



LIFE BYTES

Issue 001 | January 2023



LIFE BYTES

Let the bytes of life light a bit
Into magnificence let it be lit
Fuelling aspirations with grit
Evolving into an opus of glit
Breaking records being a hit
You, me and us together we fit
Taking it higher, never to quit
Ever to serve we do commit
So be it, So be it!!



Dr Arun S

Associate Professor
Dept. of General Medicine
KMC Hospital, Attavar

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Dear friends,

It gives me great pleasure to present the first issue of *Life Bytes*. This quarterly newsletter for the KMC Attavar family will help ensure everyone is kept up to date with our latest news, community engagement initiatives, and inspiring patient stories, while also showcasing our in-house artistic talent.

I am honoured to recognise the contributions of each one of you who have upheld the values and principles of MAHE. This is your newsletter, and it is important to us that the content is something you are interested in reading.

I extend my best wishes for this new venture and look forward to reading about the hospital's and your personal milestones & achievements in each quarter. *Life Bytes* is a wonderful opportunity for us to stay connected and continue to grow together.

Dr John Ramapuram
Medical Superintendent

The Editorial Committee

Patrons



Dr B Unnikrishnan
Dean



Dr. Anand Venugopal
COO - MAHE
Teaching Hospitals

Committee



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Member



Great teamwork made a difference in the life of this little angel

Diya (name changed), a 15-month-old girl, was admitted to the hospital with complaints of multiple rashes over her body for the past few days. Initially, the child was taken to a local hospital where investigations showed low platelets, and was referred here for further management. Following bone marrow aspiration, she was confirmed to have pre-B-cell Acute Lymphoblastic Leukaemia (ALL), with FISH for BCR-ABL translocation being positive. The CSF study was negative for malignant cells. The child was then started on Regimen A induction therapy for ALL, which was changed to Regimen B in view of PH+ ALL.

During the 3rd week of the induction phase, she developed tachypnea and was started on oxygen support. Because of the child's low pulse volume and perfusion, she was transferred to the PICU. Due to worsening respiratory distress, the child was put on HFNC support. Diya was very floppy and developed generalised edema and hypoalbuminemia. Because of deteriorating abdominal distention, abdominal imaging was performed, which showed intestinal perforation. Paediatric surgeons performed exploratory laparotomies, and three small bowel perforations were fixed. She was put on a mechanical ventilator postoperatively and given multiple blood products. The pus from the peritoneal cavity grew multidrug-resistant (resistant to carbapenem) *Klebsiella pneumoniae*. Due to prolonged invasive tracheal ventilation, the child was taken in for a tracheostomy. Parenteral nutrition was given during the ICU stay. Oxygen support was gradually tapered

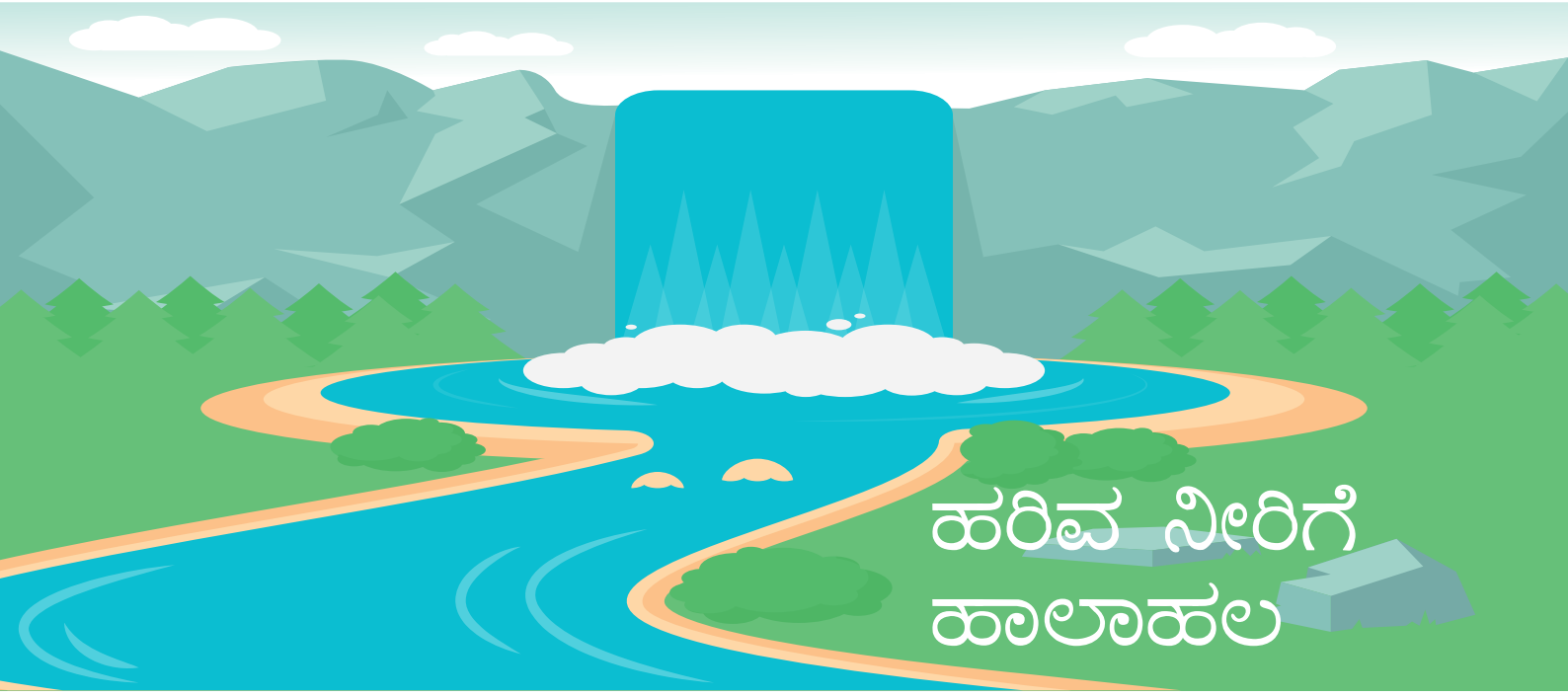
and stopped, and the child tolerated it well. In total, Diya was ventilated for 20 days and was in the PICU for 40 days. She was transferred to the hospital ward for further support, care, and the continuation of chemotherapy with a tracheostomy tube in situ.

A week later, the child had an episode of desaturation with tachypnea and was started on oxygen support with a T-piece and IV antibiotics. Due to worsening distress and signs of LRTI, the child was shifted to the PICU and started on CPAP support and other supportive treatment. Tracheostomy secretions sent for culture showed growth of *Pseudomonas*. The blood culture sent showed growth of *Candida dubliniensis* - sensitive antifungal was added. The tracheal aspirate culture sent grew *Pseudomonas*. Eventually, the child's condition improved. Diya was on continuous nasogastric feeds, and slowly we changed to bolus feeds. A repeat blood culture sent showed the growth of *Klebsiella* species. Subsequently, she continued to have augmented BFM consolidation, which took nearly 12 weeks to complete. The post-consolidation bone marrow aspiration for Minimal Residual Disease (MRD) showed <0.01% of blast cells. She received regular dietician and physiotherapy inputs in addition to constant emotional, physical, and supportive care support from the staff nurses of the ward. Finally, the tracheostomy tube was removed, and decannulation was done. Diya was discharged after 5 months in the hospital. She will receive chemotherapy for the next two years.

Dr Harsha Prasad L

Associate Professor

Dept. of Pediatric Hematology and Oncology



ಹರಿವ ನೀರಿಗೆ ಹಾಲಾಹಲ

ಪರಿಸರ ಮತ್ತು ಜೀವಿಗಳ ಹೊಂದಾಣಿಕೆಯು ಅನಿವಾರ್ಯವೆಂಬ ಕೂಗು ಇವತ್ತಿನದಲ್ಲ. ಆದರೆ ಜೀವಿಗಳಲ್ಲೆಲ್ಲಾ ತಾನೇ ಶ್ರೇಷ್ಠನೆಂಬ ಅಹಂಕಾರದಲ್ಲಿನ ಮನುಷ್ಯನು ಇಡೀ ಪರಿಸರ ತನಗಾಗಿ ಇದೆಯೆಂದು ಭ್ರಮಿಸಿದ್ದಾನೆ. ಪ್ರಗತಿಯ ಹೆಸರಿನಲ್ಲಿ ಕಾಡನ್ನು ದೋಚುವ, ಗಾಳಿಗೆ ನಂಜು ಬೆರೆಸುವ, ನದಿಗಳಿಗೆ ಪಾಷಾಣ ಸೇರಿಸುವ ಮನುಷ್ಯ ತನ್ನ ಈ ಕುಕೃತ್ಯಕ್ಕೆ ಭಾರೀ ಬೆಲೆ ತೆರಬೇಕಾಗುವುದರ ಬಗ್ಗೆ ತಿಳಿದೋ ತಿಳಿಯದೆಯೋ ತೀವ್ರ ಅಸಡ್ಡೆ ಬೆಳೆಸಿಕೊಂಡಿದ್ದಾನೆ.

ನಾಗರಿಕತೆಗಳನ್ನು ಅರಳಿಸಿದ ನಮ್ಮ ನದಿಗಳ ಪಾಡು ಇಂದು ಏನಾಗಿದೆ? ಅವು ಮಲಿನಗೊಳ್ಳುತ್ತಿರುವ ರೀತಿ, ವೇಗವನ್ನು ಗಮನಿಸಿದರೆ "Water water everywhere; but not even a drop to drink" ಎಂದು ನಾವೆಲ್ಲಾ ಹಸಹಪಿಸುವ ದಿನಗಳು ದೂರವಿಲ್ಲವೆನಿಸುತ್ತದೆ.

ಇಂದು ಯಾವುದೇ ನದಿ ಮಾಲಿನ್ಯದಿಂದ ಹೊರತಾಗಿಲ್ಲ. ಎಲ್ಲರ ಪಾಪವನ್ನು ತೊಳೆಯುತ್ತಾಳೆನ್ನುವ ಗಂಗೆ ಮಾಡಿರುವ ಪಾಪವಾದರೂ ಏನು? ಧಾರ್ಮಿಕನಿಂದ ಹಿಡಿದು ಕೃಷಿಕನ ವರೆಗೆ ಎಲ್ಲರೂ ಮಿತಿಮೀರಿದ ವಿಷವನ್ನು ಇವಳಿಗೆ ಉಣಿಸುವವರೇ. ಸುಟ್ಟ, ಅರೆಸುಟ್ಟ ಹೆಣ್ಣುಗಳು, ಮಲ, ಕಸ, ಮುಸುರಿ, ಕೃಷಿಗೆ ಸಿಂಪಡಿಸುವ ಎಂಡ್ರಿನ್, ಡಿ.ಡಿ.ಟಿ., ನೈಟ್ರೇಟ್, ಫಾಸ್ಫೇಟ್, ಉದ್ಯಮಿಗಳು ಧಾರಾಳವಾಗಿ ಸುರಿಸುವ ಮಿಥೈಲ್, ಮರ್ಕ್ಯುರಿ, ಸಯನ್ಯೆಡ್ ಮೊದಲಾದ ಮಾರಕ ವಿಷಗಳು ಒಂದೇ, ಎರಡೇ? ಸಾಯುವವನಿಗೆ ಗಂಗೆಯ ನೀರು ಕುಡಿಸುವ ಮಾತು ಹಾಗಿರಲಿ, ಗಂಗೆಯ ನೀರು ಕುಡಿದರೇ ಸಾಯುವ ಸ್ಥಿತಿಯಿಂದ ನಾವು ದೂರದಲ್ಲಿಲ್ಲ. ಯಮುನೆಯ ಪಾಡು ಇದಕ್ಕಿಂತ ಭಿನ್ನವೇನಲ್ಲ. 1956ರಲ್ಲಿ ದೆಹಲಿಯ ಮುನ್ಸಿಪಾಲಿಟಿ ಚರಂಡಿಯ ನೀರು ಯಮುನೆಯನ್ನು ಸೇರಿದ ಪರಿಣಾಮವಾಗಿ ಮೂವತ್ತು ಸಾವಿರ ಜನರು ಹೆಪಟೈಟಿಸ್ ಬೇನೆಗೆ ತುತ್ತಾದರು. ನೂರಾರು ಜನರು ತಮ್ಮ ಪ್ರಾಣವನ್ನು ತೆತ್ತರು. ನಮ್ಮ ತುಂಗಭದ್ರೆ ಕೆಲವೊಂದು ಪ್ರದೇಶದಲ್ಲಿ ಮೋರಿಯ ನೀರಿಗಿಂತ ಭಿನ್ನವಾಗಿಲ್ಲ. ಕಾವೇರಿ, ಕಪಿನಿಯರೂ ಉದ್ಯಮದ ವಿಷವನ್ನು ಕುಡಿಯುತ್ತಲೇ ಇದ್ದಾರೆ. ಇದರಲ್ಲಿ ವಾಸಿಸುವ ಕೆಲವೊಂದು ಜಲಚರಗಳನ್ನು ಮುಂದೆ ಚಿತ್ರಗಳಲ್ಲಿ ನೋಡುವ ದೌರ್ಭಾಗ್ಯ ನಮ್ಮದಾಗಬಹುದು. ಬೆಂಗಳೂರಿಗೆ ಹಿಂದೊಮ್ಮೆ ನೀರುಣಿಸುತ್ತಿದ್ದ ವೃಷಭಾವತಿ ಹಾಗೂ ಒರಿಸ್ಸಾದ ಋಷಕೂಲ್ಯ ನದಿ ಮರ್ಕ್ಯುರಿ ನದಿಯೇ ಆಗಿಬಿಟ್ಟಿದೆ.

ನದಿಗೆ ಕಲ್ಮಶ ಹರಿಯಬಿಡುವುದೂ ನಮ್ಮ ಕುಡಿಯುವ ನೀರಿನ ಲೋಟದಲ್ಲಿ ಕಲ್ಮಶ ಹಾಕಿಕೊಳ್ಳುವುದೂ ಎರಡೂ ಒಂದೇ ಎಂಬ ಭಾವನೆ ನಮಗೆ ಬರಬೇಕು. ನಾವು ಶೇಕಡಾ 2/3 ರಷ್ಟು ನೀರಿನ ಮಧ್ಯೆ ಇದ್ದೇವೆ. ನಮಗಂದೂ ನೀರಿನ ಅಭಾವ ತಲೆದೋರದು ಎಂಬ ಹುಂಬ ನಿಶ್ಚಿಂತೆಯನ್ನು ಬಿಡಬೇಕು. ಉಪ್ಪು ನೀರು ಉಪಯೋಗಕ್ಕೆ ದೊರಕದ ನೀರು. ಇವನ್ನೆಲ್ಲಾ ಬಿಟ್ಟರೆ ನಮಗೆ ಬಳಸಲು ಸಿಗುವ ನೀರು ಶೇಕಡಾ 0.35 ಮಾತ್ರ. ಒಂದು ಕಡೆ ನೀರಿನ ದುಂದುಗಾರಿಕೆ ಮಾಡುತ್ತಾ ಇನ್ನೊಂದು ಕಡೆ ನೀರನ್ನು ರಾಡಿಯೆಬ್ಬಿಸುತ್ತಾ ಹೊರಟಿರುವ ನಾವು ನಮ್ಮ ಕೃತ್ಯದ ಭೀಕರ ಪರಿಣಾಮದ ಬಗ್ಗೆ ಇನ್ನಾದರೂ ಯೋಚಿಸಬೇಕು. ಜನಸಾಮಾನ್ಯರು ಸರ್ಕಾರವನ್ನೂ, ಸರ್ಕಾರ ಉದ್ದಿಮೆಗಳನ್ನೂ ಬೆಟ್ಟು ಮಾಡುವುದನ್ನು ಬಿಟ್ಟು ನದಿಯ ರಕ್ಷಣೆ ಒಂದು ಸಾಮೂಹಿಕ ಜವಾಬ್ದಾರಿ ಎಂಬ ಅರಿವು ಮೂಡಬೇಕು.

Ms Patricia Gonsalves
Senior Hospital Auxiliary





Free Cancer Screening & Awareness Campaigns

A mega cancer screening and awareness camp was organized in association with 'The Jewel Group of Mangalore' and the 'Indian Cancer Society' on 28th August, 2022 at Rosario High School Campus. Doctors from the department of Radiation Oncology Dr M.S. Athiyamaan (HOD), Dr Sourjya Banarjee (Associate Professor), Dr Johan Sunny (Assistant Professor), Dr Abhishek Krishna (Senior Resident) and Dr Harsha Prasad L (Paediatric Hemato Oncologist) took part in this camp and made this a huge success. More than 130 people attended the awareness and screening programme. Free consultation, oral screening and breast screening was done and also pap smear tests were done for the women with the support of Indian Cancer Society.



Awareness Campaigns

KMC Hospital, Attavar conducted several awareness programmes for heavy LPG truck drivers and mentors at Total Oil India Pvt Ltd Mangalore Terminal. The awareness campaigns were held at Hotel Deepa Comforts, Mangalore on 17th and 20th October 2022, as well as at the terminal on 23rd November 2022. Dr Mahesh B.S. (Clinical Psychologist) led a session on "Addictions and its Management". The mentors' sessions on professional counselling techniques were led by Ms Mariella D'Souza (Psychiatric Social Worker), and the sessions on diabetes, hypertension, and eye health were led by Dr Keerthan Rao (Ophthalmologist). More than 120 drivers and mentors participated in the awareness programmes.



Community Outreach Geriatric & Palliative Care Clinic at B.C. Road

KMC Hospital, Attavar has started a community outreach 'Geriatric & Palliative Care Clinic' at BC Road in association with Lifeline BC Road Polyclinic, Srinivas Arcade, to cater to the needs of the elderly & palliative. Dr Sheethal Raj M, Consultant Geriatrician & Palliative Care Specialist from KMC Hospital, Attavar will be available in this clinic every Monday from 10:30am to 2:30pm. Apart from regular consultation services, home visits are also available on priority basis. You can reach us on 9481363943 & 9535542659 for appointments and home visits.

Introduction to Evening Clinic

Dr John Ramapuram, Medical Superintendent, announced the launch of the Evening Clinic at the KMC Hospital, Attavar, starting on December 1st, 2022. The Evening Clinic will run on all weekdays from 5pm to 7pm. With the launch of the Evening Clinic, KMC Hospital, Attavar will now provide radiology, laboratory, and pharmacy services in addition to doctor consultations. The clinic presently services patients who seek doctor consultation in General Medicine, Paediatrics, Orthopaedics and Obstetrics & Gynaecology. The Evening Clinic is ideal for corporate professionals, students, and people who may not be able to visit their doctors during the daytime. As a NABH-accredited hospital, the KMC Hospital, Attavar is also recognized for its nursing excellence.

You can reach us on 8861586249 for appointments or information on the Evening Clinic.



Paintings



Artwork by **Moksha Shetty**,
Daughter of Ms Shobha Shetty,
Staff Nurse, KMC Hospital, Attavar

Charcoal artwork by **Dr Rakshit Patil**,
Senior Resident, Department of Orthopaedics,
KMC Hospital, Attavar



Artwork by **Dr Mekala Krishna**,
Senior Resident, Department of Radiology,
KMC Hospital, Attavar



Tom has been given Rs 100 to purchase 100 items from the market. Cost of following items are given below:

Pot	Rs 10
Jug	Rs 5
Glass	0.50 Paise

The details of the purchased items by Tom may be forwarded to lifeytes@manipal.edu within 24 hours of the issuance of 'Life Bytes' along with your full name. We will announce the correct answers in our next issue.



Clinical Services

- Anaesthesiology
- Audiology & Speech Language Pathology
- Cardio Thoracic & Vascular surgery
- Cardiology
- Clinical Psychology
- Dermatology
- Diet Nutrition
- Endocrinology
- Gastroenterology
- General Medicine
- General Surgery
- Geriatrics
- Medical Oncology
- Nephrology
- Neurology
- Obstetrics & Gynaecology
- Ophthalmology
- Orthopaedics
- Otorhinolaryngology
- Paediatric Haemato-Oncology
- Paediatric Surgery
- Paediatrics
- Physical Medicine & Rehabilitation
- Physiotherapy
- Psychiatry
- Radiation Oncology
- Radiodiagnosis & Imaging
- Respiratory Medicine
- Surgical Oncology
- Urology



Facilities

- ART Centre
- Audiology Lab
- Brachytherapy
- Cosmetology Clinic
- CT
- DOTS Center
- Evening Clinics
- Eye Bank
- Immunization Facility for Children
- Intensive Care Unit
- Labour Theatre
- Linear Accelerator
- MRI
- Neonatal ICU
- Operation Theatre
- Paediatric ICU
- Respiratory Lab
- Simulation Lab
- VCTC Center



24x7 Facilities

- Ambulance Services
- Blood Bank
- Central Laboratory
- Pharmacy
- Radiodiagnosis Services
- Trauma & Emergency

Launching Soon

- ▶ Emergency Medicine
- ▶ Mammogram
- ▶ Paraplegia Ward
- ▶ Radiotherapy - LINAC
- ▶ Super Deluxe Single Rooms



KMC HOSPITAL
ATTAVAR, MANGALURU
(An associate Hospital of MAHE, Manipal)



Attavar, Mangaluru, Karnataka 575001

☎ 0824 244 5858 **Appointments:** 88615 86249 **Ambulance:** 77605 71122

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