 2002. Besides this, he is a painter and photographer too. His painting exhibition was held in the London art gallery in 1966. He has won awards for photography both in India and abroad.

In 2010, he was awarded Padmashree. His elder brothers whom I know are late Jagannath Gupta, a criminal lawyer practiced at Gwalior and Dr.S.R.Gupta, Retired HOD and Professor at Raipur Medical College.

First, I came in close contact with him when he came to our house in 1991 during his short visit to Indore. He initiated and encouraged me to write books for medical students. Since then, I have written ten books for undergraduate and post-graduate students.

On 26th May, 2010, the cruel hands of death snatched away Dr.L.C.Gupta from all of us. He was sick for a week and diagnosed as acute myeloid leukemia, developed pulmonary complications and died. I have lost a honest friend and guide which is un-reparable.

## **41. BUY TWO AND GET ONE FREE**

These are the days where marketing tactics are largely used in business. For example, if you purchase a gold chain, you may get 5 gm gold coin free. If you purchase, a two ready-made shirts, you will get one shirt free. In Big Bazaar, if you purchase 5 kg of sugar, you may get one kg of potatoes free. These gimmicks are increasing day-by-day. The word 'free' attracts common man's mind.

I only need 2 kg of sugar, still I spend more money and get 5 kg sugar because of the free 'Alu' which I am getting. The shopkeeper is making me spend more money and get sugar more than I need just because I am getting some other item free. This way the un-saleable products are sold. You purchase more than you actually need. Spend more money either cash or through credit card.

Mall culture and use of credit card for purchase of products are often seen in youths as well as middle class families. The annual interest charge by credit card is around 16-18% quite high. One should use prudently credit card and able to pay the amount within the stipulated period to avoid excess interest. If your income is 40,000, spend less than 10000 only by using credit card that is 25% salary. Otherwise, you are always in debt. Long-term loans like house loan, you can take where you get an asset. But, purchasing cosmetics, monthly provisional items, other fancy items through credit card may be avoided.

Once there was an ad stating to bring all your old, damaged, out-of-date items - furniture, radio, clothes, newspaper, etc. Each one was taken on fixed rate per kg. I sold all these unused articles happily and got coupons worth of Rs.20,000/- When I wanted to use the coupons for purchasing a new item, I was told that I can use coupons for 20% of cost and rest I have to pay in cash i.e. if computer table costs 6000, I can use 1200 worth coupons and rest I have to shell from my pocket. In other words, for totally consuming 2000, I have to spend Rs.8000 and purchase goods. There is restriction on purchase of jewelry and food provision by these coupons. I distributed the coupons to my friend and asked them to use before stipulated date.

Is this the marketing tactics of modern world? They teach how to fool and cheat the customer and empty their purse.

## **42. INDOREANS LOVE & LIVE TO EAT**

Who is not familiar with 56 shops and chat shops of Sarafa! It is a great pleasure to visit these places and satisfy your appetite for chat. No where in the country, I found such places where delicacies are available and city dwellers regularly visit these centres, bring their guests to chat houses, Rathlami Sev is so famous that outsider when they visit Indore take with them plenty of packets to distribute to their friends. Sweets are also popular. Few shops are earmarked for Jalebi and imarti. Kulfi for diabetic and non-diabetics are available. There is a shop which keeps all types of sweets for diabetics which are sugar free.

In each locality, there is one or more restaurant which provide poha, jalebi in the morning breakfast. Kachori, samosa and petis are available all the time. If you taste Garadu, you will love and enjoy it. Only the problem is in the night hyper-acidity will trouble you and you have to take antacid tablets. This is because it has too much of red chillie powder.

Shreekhand and BagarBada are Maharastrian specialities. Usal Paav is another dish which some would like. Gavar is a sweet dish of Sindhis. All these food items are available at Indore.

Idli and Dosa have become universal dishes and available also at Indore. In Dosa, there are many varieties including paper dosa. All the cultural and regional dishes are available at Indore city.

Lassi is another delicacy with kesar. It tastes great. During summer, Madhushala's are there which provide juice especially cane sugar juice. Most of the shops take great care in maintaining cleanliness. In summer, buttermilk is available. Some shops are famous and people crowd at these shops for Chach: 'Mix' as it is called mixture of Chach and Lassi. There are many hotels which specialise in various dishes - Chinese, South Indian, etc. Local dishes like Daal Bati are popular on Sundays. During picnic, often one prefer to eat Dalbati. On Sundays, restaurant, 5-star hotels, chat centres are houseful. One has to wait minimum of 30 minutes before one get place to sit. I feel on Sundays at Indore, the housewives get freedom from kitchen and cooking. Is it not great? This is a first step in women's liberalization.

The Indore snacks and food items tickle your tongue and people love to eat outside at least on Saturday and Sunday, if not daily. Remember, about your waist line. Frequently overeating will increase obesity. Your waist line is your life line. Keep it trim.

## **43. INAUGURATION OF A NEW HOSPITAL (NURSING HOME)**

Today you can see plenty of doctors' clinics, hospitals, nursing home and charitable trust hospitals in and around the city of Indore. Last week, one of my junior colleagues opened a big hospital. I was disappointed because I was not invited for the inaugural ceremony. The days are gone when a senior teacher was respected and called to inaugurate the clinic by cutting the ribbon. Now the funda has been changed entirely. Whom should we invite? Those who can help in running the Nursing Home? Those who have referral potential i.e. can refer innocent patients to these five star hospitals? Caste also play an important role. Samaj fellows can help a lot in uplifting nursing homes. Those who run the show will prefer to invite BAMS, RMP, Ayurvedic Doctors, Homoeopathic Doctors, TV channel producers, other media personnel like newspaper reporters, AIR personnel, local administrators, local political leaders. Sarpanch of the village is also important person to be invited. Because, he has much potential to refer the villagers to five star hospitals. Each of these hospitals have PROs who regularly contact potential persons who can refer and assured them of sharing some percentage of income as commission. This beautifully works. Patients come in crowd. Unnecessary investigations are done because the hospital building, instruments, X-ray machine, CT scanner, MRI, ECG and Echo machines are all purchased by bank loan and the Chief or the Director of the hospital is restless to earn the investor money as fast as possible, because he has to pay a fat EMI to the bank every month. There is a medical drug store attached to these hospitals. Usually the chemist keeps IV fluids, antibiotics and commonly used other drugs in the hospital. Patients are compelled to buy the drugs from these chemist shop only. Again there is good margin of profit here.

ICU and ICCU are very clean and the patients are made to feel they are serious and take for a day or two. Here the charges can be anywhere from 1000-3000 per day.

I remember, the incidence which occurred while I was working in a private medical college. In OPD, a patient came with mild chest pain. His vitals, BP, pulse, respiration were normal. His ECG was normal. Still, I asked him to get admitted for a day for observation as it is well known fact that serial ECG is taken may show developing heart attack. After few hours, I went up to see my patient. My patient was struggling in bed. He had an oxygen tube inserted in the nose, pulse oxy-meter fixed over his finger, I.V. normal saline was running through his veins and a urinary catheter was fixed. Patient was feeling as though he is going to die and the doctors are trying to

save. I told the duty doctor that I admitted the patient for observation and why all these unnecessary treatment was given. I was told by the junior doctor that this is a ICU protocol followed in our college. I scrached my head and still cannot understood. It is going to be extra financial burden to the patient. One can observe, wait and start these gadgets only when needed. This can tremendously reduce the cost of medicine and help the poor patient. But the nursing home or hospital earning will go down.

Every hospital writes at the end 'Research Centre'. Actually no research is ever conducted in these institutions. By showing it is a research institute one can get income tax benefits. Research centre should also reserve fixed number of free beds in the hospital. This is also floated.

At this moment, I must admire few hospitals in our town which are really doing good work. There are many honest, academically oriented, kind hearted doctors with good clinical acumen. I salute them with admiration.

## **44. MONSOON MALADIES**

Monsoon has arrived. With onset of rains, temperature has come down. Rains bring health problems due to water born diseases like gastritis, diarrhea, jaundice, amoebic dysentery, cholera, typhoid and giardiasis are a few to mention.

Water stagnation leads to mosquito breeding and this leads to malaria and dengue. Food handlers and flies help in spreading all these infectious disorders. Use of mosquito nets, odomas, all-out, etc. may reduce mosquito problems. Clean the floor of the house and kitchen with phenyl so that flies do not come. It is the time when population of flies increases.

Water contamination is a main problem. Sewage lines may get mixed up with city water distribution and cause havoc. Safe water for the community is the need of the hour. Purification of drinking water, improvement of sanitation and promotion of food hygiene are essential.

### **How to Purify Water - Household Purification of Water**

Contamination in water can be biological and chemical (toxic). Boiling, filtering or chemical treatment of water can remove or kill organisms but will not remove chemical toxins.

\* Boiling - Boiling for 5-10 minutes kills all bacteria, spores, cysts and ova, yields sterilized water, removes hardness, precipitate calcium carbonate and drives CO<sub>2</sub>, taste is altered. It is excellent method of purifying water, but offers no residual protection against subsequent microbial contamination.

\* Distillation - It removes salts, chemicals, bacteria, other microorganisms and provide pure water. Removes minerals from water.

\* Chemical Purification - Chlorine or Iodine are used. Available as tablets and liquid. Not effective after expiration date. After opening, it has to be used in specific time. Bleaching or chlorinate lime is unstable. On exposed to air, light, moisture, chlorine content is lost. When mixed with excess of lime, it retains its strength. Chlorination ensures a free residual chlorine of 0.5 mg./L at the end of one hour contact with water. Chlorine is partially effective depending on water temperature, pH, and

contact time of 30 minutes. Cloudy water needs high concentration of chemical to disinfect. Iodine is more effective for Giardia and amoebic cysts than chlorine. Potassium Permanganate is not used for water disinfection because it has limited effect on cholera vibrio and not effective with other organisms. It alters colour, taste and smell of water, hence not routinely used.

\* Reverse Osmosis - It is good for removing foul taste, smell and colour. Removes dissolved minerals and heavy metals. If it has U.V.system, there is effective disinfection. Disadvantages are that it is a very slow process and lot of water is wasted. For every 5 gallons of filtered water in RO system, water filtered waste is 10-20 gallons. It removes all vital minerals from water. Ineffective in removing pesticides. They can be removed only when RO system is combined with activated carbon filter. It is best to get an activated carbon, reverse osmosis filtered system which eliminates a very wide range of water contaminants.

\* U.V.water purification - Most effective methods of water purifier. Water taste remains unchanged. Does not remove chemicals like chlorine, heavy metals, but if used with reverse osmosis and activated carbon, chemical contaminants are also removed.

### Filters

There are number of devices in the market that filter microorganisms depending upon the micron rating of the filter. Smaller organisms like viruses can pass through the filter. One should be cautious while selecting the filter. Filters can be membrane or depth filter where thick porous candles are used. These candles are of porcelain and remove bacteria and not viruses. They are liable to be logged with impurities and bacteria and needs to be cleaned and scrubbed with brush under running water and boiled once a week. There is difference between water filter and water purifier. Filters do not filter viruses but water purifiers kill all microorganisms down to 0.004 microns.

Choice of water purification system depends upon the cost of the device, number of members in the family, whether only drinking water to be purified or water used for other domestic purposes also.

If you are confused regarding choice of water purifier, best and simple method is boiling water. Enjoy the rains, but take care of rains by taking purified water.

## **45. Does An Apple A Day Really Keep the Doctor Away?**

Ripening is a process in fruits that make them to become more palatable, sweeter, less green and softer. Many fruits are picked prior to full ripening since ripened fruits cannot be transported well as they get spoiled and gets rotten at the destination in few days. 78% of apples come from Himachal Pradesh and 23% of mangoes from Haryana. Fruits are normally transported over long distances to reach the intended markets. In order to keep the bananas survive during the transit time from source to market, it must be picked at 3/4th maturity when they appear green. After arrival at the destination, artificial ripening is used.

Why artificial ripening is practiced by traders?

Ripened fruits are not easy to carry. So, traders pick up un-ripened fruits and artificially ripen them at the places of destination. Traders and retailers are under pressure to ensure regular supply of fruits much before their season. Hence, all kinds of unscrupulous methods are used to ripen the fruits and make them more colourful and attractive. Brightly colored fruits are laced with chemicals.

How artificial ripening is done?

Most commonly used agents are calcium carbide and Ethephon. Calcium carbide is cheap, one kg of this chemical costs Rs.25-30 which can ripen 10 tonnes of fruits. It is indiscriminately used in preference to Ethephon or exposure of fruits to ethylene gas. Few traders wrap a small quantity of Calcium carbide in a paper packet and keep it near a pile of banana or box of mangoes or other fruits. This is kept in close space for one or two days, as chemical reaction takes place because of moisture contents of fruits and heat is produced. This liberates acetylene gas which hastens the ripening process. Thus ripened fruits are soft and less tasty. Ethylene increases the intracellular levels of certain enzymes in fruits like amylase and pectinase. Ethylene is a plant hormone which helps in ripening. It is an explosive gas and is very expensive.

Domestic method for ripening of fruits

Storing un-ripened fruits in a brown paper with few holes and keeping them amidst straw or placing an apple in their midst are some age old methods to speed up ripening. Bag or straw traps ethylene released by the fruits hastens ripening. Apples

release large quantities of ethylene. Fruits and vegetables are to be stored separately. Many vegetables are sensitive to ethylene and get discolored, change texture or taste in presence of fruits.

How to know that the fruits are artificially ripened?

If the fruits are uniformly well colored or if black blotches appear on their surface of the fruits in 2-3 days, you can suspect chemical ripening.

What are the ill effects of artificial ripening?

Calcium carbide generates ethylene which ripens the fruits artificially. Such fruits are poor flavour. Calcium carbide irritates eye, lungs and can cause azoospermia. Calcium carbide may be sometimes contaminated with traces of arsenic and phosphorous hydride which can lead to vomiting, diarrhea, burning sensation of chest and abdomen. Weakness and numbness can also develop. Acetylene gas causes headache, dizziness, mood disturbances and sleepiness.

How to safeguard ourselves from artificial ripened fruits?

- \* Wash the fruits in a sink or a big bowel full of water.
- \* Add table spoon of salt with lime squeezed in it
- \* Allow the fruits to float in the sink of big vessel for 5-7 minutes
- \* Take out and rinse with plain water
- \* Dry and then consume.

Do not select those fruits that have puncture marks, nail marks, ruptured or powdered application on the fruits. Do not buy fruits when they arrive in the market during the off-season or before season. Such fruits are almost artificially ripened. While eating mangoes and apples, cut them into pieces rather than consuming wholly. What looks attractive outside may not be good for health. Fruits that have uniform colour are artificially ripened. Naturally ripening has color variation.

Artificial ripening is banned under the prevention of food adulteration act and violators are liable to be punished as per the law. Use of calcium carbide is to be controlled. New and better techniques or applications which prevent direct contact of the substance with the fruit to be developed. New compounds which are safe to the human health are to be tested. Valid and acceptable methods of using chemicals are to be discovered.

Nutritionists say fruits are an integral part of balanced food as they are rich in vitamins, anti-oxidants, minerals and provide easily digestible carbohydrates. But today, the old saying "an apple a day, keeps the doctor away" may not be true. As long as we eat artificially ripened fruits, our health will suffer from minor to major ailments.

## **46 PERILS OF POLYTHENE BAGS**

India is a third biggest consumer of plastics in the world. Around 500 billion polythene bags are used worldwide. One million bags are being used every minute. Polythene bags take 300 years to degrade. It breaks down into tiny particles that contaminate the soil and water. Even though polythene bags are one of the modern conveniences, we are not able to do without them. They are responsible for causing pollution and killing cattle.

Polyethylene, polyvinylchloride and polystyrene are used in manufacturing plastics. If burned, it emits poisonous gases which can pollute the environment. If buried in the ground, it makes the soil infertile.

Plastic pollution occurs by our unnecessary use of plastic carry bags, big black bin liners, clear sand-witch bags, vegetable bags and variety of other forms used to carry our daily food items. Consumer products are also packed in polythene bags in grocery shops. In any residential colony, one can see plastic bags hanging from the branches of the tree, flying in the air on a windy day, settling among the bushes and floating on the river. They clog up gutters and drain, causing water and sewage to overflow. Such sites become breeding grounds for germs which cause diseases. During monsoon season, they clog the drains causing artificial floods as it happened in Mumbai floods few years ago.

Animals and sea creatures are hurt and killed everyday by discarded polythene bags. Cattle eat polythene bags by mistake and the plastic get entangled in the intestine of the animal and can lead to death of the animal.

There is a poor garbage collection in our country and, especially in our city. Tonnes of polythene bags litter the roads preventing rain water from sweeping into the ground. Over and above, cemented roads of the city contribute further to water collection as it is not able to percolate into soil. Plastic bags litter the landscape and find their way into parks, beaches and streets. They are non bio-degradable.

Several countries already banned the use of polythene bags. In India, states like Maharashtra, Delhi, Punjab, Rajasthan, Himachal Pradesh, Goa and West Bengal have

banned the use of polythene bags. But, how strictly the ban is implemented is yet to be seen.

#### What can substitute the polythene bags?

\* Use of bio-degradable bags - Centre for environmental education has innovated in recycling technology and introduced polyloom. Polyloom is a plastic weaving handloom that helps to reuse and recycle discarded polythene bags. CEE (Centre for Environmental Education) has established eco-friendly, reused, recycling units for paper scraps and plastic carry bags in various parts of our country like Coorg, Ahmedabad, Coimbatore, Delhi, Goa, Patna and Tirupati. Today, the concept has been taken up by many women's self-help groups who gather raw material either by door-to-door collection or by buying it from rag pickers.

\* Paper bags are best option which are eco-friendly and easy to recycle. They decay early, they can be recycled, though the process is tedious. Paper bags are heavier, weigh more and may cost more. While plastic bags contribute to pollution as they do not decay although the cost is cheaper and they weigh less. But, unfortunately, they are not eco-friendly and pollute the environment as they are not degradable.

\* Jute bags may also be used. But they are less available and costly.

Each one of us is responsible for curtailing the polythene pollution. Public should be aware about the polythene bag perils and avoid using these bags. Polyloom bags, which can be recycled, may be the future generation carry bags and in the time to come they will be more popular and extensively used.

## **47. WHICH EDIBLE OIL YOU ARE USING?**

Oil, Butter, Ghee belong to a broad group of food substance known as 'fat'. Excess fat in the body gets deposited in fat deposits and liver. Leads to high cholesterol which circulates in blood vessels and get deposited. This leads to hardening of arteries known as atherosclerosis. This process in human beings starts from cradle. As we grow older, vessels get hardened and narrowed leading to stroke - paralysis, angina and heart attack. When fatty food supply is more than 40% of total energy, there is greater chances of atherosclerosis and its complications.

First, let's find out the meanings of common words associated with oil.

**Cholesterol:** A soft substance found among the fats in the bloodstream and the body cells. Cholesterol is essential for the body's functioning, and there are two basic types; low-density lipoprotein or 'bad' cholesterol and high-density lipoprotein or 'good' cholesterol. Elevated levels of blood cholesterol are an important risk factor for the development of cardiovascular disease.

Also, remember that oil does not contain cholesterol but helps to promote the formation of it in the body. Most cholesterol is not of a dietary nature ie it is formed within the body. It is only found in foods from animal sources such as meat, poultry, shellfish, eggs, dairy products, lard and butter.

**Monosaturated Fatty Acid (MUFA):** This refers to a healthy fatty acid, which lowers the levels of bad cholesterol and triglycerides without lowering good cholesterol levels.

**Polyunsaturated Fatty Acid (PUFA):** This lowers the levels of good and bad cholesterol. This is not beneficial as low good cholesterol increases the risk of developing heart disease.

**Saturated fats:** When consumed in excess, it increases the levels of both the total as well as the bad cholesterol in the blood, thereby allowing fat to be deposited on the walls of the blood vessels. This promotes the formation of blood clots and heart disease.

**Unsaturated fats:** These are considered good for health as they do not increase the levels of bad cholesterol.

**Invisible fats:** Fats present in cereals, pulses and nuts are hidden fats and also known as invisible fats.

**Trans-fatty acids:** Deep frying of food articles in oil leads to blackening of oil which is rich in trans-fatty acids and are harmful to health by increasing bad cholesterol and decreasing good cholesterol.

**Refined oil:** This type of oil has been purified with chemicals to remove any suspended particles, toxic substances, flavour components, colour and odour, thereby leaving behind a clear and bland oil.

**Filtered oil:** Obtained by the traditional cold pressing method, this is filtered once or twice to remove suspended particles.

Our eating habits can delay the process of atherosclerosis. By reducing and carefully selecting fats, we can achieve this. Example of saturated fats are butter, ghee, coconut oil, hydrogenated fats like vanaspati and dalda. They increase cholesterol level in blood.

### Essential Fatty Acids (EFAs)

Essential Fatty Acids (EFAs) are necessary fats that humans cannot synthesize, and must be obtained through diet. EFAs are long-chain polyunsaturated fatty acids derived from linolenic, linoleic, oleic acids and arachidonic acid. There are two families of EFAs: Omega-3 and Omega-6. Omega-9 is necessary yet "non-essential" because the body can manufacture a modest amount on its own, provided essential EFAs are present.

EFAs support the cardiovascular, reproductive, immune, and nervous systems. The human body needs EFAs to manufacture and repair cell membranes, enabling the cells to obtain optimum nutrition and expel harmful waste products. A primary function of EFAs is the production of prostaglandins, which regulate body functions such as heart rate, blood pressure, blood clotting, fertility, conception, and play a role in immune function by regulating inflammation and encouraging the body to fight infection. Essential

Fatty Acids are also needed for proper growth in children, particularly for neural development and maturation of sensory systems, with male children having higher needs than females. Fetuses and breast-fed infants also require an adequate supply of EFAs through the mother's dietary intake. Fats like groundnut oil, sesame oil, safflower oil contain unsaturated fatty acids and does not increase blood cholesterol. They are plenty in vegetable oil than animal fats.

Daily requirement of fats - To meet the requirement of essential fatty acids, 15 gms. of vegetable oil other than coconut oil per day is recommended. 30% of calories to be provided by fats. Cooking oil should not be used repeatedly for frying because it turns black and produces trans-fatty acids which is harmful to body and increases LDL cholesterol and decreases HDL cholesterol. Dalda also contains the same above fatty acids and hence not to be consumed. Large amounts of animal fat consumption leads to atherosclerosis.

Olive oil 2/3rd spoonful, if taken daily, can bring down BP and reduce heart-attack. Almond oil can reduce cholesterol and it contains poly unsaturated essential linolenic acid. Cod liver oil is rich store of vitamin A and D.

Ideal diet should contain 7% of saturated, 13% of poly unsaturated and 10% of mono-unsaturated fats.

Saturated fats Polyunsaturated fats Monosaturated fats

Increases bad cholesterol and decreases good cholesterol	Increases good cholesterol	good
cholesterol	Increases good cholesterol, decreases bad cholesterol	

Eg.

Red meat

Chicken

Egg yolk

Chocolate cream      Eg.

Soya bean oil

Fish

Sea food

Sun flower oil

Corn oil

Eg.

Olive oil

Almond oil

Most of the nuts

Safflower oil

Rapeseed oil

Mustard oil

Groundnut oil

\* Good cholesterol is High Density Lipoprotein (HDL)

\* Bad cholesterol is Low Density Lipoprotein (LDL)/ Very Low Density Lipoprotein (VLDL)

Omega 3 fatty acids reduce cholesterol, protect against heart diseases. Fish, green leafy vegetables, nuts, seeds contain these. They reduce triglyceride. This is a type of fat liberated when adipose tissue breaks into free-fatty acids and triglycerides.

Dietary fat recommendations for healthy adults - It is not which oil you use, but how much oil that matters. Quantity of vegetable oil except coconut oil should be approximately 30 gms. day (around 6 teaspoonful). Butter, ghee and coconut oil are rich in saturated fats (all oils which solidify during cooling) They should be consumed in moderation - less than 10 gms. a day (2 tea spoons). Skimmed milk should be used. Avoid hydrogenated fat (dalda). Avoid egg yolk, organ meat and use lean meat. Dietary

cholesterol should be less than 250 mg. per day. Children may have no restriction in their diet while normal adults and persons suffering from diabetes, hypertension and their complications like heart-attack and stroke should be more careful and restrict their fat intake as given above. Never re-use any type of oil and replace oily snack foods, like potato chips and corn chips, with nuts and seeds.

## **48. WHOLE GRAINS FOR GOOD HEALTH**

Our population consume mostly grains. It makes carbohydrate intake of 60-70%. Whole grains are recognized as source of fiber, trace minerals and vitamins. It has role in reducing blood sugar of diabetic patients, heart disease, obesity and cancer. Now our dietary pattern has changed due to western influence and younger generation likes to eat burger, pizza, French fries and chips.

Cereal based diet is cheaper and healthier. Major cereals include wheat, rice, maize, oats, ragi, barley, sorghum, bajra, jowr and corn. Cereal consumption pattern in our country differ in different parts. North states eat wheat, south zone - rice is the staple diet, west zone consumes rice, wheat, jowar, bajra and corn, while east zone takes fish and rice as main food.

### **Structure of Whole Grain**

All grains have protective hull beneath which is endosperm, bran and germ. Germ is the plant embryo. The endosperm supplies food to growing seedling. Outer covering is bran which protects the grain from environment, weather, insects, moulds and bacteria. 50-75% of endosperm is starch. 80-18% contain protein, vitamins, minerals and fiber. Whole grain can be eaten whole, cracked, split, flaked or grounded. Most often they are grounded into flour for making bred, cereal pasta and other grain based food.

### **Grain Refining Process**

Whole grains are cereal grains that contain germ, endosperm, and bran, in contrast to refined grains, which retain only the endosperm. Wholegrains can generally be sprouted while refined grains generally will not sprout.

During refining the bran and some germ is removed, resulting in loss of dietary fiber, vitamins, minerals, phytoestrogens, phenolic compounds and phytic acid. Vitamin B in the form of thiamin, niacin, riboflavin and pantothenic acid with minerals like calcium, magnesium potassium, phosphorous, sodium and iron are lost.

Whole grain has amino acids like arginine and lysine with high anti-oxidant activity. Common products of whole grain used in our country are whole wheat flour,

Simolina, broken wheat, rice flakes, bajra, jowar flour, pop corn, corn starch and ragi. Fermented cereal products produce batter or dough in preparation of idli, dosa, dhokla and bread. In fermented products vitamin B and E concentrations are increased. Consumption of whole grains help in reducing weight and waist circumference. They also help in control of diabetes, blood pressure and prevent heart attacks. Whole grains reduce cholesterol and other lipids. Fiber in whole grains helps to protect an individual from colon carcinoma.

According to Indian Council of Medical Research Guidelines, 350-400 gm. per day of cereals to be consumed by an individual in order to have a balanced diet. Reading labels can help to make wise food choices. Most packaged good in the grocery store list nutrition information on the package in a section called nutritional facts. They tell the serving size, various nutrients such as total fats, saturated fats, cholesterol, sodium and fiber for serving. Whole Grain Stamp on the food package finds consumer to choose the product of their choice. The Whole Grain Stamp was created by the Whole Grains Council and a panel of scientific and culinary advisors in January 2005 as a visual marker to signal products that contain dietarily-significant amounts of whole grains. The Stamp features a stylized sheaf of grain on a golden-yellow background with a black border. Every product that bears the stamp must contain at least 8 grams of whole grain per serving. Products that bear the 100% Whole Grain Stamp contain at least 16 grams of whole grain per serving and do not contain any refined grains.

Consumer to be educated about the benefits of whole grains consumption through educational programs in school, public places, TV channels, newspapers and health camps.

Making a commitment to eat whole-grains is an advanced healthy diet technique. This commitment will add quality to your diet. However, it takes a lot of effort to eat only whole-grains.

## **49. ANTIM-GALI (THE LAST STREET)**

There is a street in my city known as Antim Gali - the last street. It is a blind street and ends at Mukthi Dham or cremation ground. I am not comfortable to go through that street. Thought of death which is the truth of life makes one shiver. Death is as certain as birth. Body goes through youth, middle age and old age. Body is going through change so create harmony in this chance and not conflict. Some people resist change. When you grow, hair becomes grey. You resist that change and hence apply hair dye to look young. If you are 70 years old, you say that you are 65 years because there is conflict in the mind and you resist the change of old age. Life is not 60 years or 40 years, it is a moment. Live this moment merrily without the fear about tomorrow or future. Life is not a process of discovery but it is a process of creation. Face your past without regret, handle your present with confidence and prepare for future without fear. Passion is the fuel which lights the fire of life. William Penn said "I expect to pass through life once, if there be any kindness let me do it now as I shall not pass through this way again". See the positive side of everything. You can complain that roses have thorns or rejoice because thorn have roses. You can look at the glass as half-empty or half-full of water.

When you become youth, your childhood dies. When you come to middle age, your youth dies. When you are old, your middle age dies. Therefore, death is constantly happening. It is a change. Death is an unknown destination or a new address which no one knows. It is neither insecurity nor alien. It is a form of change. If birth is wakefulness, death is like sleep. Death is separation of the soul from physical body. It is starting point of new life. Birth and death are juggleries of maya. Birth and death are doors of entry and exit on the stage of this world. Life is a journey from cradle to grave runs on good thoughts, good words and good deeds through hardwork, courage, cooperation and compromise. We hold an identity of ourselves inside us based on our education, family, job, relationship and social image. Death removes this very foundation on which our identity is built. So, we feel death has snatched every thing that is ours. Loss in any form is nothing but death. Fear of death is just the fear of continuity or discontinuity. We are afraid about what is next? Death is a deep relaxation.

When your brand new house becomes old after several years, you either try to repair or decide to sell and move to new house. You leave the body to take a new one. You change your cloth or discard your old suit for new one. In the same way, the soul or

aatma discards the body and goes to another body after death. Whether death liberates one from life or not is debatable.

While doctors and healers may delay its sting eventually death bites everyone. How fleeting and precious are life gifts.

## **50. LIFE-STYLE MODIFICATION**

Some diseases are related to life-style like diabetes mellitus, hypertension and heart-attack. In diabetes, there is interaction between genetic factors and life-style factors such as obesity, sedentary life and un-healthy dietary habits. With urbanization, adverse life-style changes occur. Education promoting a healthy life-style, planned urban development leading to increased exercise opportunities and with enlightened food industry making low fat and high fiber food can decrease new onset of diabetes mellitus.

In a study, it was found intensive life-style intervention produce 58% reduction in emergence of type-2 DM. Life-style changes include - increased physical activity, diet modification in those with strong family history of diabetes. Dietary change practices and physical activity are two major wings of life-style. India had 35 millions of diabetics in 2003 and is expected to grow up to 78 millions in 2025. Major causes of high prevalence of diabetes are due to racial predisposition, genetic risk, obesity and rapid urbanization. Something can be done for obesity by life-style modification. Life-style changes combine increased physical activity along with dietary modification. During adolescent and adult period, every person should start life-style modification. Greater emphasis on physical activity to be made. School going children should join NCC training, out-door games, physical training and yoga classes. Students should use bicycle instead of scooter or bus. Safe area on roads for cyclist to be ensured. School canteen should avoid serving coke, samosa, pizza or fried potato chips, biscuits, cakes and pastry. Healthy foods like soya milk, milk, pea-nuts other nuts, chana, idli, kakra, etc. Instead of fried samosa, bake samosa may be served in the canteen. In the neighbourhood of residential areas, parks or playgrounds should be adequate where children can play outdoor games safely. There should be more clubs for indoor games like table tennis and badminton. Schools should have some sort of gym with a trainee. Extra marks to be given to children who play games or such activities. NGOs, service clubs and philanthropic persons should donate money or help in construction of small clubs in every residential locality for indoor games.

Fight against diabetes is not only a challenge for doctors or government, it is a challenge to all our countrymen and women. Unless we wholeheartedly implement all the above steps, it is difficult to prevent or reduce to upcoming disasters. So, wake up, plan and act now to reduce diabetes and metabolic disorders in our children in the next

generation. Adults and elderly can walk to nearby stores for daily purchases instead of using scooters and cars. At offices, use stairs instead of elevators. Try to create healthy workplace. In office canteens, avoid eating junk foods. Eating is not a way to overcome boredom or depression. Avoid eating foods while watching movies, the PVR popcorns. Walk in the morning daily for 30 minutes. Stop smoking, chewing tobacco and alcohol. It is customary for the housewife to give more food to husband. She gains the husbands heart through his stomach. Putting lot of ghee over roti, preparing roti by adding salt, using more cooking oil, giving paratha or paneer-alu-matar daily and deep-fried stuffs - these habits have to be changed. We have to teach housewives regarding healthy diet. Educate her to prepare more salad, milk, curd, fruits daily, reduce intake of oil and ghee. Include healthy fats like nuts, limited ghee, and cheese. Olive oil costs around Rs.2000/- per 5 kgs. Though it is good, it is costly and all cannot afford. If you keep your life-style good, saffola, groundnut oil is good enough. Honey increases triglycerides, so it can be used only like a medicine. All food is good if taken in limited quantity. Fruits are great. Among fruits, some are bad for calorie watchers like banana, custard apple, sapota and grapes. Limit their use. While some fruits are angels because of less calories like orange, papaya or watermelon. The fruit sugar fructose gets converted into triglyceride if eaten on a full stomach. Eating fruits is better than drinking juices due to its high fiber content. No food is fattening if we eat in right quantity.

Appearance of wrinkles and loss of suppleness actually has to do with loss of fat from face. There is no such thing as going on or off your diet. Eating correctly has to be lifelong commitment. Plan as per your activity, life-style, fitness level, likes & dislikes and age. Just as brushing our teeth is part of daily routine so is the planned diet. Diet is not starving or punishment. Extreme diet does not work. Everything herbal need not be good.

We start life-style modification when some disease like hypertension, heart-attack and diabetes hits us. Then we go to gym or slim centre and ask them how much they charge for per kg weight loss or per inch loss and in how many days?

One should start these life-style modifications quite early in life. Why not from young age? Why not we educate our children about healthy diet and physical activity?

## **51. COCONUT WATER - THE ELIXIR OF LIFE**

In our country, coconuts have always been associated with health and prosperity and are present in some form or the other on many auspicious occasions. Young coconuts which have green shells (as opposed to the brown mature coconuts) are the ones with the most water content; this water is called coconut water or coconut juice.

Coconut water (Naariyal Paani) is an energy drink. It is a best natural drink. It is tasty, cool and refreshing. It is good in dehydrated state like acute diarrhoea. A natural isotonic beverage with similar levels of electrolytes as the human body, coconut water helps in preventing dehydration and relieves exhaustion by replenishing the natural salts lost by the body. It is widely used in tropical countries as a means for oral rehydration needed during diarrhoeal attacks. It has high potassium content and low sodium content, hence, it is good for hypertensive patients. Coconut water contains electrolytes, vitamin C and Riboflavin. It is fat free and low in carbohydrates. It is low in glucose (sugar) content. It contains 95.5% water, phosphoric acid, calcium oxide, magnesium oxide in addition to sodium and potassium. It has a calorific value of 17.4 per 100 gm. For all those people who are trying to lose weight, drinking coconut water would prove quite useful. This is because it aids in weight loss.

### **Health benefits of coconut water**

" It detoxifies and fights viruses, helps to heal acne and skin spots. Stops fatigue, boost immunity, balances body pH and cools body. It is best in patients recuperating from acute illness.

" In the heat of summer when you are looking for something other than water to quench your thirst, you can have this nutritious and refreshing beverage instead of sugar and calorie laden aerated drinks and fruit juices. It is naturally sterile and so perfect for drinking while travelling without the fear of contamination.

" It is essentially fat free and has zero cholesterol and some studies have reported that it can have some effect on improving "good" cholesterol levels (HDL) in the body.

" Coconut water is a natural diuretic and so increases the flow of urine; this helps prevent urinary tract infections (UTI) as well as reduces the incidence of kidney

stones. Coconut water also helps relieve constipation, improves intestinal function and promotes digestive health - it is often recommended to people suffering from acidity and ulcers.

" Constipation, sluggish digestion and heartburn are common problems during pregnancy and can be helped to some extent by drinking coconut water.

" Coconut water contains high levels of lauric acid which is converted into monolaurin by the body - a disease fighting fatty acid derivative. Monolaurin has antiviral, antibacterial and anti-prozoal properties

" External application of coconut water prevents prickly heat and summer boils in body.

" Coconut water forms an excellent tonic for old and sick people who find it hard to digest solid and even semi-liquid foodstuff. Coconut water provides them various minerals and vitamins which they otherwise could not get.

" Coconut water is a natural isotonic beverage with the same level of electrolytic balance as we have in our blood. It's a fluid of life. Being an isotonic solution, coconut water helps replenish the fluids and minerals lost by body, when it indulges in a rigorous physical activity. In fact, many people involved in athletics or regular exercise prefer consuming it after their workout.

" Coconut water, when consumed along with one teaspoon of olive oil, can help get rid of the intestinal worms. Consume the mixture for three days in a row and find your stomach free of any worms.

" If you are suffering from a hangover, after having too much booze at last night's party, have a glass of coconut water. It will help you feel refreshed and get rid of other hangover symptoms as well.

#### Caution

Coconut water is not to be consumed by persons having chronic kidney problems as, in kidney failure, the body is unable to excrete potassium so there is a raise in potassium level. If coconut water is taken by such patients, the potassium level further

goes up and high potassium may cause heart-rate disturbances and may complicate the illness.

## **52. MALL-CULTURE IN HEALTH CARE**

Webster's English Dictionary describes "Mall as an urban shopping area (venue) with a variety of shops facing onto space reserved for pedestrian traffic". There are many malls in our city where people crowd. Mall attracts people to buy many things which they really do not need. This culture has invaded healthcare system too. Health malls are already there in city of Chandigarh and New Delhi. Probably the first Health Mall opened at Chandigarh in 2008.

Recently I happened to see a health care supplement of daily. It gives various articles - more of advertisements by Allopathic, Homoeopathic and many other specialty doctors. But in modern days, advertisements pay. In one such health mall, there are shops for ENT unit, diet nutritionist, foot care, physiotherapy, heart unit, lab facilities, obesity and diabetic clinic, dental clinic, eye-clinic, herbal and cosmetic shops, wellness, music and book shops, footwear shop, mother-baby products, health and fitness equipment and a shop for organic food.

Skin specialists have become cosmetologists and promise for a flawless duty and give complete cosmetic tips. Dentists have also joined the bandwagon. Health mall is definitely a great idea. These malls are visited by the rich and the affordable persons. What about poor and middle class patients? They can't afford such luxury. Health mall will definitely sell their products at a premium costs. High profile shop rents and money spent on advertisement will also be included in the billing. Let us take care of poor with cheap and affordable health care system. We must be able to provide good quality and affordable health care to all irrespective of socio-economic status. How much will these health malls can cater to the poor, only time will tell.

## **53. CHILDHOOD & ADOLESCENT OBESITY**

Anti Obesity Day is observed on 26th November. This is a major health problem. Today's obese child will be tomorrow's obese adult and will suffer from the chronic diseases like diabetes, hypertension and heart problems. Something positive has to be done in view of increasing prevalence of obesity in our country. Metabolic syndrome is a name coined to those who are obese, have lipid abnormality, glucose intolerance and hypertension. Prevention of adult obesity will need prevention of childhood obesity.

What causes childhood obesity?

Most important and the only cause is overeating and underutilization of calories. Hormonal and genetic causes are rare. Over-feeding by mothers, use of junk-foods like noodles, pizza, burgers, samosas, so called 'burger-cola culture' has added to the problem. Due to constantly changing life-styles, children have become more passive. Space constraint in cities today has left children with no opportunity to play enough. Busy housewife-cum-office going mothers try to give their children quick ready-made food like chips, maggy and other such snacks. T.V. ads show lot of junk-food as good healthy foods and this misleads children and mothers.

Bangalore based Edusports surveyed 4000 school students between 5 to 14 years in 15 cities and found nearly quarter of them had high body mass index which is a major of obesity. In urban Delhi, it was 16% in 2002 and has gone upto 24% in 2006-07. Recent study reveals 29% of private schools students were obese as against 11.3% of government school students. Among a total 1496 school children between 10-15 years, 86 were obese in Davangere city study. Prevalence of obesity in girls was 8.82% and in boys 4.42%.

How to prevent obesity?

- \* Hypo-caloric diet, exercise, behaviour modification will help.
- \* Traffic light diet - a simple format used effectively for pre-adolescent and pre-school children. It uses simple colour coding scheme to categorise foods into -
  - Free consumption of food - low caloric foods - green colour

- Moderate consumption of food - moderate caloric foods - yellow colour
- Very limited consumption of food - high caloric food - red colour.

Such a traffic light chart to be displayed with details of food material in the house, schools and canteens so that children avoid consuming high caloric foods.

- \* Use of glycemic index foods, high consumption of calcium and increasing fiber content of diet will be helpful in weight management.

#### Universal guidance for obesity prevention

Infants - Encourage sustained breast-feeding for 3-6 months.

Toddlers - In diet, emphasise vegetables and fruits also. Minimal intake of juice and other sweetened beverages. Establish physical activities at playgrounds and outdoor games. Establish healthy Television habit - less than 1 hour per day and no watching TV while eating.

School age children - All the above and physical activities. Organise sports, outdoor plays, walking and bicycling. Behaviour support on healthy body image, emphasising strength and health

Adolescents - Watch out for and discourage excess restaurant eating, avoid eating snacks in between meals. Encourage sports activity

In conclusion, public program to increase the awareness regarding physical activity in children will go a long way in preventing obesity in children. Encourage life-time sports and support recreational physical activities and family participation. School should play a major role in maintaining physical activity and nutrition for children. Drugs and surgical intervention are the last resort used only in massive obesity with comorbid disorders.

## **54. HEALTH LITERACY & DIABETIC CARE**

When we use the term 'literacy', we think this refers to the ability to read and write a particular language. But, literacy includes other skills such as speaking, listening and maths' skills. It also includes ability of a person to understand and able to act on the information provided.

Health literacy is defined as the degree to which individuals have the capacity to obtain, process and understand basic health information and make appropriate health decisions. Many patients and family members even after good literacy skills have difficulty in understanding complex health care system, medical recommendations and health information. They have difficulty in understanding consent form before surgical operations, prescription labels regarding dosage of medicines and risk of over or under dosage. Patients with poor health literacy have worse self management skills and this leads to worst clinical outcomes and higher rate of mortality. Chronic diseases like diabetes need self management under the guidance of treating physician. Recent studies have demonstrated diabetic patients with poor literacy skills having poor knowledge about diabetes are not able to control their blood glucose levels. Some are unable to identify the normal range of blood sugar, unable to use and interpret glucometer reading, unable to calculate amount of carbohydrate in a pack containing potato chips or a plate of noodles. They struggle to understand medication and insulin dosing. There is confusion about when to take diabetic pills before or after food or any time of the day. Many are not aware of importance of testing urine for acetone. Signs and symptoms of hypoglycemia, foot-care, importance of exercise and technique of insulin injection are also not well understood by these patients. These patients often depend on nurse or compounding for day-to-day insulin injections. There are many misconceptions about diabetes like - insulin therapy means that it is the last stage of disease. Patients feel that they can fast and feast and accordingly stop or increase the insulin dosage. Some even believe that diabetic drugs may damage kidneys. Hence, each diabetic has to be literate enough to know about his disease and complications.

Physicians who deal with low literacy diabetic patients have to educate the patients by means of simplified oral communication focusing on key messages, clarify and inform these messages so as to improve the understanding of patient about diabetes. Using the teach back approach where a health care provider ask patient to confirm understanding of key messages can be helpful. Charts, exhibitions, pictures

demonstrating complications may be useful. Providing literacy sensitive diabetic education materials and enhancing health communication could potentially improve diabetic related outcome.

Establishment of diabetic teaching units in hospitals will have an impact on patient health literacy. A newly diagnosed diabetic without complications needs to be admitted for a week. Nurse, dietician and physician educate the patient on various practical aspects of diabetic care. No doubt, it adds to the cost of therapy but is useful in long run to the patient. Health insurance should come forward in reimbursing the cost of such admissions.

Today, doctors are busy in their rat race and have no time to educate the patient. They do not understand importance of diabetic education. Dietician, diabetic nurse, counsellors and other paramedical staff should be well trained by the physician so that they help the physician in health literacy of their patients. This is the only way we can effectively control chronic diseases like diabetic mellitus.

## **55. MEDICAL GEOGRAPHY**

Medical geography, sometimes called health geography, is an area of medical research that incorporates geographic techniques into the study of health around the world and the spread of diseases. In addition, medical geography studies the impact of climate and location on an individual's health as well as the distribution of health services. Medical geography is an important field because it aims to provide an understanding of health problems and improve the health of people worldwide based on the various geographic factors influencing them.

Medical geography has a long history. Since the time of the Greek doctor, Hippocrates (5th-4th centuries BCE), people have studied the effect of location on one's health. For example, early medicine studied the differences in diseases experienced by people living at high versus low elevation. It was easily understood that those at living low elevations near waterways would be more prone to malaria than those at higher elevations or in drier, less humid areas. Though the reasons for these variations were not fully understood at the time, the study of this spatial distribution of disease is the beginnings of medical geography.

An example of geography aiding medicine occurred in the early 20th Century in Colorado. There, dentists noticed that children living in certain areas had fewer cavities. After plotting these locations on a map and comparing them with chemicals found in the groundwater, they concluded that the children with fewer cavities were clustered around areas that had high levels of fluoride. From there, the use of fluoride gained prominence in dentistry. Other examples related to Indian geography and some of the diseases are as below:

" Cholera is native to Ganges delta in Indian sub-continent. In 1992, V Cholera epidemic started from south-eastern India. Currently, 90% of the cases reported by WHO are from Africa.

" Flourosis is seen in those who drink well water, specially in areas of Punjab and Andhra Pradesh. The disease produces pitted enamel, brittle bones and often leads to paralysis of limbs.

" Lathyrism is caused by ingestion of 'Kesari Daal' (Lathyrus Sativus) mixed with 'Tuar Daal'. Chronic use of this toxic daal leads to paralysis of lower limbs. The disease is seen in Madhya Pradesh around Rewa district and in adjacent Uttar Pradesh state also.

" Epidemic dropsy is seen in West Bengal where people use mustard oil for cooking. Mustard oil gets contaminated with Argimonum Mexicum which leads to vascular damage and cause swelling of whole body.

" Leprosy is seen in Asia, Africa and Latin America. In India, many leprosy patients are seen in Tamil Nadu and Andhra Pradesh.

" Goiter is a swelling of thyroid gland occurs due to iodine deficiency. This disease is prevalent in many mountainous regions of India near Himalayas.

" Bilarziasis is typically seen in Ratnagiri District of Maharashtra. The infection affects bladder and the patient passes blood in urine (haematuria).

" In Kerala, pancreatic calcification with diabetes is seen due to Topica ingestion. Also, Endomyocardial fibrosis is common in Kerala and it results in enlarged heart and cardiac failure.

" Silicosis is seen in employees working in slate factories. Silica is used for making slate pencils. Exposure to silica dust causes lung disease known as Silicosis. This is seen in Mandsaur district of Madhya Pradesh.

" In coal mines of India, coal workers pneumoconiosis is seen which damages the lung and also predisposed for Tuberculosis.

" Infections like 'kala azhar' (Leshmaniasis) is seen in tropics and in our country in Bihar state. This is characterized by fever, Cachexia, Anaemia, massive spleno-hepatomegaly with blackening of skin.

Today, medical geography has a number of applications as well. Since the spatial distribution of disease is still a large matter of importance though, mapping plays a huge role in the field. Maps are created to show historic outbreaks of things like the 1918 influenza.

Through the efforts of the WHO, other organizations, and local governments, geographers are in fact able to monitor the spread of disease fairly accurately. As such, medical geography has become a significant area of expertise within the discipline.

## **56. SANJEEVANI FOR REJUVINATION**

My friend Subbu has many health problems. He has diabetes for over 40 years. He got it at age 30 for no fault of his. His 'nana' maternal grandfather had diabetes. Hereditary gifted him diabetes. After 10 years, he developed high blood pressure. He is no doubt overweight. His lipids are also elevated. Luckily, his kidneys and eyes are perfect. One fine day during his annual health check-up the ECG showed right bundle branch block. He started having angina, the heart pain which warns you that you may get heart-attack. Doctors suggested echocardiography to study the heart size and valves. This study showed left-ventricular enlargement with mild aortic valve leak. He started getting extra beats after few years. Doctors call it extra-systoli. He has a stiff neck so called cervical spondylosis for over 10 years. Of late, the cervical spine is troubling. He gets nerve root pain radiculopathy i.e. the neck nerves are getting compressed by spondylosis. He also has diabetic neuropathy. Occasionally prostate gives him urinary problems. In spite of all these, he is active and working.

His good diabetic control has helped him to live long. He is regular in habits, eat at fixed time and limited calories. He avoids overeating. He has been walking for 30 minutes daily all these years, gets his lab-reports every 3 months. He self monitors blood sugar every week or when needed. He checks fasting, post-meal and bed-time blood sugar in different days. While going to parties, he eats carefully those items which will give him low calories. He is in the habit of daily taking fruits like papaya or apple. He is a non-smoker. He tries to keep his weight under control. These habits has helped him in preventing serious complications like retinopathy and nephropathy.

He has to spend all these years for medication, frequent laboratory investigations and doctors fees. He hopes to live longer even with all these adversities. Often, he wonders how he can rejuvenate himself. Anti-oxidants, vitamines, eating less, eating fruits and healthy foods, can all this prolong life? He is tried of taking daily tablets. At times, he thinks yoga may be the answer for all these problems. Can meditation and pranayam help him?

He read about stem-cell therapy and one day contacted me. He asked me can stem-cell cure his problems. Stem-cells have potential to modify at different sites of the body into different cells. Stem cells can get converted in pancreas as beta-cells, in muscle become muscle cell, in heart it can get modified into heart cells, in brain it

changes into brain cells and in bone into osteoblasts. But, beware, they can multiply and become cancerous growth also.

Stem cell therapy has been tried in diabetes. In 6 months time of therapy, insulin dosage has come down by 50%. It is a non-invasive procedure that does not require any surgery. In adults, it can be done under local anesthesia. Bone marrow cells of the patient are injected into vein or into pancreatic artery along with umbilical cord stem cells. Stem cell therapy is used in spinal cord injury, stroke and chronic liver diseases. In our country, there are few centres like Puna, Chennai, Bombay and Delhi where research work is going on stem cell therapy in medical disorder.

Future may entirely change our concept of treatment of chronic diseases like diabetes, heart-disease and liver diseases and may be a decade from now Subbu will get relief from all his disorders through stem cells.

## **57. STEM CELL THERAPY IN DM**

Diabetes Mellitus is a chronic disorder characterised by hyperglycemia due to insulin deficiency or insulin resistance. There is no permanent cure for Diabetes. Only way is to replace insulin producing beta-cells. Whole pancreatic transplantation and purified pancreatic islets transplantation are the answer to cure for diabetes. But scarcity of suitable donor and morbidity, high cost involved are limiting factors for pancreatic transplantation.

Islet cell transplantation is less invasive procedure and safer than total pancreatic transplantation established in year 2000. Isolated islets carry less antigenic property, need less immunosuppression with fewer side effects. But major disadvantage is the life-long commitment of immunosuppression which is costly and has side effects. High dose calcineurin inhibitor therapy worsens nephropathy<sup>1</sup>. After the islet transplantation, the clinical improvement in hyperglycemia lasts for 2 years. Subsequently, the islet function declines. Unless more cells are transplanted, euglycemia is not maintained. Patients eventually returns to full insulin dependency<sup>2,3</sup>.

Stem cells hold great promise to provide a ready source of transplantable, insulin secreting tissues. Soria et al<sup>4</sup> showed that isolated beta-cells in the absence of other islet cells are less responsive to changes in glucose concentration than intact islet clusters made up of all islet cell types. Hence, stem or precursor cell types can be cultured to produce all cells of islet clusters. The main goal is not only insulin biosynthesis but also its correct processing, storage and regulator secretion in response to physiological signals.

Soft permeable coating has been developed to hide cells from the immune system. This protect cell from an immune attack while allowing them to sense glucose and secrete insulin in response to hyperglycemia. Even if cells do not survive for a patients life-time, bio-degradable coatings will break down in the body, could theoretically allow new cells to be transplanted without recovering the build-up or removal of capsule skeleton. The most extensive human trials were conducted in Moscow. The Auckland, Newzealand company uses beads made up of alginate - a gel forming polymer. They reported a trial involving 7 type-1 DM patients who received transplants of alginate encapsulated, neonatal pig islet cells. Present encapsulated

strategies have yet to show efficient performance of islets. Encapsulated stem cells derived therapies in diabetes may ultimately work.

#### Potential sources of beta-cells therapy in diabetes1

- \* Xenogenic islet cells
- \* Human islet cells from cadaver
- \* Engineered insulin producing cells
- \* Stem cells - embryonic stem cells
- \* Adult stem cells from bone-marrow and from umbilical cord
- \* Pancreatic stem cells from pancreatic duct

Stem cell therapy implies the replacement of diseased or lost cells from progeny of pluripotent or multi-potent cells. Both embryonic stem cells (derived from inner cell mass of a blastocyte) and adult stem cells have been used to generate surrogate beta cells. There is failure in trans-differential into pancreatic beta cells after transplantation of bone-marrow cells in mice. Finding the right way to protect cells and intellectual property will be key for getting cell therapy to patients.

Human Embryonic Stem Cells when differentiated into beta cells do not respond correctly to cues in the blood stream i.e. not properly responding to glucose level. Transplanting less mature cells into mice showed improvement in diabetes, but tumors developed in 5% of the treated mice suggesting that some of the progenitor cells never stopped dividing. At the moment encapsulation is the only way to ensure prevention of tumors and autoimmune attack.

In autologous stem cell therapy, the stem cells are given into pancreatic artery via catheter. Patient who cannot safely undergo catheterization procedure may elect to receive the stem cells intravenously. Overall improvement reported in studies included more stable blood glucose, lower fasting blood sugar, decreased leg pain, lower B.P. and absence of hypoglycemia. In 25%, there was improvement in erectile function.

On stem cell therapy, there is lot of hope and it seems that we are almost near the goal of curing diabetes. But still, there are many hurdles to overcome. May be in the next decade this will become a primary mode of therapy for Diabetes Mellitus.

## **58. DIABETIC EDUCATION**

14th November is celebrated as Chacha Nehru's Birthday - Children's Day. It is also celebrated world over as diabetic day. The WHO theme for 2009-2013 for 5 years is "Diabetic Education and Prevention". There is staggering increase in prevalence of diabetes in the world and more so in country. Under these unfortunate conditions, only best way left is prevention and diabetic education. As all know there is no permanent cure for diabetes till now. Only we can control the blood glucose to near normal level. Keeping blood glucose to normal all the time is not also easy and often impossible.

We have to educate the diabetic patient and his/her spouse along with other family members. Education of diabetic patient is a continuous process and life-long. It starts at the first consultation and goes on during subsequent visits. The treating physician deals with many patients and many diseases. He has neither adequate time nor inclination to teach the diabetic patient. Nurse has often many duties like starting IV lines, giving injections, charting temperature and intake-output chart. She has to go on rounds with doctors in the ward. We need a special group of nurse so called 'diabetic nurse'. The dietician can explain and solve doubts regarding diet, calories and exchange of food of same calories.

We need a diabetic educator who combines the role of nurse, dietitian and physical instructor or coach. His role will be multi-dimensional. He should be accountable and can interact with physician and the patient. This is an effective and efficient method of diabetic care. He gives educational support, demanded by diabetics. This educator serves the population, rural, urban, small or large cities in-patient or out-patient clinics of the treating physician.

Diabetic educator needs to instruct the patient on following areas:

- Diabetes disease process

- Nutritional management
- Physical activity
- Medication
- Monitoring blood glucose time-to-time
- Explaining regarding diabetic complications
- Risk reduction of diabetic complications
- Goal setting in diabetic control
- Problem solving and psycho-social adjustments
- Preconception care and gestational diabetes management

Diabetic educator who is a non-medical should work in harmony with diabetologist or physician in many management strategies like minimising cost, minimising weight, minimising infection, avoiding hypoglycemia and targeting post-prandial blood glucose. They may go home and help the patient in self monitoring of glucose and when patient needs help him to get the laboratory test in a pathologist lab.

Many physicians or health providers do not have access to a full, comprehensive, multi-disciplinary team. The diabetic educator is the gold standard for maintaining the educational process and future holds the promise of implementation of therapies together with the possibility that people with diabetes can live longer and better by gaining diabetic education.

Who can be taken and trained as diabetic educators?

Multi-purpose workers who are already working in government set-up may be taken for this training or high-school passed girls and boys can be trained by private

organizations or government agencies for this purpose. Funding and salaries for the diabetic educators needs to be provided by the government or NGOs or any private agencies. They may be imparted 3-6 months training of a certificate course. This training can be given in district hospital or government medical colleges. Syllabus and core curriculum can be set by health authorities along with specialists for this purpose.

Unless we teach diabetics, follow them at their home and help them in controlling diabetes and its complications, we are not able to prevent the morbidity and mortality due to diabetes. Diabetic educators will fill the gap between the doctor and patient. They will help us to achieve our goal of preventing complications and helping diabetics to lead a normal and healthy life.

## **59. BODY MASSAGE**

Massage is the manipulation of superficial and deep layers of muscle and connective tissues to enhance function and promote relaxation and well being. Massage involves manipulating the body with pressure, touch through rubbing. Massage can be applied with hands, fingers, elbow, knee, forearm and feet. There are 80 different modalities of massage.

### Health benefits of massage

It relieves stress, encourage relaxation, improve circulation, posture, manage pain, relax muscles and improves flexibility. Massage relieves tension and ache, tones muscles, calms nerves, adds luster to skin and promotes better sleep.

### Aids used in massage

Infrared massage units, powerful tap massage and vibration massage are some aids used during massage.

A biblical reference documents daily massage with olive oil as a part of beauty regimes of the wives of Xerxes. Massage in China has developed, practiced and taught in hospitals and medical schools and it is a part of primary health care.

### Types of massages

- \* A vichy shower is a form of hydrotherapy.
- \* Anma is a traditional Japanese massage
- \* Shiatsu is a Japanese therapy uses pressure with finger, palm and thumb.
- \* Abhyanga is an Ayurvedic massage where heated blend of herbal oils are used
- \* Balinese massage is a technique where gentle skin folding kneading, stroking and other techniques are used.

- \* Barefoot sports massage is a blend of barefoot technique
- \* Bowen technique involves rolling movements over fascia, muscles and joints.
- \* Breema body work is performed on the floor with a recipient fully clothed. It consists of rhythmical and gentle leans and stretches
- \* Champissage massage technique focuses on head, neck and face only
- \* Deep tissue massage
- \* In Esalen massage there is rocking of the body and passive joint exercises
- \* Medical massage is used in supraventricular tachycardia where carotid sinus over the neck is massaged.
- \* Reflexology massage is based on principles that there are reflexes in the hands and feet that relate to every organ, gland and system of the body.
- \* In Hot-Stone massage cold or heated water stones are used to apply pressure. Stones coated with oil is also used and it is placed over recipients back.
- \* Swedish massage has five styles of long flowing strokes.

Which oil to use during massage?

- \* Coconut oil solidifies in winter. It is heavy and thick. Warm it before use and is good for dry skin.
- \* Almond oil is non-greasy, vitamin-E rich, anti ageing oil, prevent dryness. Not to use with oily skin. Almond oil is light and anti-inflammatory and is good for dry skin.
- \* Grapes seed oil is non-greasy has same properties of almond oil
- \* Olive oil relieves stiffness

- \* Jojoba oil is for all types of skin. It can be used as carrier oil to mix up aromatic oil. It has antibacterial action and is good for acne and eczema. Hazelnut oil, avocado oil, olive oil can also be used as carrier oils
- \* Blended massage oils have combination of oils
- \* Apricot oil decreases stress and used for all types of skin and is an anti ageing.
- \* Borage oil is good for eczeme and psoriasis
- \* Avacado is a heavy oil, dilute it with lighter oils
- \* Castor oil is sticky, thick and smells.

#### Points to consider when using massage oils

- \* Unpleasant smell - mustard oil and castor oil
- \* Irritate skin in allergic persons - mustard oil
- \* Dehydrated skin - use apricot oil
- \* Dry skin - use avocado oil
- \* Any type of skin - use jojoba oil
- \* Cold weather - use thick oil
- \* Hot weather - use thin oil
- \* Avoid using thick oils in an oily skin
- \* Cost factor also matters while using massage oil

#### When massage is not to be done?

It is not done during sickness or if a person has any injury over his body with an open wound, bad veins of legs, spinal injury, damaged herniated disc, bleeding

disorders or if someone is taking blood thinning drugs. It is also contraindicated in osteoporosis which leads to weakness of bones, in recent fracture cases and during pregnancy.

Body massage has been in vogue and is done through ages. One can have it in ones home or can get it done at massage parlours, massage den or in a star hotel. Home massage is cheap may be between Rs.50-100/- per sitting, while if you go to massage centre or in star hotels it can be as costly as Rs.2000 or more per sitting.

## **60. HOW SOUND IS YOUR SLEEP**

Disturbed sleep is among the common health problems encountered. Most adults sleep 7-8 hrs. per night. But timing, duration vary in healthy individuals. Elderly and infants have frequent interruption of sleep. Electro physiological parameters to define sleep and wakefulness is termed polysomnography. There are two states of sleep - rapid eye movement (REM) sleep and non-rapid eye movement (NREM) sleep. NREM and REM alternate through the night with average period of 90-110 minutes. Over all, REM sleep constitutes 25% of total sleep and the rest is NREM sleep. Sleep-Wake cycle is the most evident of many circadian rhythms in humans. Disorders of sleep include some of the underlying conditions:

Insomnia is inadequate sleep or inability to sleep. In its early stages, insomnia is almost an oasis in which those who have to think or suffer darkly take refuge. Transient insomnia is the result of situational stress or jet lag syndrome. Short-term insomnia is associated with protracted illness. Chronic insomnia lasts for months. Adjustment insomnia occurs in unfamiliar setting like hotel or hospital bed. High altitude can also cause insomnia. Noise and light in the bedroom can interfere with sleep. Insomnia is associated with medical disorders like chronic pain, asthma, chronic lung disease, menopause and hyperthyroidism. Alcohol, caffeine, nicotine and steroids produce insomnia. Alcohol not only causes drowsiness, shortens sleep, but it also increases awakening during second half of sleep. Rebound insomnia occurs when hypnotics (calm pose) is withdrawn. In restless leg syndrome there is irresistible urge to move the legs and is associated with insomnia.

In sleep apnea syndrome there is excessive day-time sleepiness with disturbed nocturnal sleep. It is seen in obese, elderly who snore. They have hypertension, diabetes and during sleep there are periods of apnea i.e. breathing pause lasting over 10 seconds during sleep.

In sleep walking, also called Somnambulism, person automatically gets up from sleep and walks without being aware of it.

Sleep Bruxism is an involuntary forceful grinding of teeth during sleep which affect 10-20% of population.

Jet lag disorder follows trans-meridian air travel which is associated with excessive day time sleepiness with nocturnal insomnia.

Shift-work disorders are seen in certain occupations during night shifts, either on a permanent or rotating schedule. This leads to sleep loss or misalignment of the circadian rhythm with respect to sleep-wake cycle. This leads to decreased alertness and performance with increased reaction time and risk of performance lapses and safety hazards.

Medical house-staff who work shifts of 30 consecutive hours have risk of attention failure and risk of serious medical errors. Working over 24 hours consecutively increases the risk of needle stick injury and double the risk of car accidents.

Try to get 8 hour sleep. Sleep is a marvelous gift of God. Imagine if you have luxuries of life but no sleep, then what will happen? Sleep is the golden chain that ties health and our bodies together. A good laugh and a long sleep are the best cures in the doctor's book.

O sleep, O gentle sleep,

Nature's soft nurse, how have I freighted thee,

That thou no more wilt weigh my eyelids down

And steep my sense in forgetfulness?

- William Shakespeare, Henry IV, Part I

## **61. IS YOUR GARDEN ECO-FRIENDLY?**

Plants are natural pollution fighters. Plants produce Oxygen and consume Carbon Dioxide. The insects and birds reliant on plants, provide pest controls and pollination of crops and garden plants. Many gardeners like to include nectar producing plants for the birds. Loss of plants and trees due to clearing for agriculture and housing has been the greatest threat to flora and fauna.

Do not waste water as some plants need only low water. Water the lawn not more than 3 times a week and use water in the early morning to prevent evaporation. In the winter and during the entire rainy season, many landscapes need no extra water. Garden organically, try organic solutions for fertilizing and treating pests and diseases. Composting is the best way to reduce green waste.

Photosynthetic plants are crucial for converting CO<sub>2</sub> to oxygen and regulating climate. The problem is that air emissions are much larger than the ability of the vegetations to absorb CO<sub>2</sub> that is why CO<sub>2</sub> is going up into the atmosphere. Trees can store carbon dioxide from atmosphere via photosynthesis. But they also respire and release CO<sub>2</sub> back into atmosphere. It is the net capture the difference between those above two that matters. Rapidly growing plants absorb the most CO<sub>2</sub>. Mature forests absorb the least CO<sub>2</sub>. Plants absorb CO<sub>2</sub> more under polluted sky than a clean sky. Different climate changing pollutants have different direct effects on plants. Some trees and plants are given below with their eco-features.

- \*      Coconut tree gives no green coverage. Has strong roots which can attack the foundation of buildings.
- \*      Eucalyptus tree has also same feature and needs more water
- \*      Mango tree protects ground water reserves and cools the space
- \*      Ashoka trees drain ground water and parch the land
- \*      Bougainvillea grows fast
- \*      Bamboo tree is an efficient CO<sub>2</sub> sinker and draught resistant, needs very little water.

- \* Gulmohar is a rain tree
- \* Jasmine grows and flowers relatively easily in rich, moist, but well-drained potting soil. When in flower a single plant will strongly scent an entire room.
- \* Roses may be grown in any well-drained soil with optimum sunlight. Most Rose varieties are grown by budding on an understock (lower portion of a plant) propagated from seeds or cuttings. Clay soils, warm temperatures are always preferred, and the rose plants grow best when not set among other plants. Cow manure is the preferred fertilizer for Rose cultivation, but other organic fertilizers, especially composts, are also used. Rose plants usually require severe pruning, which must be adapted to the intended use of the flowers. Trim off all broken and bruised roots on the Rose plant, cut top growth back to 6 to 8 inches.
- \* Cactus plants are quite unusual and are adapted to grow in hot and tropical climates and desert areas where there is very less rainfall. It is its anatomical and physiological features that helps it to conserve water and survive in such harsh environments. One of the most unique characteristics of cactus plant is that it has periods of blossom and periods of rest. During the growing phase, cactus requires direct sunlight, high temperature, humidity, proper watering for rapid growth. While for the resting phase, it should be kept in cold temperatures, low humidity and needs once a week of watering.

Some eco-friendly things we can all do to make our garden more sustainable

- \* Conserve water. In periods of normal rainfall we should be using water butts to collect run-off rainwater and during longer spells of dry weather try to recycle household water from baths.
- \* Watering generously only when absolutely necessary is far better than little and often, as it encourages deep rooting rather than shallow surface roots, encouraging roots of the garden plants to search more effectively for water in dry weather. Watering in the evening or early morning, directing the water at the soil rather than the leaves minimises evaporation.

- \* Planting thirsty plants in thin sandy soil will require lots of wasteful watering just to keep them alive. Choosing and planting the right plants, should make it possible to achieve non or at least minimal watering in most gardens.
- \* New plants will need to be watered until they establish but once they reach maturity the deep searching roots mean no more watering.
- \* Recycle kitchen and garden waste on a compost heap.
- \* Reuse non-biodegradable products. Most of those plastic pots in your garden shed can probably be reused rather than sending them off to the landfill and then buying more.
- \* Minimise the use of chemicals. Minimise instead of never using.
- \* Bright garden lights as well as noisy birds are irritating for neighbours and waste electricity. It might be reasonable to light up the garden for parties but not every night. If you must light up your garden, solar-powered lighting and candles create more atmosphere and are less annoying for your neighbours.

## **62. COMMON COLD**

How aptly the name has been given 'common cold'? Can any one swear and say he or she never suffered from cold? If so, your name will be included in Guinness Book of World Records. A common cold, also known as acute coryza or rhinitis (In Hindi, it is known as Jukaam, Sardi and in Tamil it is called 'Jaladosham'), is an inflammation of the upper respiratory tract caused by infection with common cold viruses. A common cold occurs more often than any other disease - hence, its name. A person may suffer from a common cold several times in a year. A cold usually lasts from three to ten days. The patient feels miserable for the first three days or so.

The reason for the widespread and frequent occurrences of the common cold is attributed to the fact that there are over two hundred viruses that can cause the common cold. These viruses that can cause the common cold are generally referred to as rhinoviruses. These viruses are contagious and are known to cause inflammation of the airways and the lining of these passages. Because of the astoundingly high number of common cold viruses that can cause the illness the signs, symptoms, cures and treatment of common cold infections can vary significantly and can also occur frequently, as it is impossible for your body to develop immunity against all the viruses. As your body develops an immunity to one of the viruses you will probably stumble upon another virus against which you have no immunity.

A common cold is not really a serious illness, but it may not always seem harmless because of the extent of discomfort that it can cause. A common cold is caused by a variety of viral infections and it is the most common of all infections that we suffer from and accordingly is the most treated condition. Some colds may end-up as Flu. Extreme of ages, namely children or elderly may start with cold and end up with pneumonia as the infection goes down and affects lungs in immunocompromised. It is usually due to viral infection. H-Influenza can also cause it. A common cold will cause a runny nose, sore throat, coughs and congestion typically, but at times it may also cause sneezing, watering of the eyes and headaches. As mentioned above the common cold is caused by a virus that affects the upper respiratory tract, including the nasal passages, the voice box, the throat, windpipes, and lungs. At times, there is ear-ache because throat and ear are connected by a tube called 'Eustachian tube'.

I wonder if we have no nose, there will be no cold but how horrible we will look. Influenza is highly infectious caused by Type-A (H1N1 and H3, N2) and Type-B. Influenza can cause mortality. There is fever, cold, cough, body ache, headache, fatigue, weakness, loose motions and vomiting. Often confused initially with common cold

### How to prevent common cold?

When you travel by bus, train or air, fellow-travelers suffering from cold, cough and sneeze and spread the infection. Schools, cinema halls, malls are also places where there is overcrowding and infection spreads.

Use of handkerchiefs, hand-sanitizers, hand-washing and proper disposal of mask are also important. While coughing and sneezing cover the nose and mouth with hand-kerchief or napkins. Vitamin-C and antioxidants may improve immunity, particularly susceptible individuals can take it in winter months. Avoid going in crowded places. Avoid going out late in nights. 'Jalanedi' may help in preventing cold.

### Treatment - Home Remedies

\* The most effective remedy for common cold would be to have lime juice. Take a glass of lukewarm water and dilute the lime juice in it. Add a tsp of honey to enhance its efficacy.

\* The antiseptic properties of garlic make it one of the most effective ingredients for cold. Consumption of garlic soup would be the best way to cure common cold.

\* Another effective method of using garlic would be to combine some garlic oil with onion juice. Dilute this with water and consume it for several times a day.

\* Ginger also works favorably in treating common cold. Cut small pieces of ginger and put it in water. Boil this mixture. Once it simmers, strain the liquid and add half a tsp of sugar to it. Drink this hot.

\* Taking steam also would heal the congested nasal tissues.

\* An excellent home remedy would be to have a glass of warm milk. Add 2 milligrams of roasted asafetida and drink this milk quite slowly two times in a day.

- \* Make a powdered mixture of black pepper and mix this in curd. Add jaggery or sugar candy to it. Take this two times a day to get cured of common cold.
- \* Take 250 grams of water and boil 7 pieces of each black pepper and sugar cubes. When the content comes to 1/4th quantity, stop boiling. Drink this mixture hot twice everyday to get relieved from common cold.
- \* Mix equal amounts of tulsi seeds and ginger. Make a fine powdery mixture out of the two. Have this mixture two times a day.

There is no specific treatment for common cold. Pharmaceutical products for common cold treatment are probably the highest selling of all drugs. Common cold remedies are highly sought after because natural treatments are preferable to pharmaceutical ones when it comes to dealing with common ailments that strike frequently or repeatedly. This is because most natural common cold remedies for common cold relief will not cause any adverse reactions as compared to prolonged or frequent usage of medications and drugs, no matter how mild they may be. Moreover antibiotics offer no relief against a common cold as common colds are caused by a variety of viruses and antibiotics can only work against bacterial infections. The use of antibiotics in such situations simply weakens your natural immunity, creates bacterial resistance and destroys healthy bacteria, leaving you a lot more exposed to a host of other infections. Home remedies for common colds are among the most popular and effective of all natural treatments.

Antihistaminics, decongestents, cough syrup, tincture benzoin inhalations are useful. If there is body ache and fever, paracetamol can be taken. If secondary bacterial infection occurs and purulent (sputum) expectation and fever persists, consult ENT specialists. Vaccine for common cold are used in elderly patients but many times, such vaccines do not give 100% protection because the viruses mutate and the genetic character changes and in such an event vaccine is not very effective.

Cold weather, stress, lack of sleep and poor nutrition can damage your immune system and hence strengthen your immune system. Aamla and Tulsi may help to strengthen immune system. Tulsi has antibacterial and antiinflammatory effects. Aamla is rich in vitamin-C.

A treated cold last for one week while an untreated cold remains for seven days.

## **63. MUSIC THERAPY**

Indian Classical 'Ragas' have been acclaimed by Vedic Science to have healing effects. It is used as therapeutic agent. The Raga is the basis of melody. These Ragas are effective in modulating various organs including Central Nervous System. Music plays an effective role in subduing emotional imbalance. Music therapy day is celebrated on 13th May each year in India.

Music is the universal language and is not necessary to understand the music. Music affects brain, emotions, helps in interaction, decreases depression, improves mood and reduces anxiety. It increases motivation and positive emotions. When music therapy is used with traditional therapy, it improves success rate significantly. It helps stroke victims recover faster. Music therapy helps Schizophrenic patients, children and adults with learning disabilities. It is used also as Palliative care in treating melancholia. Neurological music therapy is used in stroke patients for recovery of motor skills. Music can reduce heart-rate, respiratory rate and blood pressure. Listening Mozart's Piano Sonata reduces the number of seizures in epileptic patients. There is alteration in brain wave and autonomic function. Music improves immunity and eases muscle tension.

Live music was used in hospitals after both world wars as a part of regime for some recovering soldiers. Classical music therapy in Britain was pioneered in 1960-70. Ph.D. courses are available in U.K. in music therapies. In USA, American Music therapy was founded in 1998 and some centers have undergraduate degree programme, masters and doctoral degrees. A degree in Music Therapy requires proficiency in guitar, piano, voice, music theory and music history.

There are two modes of music therapy - one in active mode where a person participates. Second one is passive form where individual hears and does not participate. Passive form of music therapy enhances concentration, memory, reduces stress and brings down blood pressure. Active form is used in children to reduce speech problems, hyperactivity and neurological problems. It improves verbal memory and psychosomatic disorders. It also can treat pain, migraine, arthritis, anger, depression and sleeplessness.

Certain Ragas affect hormonal and glandular functions and help in producing secretions that keep the body balanced. Percussion instruments viz. tabla, drum, dholak

are used for patients who have depression where as sitar, flute, santoor, guitar and vocal music can be played for excited and hyperactive individuals. Music therapy helps in releasing endorphins and other substances from brain that lead to changes in heart-rate, respiration and blood pressure.

The target group listens to specific music and sounds through headphones while doing homework. Music should be listened at least 30 minutes a day for 6-8 weeks without a break. Music therapy is non-invasive, non-pharmacological and safe. It is for healing, conserving energy in body, mind and spirit.

Don't listen to music casually while you are engaged in driving, eating, working, cooking, chatting, etc. Listen to music only in relaxed position like lying or sitting when you are alone or in privacy. It is effective if the music is heard with headphone. The sounds and tones of music must get absorbed in mind and body to be effective.

## **64. MEDICAL PROBLEMS DURING TRAVELLING**

Travelling by road or by air can cause some medical problems. Motion sensitivity varies with individuals. One gets sick when the balance system in the inner ear senses motion in which persons develop nausea, vomiting and dizziness. Sit in the front seat of car or bus because the back-seat is exposed to more motion than the front. Develop a distant stare. Instead of watching telephone pole or trees in the near vicinity, look out for landscapes far down the road. Keep your head movement minimum. Take a nap, close the eyes and try to sleep. Don't read books while travelling, as it will increase motion sickness. Dramamine, Stemetil tablets are available for motion sickness which can be taken by the person before journey. They reduce brain awareness of sensory conflict. Take them half an hour before the travel. But these drugs may make one drowsy and sleepy. Try to lean with the turns. Don't look down. If you are in a car, stop and come out for a short period which will make the person feel better.

It will be sea-sickness while moving in a ship in which persons develop the same symptoms as that of motion sickness. Sea-sickness resolves itself in few days. It is best to spend as much time as possible in the deck. As long as the person is in deck, the symptoms of sea-sickness are reduced. It is worse if the person is below in the cabin. Stay active. Being active and moving can reduce motion sickness.

Jet lag, medically referred to as desynchronosis, is a physiological condition which results from alterations to the body's circadian rhythms. It is classified as one of the circadian rhythm sleep disorders. Jet lag results from rapid long-distance transmeridian (east-west or west-east) travel, as on a jet plane.

Jet lag is seen usually during long air travel. Long flights interrupt natural biological rhythm crossing time-zones cause insomnia. It is worst when travelling from West to East. When traveling across a number of time zones, the body clock will be out of synchronization with the destination time, as it experiences daylight and darkness contrary to the rhythms to which it has grown accustomed. The body's natural pattern is upset, as the rhythms that dictate times for eating, sleeping, hormone regulation and body temperature variations no longer correspond to the environment nor to each other in some cases. Strictly control meal-time. Carbohydrates stimulate hormones to make one sleepy and protein ingestion makes one wakeful. Many factors like low humidity, sitting for long-hours and stress are added factors in causing Jet lag.

The symptoms of jet lag can be quite varied, depending on the amount of time zone alteration. They may include the following:

- " Headaches
- " Fatigue, irregular sleep patterns, insomnia
- " Disorientation, grogginess, irritability
- " Mild depression
- " Constipation or diarrhea

Other symptoms which some may attribute to jet lag, such as nausea, earaches and swollen feet, may be caused by the mode of travel rather than the time zone change.

It is possible to minimize the effects of jet lag by following some basic steps before, during, and after the flight. People are advised to get plenty of rest, exercise and follow a healthy diet. When the person is in good shape, it is easier to cope after landing. Also, it is recommended to visit the doctor to plan a coping strategy for medical conditions that require monitoring, including when to take medications or any other necessary detail.

Another piece of advice is to adapt to the destination time zone in advance. This includes starting the daily routine one hour before or after one normally does from three to four weeks before departure. The use of a light box can help speed up the body's body clock adjustment significantly.

To avoid dehydration, passengers are discouraged from taking alcoholic beverages and caffeine. Caffeine not only causes dehydration but also disrupts sleeping schedules. Contrarily, it is recommended to drink plenty of water to help counteract the effects of the dry atmosphere inside the plane.

Passengers are encouraged to exercise their legs while sitting and move around the plane when the seat belt sign is switched off, every hour or two. One option to counteract jet lag is to break the trip into smaller segments if it is too long and stay

overnight in some city. And, finally, to adjust sleeping hours on the plane to match the destination time.

A helpful way to minimize jet lag is to adapt to the local time and eat accordingly. Also, exposure to sunlight during the day is helpful. Melatonin is a hormone produced by brain during sleep. This is available in the market and is a useful drug in Jet lag.

## **65. HEALTH RISKS OF FAST FOODS**

Today there is a craze for fast-food. People, specially children, are getting lured to yummy fast-food dishes without knowing it's non-nutritious value. Fast-food chain of restaurants are booming in numbers and they have flourishing business in urban cities of our country. Quick service restaurant is the term given to the food that can be prepared and served quickly.

While there is increasing consumption of fast-food? It is readily available, quick to make, easy to serve and tasty. Media plays a great role in giving wide publicity for fast-foods. Women have no time to cook elaborate meals any more. Women work fulltime so they find it difficult to cook fresh, wholesome, nutritious meal. Weekends are mostly spent on relaxations and outings. So again, family eats outside in fast-food restaurants. These restaurants do not change oil used for deep-frying very often and foods are dripping with calories, saturated fat, trans-fatty acids and excess of salts. Trans fatty acids are fats created during hydrogenation. Hydrogenation prevents poly-unsaturated oils from becoming rancid and keep them solid at room temperature. When we eat oil for deep-frying, again trans fatty acids are formed. This change in oil is not good for health and is implicated in CAD, diabetes and obesity. Hydrogenated fats are used in margarine, fast-foods, commercial baked biscuits and processed foods. Our snacks are rich in carbohydrates and trans-fatty acids. Malnutrition, obesity, increased risks of heart attack; hypertension and an overall unhealthy body are some of the things that follow a fast food addiction. Fast food has a very high energy density and regular eating of fast-food more likely to increase weight. By eating a Big Mac and fries, the body consumes almost twice as many calories as you would if you ate the same weight of pasta and salad.

Some fast-food which can fatten you are korma, biryani, papad, creamy pasta, sause, potato chips, chivda, batada vada, bhajia, chaat, etc. A donut dusted with sugar, fried chicken, samosa or a packet of chips are also included in the above category. If one eats big MAC burger, large bowl of French fries and a coke it adds to 1450 calories, 58 gms. of fat, 24 gms of saturated fat and 1970 mg. of Sodium. It has taken up a large part of recommended daily allowance of calories of the day in one meal itself. Sugar, sweeten beverages contribute to obesity and diabetic epidemic. Eating too much salt can cause high blood pressure and lead to other health problems. Try to limit sodium

intake to 1,500 to 2,300 mg per day, the equivalent of one teaspoon of salt. Avoid processed or pre-packaged foods.

Fruits and vegetables are the foundation of a healthy diet-they are low in calories and nutrient dense, which means they are packed with vitamins, minerals, antioxidants and fiber. Fruits and vegetables should be part of every meal and your first choice for a snack. The antioxidants and other nutrients in fruits and vegetables help protect against certain types of cancer and other diseases. Eat a rainbow of fruits and vegetables every day-the brighter the better. The brighter, deeper colored fruits and vegetables contain higher concentrations of vitamins, minerals and antioxidants-and different colors provide different benefits. Sweet vegetables add healthy sweetness to your meals and reduce your cravings for other sweets. Some examples of sweet vegetables are corn, carrots, beets, sweet potatoes or yams, winter squash, and onions.

Choose healthy carbohydrates and fiber sources, especially whole grains, for long lasting energy. In addition to being delicious and satisfying, whole grains are rich in phytochemicals and antioxidants. Healthy carbs (sometimes known as good carbs) include whole grains, beans, fruits, and vegetables. Healthy carbs are digested slowly, helping you feel full longer and keeping blood sugar and insulin levels stable. Use monounsaturated fats, from plant oils like canola oil, peanut oil, and olive oil, as well as avocados, nuts (like almonds, hazelnuts, and pecans), and seeds (such as pumpkin, sesame).

Polyunsaturated fats, including Omega-3 and Omega-6 fatty acids, found in fatty fish such as salmon, herring, mackerel, anchovies, sardines, and some cold water fish oil supplements. Other sources of polyunsaturated fats are unheated sunflower, corn, soybean, and flaxseed oils, and walnuts are also good. Trying different protein sources such as beans, nuts, seeds, peas, tofu and soy products-will open up new options for healthy mealtimes. Dairy products are rich in calcium in a form that is easily digested and absorbed by the body. Sources include milk, yogurt, and cheese.

Educate parents, children and population at large to avoid fast-food. Teach them to eat healthy foods. Can we ban the sale of fast-food in our country? The Government, NGOs, doctors and schools have to raise awareness about the harmful effects of fast-foods. Proliferation of fast-food restaurants have to be stopped. The clock has started ticking - a whole generation of children who are fast-food addicts are preparing for an

obese and unhealthy adulthood. Unhealthy diets, obesity, sedentary life-style are contributing to diabetes. In schools, charts have to be made on fast-foods and their ill effects. At the same time, the charts should show the list of healthy foods. Lessons on nutrition and healthy diet should be part of school syllabus. In the canteen located in school campus, only healthy food should be provided and fast-foods should be avoided and the school authorities should see that the canteen implements this policy.

## **66. MUSCLE CRAMPS**

A muscle cramp is an involuntarily and forcibly contracted muscle that does not relax. When we use the muscles that can be controlled voluntarily, such as those of our arms and legs, they alternately contract and relax as we move our limbs. Muscles that support our head, neck, and trunk contract similarly in a synchronized fashion to maintain our posture. A muscle (or even a few fibers of a muscle) that involuntarily (without consciously willing it) contracts is in a "spasm." If the spasm is forceful and sustained, it becomes a cramp. Muscle cramps cause a visible or palpable hardening of the involved muscle.

Muscle cramps can last anywhere from a few seconds to a quarter of an hour or occasionally longer. It is not uncommon for a cramp to recur multiple times until it finally goes away. The cramp may involve a part of a muscle, the entire muscle, or several muscles that usually act together, such as those that flex adjacent fingers. Some cramps involve the simultaneous contraction of muscles that ordinarily move body parts in opposite directions.

Characteristically, a cramp is painful, often severely so. Usually, the sufferer must stop whatever activity is under way and seek relief from the cramp; the person is unable to use the affected muscle while it is cramping. Severe cramps may be associated with soreness and swelling, which can occasionally persist up to several days after the cramp has subsided. At the time of cramping, the knotted muscle will bulge, feel very firm, and may be tender. It hurts and often occurs at night. Severe cold, lack of blood-flow, mineral deficiency like deficiencies of calcium, potassium, magnesium in diet can cause muscle cramps. Pain in the muscle is due to accumulation of chemicals like lactic acid. If water is lost during exercises due to sweating, there is always sodium loss which always cause muscle cramps. Endocrine disease like hypothyroidism can also produce muscle cramps. Almost everyone (one estimate is about 95%) experiences a cramp at some time in their life. Cramps are common in adults and become increasingly frequent with aging. However, children also experience cramps.

Medications such as diuretics like furosemide, donepezil, neostigmine, raloxifene, anti-hypertension drugs like nifedipine and asthma drugs like terbutaline can cause muscle cramps. Lovastatin, a cholesterol reducing agent produce muscle cramps. Cramps are sometimes noted in addicted individuals during withdrawal from medications and substances that have sedative effects, including alcohol, barbiturates and other sedatives, anti-anxiety agents such as benzodiazepines (for example, Valium and Xanax), narcotics, and other drugs. Vitamin deficiencies due to thiamine (B1), pantothenic acid (B5), and pyridoxine (B6) can cause muscle cramps. Poor circulation to the legs can cause cramp during walking.

Massage helps to overcome cramps, mainly by stretching cramped muscle. It elicits reciprocal inhibition. Massage improves blood supply and helps to wash out accumulated metabolites. Most cramps can be stopped if the muscle can be stretched. Products such as milk, yoghurt and cheese are good sources of calcium. Magnesium is abundant in tofu, bean seeds and leafy-green vegetables. Potassium is rich in fruits and vegetables. Always drink enough water to prevent de-hydration particularly when you sweat or exercise for long periods. Even in cold weather, drink adequate water. Adding epsom salts to post-exercise tub-bath is useful. Epsom salt is basically magnesium and this relaxes the muscle. Take extra salt - Sodium Chloride when there is lot of sweating and water loss. Remember, extra salt is dangerous if a person has hypertension.

Gently massaging the muscle will often help it to relax, as will applying warmth from a heating pad or hot soak. If the cramp is associated with fluid loss, as is often the case with vigorous physical activity, fluid and electrolyte (especially sodium and potassium) replacement is essential. Medicines are not generally needed to treat an ordinary cramp that is active since most cramps subside spontaneously before enough medicine would be absorbed to have an effect.

### Prevention

Good hydration before, during, and after the activity is important, especially if the duration exceeds one hour, and replacement of lost electrolytes (especially sodium and potassium, which are major components of perspiration) can also be helpful. Excessive fatigue, especially in warm weather, should be avoided. Consuming beverages with sodium and/or small amounts of salted snacks or sodium-containing foods at meals will help to stimulate thirst and retain the consumed fluids. Electrolyte repletion (sodium and

potassium) can help sustain electrolyte balance during exercise. Night cramps and other rest cramps can often be prevented by regular stretching exercises, particularly if done before going to bed. Even the simple calf-stretching maneuver, if held for 10 to 15 seconds and repeated two or three times just before going to bed, can be a great help in preventing cramps. The maneuver can be repeated each time you get up to go to the bathroom during the night and also once or twice during the day. Vitamin E has also been said to help minimize cramp occurrence.

Although cramps can be a great nuisance, they are benign condition. Their importance is limited to the discomfort and inconvenience they cause, or to the diseases associated with them.

## **67. SUNSHINE - NATURE'S GIFT TO MANKIND**

Sunshine is natures' gift to mankind. When did you last time sit outside on a sunny day? We have no time to expose ourselves to sun. We spend all our time in closed rooms, in AC cars or in the office's AC chamber. Those who move out in two-wheelers, especially women folk, cover their face with cloth to protect from UV rays and dust. Often, these women use sun-protective creams which prevent penetration of UV rays. Children are glued to TV sets and hardly play in playgrounds. Many times, no playgrounds are available because we are surrounded with cemented roads and multies. Every where, there are multi-flats, tall buildings due to so called 'urbanization'. Though we are in tropics, yet we are not utilising the benefits of sunshine. Our children have almost stopped drinking milk and started drinking coke.

Fear the sun no more. In moderation, sunshine is a vital part of healthy living. We all know that vegetation needs sunshine to grow and that sunshine melts the snow to fill our rivers and lakes with necessary water. Sunshine also warms us and the world so that life is possible. Studies are suggesting that regular exposure to the sun's rays actually improves health. As little as 15 to 20 minutes of sunshine twice a week can make a difference. Sunshine stimulates the production of serotonin which promotes a good mental outlook and fights seasonal affective disorders. It also stimulates the pineal gland which produces melatonin. Melatonin is one of the chemicals that operates our bodies clocks and helps with sleep function. Ninety percent of our vitamin D comes from exposure to the sun.

We can get vitamin D from food, but not enough for optimal health which is why supplementing our intake is necessary. Most recent studies suggest that since vitamin D helps to lower blood cholesterol levels it is a factor in fighting heart disease. Vitamin D is necessary for strong bones and teeth as it aids in the absorption of calcium. It also helps prevent certain cancers including lung and prostate. Sufficient vitamin D also regulates the immune system. One study saw a 70% reduction of colds in 3 years in participants given vitamin D supplements. VitaminD may even help slow down the aging process.

Vitamin D is a fat soluble vitamin and is produced in abundance by the skin on exposure to sunlight. Dietary sources of vitamin D include fish, egg-yolk and butter. Plant based foods contain no vitamin D i.e. vegetarians are at risk for vitamin D

deficiency. Growing children, pregnant women, lactating women and old persons, specially post-menopausal women need vitamin D and calcium supplement.

On exposure to solar ultraviolet B radiation, 7-dehydrocholesterol in the skin is converted into vitamin D3. Vitamin D is stored in muscles and fat tissue. Vitamin D deficiency can occur due to sun-screen cream, in dark skin due to melanin excess which prevents UV penetration and in winter months. Drugs like anti epileptics, glucocorticoids, rifampicin and antiretroviral therapy used in AIDS can reduce body vitamin D level. Finally, mal-absorption due to chronic diarrhoea may adversely affect vitamin D levels. Vitamin D is important for our bone health. It prevents osteomalacia and osteoporosis. Low vitamin D levels affect immune function, may be a causative factor in diabetes, metabolic syndrome and obesity. There is evidence that vitamin D supplement may prevent or reduce insulin resistance in diabetes. Its deficiency is linked to cardiovascular disorders. But be careful to avoid hypervitaminosis which will lead to hypercalcemia. Avoid using vitamin D if one has kidney stones.

The worry about too much vitamin D pertains to unmonitored use of high doses of synthetic vitamin D supplements. Vitamin D3 supplements, not D2, are generally considered safe. Overdose of vitamin D leads to excessive levels of calcium in the blood, or hypercalcemia. Symptoms of hypercalcemia are nausea, vomiting, constipation, weakness, confusion and irregular heartbeat. Excess calcium can damage the heart and kidneys. In some diseases, such as hyperparathyroidism, vitamin D and calcium supplements are contraindicated. Check with a physician about any concerns.

Full body sun exposure quickly produces vitamin D; the process is maximized before the skin turns pink. UVA rays in sunlight are responsible for tanning and protecting skin against sunburn. UVA rays also degrade excess vitamin D so that toxicity cannot possibly occur from this source of vitamin D.

Like all activities, exposure to the sun must be done in moderation. The best way to absorb it is without sunscreen so limit your exposure to short periods of time. The body takes in the sun's goodness through any exposed skin area. The body can only store vitamin D for 60 days so regular exposure is called for. Get the benefit of vitamin D by sitting outside in sunshine daily for 20 minutes for good health.

## **68. INDORE, AS I SAW, FIVE DECADES AGO**

I joined in 1957 at Indore as a first year medical student and came to Long Barracks Hostel. I remember there were more bicycles and Tangas (horse-drawn carriage) at Indore. These were the main forms of transport. Very few cars were seen, less population compared to the present time.

Indore weather was good so that Malwa's evenings and nights were cool so called 'Shab-e- Malwa'. I vividly remember bicycling from hostel to medical college. There were more trees every where and in summer also evenings were cool and pleasant. There was no need to use fan or A.C. or cooler. Most often, people used to sleep over the terrace care-free. Today we can't dare to sleep as your house will be burgled completely while sleeping over the terrace. Indore has also been hit by the phenomenon of global warming. Cemented roads and cutting trees for widening the roads and development of new colonies has made drastic change in weather condition.

Population was less, vehicles were less, roads were not over-crowded. Pipliyapala, Sirpur, Yashwant Sagar Dam were the main picnic spots around Indore. Indore city ended near Punjab National Bank if you go by AB Road towards Dewas. There used to be a roadside 'chaat vendor' below the big tree in-front of the present PNB. My friend and myself used to come by cycle and relish Bolenath Ki Kachori.

Topkhana, near Kothari market of the present MG Road, was our favourite spot. We used to go around this place for a evening stroll. Jaora compound had a lot of empty plots. There was a Gujarati Bhojayanaly in-front of M.Y.Hospital where I used to have my lunch and dinner. MYH was the main referral hospital catering to Central India population. Doctor S.K.Mukherjee was already retired and was practicing as Senior Physician. Public had faith on him and crowded his clinic for their ailments. There were no major nursing homes. All patients including VIPs used to get admitted in MY Hospital for treatment. Less laboratories, less tests and more of a physician's clinical sense helped to diagnose illness. Among antibiotics, Sulphadizine and Penicillin were extensively used along with Raufia antihypertensive agents. Cancer therapy was more primitive. Insulin was available for diabetics. Other modern oral antidiabetics were not available in those days.

My dad used to send Rs.75/- every month for me while I was in the hostel. In this, mess charges, canteen expenses and pocket money were included. I felt more rich and care-free than what I am today. Maharaja Talkies, Raj Talkies, Shrikrishna Talkies and Yeshwant Talkies were there and these are no longer in existence. Mini-theatre in Yeshwant Talkies was very popular. Near Regal square, there was 'Kwality Restaurant' where a juke box was there and I used to enjoy coffee and hear recent filmy songs by inserting coin and choosing my favourite songs. 'Chappan Dukaan' and many hotels were not in existence during those days. Crime, pick-pocketing, murder were much less and chain-snatching was not known.

Now Indore has changed a lot. More younger generation, more colleges, hotels, restaurants, parlours, ATMs, banks and malls have come. Several colonies have spread out. Vehicles have increased leading to more accidents inside the city. Senior citizens are not safe on roads. Industrialization has its disadvantages like over-crowding, vehicular pollution, problem of garbage disposal and health problems. Fashions have changed from Salwar-Kameez and Sarees to Jeens and Tops.

Satellite cities are to be established in order to reduce the population load, less air pollution, restriction on sale and registration on two-wheelers and four-wheelers to be made. Plantation and social forestry to be increased. School children to be regularly taught about traffic rules so that we live in a better Indore city, if not best with all our civic rights.

## **69. MEDICAL AUDIT**

Medical audit is a process that has been defined as "a quality improvement process that seeks to improve patient care and outcomes through systematic review". It provides a framework to enable to improve clinical care. It is the systematic analysis of the quality of healthcare, including the procedures used for diagnosis, treatment and care, the use of resources and the resulting outcome and quality of life for the patient.

One of first ever clinical audits was undertaken by Florence Nightingale. She and her team applied strict sanitary routines and standards of hygiene to the hospital and equipment, kept meticulous records of the mortality rates among the hospital patients. Following this change, the mortality rates fell from 40% to 2%.

Another famous figure who advocated clinical audit was Ernest Codman who followed every patient's case history after surgery to identify individual surgeon's errors on specific patients and establishing accountability, allocating and managing resources efficiently.

### **Types of audit**

- \* Standards-based audit
- \* Adverse occurrence screening and critical incident monitoring audit
- \* Peer review audit
- \* Patient surveys and focus groups audit

### **Medical audit - the process**

The medical audit process seeks to identify areas for service improvement, develop & carry out action plans to rectify or improve service provision and then to re-audit to ensure that these changes have an effect.

Following stages are there in medical audit:

Stage 1: Identify the problem or issue

- Stage 2: Define criteria & standards
- Stage 3: Data collection
- Stage 4: Compare performance with criteria and standards
- Stage 5: Implementing change
- Re-audit: Sustaining Improvements

#### Benefits of medical audit

- \* It aims to improve the quality of medical care
- \* It compares actual medical practice with agreed standards of practice
- \* It is formal & systematic
- \* It involves peer review
- \* It requires the identification of variations between practice and standards followed by the analysis of causes of such variations.
- \* It provides feedback for those whose records are being audited.
- \* It includes following up or repeating an audit sometime later, to find out if the practice is fulfilling the agreed standards.

Medical Audit is essentially a stimulus to the practice of scientific medicine, and an objective and specific check on the professional tasks performed in the hospital. A medical audit committee has to be formed with the hospital professionals. Periodic, regular, monthly audit of cases including death cases are to be done.

#### Areas of audit

- a. Case audit
  - \* Mortality review

- \* Complications audit
  - \* Overstay audit
  - \* Investigation audit
  - \* Check sheet: Pre-operative, pre-anesthetic, pre-procedural.
- b. Infection control audit
- \* Hospital acquired infection / Environmental infection
- c. Critical areas audit:
- \* Such as Operation theatre, ICUs, Burns ward, Dialysis etc.
  - \* Standard operating procedures laid down for these areas have to be followed strictly.
- d. Medical record audit
- e. Resource utilization audit
- f. Equipment audit
- \* This audit helps in curtailing costs without compromising on efficiency.

### Constraints

The medical audit procedure may suffer from certain drawbacks - one such could be the poor recording of case studies. Audit works on the premise that if an item of care is not recorded, it did not take place. Failure owing to the retrieval of records, may affect the outcome.

There is a need, therefore, to approach medical audit in a rational manner, and achieve pragmatic solutions, in order to facilitate better implementation. As with other quality initiatives, medical audit is effective only in a culture of cooperation and mutual criticism. It requires commitment, particularly from the senior staff, who provide

leadership. A planned programme of rectification and finding alternate solutions through the direct training and involvement of all concerned people, would go a long way in consolidating interdepartmental cooperation. Success of medical audit depends on its implementation

Medical audit is far more important to a hospital than financial audit. Financial deficits can be met eventually but medical deficiencies can cost lives, or loss of health thereby resulting in unwanted agony. It is being increasingly felt that while on one hand quantitative development is an important pre-requisite for ensuring accessibility of services, another equally essential requisite is the right quality of services. The evaluation of quality of patient care in hospitals through medical audit has assumed significant importance because it provides valuable feedback to the administrators and to the clinicians who are responsible for efficient and effective running of hospital services.

The foremost point expressed against by the clinicians is that a dynamic science like medicine cannot possibly have standardized norms for treatment and management of any clinical disease. So, the working norms for disease groups can be made available. They can later be changed from time to time depending on the scientific advancement and discoveries. The clinicians and surgeons have to develop the norms of medical or surgical practice particularly for medical audit individually and not by any outside agency.

## **70. NUMBER GAME AND YOUR HEALTH**

As you grow older and cross 40, your health depends on numbers ! Remember, your tummy (waist circumference) should be less than 90 cms, in female the cut-out point is 90 cms. Your weight is important parameter to say whether you are obese or normal. Here is a simple formula. Height in cms - 100 = Weight in kg (applicable to adults only). Anything beyond this number means you are going towards overweight or becoming obese. When did you check your BP last time? Here again the number is important. 130 systolic (upper reading) and 80 diastolic (lower reading) is ideal for a healthy life. When was your blood fat analysis was tested (lipids)? HDL cholesterol should be around 40 mg/dL. It is a good cholesterol and helps you to prevent from heart attack. It is a marker for healthy heart. To increase your HDL, exercise, avoiding alcohol are most important steps.

LDL cholesterol is a bad fat, keep it below 100 mg/dL If it goes up, there is risk of angina and coronary artery diseases. Now everyone is worried about diabetes as our country is labeled as capital of diabetes. Is there anybody in your family who has diabetes? If the answer is yes, you carry greater risk of developing type-II diabetes in future. Wake up and reduce your weight before it is too late, by exercise and diet. Start a healthy diet, jogging, running or going to gym may help you to reduce weight. Maintain ideal weight. Quit smoking, all forms of tobacco are prohibited viz. chewing or smoking. Here it is no good to reduce from 20 cigarettes to 10 but zero or not smoking will be ideal. Are you anemic? This question is pertinent to women more. Check your hemoglobin and see if it is over 12 gms. Your creatinine which is a marker of kidney function should be around 0.8 mg/dL to 1.2 mg/dL. If it goes up, it means you are heading for many problems related to kidney damage.

Cut you calories for weight maintenance. You must know the calories provided by a burger, fruits like banana, one peg of whiskey, a plate of pasta or noodles. These food stuffs are of high caloric value. Choose a diet which will provide you low caloric food so that you can maintain your weight.

How funny it is that in our life we feel happy when the fixed deposit interest increases, sensex goes up, real-estate, gold and silver values go up in the market. But in health, it is the reverse that makes you happy. The health indices numbers usually should go down (exception is hemoglobin) so that you live long without diseases.

## **72. HOW TO GET RID OF SNORING?**

Snoring is the vibration of respiratory structures namely Uvula and Soft palate which result in sound due to obstructed air movements during breathing while sleeping. Air-way blockage is caused by misposition of jaw, fat gathering in and around the throat (floppy tissue) and obstruction in the nasal passage and enlarge tonsils. All these may cause snoring. Alcohol and sedative drugs relax throat muscles and produce snoring. Sleeping on once back may result in tongue dropping to the back of the mouth and causes snoring. Snoring is more in males compared to females. Men have narrow air passage and hence snore more.

How snoring affect health?

Snoring deprives sleep which leads to day-time drowsiness, irritability, lack of concentration and decreased libido. Psychological and social changes may also occur. Snoring increases by 34% risk of heart-attack and by 67% risk of stroke (paralysis). Sleep apnoea syndrome is a complication of obesity and snoring. There is significant affection of marital status. Do not let snoring damage your relationship with spouse.

Closed mouth snoring indicates a problem with the tongue while open mouth snoring may be related to tissues in the throat and tonsils. Snoring when sleeping on the back is usually mild. Snoring in all positions during sleep is considered severe.

Management of snoring

Aim is to clear the blockage in the breathing passage. Loose weight which decreases fat around the throat and reduces snoring. Stop smoking as nicotine weakens and clogs the throat. Sleep on the side and stop sleeping on the back. This prevents the tongue from blocking the throat. Tennis ball trick i.e. sleep with tennis ball attached to back of pajama as it is uncomfortable and hence the person rolls to the side and avoids sleeping on the back which reduces snoring. Nasal spray, nasal steroid, nasal decongestant to decrease swelling anti-allergic pills to reduce the irritation may be helpful particularly if snoring is due to cold and respiratory infection. Nasal strips, nasal clips, lubricating nasal spray and anti-snore pillows are all used with variable results.

Dental appliances like mandibular advancements splints are used which can cause temporo-mandibular joint pain, gum irritation, loosen teeth and increases

salivation. Muscle strengthening can also reduce snoring to some extent. Pronouncing certain vowels and curling the tongue can be helpful. Repeat each vowel - a,e,i,o,u, loud for 3 minutes several times a day. Place the tip of your tongue behind your top front teeth. Slide your tongue backwards for 3 minutes in a day. Close your mouth and purse your lips. Hold for 30 seconds. Move the jaw to right and left side of the mouth. These exercises may help in strengthening the throat muscles.

Jalaneti pots and nasal decongestants may be helpful. Keep the bed-room air moist with humidifier. Elevate head end while sleeping by 4 inches which may ease breathing.

There are many surgical methods used in the treatment of snoring. Uvulo palato pharyngoplasty where air-way passage is widened by removing tissue in the back of the throat including the uvula and pharynx. Risk is scar tissue formed which may result in narrowing the air-way. Radio frequency ablation where energy and heat are used to remove excess of soft tissue and back of throat. This procedure though reduces snoring, never completely eliminates. Deviated nasal septum, nasal polyp surgery if present may help. Pillar procedure is minimally invasive treatment where 3-6 dacron (material used in sutures) are used as palate implants. This prevents sagging of soft palate and help in reducing snoring.

Anti-snoring treatment tips are :

- \* Reduce weight
- \* Try to sleep on the side and not on the back
- \* Elevate your head by having pillows or blocks under the head-side of the bed
- \* Exercise of muscles in your throat along with breathing exercises
- \* Avoid alcohol and tobacco in all forms

All these measures will help to reduce or eliminate snoring.

## **72. THE PEP OF LIFE**

Pep means energy or vigour. As people grow old, they loose pep i.e. energy. Can we reverse it or prevent it? There is a rule of third which states one third of the decline in function is due to disuse, one third is attributed to diseases and one third is due to ageing. Human reach maximum capacity of strength and function in their late twenties. This peak is followed by inexorable decline during remaining period of life. The decline may be slowed by healthy life-style and medical care. Behaviours such as smoking, alcohol will cause disease and shortened life. Life time exposure to infections, parasitic diseases or environmental pollution leave the person with impaired function. Adequate nutrition, daily exercise are essential to maintain physical strength and mobility. Finally, the genetic predisposition determines how well and how long we live. Another important concept of health in the aged is homeostasis. Aged people's capacity to withstand insults and injuries to normal functioning of the body diminishes. This is due to diminished physiologic reserves. For this reason, smaller insults often have larger ill affects in older people, challenging their ability to function normally, hence they become seriously ill.

Muscle mass decreases, subcutaneous fat decreases and water stores decrease, osteoarthritis and osteoporosis develop. There is changes in skin and hair, decline in balance, reaction time, grip strength and writing speed. They learn more slowly. Body temperature, blood pressure are also affected with age. They get postural hypotension and have decreased capacity to produce heat. Ectopic beats occur and heart-rate decreases. Diabetes, hypertension and dyslipidemia, if present, it worsens their cardiovascular functions. Chest wall becomes more rigid and less of oxygen exchange occurs due to structural changes in the lung. Cough is less vigorous in older people. Vision gets affected leading to difficulty in reading, etc. Decrease in saliva and loss of tooth make difficulty in chewing and affect nutrition. There is impaired ability to eliminate medications by kidney. Loss of libido and decrease sexual function occurs in both sexes. Use it or lose it is applicable to brain in old age. They must actively use their minds in activities such as reading, puzzle solving, and adult education, etc. In old age, forgetfulness is usual.

Some of the biological changes associated with ageing are genetically programmed to some extent (30%). Old persons can control their ageing process by

choosing healthy life styles. The goal of successful ageing is to maximise disability free life span.

Indian society views life as having 4 stages - Bal Avastha, Kishore Avastha, Yuv Avastha and Vriddhavastha. In the final stage, family and society expects that older people will disengage from life and follow a spiritual path. But other than spiritual life, an old man requires to make efforts on number of levels including diet, exercise, avoidance of substance abuse, and adverse environmental exposure. He should keep himself busy like doing gardening, teaching the young children and doing other social works so that he proves to be an useful member of the society. All these activities will make him live healthier, longer and happier.

## **73. WAILING WIVES AND ARROGANT HUBBIES**

I thought wife-beating is common only in lower socio-economic class. Poverty, unemployment, loss of job, alcohol addition, drug addiction, affair with another lady and dowry demands like so many factors are contributing to this phenomena. Now this is seen in affluent, wealthy, educated males also where both are bread-earners and still the male gender feels his superiority, gets annoyed at petty matters and beats the wife. What impression the child will carry about the father. What agony and mental torture the child and mother will have throughout their life?

Why the male behaves like this? Probably, he has seen the violence in his parent's life. He has watched his mother being beaten. Is it because he has been brought up by the mother as a mom's favourite and spoiled son. He has been taught to look down on other women. This is a tragedy. The mother must have taught the young boy to show respect, equality to opposite gender.

Indian diplomat accused of wife beating in December 2010 who was at London was recalled by Government. He attacked his wife after heated arguments and used to boast about diplomatic immunity to his wife.

Does your husband criticise you for little things? Humiliate you in front of others? Hit, punch, slap, kick or bite? Blame you for everything? Throw or smash things, hit wall, slam doors? No one deserves to be treated this way. Do not ignore the problem.

One out of 3 women in this country suffers from some kind of violence from partner. Abused by the partner is the leading cause of injury to women between ages of 18-44. 90% of batterers have no criminal record. Only one out of every 270 incidents is reported because women deny the seriousness, try to protect the batterer, believe it should be kept in the family, fear loss of support and recurrence of worse abuse for telling someone. Women are ashamed to tell the fact and often they believe it won't be repeated again.

Domestic violence produce emotional and psychological problems in women. Threat, intimidation, isolation, degradation, mind-games are all forms of abuses. Victims of domestic violence come from all walks of life, cultures, income groups, ages and religion. They share feelings of helplessness, isolation, guilt, fear and shame. Among

the Indian states, Bihar has highest cases (59%). West Bengal, Uttar Pradesh, Madhya Pradesh and Tamil Nadu have a staggering figure of 40-46%, while Delhi, Kerala and Jammu & Kashmir have least number between 13-16%.

The women tolerate in our country hubbies' brutality not because she is timid, weak, coward or afraid but because she does not want to break the family unit. She tolerates for the sake of her child's future. Indian women are not like Elizabeth Tailor to marry seven times in their lives. She accepts husband's weakness, negative traits and even the painful slaps to keep the family united. Role of mother-in-law and father-in-law are important. Instead of instigating their son to commit such ugly offense, they should come forward and stop such incidents. They must feel that her daughter-in-law is their own daughter once she is stepped into their family. Proper counselling, intervention by in-laws will greatly help to reduce their stress in married woman. No amount of code of law will change the situation. Only by proper counselling of the couples and advise by elders in the family may reduce such incidents. It is important to note the women should try not to provoke the angry hubby during such unfortunate situations.

## **74. GHETTO BEHIND MY COLONY**

I am living in this colony for over 20 years and have been watching them during all these years. They live behind the colony may be 20-25 families. Most of them are working in nearby hospitals, municipal wards and some work as ward-boys and 'ayas' in private nursing homes. I am seeing today the 3rd generation. Elders who are un-educated or less educated are now grandparents. Their children are school dropouts. In spite of the government facilities of giving free books, other concessional offers, the 2nd generation had hardly got educated. Most of them are not-even high school passouts. They are mostly school dropouts. But, they look more healthy and tall than their parents. Probably, they are well fed nutritionally by their parents. When I see the grandchildren, 3rd generation of toddlers and school going youngsters I am happy. Their parents have understood the value of education. They started sending their children to English medium private schools. They prefer it to government schools. They send their grandchildren in a school bus or auto-rickshaw. All of them are gradually changing from bicycles to bikes and scooters for commuting. Cleanliness, personal hygiene have definitely improved. The dress sense is also good. All the members of the family unit are working and earning and I find them more responsible. Girls are also interested in studying. I am sure, these youngsters will come up in life and join the mainstream. One of them from this group told me that his daughter is studying in 1st year in college. These are all progressive signs of the nation. Girls' education, underprivileged getting good education are the recent changes seen in the country. Only when women get educated, she can fight against oppression and offences committed against her. When she marries and later becomes mother, she can care her family better and can bring revolution in upbringing her children.

Children and youth of this ghetto have dreams there is no harm in dreaming. Dream and visualise creating pictures in your mind of what you want. What you visualise you may materialise. Inventors like Wright brothers, Thomas Edison and Graham Bell visualise their concept and ideas first and worked hard to achieve their goal and invented. Visualising is the great secret of success. Ram who lives behind my colony dreams to become Bollywood actor. He is good looking, dance and act. He works in local drama and dance group and has given impressive performance in the past. He is dreaming to achieve goal and is working hard towards the goal. I feel this is good. If you don't dream and not set goals for your life, then life is tasteless. No challenges are there to face. For success in life, have dreams and work hard towards it.

One little girl told me that she will become air-hostess, other boy wants to become Collector. They are all working hard to achieve their goals. Financially, they may be poor but they all have tall dreams. By hardwork and persuasion they can achieve their goal in free India. I wish them all success and pray god to give them power to achieve what they want. I wish their dreams come true. I want these children to have high moral value and honesty should prevail so that they become good citizens of the country.

## **75. PARENTING THEN AND NOW**

A tremendous change has occurred in the relationship between modern parents and their children. Most of us born in middle-class family had tough time in childhood. Dad was the boss and what he said was the final word. Discipline was imposed too much on us. We were told to study regularly. There were no tuitions and coaching-classes. If we had doubts, we cleared it from our teachers or seniors. Those days, teachers were devoted. Tuition was not very popular. We hardly got pocket money whatsoever. Our request for purchasing books, pen and other stationery went through mom who used to recommend our case to dad. Playing with friends or any such indoor or outdoor games were allowed during a fixed time. Parents were knowing all about our friends, where we go, etc. We used to go by bicycle to nearby place or walk or else took public transport. Whatever food prepared we ate and there was no choice or preferences and we never left the food in the plate. Going to hotel or restaurant for dinner was a rare event. We never heard those days what a fast food is. Mother spent most of the time with us and we grew up in home surrounding.

Today, the scene has completely changed. Both the couple are working and children are left at the mercy Aaya Bai. If a child is lucky, the grandparents are there to take care. Food habits have been changed. Quick serving, high caloric fast-food are prepared which consume less time to cook. Common toys and outdoor games are replaced by computer, computer games, play-station and TV. Boys and girls are glued to mobile phones. They often use two-wheelers for moving around. Parents are willing to satisfy all the demands of children. If he is mischievous, he is not scolded. Parents are proud of such children. Watching 'Hungama' TV and Shinchan has further deteriorated their behaviour. They are not playing and talking with their peers. Instead they are with TV and computers. Coaching classes start at a very young age. They go to maths, computer, dance and language classes for tuition. Once they reach 9th standard, they are busy attending coaching classes for professional examinations. The art of writing letters has vanished with modern ways of communication. Now SMS is used with abbreviations and aberrations in the language like 'How R U'. They have no time to admire nature and to be compassionate with other less fortunate children. There is rat race to achieve their goal by fare or foul means. Respect for aged has gone with the time. 'Desire only when you deserve' has been replaced by 'desire to get everything by whatever means even if one is not deserving'. Parents are not able to inculcate in their child virtues of being good, hardworking, role of exercise, balanced nutrition and

living with content and satisfaction. Dress code of adolescent girls has changed from Salwar Kameez, Dupatta to Jeans and Top which is more revealing. Boys and girls freely mix and move on the street and restaurants about which parents are unaware.

Modern child is intelligent and has easy ways to grasp and gain knowledge through various modern gadgets but at the same time they are drifted away from moral values. There is always a sense of insecurity in life.

Ideal parenting is a challenge in modern times. The highest form of freedom carries with it the greatest measure of discipline and humility. The parents should bring up their children with little more discipline, try to spend time with their kids to know what is happening in the school and in the daily life.

## **76. HOW TO COPE WITH STRESS ?**

Now-a-days it seems everyone is living with stress, from childhood to old age. Engaging in simple everyday relaxation will help to sustain and strengthen stressed individuals. Taking care to unwind and destress must be regular part of self care regime. Many people in an attempt to cope with tension fall prey to unhealthy or dangerous habits like substance abuse, smoking, overeating, drinking alcohol in excess and gambling. Some take medicines to relieve stress and become addict to tranquilizers and sedatives. Prolonged stress leads to hypertension, muscular pain, irritable bowel and insomnia.

### **How to destress oneself?**

Exercise helps to release stress. Twenty minute walk, jog, run or punch a bag at gym - all these help to reduce stress. Do physical activity of your choice or one that you enjoy like dancing, gardening or jogging. Laughter is really the best medicine for relief from stress. Watching in TV some laughter or comedy shows or seeing a funny movie and forgetting all the worries. Tell a funny joke or SMS a joke or tell stories to co-workers. Play indoor games or some fun games. Write, if you can, on situations that is bothering you. Socialise by meeting friends and family which gives you the sense of belonging purpose and works as stress reliever. Meet loved ones, well wishers who share your feelings and get help and advice. This is a good way of relaxation technique. Meditate and use deep breathing technique to reduce stress. In your work place or job if you are stressed try to change the environment or workplace.

Reflexology is the massage of the feet which relieves some amount of tension. Most students experience significant amounts of stress particularly during examination time. Students with their packed schedules are notorious of missing sleep. Sleep-deprived state puts one at a distinct disadvantage. You are less productive and may find it more difficult to learn and even be a hazard behind the wheel. Adequate sleep will relieve in such a situation lot of stress. Visualization can help you to calm down, detach from what is stressing you and turn off your body's stress. You can also visualization to prepare for presentation to stress less and score higher on tests by vividly seeing yourself performing just as you would like to do. Learn more about how to use guided imagery and visualizations to reduce stress and prepare for success.

A great stress reliever is progressive muscle relaxation or PMR. This technique involves tensing and relaxing all muscles until the body is completely relaxed.

Music has the benefit of relieving stress. It calms down or stimulate your mind as the situation warrants. Students can harness the benefits of music by playing music while studying, relaxing with the help of favourite slow melodies. Staying organised decreases lot of stress. Have you ever lay down over the grass or on the beach with your hands behind your head? It gives a great sign of relief and helps in reliving stress. It is said that watching fish swim in a fish tank destresses and relaxes the mind. Looking at the stars at night helps you to relax. Looking at the sunrise and sunset also gives your mind great calm and satisfaction.

Healthy diet can also help in destressing as diet related mood swings are known. Self hypnosis can be an effective management tool. With it, one can relax tension and plant the seeds of success in subconscious mind with power of autosuggestion. Learn how to use self hypnosis for stress management. Positive thinking is a prerequisite to prevent stress.

## **77. THE ERA OF MIX AND REMIX FROM DANCE TO DOSA**

These are the days of mixing and remixing. It is done in all the spheres viz. music, literature, art, consumer products and beverages. It is done from dance to Dosa. A remix is an alternative version of recorded song made from an original version. This term is used for any alteration of media other than song.

A remixer uses audio mixing to compose an alternate master recording of a song, adding or subtracting elements, or simply changing the equalization, dynamics, pitch, tempo, playing time, or almost any other aspect of the various musical components. Songs are remixed because it gives a second chance to play at radio and club, create a stereo version which was not previously available, to alter a song to suit a specific music or radio format. Remixing is not editing where shortening of music for marketing or broadcasting purpose are done.

People have enjoyed the ability to rearrange the normal listening experience with technology. DJ in early discotheques where performing in similar tricks with disco songs. Remixing is used to improve the aesthetic of dance oriented recordings. With the rise of powerful home computers with audio capabilities, came the unsolicited, unofficial remix created by underground remixers. Remixing has become very prevalent in heavily synthesised electronic and experimental music circles. Remix is also seen in painting and literature.

A food plaza in Hyderabad has recently introduced 104 different varieties of Dosa by way of remixing and they have already patented 27 of them. Humble Dosa has travelled a long way from its home in South India to restaurants of Sindh in Pakistan where chicken-cheese Dosa and Keema Dosa are served. India's influence on Pakistani culture extends beyond cinema and soaps. To name varies of Dosas which are done by mixing are Peas Masala Dosa, Pesarrated Dosa, Rawa Dosa, Onion Masala Dosa, Vegetable Dosa, Poha Dosa, Maize Dosa, Uthappam, Beasn Dosa, Adai, Atta Dosa, Spinach Dosa, Coconut Dosa, Tomato Dosa, Soya Dosa and Mixed Lentil Dosa.

See how remixing has gone deep into the root of our daily life. It has moved from dance to Dosa !

## **78. THE SECOND CHILDHOOD**

Second childhood in someone's adult life starts as a consequence of reduced mental and physical capabilities. Grandpa needs fulltime care, as he is in second childhood. For some, it means that he wants to play if not with toys but with fast computers, fast modems and graphics. During your second childhood, you want to sit and play games and watch cartoons. Now more than ever, one need to look for joy in life, to find smiles and not give way to despair and fear which try to steal the very life. Live long, laugh today, right now and this very second. In old age, people become physically and mentally weak and dependent on others to take care of them. One common and particularly damaging stereotype is infantilization which reduces minority group members to the status of children. According to this image, they are typically depicted as irresponsible, impulsive, fun loving and immature. Old people are unproductive, have to go to bed early, needs a nap every day, cannot manage their own affairs and so they are in second childhood. There is a tendency to view some aged as mere unproductive, useless with vegetative existence. Stereotyping continues to be integral part of public images of aged. Old people are like big children. Casting old people as children has detrimental effects on old and youth alike. Young people distant from their elders. Many elderly people accept the second childhood and play the role with enthusiasm but that is because they fail to see any other alternative. The second childhood lowers one's social status.

Take the example of Rakesh who has completed his 85th birthday but is lying on bed with paralysis and his wife gave a small piece of birthday cake. She has to feed him. His memory went back to his childhood. When he was four, his mother used to make him sit and feed. When he went outside, his father used to hold his hand and take him to bazaar. When he used to climb the stairs of his house, his mother came running to hold him or else he would fall. If he stands on a table, he was told not to do so or else he would get injured. In toilet and bathroom, he was not allowed to lock the door from inside or else he would get stuck up inside. Near water tank and kitchen gas, he was asked to move out. His diet was carefully planned so that he would never get gastric upset. He was asked to sleep in time so that he could get adequate sleep. Adult medicines were kept in a cupboard so that he would not engulf by accident. Rakesh feels that he is passing through second childhood. Same things are happening again in life. Before he got bed-ridden, his wife and children used to hold his hands to cross the street. His medicines are given by his wife or else he may take wrong medicine as his vision is poor. He is not allowed to climb the stairs. He wondered how similar his life is

now and in childhood. He knew very well that after this there is nothing. No excitement, no progress, only one thing which is certain is his death. While after childhood youth comes, then adulthood and there are many dreams, challenges to meet, while during second childhood, there are no dreams, no challenges. The curtain falls, no hope to live, no charm of future. Everything he feels is left to the Almighty

## **79. SUDAMA MEETS LORD KRISHNA**

I was very excited. Last week I got an invitation from my friend to attend his marriage anniversary. It was his golden anniversary. 50 years of married life. He has two sons and settled in USA. A big man and a Cardiologist. We graduated and worked together in Medical College. We passed out post-graduation together and then worked together as Residents. I knew him very well. I will be meeting him after 45 years. I wanted to talk to him about our old days, about our family and so many things. In the invitation, it was given 7.30 p.m. So I rushed to venue with my wife at 7.30 p.m., thinking US people are very punctual. He came around 8.30 p.m. exactly one hour late. I know Netas are usually late. In marriages, Bharathi's may come late dancing all the way, obstructing the road and making traffic jam. All of a sudden, all started gathering at the entrance gate. I saw my friend with his wife. I am seeing them after 45 years. His wife was wearing a diamond necklace which was glittering and sparkling. My friend has become healthy, fatty and wealthy. I remember him very skinny those days. He was very thin and with lot of pimples on his face. He was wearing light golden coloured suit with tie. I can see the US dollar shining on his face. In spite of recession, still the US dollar shines in front of poor Indian rupee. There were photographers hired by friends and relatives and were taking photographs. Many of his friends were rushing towards him to have a photo session with him. I was standing with my wife ready to deliver the bouquet which we brought and was waiting for my turn so that I can talk to him. He came near me. He glanced at my wife for a while. I was very eager to introduce to myself. I said I am so and so. Do you remember? We studied together and did job together. He took a cursory look at me and said "yes I remember" and went ahead.

I felt humiliated. I was like Sudama standing before Lord Krishna. There was difference where as Lord Krishna was very humble to receive and talk to his friend Sudama about his welfare, family and dinned with him. Lord Krishna showered love and affection on his friend. He never forgot his friend with whom he studied at Guru Sandeepan's Ashram. This US Lord, not even recognised his friend. Is this change because of dollar power? It is unfortunate, NRI Indian feels they are superiors, their body language changes, their accent changes and their relation with their family and friends change. Why this happens? We teach our children when wealth has gone, nothing has gone. While health has gone, something has gone and when character has gone, everything has gone. Do we need to rewrite the above saying when wealth is gained, everything comes - power, arrogance and superiority?

## **80. WINTER CARE FOR ELDERLY**

We all love winter. After perspiring summer, muddy rainy season, we eagerly wait for winter to come. This is the time you can wear suit and tie and colourful sweater made by your sweetheart. Outdoor picnics and travel to neighbouring states are often planned during this season. Lots of green vegetables and fruits are available in winter. It is not so pleasing and good for health of elderly who are already having many ailments. Arthritis gets worse. Osteo arthritis and rheumatoid arthritis manifestations increase with pain and swelling of joints. Winter bronchitis as it is aptly described become worse and all the more so if you are a smoker. Blood pressure goes high inspite of taking BP tablets. Cold increases adrenalin level and can aggravate BP. Heart attacks are more common during this season. Respiratory ailments like common cold, asthma and pneumonia are more likely to occur. Dehydration among the elderly rises with the onset of winter. Doctors say people generally drink less water in the cold weather, which leads to dehydration and electrolyte imbalance. In senior citizens who are on medication for blood pressure, diabetes and other long-term ailments, this condition can even prove fatal. Other health problems like hypothermia, slips and falls, flu and depression also peak among the elderly during winter.

Some precautions can be taken, specially by elderly, to prevent winter health problems. Wearing proper woolen clothes, caps and mufflers can some extent prevent exposure.

Early morning walks can be postponed by two hours, till it gets warmer. Family members should ensure that they are adequately dressed for the cold - heads should be covered and socks are a must. Old people have weak lungs and many of them suffer from asthma and chronic bronchitis. Such patients should not be allowed to go out in foggy weather.

For any respiratory problems, if arise, contact your doctor and start medication. Do not delay as the immune function is decreased in old age. Upper respiratory infection can spread down and become a serious problem like pneumonia. Influenza and pneumococcal vaccination to be given to elderly to prevent flu, influenza and pneumonia. Chemoprophylaxis is needed if in the household someone is suffering from flu or respiratory infection. Skin gets dry and itching starts often in winter. To prevent this problem, use cold cream and moisturizers.

Avoid gastric upsets by eating moderately. Overeating, deep fried foods and spicy foods can cause gastric upsets. Healthy massage and simple exercise for joints can help relieve age-related arthritis or pain in the joints, which aggravates during winter. In the cold weather, bones get stiff, leading to slips and falls. To avoid this, walkways must be well lit and the surface should be even. Assistance can make seniors feel much more confident and safe.

### **Winter Tips for the Elderly**

As the winter months roll in and the temperature drops it's important to remember the following tips for the elderly to remember to combat the cold season.

Stay warm. Think about getting a flu shot. Doctors should speak to their patients about the benefits of getting a flu shot to avoid future infection. Many medications have side effects that are similar to cold symptoms since medication can cause changes in the circulatory system. Speak to your doctor about these side effects and consider alternative treatments. Take warm drinks such as coffee/tea. Very hot frequent drinks, while warming your hands and body on a cold day can actually confuse the body's temperature regulation. So stay hydrated

## **81. LOST CHILDHOOD**

World over as well as in our country, children's day, girl child day and world day against child labour are celebrated. Childhood has been glorified in bollywood songs - "Bachpan Ki Din Bhulana Dena" and Ghajals - "Ye Daulat Bhi Lelo; Ye Shourat Bhi Lelo; Bhale Cheenlo Mujhse Mere Jawani; Magar Lautado Meri Bachpanka Sawan". But still children suffer a lot world over. Innocence, care-freeness in childhood are lost. Books, schools, toys are beyond their reach as they are grounded in harsh reality of being poor. Many children born to poor, work as domestic servants, sweeping, dusting and performing household chores. Often, at traffic signals, young children are seen begging and selling articles. It is sad to see young rag-pickers hunting for food in garbage dumps. These children when grown into adulthood, they become criminals. Because of poverty, their education is denied. How can our country boast of technological advancements and development when lots of children are in darkness of ignorance and poverty.

Trafficking of children is defined as recruitment, transportation, transfer, harboring or receiving children for the purpose of exploitation. It can be in the form of commercial sexual exploitation, child pornography, force labour, slavery, illicit international adoption, trafficking for early marriage, use for begging and recruitment for cults. An employer is usually not permitted to hire a child below certain minimum age varying between 14-16 years. Children of the poor are expected to help towards the family budget, often working long hours in dangerous jobs for low pay. Technological and economic reforms play a great role in getting children out of the workplace and into the schools.

If we see this scenario with rich urbanites, the child's life is not still ideal. Although compared to poor, a child born in rich or middle class family is far better but yet life at school is not good. Curriculum proves heavy for children. It seems there is a perception that if a child has to succeed in life, he/she must start education early in life. Weight of the school bag represents one dimension of the problem. Another dimension can be seen in the child's daily routine which includes completion of homework and attendance at tuitions and coaching classes of different kinds. Examination system focuses on child's ability to reproduce information. Both teachers and parents constantly reinforce the fear of examination. Children view learning at schools as boring, unpleasant, bitter experience and found to be joyless. Textbooks of high density of concepts which is incomprehensible to many students. Teacher perceives the content of textbook as a rigid boundary. Our social ethos, particularly in urban areas, is fully entrenched in

competitive spirits, raising aspirations of people in all sections of society. This further adds more burden to a child.

What can we do to improve? Let every poor child go to school. Affluent people can adopt a child for his schooling. Change the curriculum, reduce classroom lectures, have more trained and devoted teachers. Let's give time for moral education, physical education and teach traffic rules. Reduce school bag load, reduce homework. Remove the fear of examination from the minds of children. Let the child enjoy the school and examination.

Whatever food left in kitchen, hotels, during marriages and other parties to be given to poor children in the vicinity. Society should be careful and be a watchdog in preventing child labour, child trafficking and other forms of child abuses. Non-Government Organizations are already playing key roles in Mumbai and Pune. In every town, villages of country, core group consisting social workers, lawyers and interested executives of the government should work together and help exploited children.

Let Chacha Nehru's dream come true, who loved children very much. Let's give new life to childhood. They are the future citizens of our country.

## **82. HEALTH TIPS FOR 40+ WOMEN**

Turmeric : Curcumin, the active component of turmeric, is an object of research owing to its properties that suggest they may help to turn off certain genes that cause scarring and enlargement of the heart. Regular intake may help reduce low-density lipoprotein (LDL) or bad cholesterol and high blood pressure, increase blood circulation and prevent blood clotting, helping to prevent heart attack.

Cardamom : This is a thermogenic herb that increases metabolism and helps burn body fat. Cardamom is considered one of the best digestive aids and is believed to soothe the digestive system and help the body process other foods more efficiently.

Chillies : Foods containing chillies are said to be as foods that burn fat. Chillies contain capsaicin that helps in increasing the metabolism. Capsaicin is a thermogenic food, so it causes the body to burn calories for 20 minutes after you eat the chillies.

Curry leaves : Incorporating curry leaves into your daily diet can help you lose weight. These leaves flush out fat and toxins, reducing fat deposits that are stored in the body, as well as reducing bad cholesterol levels. If you are overweight, incorporate eight to 10 curry leaves into your diet daily. Chop them finely and mix them into a drink, or sprinkle them over a meal.

Garlic : An effective fat-burning food, garlic contains the sulphur compound allicin which has anti-bacterial effects and helps reduce cholesterol and unhealthy fats.

Mustard oil : This has low saturated fat compared to other cooking oils. It has fatty acid, oleic acid, erucic acid and linoleic acid. It contains antioxidants, essential vitamins and reduces cholesterol, which is good for the heart.

Cabbage : Raw or cooked cabbage inhibits the conversion of sugar and other carbohydrates into fat. Hence, it is of great value in weight reduction.

Moong dal : The bean sprouts are rich in Vitamin A, B, C and E and many minerals, such as calcium, iron and potassium. It is recommended as a food replacement in many slimming programmes, as it has a very low fat content. It is a rich source of protein and fibre, which helps lower blood cholesterol level. The high fibre content yields complex carbohydrates, which aid digestion, are effective in stabilising blood sugar and prevent its rapid rise after meal consumption.

Honey : It is a home remedy for obesity. It mobilises the extra fat deposits in the body allowing it to be utilised as energy for normal functions. One should start with about 10 grams or a tablespoon, taken with hot water early in the morning.

Buttermilk : It is the somewhat sour, residual fluid that is left after butter is churned. The probiotic food contains just 2.2 grams of fat and about 99 calories, as compared to whole milk that contains 8.9 grams fat and 157 calories. Regular intake provides the body with all essential nutrients and does not add fats and calories to the body. It is thus helpful in weight loss.

Orange Juice: Not the ones you get in tetra packs laced with unhealthy preservatives but fresh homemade orange juice is actually the best source of this nutrient in the body. The anti oxidant levels in orange juice (because it is highly citrus) is very high making it a great cleanser for your clogged arteries. Have at least one glass a day.

Fish: Having any kind of fish and especially sea fish is a great way of increasing good cholesterol level in the body. Seafood like prawns and oyster have abundance of omega-3-fatty acids which keep your cholesterol levels low without cutting out on food value. Avoid very fat or big fish that has accumulated fats under the skin; otherwise fish is a great replacement for meat in your meals. How you cook fish also makes a huge difference; deep fried fish is as bad as junk food.

Cocoa: You must have heard that chocolate is very heart healthy. It is because of its anti oxidants and micro nutrients. But always go for bitter chocolate or homemade chocolate that is without preservatives and also not loaded with sugars.

Red Wine: Well for non drinkers it is just as good as having grape juice or raw grapes whole. It contains a component as resveratrol which lowers the the normal cholesterol levels. However this remedy is not an excuse for binge drinking! Drink red wine judiciously for best results.

If you follow these good health tips, it will not only keep your heart healthy but also make your body trim.

## **83. FOUNTAIN OF YOUTH - MYTH OR REALITY?**

Can we prevent ageing? A million dollar question. Has any body got the answer? Till now, the answer is no. But there are ways by which we can delay ageing. Ageing is the progressive, universal decline in functional reserves of different organs of the body. Improvement in environment viz. clean water, improved sanitation with better nutrition and control of infections have resulted in life expectancy in the recent years. 40% of over 80 years live in Asia. Women outlive men. Homeostasis mechanism in the aged is low to respond to stress. Biogerontology is the study of biological basis of ageing. There are many research workers who are looking for preventing onset of age-related diseases and improving quality of life in old age.

You will be surprised to know that longest living mammal is "Bow Head Whale". It is also known as "Greenland Right Whale" is known to live at least 170 years and possibly more than 200 years. How it is possible, needs to be scientifically studied.

Normal body cells replication decreases with ageing. Alteration in gene expression in a tissue can lead to life extension. For e.g. genes involved in DNA repair and insulin signaling can extend life. Sirtuins - the gene silent information regulator two is a proteins found in bacteria as well as in humans. They are implicated in influencing ageing and regulate apoptosis and stress resistance. They are referred to as longevity genes. There are SIRT class from 1-7 with functions affecting metabolism, inflammation, tumorigenesis, insulin secretion, DNA repair, r-DNA transcription and Ammonia detoxification. Intervention associated with increased life span in animal model activate the expression of one or more of a family genes called Sirtuins.

Resveratrol is a polyphenol antioxidant, possibly SIRT1 activator found in Muscadine grapes, groundnuts, berries and cocoabeans. It is found in Japanese knot weed and has been used for several decades in Japan and China for antiageing properties. It activates longevity genes.

Caloric restriction at least 30% lower than the normal diet increases both average and maximal life span. Reduction in oxidative stress and improving mitochondrial function can prolong life. Telomere shortening lead to decline in cell replication. Defective host defense leads to immune dysfunction. Accelerated ageing is seen in Werner's syndrome, Bloom syndrome, Cockayne syndrome and Progeria.

30% of variation in longevity is attributed to genetic factors and other factors are environmental and behaviour factors. Centenarians have larger HDL and low LDL particle size with lesser prevalence of hypertension, CAD and metabolic syndrome.

Essential lifespan are warranty period. It is the time required to fulfill the Darwinian purpose of life, i.e. successful reproduction. Species that undergo fast maturation have early onset of reproduction with higher reproductive potential and shorter essential lifespan. Long essential lifespan is seen in those who mature slowly and have late onset, low reproductive potentials (e.g. human being). The period of extended survival beyond the essential lifespan is defined as period of ageing. Survival and longevity of a species are function of the ability of its maintenance and repair mechanism to keep up with daily wear and tear. Lifespan is longer in those who have ability to repair DNA, detoxify reactive oxygen molecules respond and counteract stress and replace worn-out cells. In human, it is found that mutation in certain genes can either prolong or shorten lifespan. Supplementation of hormones like growth hormones, DHEA (dehydro epandrosteroid) melatonin, oestrogen and nutritional supplement may help in prolonging or preventing ageing.

Cosmetic treatment of ageing is at best only superficial and temporary. Low doses of toxic, harmful substances can stimulate homeo dynamic adaptive responses that benefit individual cells as well as whole organism. This effect is also known as hormesis. Hormesis in ageing is beneficial effect of mild repetitive stress leading to slowing of ageing. Repeated mild heat stress can cause anti-ageing affect. Temperature shock, irradiation, pro-oxidants, hypergravity, exercise and caloric restriction can be helpful in preventing ageing. Curcumin seen turmeric show cytoprotective effect through its hormetic action in stimulating the synthesis of heat shock proteins.

Hormesis amplifies adaptive response to stress which in turn improves overall cellular functions and performance. Exercise is a good example because it is not only the specific target muscles that benefit but also immune system, cardiovascular system, sex hormones, libido and mood.

Can we ever achieve fountain of youth? Only time alone will tell us.

## \* LETTERS PUBLISHED IN NEWSPAPERS

### Caste based census

There is controversy among public on caste based census. Some favour and some call it as a gimmick by politicians to increase their vote bank. As a doctor, I would like to add one more column during the census on 'History of Diabetes Mellitus in the family' as well as other diseases. As it is well known that this disease will be highest in Asia and particularly in India. This will give a correct prevalence rate and will be helpful for taking public health measures to prevent and treat the disease.

### Dress-Code

I read the article 'It's the degree that matters' (FreePress, 11th April, 2010).

Politicians have described the convocation robe, the gown, as a 'Barbaric Colonial Relics' and the person looks like cartoon and some suggested 'Dhoti-Kurta, Rajasthani Turban and Tilak over forehead. The gown robe gives a unique sense of esteem as one cannot wear it on any other occasion. Many of us have taken a photograph and proudly displayed it in our drawing rooms. It is a celebration of success, honour and not attire.

British rule has given many memorable useful things to us viz. Railways and Education System. By this above debate, we are opening a Pandora box of controversies. Some communities may refuse to wear turban and tilak. South Indian political leaders will vehemently oppose and say the Hindi speaking states and pressurizing their students. They will opt for Dhoti, Shirt and Angavastra. Christians may like to use pant, shirt, coat and tie for a convocation. Maharashtra leaders will be totally against the North Indian view of dress-code for convocation. They may like a Gandhi cap, Kurta and Dhoti or any different attire to give respect to Maharashtrians. This will lead to an unending trouble.

Do we have to change all other dress code viz. Lawyer's black robe, Doctors' white apron, Nurses' white dress with white cap and Coolies' red dress in railway stations?

How about changing school dress? Each school has a dress-code to identify their students. Do you have to change them in order to Indianize the dress code?

We are wasting our time in useless debates. Let's look at the dire needs of the country. Safe drinking water, mass education, employment to all, prevention of dowry deaths, women harassment, crime rate reduction and health for all are some vital areas.

### **How much to investigate a patient?**

There are some patients who feel that a Doctor is unnecessarily getting investigations. Some even doubt the integrity of Doctor. Today's patient is also much aware of diseases. If he has headache he asks his Doctor can it be due to tumor and suggests that can a CT or MRI be of any help to him? When I was the PG student Thyroid Hormone Test was not available and one used to depend upon BMR, clinical signs and symptoms. Today, we can entirely miss early disease of thyroid if we only depend on clinical signs without lab investigations. In Epilepsy, good history is enough for diagnosis but a scar or brain tissue dysplasia may be missed if CT or MRI is not done. Such lesions can be surgically treated and Epilepsy can be cured. In Dengue platelet count goes down and can lead to bleeding so these days, doctors get blood count with other blood tests in any fever so that not to miss these changes. Practicing Medicine has become quite difficult these days as there is always a fear of consumer's court and other legal disputes/ litigations. A doctor wants to protect and feels safe and hence gets laboratory tests. Best way is to explain the patient and get the most essential test and wait for few days to see the course of disease and review the case and if patient is not improving get other tests by step-by-step fashion. Let the doctor ask himself what he will do if the patient is his own dear and near relative. What course doctor will take in such a situation? Same decision he must take with his patients. In every doctor's mind first priority should be patient's interest and let him not have any self interest or monetary interest. Let him ask can I give best diagnosis and treatment with minimum cost. This question should come to his mind while treating patients.

### **Item Song/Dance in Bollywood Films**

An item is defined as a single thing in a list or collection in newspaper, magazine or film which stands out and attracts the attention. Do item songs make a film super-hit? The evolving tastes of audience today influence the movie makers to include the item numbers. Item numbers can only act as a bait to draw a particular segment of audience

to the theatre. It will not drive a bad movie to success. Item songs do woo people to watch a movie. These songs are integral part of trailers so much so that even the kids start singing to the beats.

"Munni Badnaam Hui" and "Sheela Ki Jawani" are examples of such item songs. Does this help in increasing box-office collection? A film is watched for its story line which is the backbone of the movie and not for the item song which is just the spice factor. These are recent trends in order to attract younger viewers. Even in the past, there were dance numbers and songs which were never called as item-songs. Remember, Helen doing many dances and songs even in the black and white movie era.

It is a good content, engaging screen-play and authentic portly which gets audience approval. Now-a-days, the language of these songs and dialogues have become vulgar which can't be seen or heard by children. There were many highly successful films including many award winning pictures that do not feature a song, item songs and dances.

We need films with good theme, suitable screen-play and content which will appeal to heterogenous audience.

## **THE WORLD CUP SUCCESS AND THE AFTERMATH**

We are all happy and celebrating our victory over winning the World Cup. We will continue to be jubilant for a long time and praise the players and celebrating through parties. I see the unity of people of our country during such occasions. If we want to maintain our position in the World, we must start working right now. Every state should prepare and produce sportspersons not only in cricket but also in other sports. Government should encourage school level, district level and inter-state level competitions. More coaches, physical instructors and trainers are to be appointed in schools and colleges. Many a time, in a rural setting, you may find a brilliant boy or girl who is excellent in sport activity. Such student should receive scholarship and be molded to participate in national and international games. I find in school and colleges, medals and scholarships are given for scholastic achievements. Now let's consider sports activity also and give financial aid to upcoming students who are good at sports and improve their performance. This is a gigantic program, needs will power, financial support and honesty in selecting suitable candidates who will bring fame and name to our country. We need many more Sachin, Dhoni and Yuvraj to accomplish this task.

This is not only the responsibility of Government, let public also participate in this effort.

## **MALL CULTURE IN HEALTH CARE**

Webster's English Dictionary describes "Mall as an urban shopping area (venue) with a variety of shops facing onto space reserved for pedestrian traffic". There are many malls in our city where people crowd. Mall attracts people to buy many things which they really do not need. This culture has invaded healthcare system too. Health malls are already there in city of Chandigarh and New Delhi . Probably the first Health Mall opened at Chandigarh in 2008.

Recently I happened to see a health care supplement of daily. It gives various articles - more of advertisements by Allopathic, Homoeopathic and many other specialty doctors. But in modern days, advertisements pay. In one such health mall, there are shops for ENT unit, diet nutritionist, foot care, physiotherapy, heart unit, lab facilities, obesity and diabetic clinic, dental clinic, eye-clinic, herbal and cosmetic shops, wellness, music and book shops, footwear shop, mother-baby products, health and fitness equipment and a shop for organic food.

Skin specialists have become cosmetologists and promise for a flawless beauty and give complete cosmetic tips. Dentists have also joined the bandwagon. Health mall is definitely a great idea. These malls are visited by the rich and the affordable persons. What about poor and middle class patients? They can't afford such luxury. Health mall will definitely sell their products at a premium costs. High profile shop rents and money spent on advertisement will also be included in the billing. Let us take care of poor with cheap and affordable health care system. We must be able to provide good quality and affordable health care to all irrespective of socio-economic status. How much will these health malls can cater to the poor, only time will tell.

## **HOMECOMING OF BLACK MONEY**

Imagine foreign black money saved by crooked countrymen brought by our government, then what ? 120 crores of Indians are eagerly waiting and hope to get something. If black money comes to the government coffers, it will be reutilised for various development plans. Money will percolate from ministers, secretaries, heads of department and various officers. By the time it comes to project level all will get their

share money/ commission. Again black money accumulates. So, it will be better that after every 5 years government flushes out black money without punishing or announcing the names of those involved. Let's allow them to earn and every 5 years take it back from them. Is this not a good idea? After getting the black money will the government be able to slash taxes, reduce inflation, reduce petrol prices and reduce the cost of all utility items. Will this occur? Unless the mindset of our people changes, there is no use in doing this gimmick. Do we need a car for each members of our family? Do we need two bungalows and two flats for each of us? Do we need lakhs of jewellery which lies idle in the lockers? Do we have to lavishly celebrate marriages of our sons and daughters? Unless we live with reduced needs, demands and be happy and contend with less money, there is no solution to black money problem of our country.

### **SYSTEMATIC INDIAN SCAMS (Ghotala)**

Scams have symbiotic relationship with Kaladhan. Size of black money goes parallel with number of scams. To name a few, Bofors, Harshad Mehta Scam, Satyam Scam, Stamp Paper Scam, 2G Spectrum Scam, Aadarsh Society Scam, Commonwealth Games Scam, Madhukoda's Scam, City Bank scam, Medical Council of India Scam and IPL scam. Politicians involved in some scams are quite familiar to us.

There are minor scams which hardly draw public attention even though they affect citizens daily life viz. examination paper leak, rotting of food grains, public service recruitment irregularities, etc. These scamps are national scamps. I am not elaborating on state level and city level scams.

Clearly the number of scams are going. The money lost by the public per scam is increasing. None of the government agencies retain its credibility in public eye. Underlying the vast illegalities, a triad involving corrupt business class, political class and executive class are there. Media house play paid news because of link with favourite politicians or businessmen. Those who have been exposed are shamelessly denying wrong doing hoping that they will bail out. Legal delays, threats, political and money-power keep truth under wrap. Can one be financially honest and dishonest in other spheres? We have to be honest ourself and bold enough to stop acts of dishonesty by others and be bold to bring out the dishonest to law makers.

### **ANDHA VISHAWAS (Blind Beliefs)**

I was anguished to read two newspaper reports last week. Once states that a man drank his wife's blood daily for 3 years in Damohdistrict (M.P.). He used to use a syringe to withdraw blood from wife's veins and pour it in a glass and drink. He was an agricultural labourer and felt stronger by drinking wife's blood. This is absolutely non-sense. Can this be called minor form of cannibalism? The blood cells will be destroyed in the stomach by hydrochloric acid. It is strange and a false belief.

In another incident, wife was beaten to death because she gave birth to a girl child for the last four deliveries. Husband and his parents wanted a male child so she was beaten to death. Scientifically male sperm has 'xy' chromosomes and female ovum carries 'xx' chromosomes. If male partner's 'x' chromosome joins with wife's 'x' chromosome a female infant is born, but if 'y' chromosome of husband unites with 'x' chromosome of wife, a male child is born. Who has to be blamed - husband or wife? If on every occasion, male partner's 'x' chromosome unites with 'x' chromosome of wife, the outcome will be a girl child. It is high time that social workers, NGOs and counsellors go to rural India and explain these facts to villagers and save our daughters from torture and humiliation.

### **BETI BACHAO ABHIYAN**

M.P. Government has initiated Beti Bhachao Abhiyan since October 5, 2011. It is "Save the Girl Child" campaign. "Beti Bachao", "Ladki Ho to Kal Hain" are good slogans. I congratulate our CM for initiating such steps on women reforms. Village life is full of miseries and illiteracy, attitude of parents towards undesirable and unwanted girls adds more to woes. Plight of women both in urban and rural India is very deplorable, although women are supposed to be embodiment of high character and ideal. The campaign has been started to create awareness among the masses. On the other hand, still we read in newspaper news like "Ganga saves her brave daughter", "in Patna man threw his wife into Ganges but she swam for 12 hrs to save herself", etc. Another heart rendering news is about a baby buried alive in a farm near Burhanpur. She was rescued and brought to hospital. I hope, Beti Bachao Abhiyan does not remain just on paper and it is well implemented so that the message percolates in the hearts of all men both in rural and urban M.P.

