

KAUSHALYA TIMES

www.kaushalyahospitalthane.com

VOLUME: 01 | ISSUE:03 | THANE | 4 PAGES | APRIL-JUNE 2024

EDITORIAL

OBESITY AND IT'S MANAGEMENT

t is every obese person's fervent desire to have a slim and trim body habitus. The attainment of the goal as advised by experts and well-wishers is pretty simple: diet and exercise.

Inspite of all efforts, many fail this obvious simple plan. Desperate diet plans and extreme



Dr Prashant Kulkarni

exercise regimes fail, more often than not. And almost a sense of despondency grips this corpulent population.

BMI or the Body Mass Index is the value of weight in kg divided by height in meters squared. The

"normal" BMI is less than 25, overweight is defined as a BMI of 25 to 29.9 kg/m^2, obesity as a BMI of >=30 kg/m^2, severe obesity is defined as a BMI of \geq 40 kg/m² (or \geq 35 kg/ m^2 in the presence of comorbidities such as diabetes, hypertension). But these are not just numbers. THE HIGHER THE BMI, THE GREATER THE RISK OF MORBIDITY AND MORTALITY. Conversely, randomised trials inducing weight loss via lifestyle (diet and exercise), pharmacologic therapy or bariatric surgery have been shown to reduce morbidities such as diabetes mellitus, blood pressure, plasma lipid levels and cardiovascular events.

So, what are the current options available to attain ideal body weight? The initial management of individuals who can benefit from weight loss is a comprehensive life style intervention: A combination of DIET, EXERCISE and BEHAVIOURAL MODIFICATION. If ideal weight is not obtained by above then the options are PHARMACOLOGIC THERAPY (DRUGS) and BARIATRIC SURGERY.

DIETARY THERAPY: The options include balanced low calorie, low-fat/low calorie, moderate fat/low calorie. low carbohydrate diet as well as the Mediterranean diet. A less than 1000 kcal/day diet plan will definitely lead to reduction in weight, but may not be sustainable. A proper diet counselling and exercise plan may help achieve the goals.

EXERCISE: Exercise is a less potent option than dietary restriction in promoting weight loss. But it has been observed that a

Team Kaushalva successfully treats

The 3-year-old female child underwent a tumultuous recovery from toxic epidermal necrolysis (TEN) triggered by oxcarbazepine. She presented with extensive blistering covering her entire body, including mucous membranes, impeding even the simplest tasks like opening her mouth. Persistent bleeding from her lips during crying due to a breach in deep fissures exacerbated the distressing situation to the tune of a drop in Hb. Lip crusting was managed effectively with good nursing care, and minimal bleeding remained by the end of the hospital stay.

Management necessitated a multifaceted approach, comprising intravenous antibiotics to combat sepsis and meticulous electrolyte correction via Total Parenteral Nutrition (TPN) over seven days to address nutritional deficiencies. Unfortunately, the cascade of complications ensued, culminating in acute kidney injury, necessitating intricate management of electrolyte imbalances in an intensive care setting. Immunosuppressive agents were



judiciously employed to quell the raging inflammatory response. Gradual amelioration was witnessed as the blistering abated, signifying positive therapeutic progression. The child was successfully discharged last week.

Team:- Dr Jugal Gada and entire **IPCU** team

Dr Pradnya Joshi (managing the extensive skin involvement)

Dr Yatin Khairnar (placement of important central line)

Art as a blessing

If somebody had told me five years ago that I would exhibit my paintings at the Nehru Art Gallery, I would have laughed at him. But Covid era brought art as a blessing to me. A stressful period in life turned into a

Until now, I have painted only landscapes. No human or animal figures in these landscapes. And all have serenity as the common thread. Many of the paintings

joyous journey. are inspired by a photograph. ... Page-3

... Page-3





Baby saved, mother saved!

Between February 12 and 24, Kaushalya Hospital went through a miraculous journey as they were able to save a 31-year-old mother and her baby. The patient was 35 weeks pregnant (Non-PIH and no other high-risk factor in ANC). One fine day, when she was home, she suddenly collapsed around 11:00 AM. She was brought to Kaushalya Hospital at around 4:00 PM in an unconscious state. There was an unfortunate delay of five hours as the patient was referred from one hospital to another.

As soon as she was admitted, a MgSO4 injection and steroids were given to her. Standard Preeclampsia Eclampsia Protocol was initiated, and the patient was shifted to the Operation Theatre. LSCS was performed under the able supervision of the concerned doctors. As expected, moderate post-partum haemorrhage was detected. It was wellmanaged with HAL B Lynch and Cho's sutures and uterotonics.

Later, it was observed that the baby



was depressed and required neonatal resuscitation to be undertaken by the NICU team. The patient was shifted to ICU and was kept on the ventilator. MRI (brain) was done in the morning at around 11:00 AM. There was intracerebral bleeding and a shift of the lateral ventricle. Broca's area was affected. The neurosurgeon looked into the matter and advised conservative management.

Two days later, the patient was stable. The patient was discharged after seven

Take home points

As against the conventional regime of Obstetricians and Gynaecologists to stabilise the patient first and then operate, Kaushalya Hospital chose to operate first. The thought process behind the decision was that once the baby is out, maternal recovery starts.

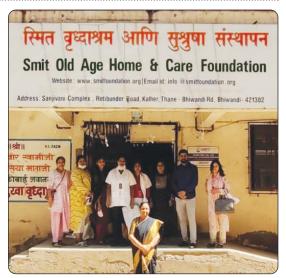
days in the ICU and as many days in the ward. She was advised on home-based physiotherapy and speech therapy. A month later, when she could talk and walk with some support, the patient extended her heartfelt gratitude to Kaushalya Hospital and the Almighty. The patient thanked the Dept. of Anaesthesia - Dr Jayanti, Dr Leena, Dept. of NICU - Dr Jugal Gada, Dr Grivita Raikar, Team ICU - Dr Amit, Dr Reena, Manju Sister, Teju Sister, and the Physiotherapist.



Kaushalya Hospital's team of Orthopaedic doctors including Dr Sameep Sohoni, Dr Kiran Bhavnani, Dr Jayesh Nayak, along with Physiotherapist Rasika Bali conducted a camp on Orthopaedic **Wellness and Robotic Knee** Replacement at RCF colony in Chembur on January 12.







Under the able aegis of Kaushalya Medical Foundation Trust, Centurion President Neha Gada and Inner Wheel Club of Mumbai (Mulund East) conducted a medical camp for senior citizens at Smit Old Age Home on February 24. Later, on March 7, the doctors of Kaushalya Hospital were a part of the coveted medical team for Maharojgar Melava organised by Maharashtra CM Shri. Eknath Shinde.



www.kaushalyahospitalthane.com

Cricketer lost and refound...

Young cricketer Yash Khedekar got paralysed with GBS and was on ventilator for 20 days. He needed plasma exchange therapy for 14 days. Battling through his crisis, he read Sachin Tendulkar's autobiography like a Geeta/Bible daily through his recovery at Kaushlaya Medical Foundation Trust's ICU. Yash was admitted on February 5 and discharged on March 16.



Dr Amit Khomane led Yash's treatment. Giving him company were Dr Nikhil Kadam (Neuro Physician), Dr Priya Srinivas (Ophthalmologist), Dr Amol Bhanushali (Surgeon) Dr Amol Khale (ENT), Dr Mihir Kulkarni (Nephrologist), and Dr Manas (Speech therapist), and the hospital's team of physiotherapists, who not only successfully treated Yash but also reignited his dream of playing his favourite sport cricket.









Kaushalya Hospital celebrated International Women's Day with great fervour. Dr Anita Sharma (Career Counselor and Performance enhancement coach) and Mrs Gladys Cabral (Vice Principal, Smt. Sulochanadevi Singhania School, Thane) graced the occasion with their esteemed presence. To mark the celebrations, Kaushalya Hospital offered free check-ups for women in the following discipline: Gynaecology, Dental, General Surgeon, Skin, Oncology, Cardiology, Ophthalmology, Diet, and BMD.

Continuation from Page 1

OBESITY AND IT'S MANAGEMENT

combination of diet and exercise helps in attaining the weight control goals than either modality alone. Physical activity (brisk walking, running, sports) should be performed for approximately 30 minutes or more per day, 5 to 7 days a week, to prevent weight gain and to improve cardiovascular health. To prevent loss of muscle mass, resistance training is often required.

BEHAVIOURAL MODIFICATION: Behavioural therapy may help patients make long-term changes in their eating behaviour by modifying and monitoring their food intake, modifying their physical activity and controlling cues and stimuli in the environment that trigger eating. Psychologists are often required for behavioural modification.

DRUG THERAPY: The earlier medicines that used to control weight/lose weight included PHENTERMINE-TOPIRAMATE, PHENTERMINE alone, NALTREXONE-BUPROPION and ORLISTAT. The revolutionary approach to medical management of obesity is the recent availability of the so-called incretin-based therapies. These medicines include SEMAGLUTIDE (available as a subcutaneous injection; not available in India), oral SEMAGLUTIDE

(available in India as RYBELSUS), INJ LIRAGLUTIDE. The use of SEMAGLUTIDE has been associated with cardiovascular benefits. It has also beneficial effects on renal function. A loss of weight of as much as 10% of total body weight has been found in a significant number of its users. Not to forget is that all oral therapies must be used in addition to diet and exercise to attain sustained goals of weight management.

BARIATRIC SURGERY: These procedures include gastric bypass operations. The option of gastric bypass is offered to patients with a BMI of >= 35 kg/m^2 or even those with a BMI of >=30 kg/m^2 with severe comorbidities such as uncontrolled diabetes, inspite of best management. Bariatric surgery can give sustained weight loss and diabetes cure and significant cardiovascular benefits. BARIATRIC SURGERY OPTION IS GIVEN ONLY IF SUSTAINED EFFORTS AT WEIGHT MANAGEMENT BY DIET AND EXERCISE HAVE FAILED TO ACHIEVE THE DESIRED GOALS.

- Dr Prashant Kulkarni, M.B.B.S, M.D Consulting Physician, Kaushalya Hospital

Art as a blessing

But I assure you, each painting has a mind of its own. It is never like the base photograph. At the very first sitting itself, it takes its own shape and design. After that, one starts seeing things in it and that's how it progresses.

The stream painting that you see here, many have liked the forest at the back. And it wasn't there at all in the base photograph. When I painted the stream once, I didn't like it at all. I applied white colour over it (the only such incident) and re-painted the stream. It then came to life. Today this painting sits proudly in our dining area. One can never predict from where God will send a blessing in your life.

-Dr Smita Mudgerikar, Gynaecologist, Kaushalya Hospital



KAUSHALYA TIMES

HAPPY PATIENTS

The staff of the Kaushalya Hospital is very good. Dr Sameep Sohoni and Dr Mohan Sohoni performed robotic knee replacement surgery on me. They did it with extreme precision and I didn't feel any pain. Physiotherapist Dr Rasika Bali helped



me with the exercises and I was able to walk in just 15 days after the operation. I am grateful to the entire orthopaedic team at Kaushalya Hospital. It is one of the best healthcare facilities in Thane. Everything from my admission to discharge was hassle-free.

- Subramaniam Iyer

On March 27, Dr Mihir Patel and Dr Sameep Sohoni performed left shoulder arthroscopy successfully. After the procedure, I was relieved of pain and was able to freely move my left hand. The overall service of all the staff of the Kaushalya Hospital was very good. The nursing staff and the RMOs were very cooperative and friendly. They were excellent at their job. The

- Sanjay Deo

I was happy and satisfied with the medical care provided at Kaushalya Hospital during my pregnancy. My treatment was under the supervision of gynaecologist Dr Smita Mudgerikar and gynaecologist Dr Jolly Gosavi. I must say that both the doctors

housekeeping service was fantastic too.



are well experienced, co-operative, supportive and reachable at any time. I consider myself very fortunate for a smooth pregnancy journey. Also, thanks to hospital staff, nurses, and RMO. Special thanks to Mrs Aruna sister for her support.

- Manasi Soman

I was gratified by the welcoming atmosphere at Kaushalya Hospital, a refreshing departure from the corporate vibe of other hospitals. As a runner prone to injuries, finding Dr Sameep Sohoni was a game-changer. His expertise



and innovative approach to orthopaedic care have been instrumental in my recovery journey. My recent tibia fracture was approached with the right blend of modern and contemporary treatments. Today, my ode to recovery is credited to him, and I trust him implicitly for any future orthopaedic needs. Special thanks to Roshni for her unwavering support. Kaushalya Hospital offers a comforting healthcare experience, and Dr Sohoni's expertise makes him my top choice for orthopaedic care.

- Kameshwari Kulkarni

Republic Day celebrations....







Kaushalya Medical Foundation Trust celebrated India's 75th Republic Day with enthusiasm. The medical and non-medical staff of the Hospital came together on this momentous occasion.







SSTCON, a surgical conference was held on March 23 and 24. Dr Amol Bhanushali was the organising secretary and many of the surgeons of Kaushalya Hospital were part of the organising committee. Dr Sarang Alaspurkar, Dr Satish Kamat, and Dr Hemant Patil demonstrated live surgeries. Dr N. Saileshwar delivered the Dr H.S. Bhanushali oration.

supported by ठाणवंभव