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YOUR HEALTH

An Official Monthly Publication in English of the Indian Medical Association since 1952 for the people to propagate Health Awareness in the Community



Happy Doctors' Day

*Remembering the legend
Bharat Ratna
Dr Bidhan Chandra Roy,
a well-known physician,
philanthropist,
freedom fighter,
educationist, and dedicated
Statesman on his
Birth Day,
1st July*



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YOUR HEALTH

of the

INDIAN MEDICAL ASSOCIATION



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YOUR HEALTH

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HAPPY DOCTORS' DAY

'Doctors' Day', is celebrated in India on July 1 every year, holds special significance for medical practitioners in India. Just like Mothers' Day we pay tribute to our Mothers, Fathers' Day to our Fathers, Teachers' Day to our teachers, Children's' Day to children; it is on this day that Doctors' are appreciated for the irreplaceable roles that they play in our lives. **Doctors' Day is the time to pay tribute to the entire medical profession.** This is in commemoration of the Birth & Death Anniversary of Eminent Physician and Patriot Dr. Bidhan Chandra Roy.

The history of this special day dates back to the 1800's when an American, Dr. Crawford W. Long became the first physician to use anesthesia in an operation that he performed on March 30, 1842. To commemorate this unprecedented event, March 30 was declared as National Doctors' Day in the United States.

The **red carnation** was chosen as the official symbol of Doctors' Day because of the colour of the flower denotes love, charity, sacrifice, bravery and courage, all of which are synonymous with the medical profession.

Interestingly, the story of Doctors' Day in India is quite different and few people actually know why it is celebrated. First of July happens to be the Birth & Death Anniversary of a famous Indian physician, Dr. Bidhan Chandra Roy who was born on this day in the year 1882, in Patna, Bihar. After his medical graduation at Calcutta, he completed his MRCP and FRCS at London and returned to India in 1911. His career as a physician began in 1911, after he returned to India. Thereafter, he joined the teaching staff of the Calcutta Medical College and then moved to Campbell Medical School after which he moved to the Carmichael Medical College. He excelled not only as a physician and educationist but even as a freedom fighter, joining Mahatma Gandhi in the Civil Disobedience Movement. He was instrumental in starting many institutions including hospitals and for caring for thousands of patients. Dr Roy's dedication to the upliftment of Indian society and his love for serving the people led him to the political arena, where he first became leader of Indian National Congress and later Chief Minister of West Bengal. After a life of work and service, the Doctor passed away on July 1, 1962, on his birthday.

Doctors' Day thus pays tribute to all doctors like Dr. Bidhan Chandra Roy, who spend their lives helping others. The nation has honoured Dr. Roy with Bharat Ratna and the B.C.Roy National Award instituted in 1976.

Majority people are of the opinion that Doctors' Day is the Birth & Death Anniversary of Dr. Bidhan Chandra Roy and it is observed in many places paying homage to the legendary figure.

It was **Indian Medical Association, Kidderpore Branch, Calcutta** who first came out with the proposal of "Doctors' Day" in the year **1989** with **Dr. Santanu Banerjee (President)** and **Dr. Pradip Kumar Chatterjee (Secretary)** and designated 1st July in commemoration of the Birth & Death Anniversary of Eminent Physician and Patriot Dr. Bidhan Chandra Roy, which was passed first in State Working Committee, IMA Bengal State Branch and then in Bengal State Council Meeting in 1989 with **Prof. Ashok Chaudhuri (State President)** and **Dr. Subir Gangopadhyay (State Secretary)** and forwarded to IMA Central Working Committee and passed in CWC meeting 24-25 April 1991 under the then National President **Dr. Ram Janam Singh (Bihar)**. IMA Hqrs. directed all its branches to observe 1st July as "**IMA Doctors' Day**" from 1st July 1991. The IMA Hqrs. then persuaded the Government of India and after a long process ultimately "**National Doctors' Day**" got official recognition in India only in the year 1991 by Dept. of Health & Family Welfare, Government of India, 29 years after the death of Dr. Bidhan Chandra Roy. Dept. of Health & Family Welfare, Government of India instructed all State Governments to organize & observe "**National Doctors' Day**" and **1st July 1992 became the most important date for doctors all over India when "National Doctors' Day" was observed for the first time with Government extending financial support to IMA.**

This special day is an ideal opportunity to remind people of the critical role doctors' play in our lives. Being a doctor is not just a 'job'; it is a challenging commitment to service that requires high levels of skill and precision. To make a tough job even tougher, doctors also have to deal with the reality that even a small professional mistake could drastically affect a patient's life. Doctors' Day is the perfect time for patients to acknowledge the high-pressured job and appreciate their doctors' ability to comfort and heal.

Doctors' Day is also a significant day for doctors themselves as it provides them with an opportunity to revitalize and rededicate themselves to the practice of medicine. All doctors begin their professional lives with the noble ideals of serving humanity and healing those in need; however, some practitioners lose sight of these ideas and become corrupt and unethical. Doctors' Day is thus a time for doctors to reflect on their own careers, realize the responsibility they bear and redirect themselves onto an ethical path of healing those in need.

Unfortunately, the medical profession today is witnessing a rapidly deteriorating patient-doctor relationship, with people losing faith in their doctors' abilities. The easy availability of medical information, and misinformation, from the media and the Internet is also responsible for clouding a patient's view of their doctors' advice. Nowadays, doctors are more often the victims of criticism while their successes are overlooked. It is true that the medical profession carries a heavy responsibility with it, but people need to realize that behind the white coat and stethoscope is a normal human being and like in all other professions, doctors too need appreciation for their work and efforts.

It must be mentioned that different sectors observe this day in different way that suits them forgetting the actual reason. The media stays a passive onlooker on this day as they require stories to criticize medical fraternity overlooking their contribution to the society; corporate healthcare institutions comes out with patient friendly business deals, organize free camps to attract business for their own needs, medical organizations playing puppet in the hands of political leaders call upon Doctor Community to build up good Doctor-Patient relationship, give free treatment, organize free camps, organize rallies/tabloids for mass education; the Pharmaceutical Companies utilizes this day approaching those doctors who matters with gifts & wishes (but not to all) and lastly political parties felicitate their core group Doctors.....

In FATHERS' DAY we wish our fathers, MOTHERS' DAY we wish our mothers, TEACHERS' DAY we wish our teachers, CHILDREN'S DAY we wish little children, we do something for their appreciation.....but on Doctors' Day the Doctors only are supposed to do all types of activities themselves for the society.....***This is not what DOCTORS' DAY is for***.....

On this Doctor's Day, make an effort to honour doctors for their skill and commitment. Single out a family doctor and show them your gratitude for the care they have provided you and your loved ones. This day provides students and those who work in hospitals, nursing homes or other medical facilities with the ideal opportunity to express their thanks to doctors for mentoring, being supportive and encouraging.

Give your doctor a card, a single red rose, a gift or just say a simple, heart-felt 'Thank You': it will brighten up their day and make them feel respected and appreciated.

So here's wishing all my doctor colleagues, "A HAPPY DOCTORS' DAY"

Dr. Sanjoy Banerjee

Hony. Branch Secretary IMA Behala 2001-2024
Hony. Jt. Finance Secretary, IMA HQs. 2020-2022
Hony. Secretary, JIMA 2018-2020
Hony. Jt. Secretary, IMA Hqrs 2014-2016
Hony. State Secretary, IMA Bengal 2010-12





Dr Samarendra Kumar Basu

National Doctors' Day is celebrated on 1st July each year, on the Birthday of Dr Bidhan Chandra Roy.

Dr Bidhan Chandra Roy was the Son of Prakash Chandra Roy and Aghorkamini Devi. He was born on 1 July 1882 at Bankipur in Patna. A brilliant student, Roy passed Entrance examination from Patna Collegiate School in 1897 and FA examination from Patna College in 1899. In 1901, after his graduation with Honours in Mathematics Roy joined Calcutta Medical College. He obtained MSS degree from the university of Calcutta in 1906 and MRCP and FRCS from England in 1911. On his return to the country he soon earned great fame as a physician.

Being inspired by Chitta Ranjan Das, he first entered Bengal politics in the early 1920s and gradually engaged himself in national politics.

In 1948, after the break up of Prafulla Ghosh Ministry in West Bengal, Roy was elected as the leader of the Provincial Congress and had to take the charge of the Government of West Bengal. In 1952, he became the Chief Minister for the second time. After the election of 1957, Roy became the Chief Minister for the third time. Roy was conferred 'Bharat Ratna' in 1961. He formed the ministry in West Bengal for the fourth time after the 1962 elections, but within a few months breathed his last on 1 July 1962.

At his initiative the Government of India undertook the refugee rehabilitation plan at Dandakaranya. Roy took up projects of new townships at Salt Lake, Kalyani and Durgapur and planned an exciting tourist spot at Digha. He initiated the establishment of Burdwan, Kalyani and North Bengal Universities.

In India, National doctors day was first observed on 1st July 1991 in the honour of Dr Bidhan Chandra Roy, to pay tribute to his contribution in health domain.

Doctors play a vital role in the society. They dedicate their lives for patients' well-being & help quicker recovery from a disease & improve quality of life. In many incidents, doctors never give up in spite of attacked by patient party.

National Doctors' Day celebrated to appreciate, recognise the importance of doctors role in the society. We must pay tribute & recognise our doctors efforts as no one should forget the contributions of our medical professionals during COVID-19 pandemic and they are still fighting against this disease. But we the doctors are being frustrated day by day due to mishandling of our friends leading even to death. National Health Policy also has adopted certain unlawful laws for doctors .

Doctors day should be the day, when whole population must promise to stop violence on medical fraternity. We should give a peaceful India where we can perform our services to the humanity without fear & pressure. Our government are adopting many laws to protect us. But law **alone** can not stop violence unless and until our own mind does not understand the actual role of a doctor. The doctors are not God, only a medically expert human being. Thus doctors have many limitations. Here only to note their attitude to a patient, real sincerity & to give a conducive environment for treating our patients.

Dr Bidhan Chandra Roy was an active member of IMA & took an instrumental role to formulate the rules & regulations. The population including our doctors friend can give proper tribute to this unquestionable leader of leaders & proper doctors day will be meaningful when India will be a country without violence on medical fraternity & to establish an environment where doctor can treat a patient as a real friend of a society.

Hero's of the country **are** those **too**, who don't fight at borders but dedicatedly work for saving lives & improving life expectancy while putting their own life at risk, we call them DOCTORS.

Happy Doctors' Day!



Dr Sarbari Dutta

From the Desk of Secretary

Happy IMA National Doctors' Day 2022

July 1 is celebrated as National Doctors' Day by the Indian Medical Association (IMA). The day is observed to commemorate the birth and death anniversary of former Bengal's Chief Minister Dr Bidhan Chandra Roy. The day is dedicated to all the doctors and healthcare workers who have been serving the people by risking their lives. The COVID-19 pandemic has once again reminded us about the contributions and sacrifices made by doctors and healthcare workers around the globe.

They have been no less than angels who are struggling constantly in order to save lives, even if that means putting their own lives at risk. National Doctors' Day is the best occasion to thank all the doctors, nurses and healthcare professionals in your life for all that they do for us.

National Doctor's Day is celebrated every year on July 1 in order to show gratitude to those doctors who have selflessly aided people in their time of need and tirelessly worked for the health of their patients. Since the Covid-19 pandemic has struck the importance of doctors has been realised worldwide. As we salute the sacrifices of the doctors, let us take a look at the life of India's first female doctor, Anandibai Gopalrao Joshi.

Anandibai was born in a conservative Brahmin family of Kalyan in present-day Maharashtra's Thane district on March 31, 1865. She was originally named Yamuna by her parents, but her name was changed by her husband post her wedding. When she was just nine years old, she was married off to 25-year-old Gopalrao Joshi. According to her biography, Gopalrao had married her on the condition that she would study post their marriage. When they got married, she even did not know the alphabet since her family was against her getting an education. At that time, it was considered that the husband of the woman who studies died at an early age.

Initially, Anandibai did not have much interest in studies and her husband had to scold her in order to teach her. However, one setback in her life changed her mentality towards studies. According to the biography, when Anandibai was just 14-years-old, she lost her baby in only 10 days. She was so much shocked by the death of her baby that she took a vow to become a doctor and try to stop such untimely deaths that were quite frequent in those days.

Gradually, Anandibai started studying more and more and her husband supported in fulfilling the vow. After completing basic education, she enrolled herself in a medical program at the Woman's Medical College in Pennsylvania which was one of the two women's medical colleges in the world. However, she had to face a lot of criticism from society for going abroad to study despite being a married woman.

Without caring about the criticism, Gopalrao made sure that she achieved her dreams and for this, he sent her to New York from Kolkata by ship. At the age of 19, she became the first woman physician in India to have graduated with a two-year degree in western medicine from the United States.

On her return to India, she was given a grand welcome and the princely state of Kolhapur had appointed her as the medical in-charge of the women's ward of the Albert Edward Hospital. She succumbed to tuberculosis at the early age of 22 but went on to become an inspiration to generations of women to pursue their education.

The "Your Health of IMA" is a publication of Indian Medical Association (IMA) for the masses from Kolkata. This June 2022 issue is dedicated to all Doctors who have sacrificed their lives fighting with the dreaded Corona Virus during 2020-2021. The different authors have done a marvellous job while composing the contents covering a vast field in Medicine. I am grateful to all concerned those who have contributed to bring out this issue. I hope this will be of great help to the common masses to understand the subject.



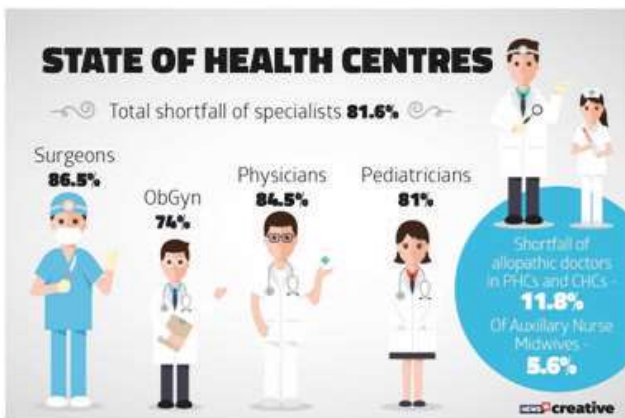
Prof. Dr. J.A. Jayalal MS, FRCS (Glasgow), PhD
 National President IMA 2021
 Nation Head IMA UNESCO Bioethics

The healthcare sector is one of the major and strongest pillars of our country. Ever since the pandemic outbreak, the segment has been functioning tirelessly to ensure that the required medical assistance reaches the citizens on time. It has been an ever-evolving market, and healthcare providers are putting their best foot forward to ensure that high-end services are available and accessible to all. Even though a lot of good work has happened on the MedTech side, we must look beyond physical healthcare offerings and vanilla telemedicine for addressing universal healthcare needs.

India has made significant advances in the health of its populations over more than a decade, reducing the gap between rural and urban areas and between the rich and the poor. However, huge disparities remain, and access to healthcare in rural areas remains a huge challenge. There is a growing recognition that India needs to build a strong comprehensive primary healthcare system to accomplish any further advancements in the health status of the population and to reduce these disparities.

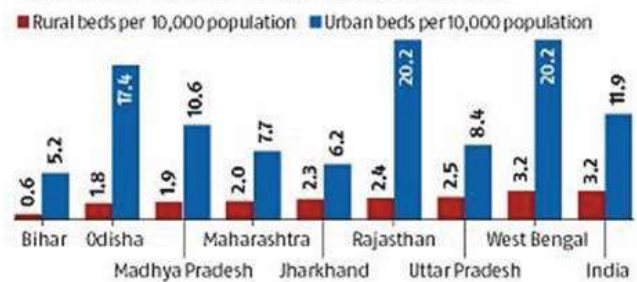
INDIAN RURAL HEALTH CARE SYSTEM:

The Indian rural health care system is a three-tier system comprising Sub-Centres, Primary Health Centres (PHC), and Community Health Centres (CHC). As of 31st March, 2020, there are 155404 and 2517 sub-centers (SC), 24918 and 5895 Primary Health Centres (PHCs), and 5183 and 466 Community Health Centres (CHCs) respectively which are functioning in rural and urban areas of the country.



Importance Of Doctors In Rural India

KEY STATES LACKING RURAL HOSPITAL ACCESS



Source: National Health Profile 2019, Census 2011, BS calculations

There is currently a shortfall in health facilities:

- 18% at the Sub-Centre level,
- 22% at the PHC level
- 30% at the CHC level (as of March 2018).

Rural India has 3.2 government hospital beds per 10,000 people. Many states have a significantly lower number of rural beds than the national average as shown in the figure.

Overall, there is a shortage of specialists working at the CHC level (81.9%). This includes a shortage of surgeons (84.6%), obstetricians & gynaecologists (74.7%), physicians (85.7%) and paediatricians (82.6%).

THE HEALTHCARE LANDSCAPE IN RURAL INDIA:

Healthcare is the right of every individual but a lack of quality infrastructure, a dearth of qualified medical functionaries, and non-access to basic medicines and medical facilities thwart its reach to 60% of the population in India. According to recent health data, in 2021, the rural population of India was 903 million and it is projected to hit the 905 million mark by the end of 2022. This indicates that the country's considerable population dwells in rural areas. Though 70 percent of the population live in a rural area only 30 percent of doctors are available in Rural India.

But what is indeed undeniable is that due to inadequate facilities, the mortality rates are at an all-time high.

As per the WHO, all individuals and communities should receive the health services that they need

without experiencing financial constraints. But the reality is that people in rural areas still suffer due to the lack of quality healthcare services. The inadequate access coupled with the growing chronic diseases and higher pricing further adds to the woes.

Overall, availability, accessibility, and affordability are the major factors that hinder the growth of the rural healthcare market. However, this can be addressed by providing support to innovative and disruptive models that leverage tech and physical assisted healthcare models in remote locations

SHORTAGE OF DOCTORS IN RURAL INDIA :

Due to the governance failure and lack of skew distributions we are having many states have an excess doctors while few has acute shortage of doctors rural India.

ROLE OF DOCTOR IN RURAL HEALTH CARE:

In rural areas, health professionals need to provide a range of care, for a range of conditions to people across the life cycle. They, therefore, need to have a range of clinical skills, social skills, and leadership skills. Current medical and nursing education is conducted in specialized tertiary care settings and is geared toward providing care in such settings only

The role of a rural doctor differs significantly from that of a doctor in a large metropolis or a provincial hospital.

- A district doctor must have sufficient knowledge and abilities in supporting primary health care in the community.
- He or she must be able to effectively promote community participation necessary for the development of PHC at the community level by mastering at least the following tasks: delegation of responsibility, authority, and resources to establish PHC in the community in a way that is linked to the people's real-life situation;
- assisting the establishment and functioning of community organizations;
- fostering individual responsibility for self-care and family care, adolescent health, and adolescent health.
- Some people believe that by completing a "self-referral" and going straight to a specialist instead of seeing a primary care doctor first, they can save time.

These expectations of the doctors can be fully fulfilled by all the stakeholders working together and bring

- Human Resource Development:
- Increased Technology Adoption:
- Emphasis on Health Literacy and Preventive Care:
- New Referral Pathways and Funding Mechanisms:
- Improved Public Healthcare System:

WHERE IS THE SHORTAGE?

Best		Worst	
States	People per doctor	States	People per doctor
Tamil Nadu	253	Jharkhand	8,180
Delhi	334	Haryana	6,037
Karnataka	507	Chhattisgarh	4,338
Kerala	535	Uttar Pradesh	3,767
Goa	713	Bihar	3,207
Punjab	789	Himachal Pradesh	3,124

NOTE: Andhra has a ratio of 1:689, but this is misleading because most Telangana doctors continue to be registered in Andhra

Population vs Doctors



WHAT MAKES A GOOD DOCTOR





IMPORTANT QUALITIES FOR A RURAL PRIMARY CARE DOCTOR:

Family practice in primary health care is the comprehensive medical care given by the Doctor to the whole family from womb to tomb .The doctor needs to have 10 Cs

1. Caring /Compassionate
2. Clinically competent
3. Cost effective care
4. Continuity of care
5. Comprehensive care
6. Common problems preventive care
7. Coordination of care
8. Community oriented care and research
9. Continuing Professional development
10. Communication and counselling skills with confidentiality

Doctors in rural India play a pivotal role in building society. They are the lifelines of the community. They act as an inspiration to society.

Doctors save lives, but their importance goes far beyond that. Doctors also make a difference by helping patients minimize pain, recover from a disease faster or learn to live with a disabling injury. A patient's ability to enjoy life, even if they can't be cured, makes a huge difference to them and to their families. If they can go back to work after an illness, that benefits their employer, too. And, that's only part of what makes doctors important to society.

The Doctor in Rural India needs special skills and values apart from the different roles he is expected to play.

The Doctor in rural India are indispensable for

Roles	Skills	Values
<ul style="list-style-type: none"> • Clinician with strong knowledge base • Leader • Advocate • Educator • Scholar/researcher • Manager/coordinator of health care team 	<ul style="list-style-type: none"> • Comprehensive medical skills • Surgical skills (Caesarean sections, emergency surgery) • Ability to integrate public health with clinical skills • Resource management • Medical informatics 	<ul style="list-style-type: none"> • Community-based • Longitudinal care • Promotes a strong doctor–patient relationship (but given the physician–population ratios, this is limited by time constraints) • Continuing professional development

- Preventive Medicine
- Stopping Pandemics
- Economic Impact
- Educating People
- Shaping Health Policy

CAN MIDDLE-LEVEL PRACTITIONERS CAN REPLACE QUALIFIED DOCTORS?:

In India, the constitutional right of equality is given to all people and the rural population cannot be treated as second-grade citizens. Medicine is a complex subject and only those who are fully trained in all the components of pre, para and clinical pillars of Medicine can full fill the health care needs and its safe and quality-oriented delivery. As the number of Doctors coming out of nearly 620 Medical colleges in India is around 1lakh proper planning and infrastructure development will definitely help our country to have qualified doctors in every corner of Rural India.

With the best compliments for the **Doctors' Day** from.....

INDIAN PHARMA

The makers of INVIT – 7 and ESDIP – 5

Holding Number – 334, Ward Number – 09, RC – 25/2, Raghunathpur, Tegharia, Kolkata, North 24 Parganas, Pin – 700 059, West Bengal, INDIA



Prof. Dr. Prasanta Kumar Bhattacharyya

PROF.&HOD, Dept Of Plastic Surgery, KPCMCH, Kolkata.

Doctor's Day In Brief

Every year doctor's day has a theme and in 2022 the theme of National Doctors day is "Family Doctors on the Front Line."

When was Doctors Day started in India?

1991

The First Doctor's Day was celebrated in India in the year 1991. July 1 happens to be the birth and death anniversary of the most famous physician of India - Dr Bidhan Chandra Roy. It is hence a tribute to his contributions to the health domain in the country.

Which date is World Doctors Day?

Doctors' Day is observed to show gratitude to doctors for their hard work and determination in saving lives. Every year, March 30 is celebrated as Doctors' Day in the US, to honour those medical professionals and physicians who help save lives all over the world.

National Doctor's Day

The presence of the doctor is the beginning of the cure". A special day is hence observed every year on July 1 as Doctor's Day. The objective is to acknowledge the contributions of doctors' humane service to mankind.

Background

The First Doctor's Day was celebrated in India in the year 1991. July 1 happens to be the birth and death anniversary of the most famous physician of India - Dr Bidhan Chandra Roy. It is hence a tribute to his contributions to the health domain in the country.

About Dr B.C.Roy

Dr B.C. Roy was born on July 1, 1882 at Patna, Bihar. He had completed his medical graduation from Calcutta and his MRCP and FRCS degrees in London. He began his medical career as a physician in India in 1911. He then joined the Calcutta Medical College as a faculty and later moved to the Campbell Medical School and then to Carmichael Medical College.

He was a famous physician and renowned educationist as well as a freedom fighter. He joined Mahatma Gandhi during Civil Disobedience Movement. Later he became the leader of Indian National Congress and

then Chief Minister of West Bengal.

He passed away on July 1, 1962, after registering 80 years of his great service for the country. The erstwhile Medical Council of India (National Medical Commission) instituted Dr. B.C. Roy National Award Fund in 1962 to perpetuate his memory. The Dr B.C. Roy National Award was instituted in the year 1976 to recognize the best talents in encouraging the Development of specialities in different branches in Medicine. Dr Roy was honored with the great Indian civilian award "Bharat Ratna" on February 4, 1961.

National Doctor's Day is observed in India to recognise and appreciate the significant roles and responsibilities of doctors. The annual celebration of this awareness campaign also helps common man to become aware about the roles, importance and the precious care delivered by doctors.

National Doctor's Day is being celebrated for years by the government and non-government healthcare organizations. in order to get familiar with the doctors contributions. Consultation workshops, Free medical checkup camps, General screening test camps are organised across the country. Activities are also organised at the school and college level so as to encourage young students to take up medical profession. Patients greet their doctors by distributing greeting cards, gifts, bouquets, etc.

Doctors Day 2022 Wishes – Doctors always play an important part in everybody's life. Whenever we need help related to our health we rush to the Doctor and since Coronavirus has developed, the doctors have become heroes and superheroes. Recently the world has learned that how doctors are contributing towards society. Doctors are those who are constantly fighting for the lives of infected people while we were in isolation. Doctors are trying their best to deal with the pandemic and trying to recover the patients. They are truly the greatest hero of not only present but all of the time. Every year on 1 July, India Celebrates National Doctor's Day. The day is celebrated to honor the birth



Dr. Amitabha Bhattacharya, MBBS (Cal), DPH (Cal), MPhil RMTS
Mr. Anwesh Ghosh, MPhil RMTS Part-II

For World Environment Day

We know the whole world will observe 05th June 2022, as the World Environment Day.

Today is the 03rd June 2022, a very important date for the world's environment movement. Today, the UNEP (United Nations Environment Programme) and partner along with Kenya and Sweden are organizing a high level international meeting on the Human Environment in Stockholm.

Every year, a different country hosts the World Environment Day, with formal events taking place in that country. Sweden will be the host country in 2022.

The United Nations General Assembly (UNGA) declared the June 05th to be the World Environment Day (WED) in 1972. In 1974, the inaugural celebration was held under the slogan "Only One Earth". In the years afterwards, WED has grown into a platform for raising awareness about issues such as air pollution, plastic pollution, illicit wildlife trade, sustainable consumption, sea-level rise and food security, to name a few. WED also aids in the transformation of consumer patterns as well as national and international environment policies.

The global campaign #OnlyOneEarth for World Environment Day 2022 pushes for policy and decision reforms that enable cleaner, greener and sustainable living in harmony with nature. It will focus on the importance of living sustainably and in peace with nature, as well as our options for transitioning to a greener lifestyle through policy and individual choices. The motto of the 1972 Stockholm Conference was "Only One Earth". The motto is as relevant today as it was 50 years ago: this planet is our only home and humanity must protect its precious resources.

For the UNEP and the worldwide environmental community, the year 2022 marks a watershed moment. It is the 50th anniversary of the foundation of the United Nations Environment Programme as a result of the Stockholm Conference. It also falls on the same day as the high level Stockholm+50 international summit. These iconic events provide a platform for the world community to strengthen cooperation and demonstrate leadership in the transition to a more sustainable society.

Doctor's Day In Brief

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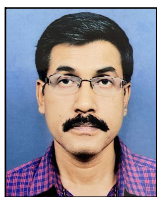
and death anniversary of the great physician and the second Chief Minister of West Bengal, Dr. Bidhan Chandra Roy. India has grown by leaps and bounds in the medical field. This day serves gratitude to all those who are aiding us selflessly in the time of need and tirelessly worked for the health of their patients by commemorating the greatest representative of these ideals.

Every year doctor's day has a theme and in 2022 the theme of National Doctors day is "Family Doctors on the Front Line".

Conclusion

Every year we should memorise our day, Doctor's Day at large Scale on 1st July, not only to commemorate our beloved respected exemplary Doctor Dr Bidhan Chandra Roy, but also to pay our regards and homages to our Gurus, teachers, colleagues and health workers of our fraternity.

We should try to recognise and felicitate our exemplary reverent teachers and seniors due to their outstanding activities for the community at large.



Dr. Saurabh Sankar Kundu

Internet Addiction

The term internet addiction was introduced as a new disorder in the mid-1990s since then there is a growing concern about the addictive nature of the internet. Asian countries such as China and South Korea are affected most. Overall prevalence rate was 6%. Internet addiction includes Gaming gambling social networking and cybersex. Social isolation and online education have changed all the statistics of internet addictions during Covid era. Till October 2021, There are 27% of smartphone addictions, 14% internet addictions and above 6% of people have game addictions.

In the year 1996 Dr. Young wrote a paper as, internet addiction, "the emergence of a new clinical disorder". She proposed the DSM IV criteria of substance dependence to diagnose it. Some consider it as an impulse control disorder or even as obsessive compulsive disorder. However, DSM-V introduces the condition as Internet Gaming Disorder for future studies.

Controversies:

Can we consider liberal use of the internet as an illness at all? There is no chemical substance in it to get addicted. With the day to day rise of internet use among the Young generations we need to be proactive against its excessive use and negative impacts.

Types of internet addiction disorders:-

1. Online gaming disorder includes online gambling
2. Social networking
3. Cybersex.

Online gambling is the most addictive type and males are found to be more involved.

Internet addiction is more common in Asian countries and among males aged between 12 to 20 mostly in China and South Korea. Results show that adverse living conditions, poor satisfaction with life, lowered national income, greater times spent on traffic are directly proportional to internet addiction. According to a recent study, the Indian subcontinent is seemingly overtaking other nations with 53% of Indians connected to the internet.

Causes of internet addiction:

In this post Covid era many children and adolescents, engaged in the internet for academic pursuits, are ending up with internet addiction.

The genetic factors play in addiction. Personality traits are also contributory. Social factors like affordability and availability of devices, attitude of parents and school over the internet, social isolation, poor outdoor mixing and activities with friends etc.

Developing brains of children and adolescents are more vulnerable to get addicted to rewarding activities. According to neurobiological theories, this internet addiction also acts as a stimulant to the reward centre and pleasure pathways same as other chemical addictions like alcohol, opioids etc. Dopamine and other endorphins are found to activate in the pleasure pathways.

The receptor gets affected when exposed multiple times. Tolerance and withdrawal develops like other addictions needing more and more online input to achieve the same stimulation or 'kick'. Computer applications are increasingly developed to engage the users fully and incessantly. Games are directed towards more pleasure generating themes.

Adolescents who are lacking emotional and psychological support are found to be at the highest risk and so are the adolescents with identified behavioural and emotional disorders. Those who face tremendous academic pressure in real life tend to find temporary solace in stress free virtual reality of being online. Depression and anxiety disorders specialty social anxiety disorder, ADHD (attention deficit hyperactivity disorder) are vulnerable to internet addiction disorder.

Clinical features: In children and adolescents, drop in school work, academic performance, disinterest in extracurricular activities, previously interested in and lying about the internet usage duration.

Management: No definitive treatments but sensible internet usage should be the goal. Psychological intervention like cognitive behaviour therapy (CBT), medicines like antidepressants of SSRI group,



Dr. M. A. Kasem
State President – IMA Bengal State Branch

National Doctors' Day: Know all about history and significance of this day.

National Doctors' Day – History and Significance:

The Indian Medical Association celebrates National Doctors' Day on July 1 every year, but with the country reeling under the effects of the Covid-19 pandemic this year the day holds even more importance.

National Doctors' Day is actually celebrated on July 1 to mark the birthday of Dr. Bidhan Chandra Roy, who was a world renowned physician, freedom fighter, and a politician who held the post of Chief Minister of West Bengal.

National Doctors' Day – History:

The first National Doctors' Day was celebrated in the year 1991 in the honour of Dr B. C. Roy's contributions to serving humanity and to the medical field. He was born on July 1, 1882, and incidentally passed away on the same date in the year 1962. Dr Roy was awarded with the Bharat Ratna on February 4, 1961.

He was instrumental in establishment of institutions like Chittaranjan Cancer Hospital, Chittaranjan Seva Sadan, Jadavpur T.B. Hospital, Victoria Institution (college), and Kamala Nehru Memorial Hospital, among others.

Dr Bidhan Chandra Roy was born in Patna, Bihar, and he studied at Patna Collegiate School, Presidency College Calcutta and Patna College. He did his post-graduation from St Bartholomew's Hospital, London, where his application was accepted by the Dean after 30 rejections. There he became a member of the Royal College of Physicians and a fellow of the Royal College of Surgeons. He returned to India in 1911 and wholeheartedly devoted himself to community service and to the freedom movement.

Dr. Roy actively helped students and freedom fighters during the struggle for independence and was also Mahatma Gandhi's close confidante and doctor.

National Doctors' Day – Significance:

July 1st is celebrated as the National Doctor's Day to honour Dr B. C. Roy's contributions to the medical field. Notedly, apart from his service to the nation and to the field of medicine, Dr. Roy was also instrumental in the establishment of the Medical Council of India (MCI) and the Indian Medical Association (IMA).

Internet Addiction

.....Contd from page 14

bupropion etc. Mass awareness programmes needed in prevention of the disorder.

Tips on sensible internet usage:

1. Having a prior discussion and agreement in internet use before a purchase of an internet facility.
2. All in the household follows the plan.
3. Setting aside devices at family and friends gatherings and meal times
4. Having an internet free a day specially on Sundays (digital detox)
5. When at studies or assignments switching off the notifications of chat sites or social networks.

Keeping the mobile on silent or switch off mode during study time.

6. Having an assigned time for socialising.
7. Internet time to be replaced by more interesting off-line activities.
8. Reward for being off from the internet - like having a vacation every three months or weekend movies or dining out.

Reference:

American Psychiatric Association. (2022). Internet Gaming Disorder. In *Diagnostic and statistical manual of mental disorders* (5th ed. text revised)



Soumili Sen

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Media envelops our homes, our culture, and our world. Books, newspapers, magazines, radios, television, movies, and computers are examples of media, which have encompassed us throughout the ages. Whether being bombarded by these facets of media is good for us or not is something we shall attempt to discuss here.

While 'media' has existed since time immemorial, the rise of 'social media' is something that we have seen only in the 21st century. Applications like Facebook and Instagram, and websites like YouTube and Google have undeniably become an indispensable part of our daily lives.

Some of us allow what we receive from the media to affect our lives in a very positive manner, and this was indeed the case from the time print media came into existence, up until the late 1990s. If we try to answer 'why', we can narrow it down to two very basic reasons; type of content and availability. Entertainment media was indeed developed to provide breaks from the bore of our daily life, but generations before ours never let it cross certain boundaries, solely because of societal limitations and/or availability. If we consider the case of India itself, we find the technology boom occurring almost simultaneously when the country opened its doors to the world, a phenomenon which we study as 'globalization'. So, put simply, before this time in the late 90s, most forms of media, be it newspapers, television, or the 'internet' (to a very small extent) provided us with useful information, whether it was world news, recipes of your favorite dishes or sometimes even our favorite daily soap opera. The world was probably a simpler place back then.

Fast forward to the early 2010s; the era ushering in the advent of smartphones and social media. While I realize it would be wrong of me to highlight only the negative aspects of the same, I think most people reading this would agree that the ill effects have grown to become much more than the positive ones. While we are the generation that has seen life without smartphones, we are ourselves the ones who can't

spend an hour without them today. In today's day and age, a four-year-old creating a tantrum at a mall would probably be handed a 12-inch tablet by his parents to pacify him. Common sense would suggest the several long-term ill effects this may have on the child. Looking at the teens of today, we see almost everyone obsessed with their 'self-image' which has been set by the unrealistic standards of either beauty or 'machoness' we find on social media. Not meeting up to these standards often will lead such children (and sometimes even pre-teens) to go into depression, sacrifice academics, and lose friends in the long run. To understand what causes such addiction right from toddlers to people of our age, we must look at what these apps try to do with our psyche. It is a well-known fact that all social media apps run advertisements, which serve as their main source of income. But to make these ads visible to us, each such company, whether it is Facebook or Instagram or Twitter, has teams of thousands constantly developing and bettering user-specific algorithms that decide what content should be displayed after a 'post' such that the user keeps 'scrolling'. We are therefore nothing, but victims of the largest money-making scheme in the world.

The media can deceive many into thinking it is anything but oppressive. Therefore, the majority of the population bypasses the possibility of media being misleading, false, or even offensive. One of the other important problems is the increasing violence and explicit sexual nature of available content.

Thus, to conclude, after looking at only a few of the many advantages and disadvantages of suggestions received from digital platforms, we can probably understand its impact on our daily lives. While it is difficult to debate about whether digital platforms should be removed from our lives wholly or not, it is my opinion that we may continue their use, but in absolute moderation, because in the end, it is us ourselves who can control the amount of positive or negative influence it may have in our lives.

Pros and cons of the media



Dr. Dinanath Rai, Gynecologist,
Ex-Medical Officer, Coal India and Deputy
Ramkrishna Mission Seva Prathisthan, Kolkata

No of couples visiting clinics has increased over the past decades.....

Couples may voluntarily delay pregnancy to establish themselves and age increase causes it.....

Along with other factors related to lifestyles, pollution, addictions, infections due to sexually transmitted diseases as well as illnesses.

Definitions.....

- 1) Infertility..... Unable to conceive within a year or sub-fertility
- 2) Sterility.....intrinsic inability to conceive
- 3) Primary infertilitythose who have never conceived
- 4) Secondary infertility..... Those who have conceived at some time in the past

Prevalence of infertility is approx 13%ranging from 7 to 28 % in women.....

And remained so for last 40 years.

Primary infertility has now increased.

In normal couples with regular intercourse 85 to 90 % will conceive in a year.

Sterility affects 1 to 2 % of couples.

Causes.....

It can be due to either partner or both.

Cause may be found in 80% of cases with an even distribution of male - female factors.

A primary diagnosis of male factors only is found in 25% of cases.

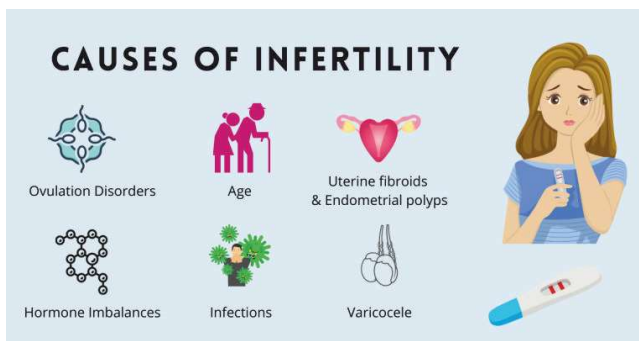
In 15--25% cases cause is not found and therefore labeled unexplained infertility.

Essentials of diagnosis..... In males

- 1) History
- 2) Semen analysis.
- 3) Urology...Endocrine ...Karyotyping
- 4) Infectious disease panel for IUI or IVF...ET



Infertility.....



Essentials of diagnosis..... In females

- 1) History, confirm ovulation
- 2) physical internal exam .
- 3) Cycle day 3 workup and ultrasound for ovaries.
- 4) Hysterosalpingogram if needed.
- 5) Laparoscopy ..hysteroscopy
- 6) Infections disease panel

Prevention.....

- 1) Above age 35 yrs seek earlier treatment.....as also for over 40 yrs.
- 2) Do not delay childbearing if possible.
- 3) Weight extremes have been associated with infertility due to anovulation..... Like obesity..... Along with decreased rates of success with ovulation induction... Poor egg quality, poor endometrial function, increased miscarriage s.
- 3) Smoking..... Adverse for females with early menopause by 1 to 4 years. Adverse for male semen too. So also with alcohol too for both partners.
- 4) Couples should not use vaginal lubricants as it may affect sperm quality.

Treatments available.....

- 1) Lifestyle with weight reductions
 - 2) Stop smoking and alcohol.
 - 3) Oocyte preservation
 - 4) Ovarian tissue preservation
 - 5) Donor oocyte and sperm programmes
 - 6) Intrauterine insemination 7) IVF.... ET
 - 8) ICSI 9) Preimplantaion genetic diagnosis
- If possible DO NOT DELAY CHILDBEARING.....



Dr Karan Juneja

National Secretary – IMA JDN
State Chairman – IMA JDN (Haryana)

Without oxygen we cannot live for a moment even. Without oxygen, the animal world will die away. Trees make the oxygen and spread it in the air. While inhaling air we take the oxygen with it into our bodies and live in life.

Carbon dioxide makes our atmosphere or rather our environment poisonous for us. Trees consume this carbon dioxide and thereby make our environment safe for us. Trees also give us many other benefits. We get fruit and flowers from the trees. Trees provide us with fuel and timbers. In summer, they bear the scorching rays of the sun and give us cool shade under them.

Trees in our forests draw the rain from the clouds floating in the sky. Trees in our forests check the quick flow of rain-water and thereby check the occurrence of high flood in our rivers. On the other hand, this slow process of water-flow gives us good water all

Go Green Initiative - Each One, Plant One

throughout the year through streams and streamlets with their sweet melodious music.

Trees conserve our soil. This soil-conservation is very important for our corn-fields. Trees make own land fertile by their fallen leaves. By their fallen leaves they make new soil for us. Most of the forest-products are the products from the trees in the forests, absence of trees will cause a lot of harm to us and to our life. So the number of trees should be multiplied by the tree-plantation by us.

We should plant trees near our houses and near our villages for a forestation with a view to raising new forests. We should plant trees on the two sides of the roads and paths and on the four sides of our corn-fields. We should plant trees on all the vacant places in our Hospitals, village and towns where we live, and we should advise all to do so.

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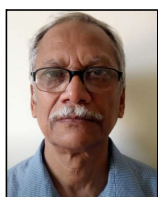
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* Parthasarathi Giri
 **Amita Majumdar Giri
 ***Nirmalendu Kanjilal
 ****Pramit Giri

The knowledge says, 'the only *constant* in the world is the *'change'*. The art that rolls in the environment is the science. It starts from the time when man has started computing the objectives in its daily use and abuses. It too also appears as a concealing art to develop as a still better quality of life.

The term knowledge and attitude is entirely the changing objectives in relation to what we call 'evidences'. The similar sets of arrangements will appear with the application of gained knowledge over the period of observations. The mechanism and the detectable process is still rising in every moments in its character following its risk and benefit ratio when applied in the quality of life care system. The knowledge is power and this *power* develops similar *attitude* towards life, finally the desired *practice* is the resultant 'evidence based' objectives in the emergency care system. Thus the protocol is generated entirely on the basis of scientific knowledge.

The entire system runs within the sequence of evidences. The evidences popped up as we talk about the practical & protocol based application of knowledge, we assess with '*specificity*' and '*sensitivity*'.

The quest for our brain is different than the eye witnesses and we learned that our 'eyes cannot see what mind does not know.' Thus the evidence became the corner stone in rationalizing the scientific knowledge.

The traditional *folklore* became the evidence based advancement of *knowledge* gained on the learning process over the period and in *sequences*.

There is propagation of knowledge in its learning curve started from the concept of *own life care* gradually

Key:

- * Assistant professor,
- ** Professor, department of Pathology, Calcutta National Medical College]
- *** Senior consultant [MO], Department of surgery College of Medicine & JNMH, Kalyani
- **** RMO, deptt. Of Biochemistry, COMJNMH

Knowledge and learning process from Pr-mechanized to mechanized and advanced mechanized phases-a special reference to the advancement and risk assessment in emergency life care system:

gained from the *surroundings* and continued as an organized training *system* to obtain a *defined target* to create a *risk poor state* in emergency life care system.

The process of learning runs as a simple example in the *time calculation* is by the movement of the shadow of an object. Then the mechanical clock, the digital binary applications and the molecular perfections came as the advancement of knowledge, but still going. There are still other systems yet to come. The pathway is still on the process from *myth* to *mechanization* to molecular *micro mechanics* to a *mixed nanotechnology*. These all advancements approaching the height day by day because of more and more need appeared for quality of life care improvement within a sound mental garden. The *knowledge hunt* is the *minds manual* since our cortical hunger become more than the physiological one. *The theme is to prevent or catch the physiology before it became pathological*. There are *two basic needs* as stands before us as the quality improvement within a quantity in our life care system.

The example of chances of an *event and incident* in course of time and learned partially over the periods,

- Nausea& vomiting after appendicectomy is 1:10
- Death after elective coronary artery surgery 1:100
- Risk of death after HOUSE fire 1:1000
- Risk of perforation during endoscopy & biopsy 1:10,000
- Risk of hep-c with blood transfusion 1:100,000
- Lifetime risk of cancer with chest X-ray is 1:1,000,000
- Risk of dying from lightning stile 1:6,500,000
- Chances of winning a lottery (choosing 6numbers from49) 1:10,068,347,520 (UK)

Where

- 1:10 very common
 - 1:100 common
 - 1:1000 uncommon
 - 1:10,000 rare
 - 1:100,000 very rare
- Grading the Risk

SEPSISI CONTROL
 NUTRITION BACK UP
 ANATOMY TO MAP
 PLAN FOR THE NEXT

Whether the risk is really needed to be assessed in relation to each act of intervention is an

Indefensible mistakes can be avoided. This is what we call the continuing education system. -The need of a better knowledge of man.

Myth or folklore started from the fear psychosis only from the apprehension of evil spirit. That entire attitude concentrated to the fact that is to save a losing life. The art of learning developed over the time with some pre monitoring parameters and in modern life care system there developed a number of common signs and symptoms by which we in this era can go through a systemic assessment and monitoring for caring life as a procedure common to all in relation to pre assessment, per regulatory and post evaluation. This is in the form of continuing and updating our knowledge and learning. The system so developed that tells us two basic relations for emergency or life care as

1. Temperature & Pain originating in the propagation of life
2. Unusual swelling on the body, but second one is interdependent on the first. So the only alarming note for our learning curve is *pain*. It is needless to point out that till today unless pain is there we remain reluctant to seek modern medical advice and that is also related to the grade of pain even in modern life care system. The only assessment behind the origin of pain can document the cause and relation (pathology) for it. Thus we hunt for every section to extend our lives in a developing *emergency care system*.

Necessity is the mother of invention so knowledge is need based, be it is physical or mental but mental hunger probably is more.

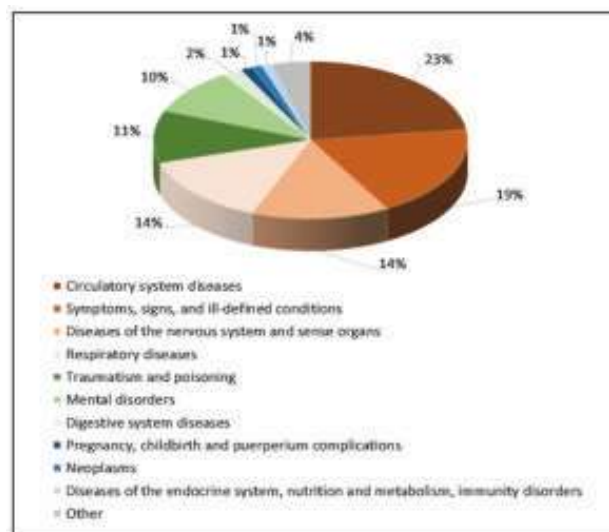
All the moments in our day to day life is dictated by the risks-assessment in terms of direction and magnitudes. Whatever we do we need to justify ourselves in the eye of a learned judge. It includes anything and everything from payment of premium to road crossing. Still we need to decide many things out of our personal experience from the surroundings.

There are arguably two indications of interventions in terms of surgery-

- improvement of symptoms (quality of life)
- Improvement of prognosis (quantity of life).

The likelihood of achieving a meaningful improvement in symptoms or prognosis (the benefit) must balance against the risks of death or an outcome those results in a reduced quality of life (the cost).

There should have risk assessment tools by which the team of care giver can assess the risk: benefit in terms



of a fair profit in business.

There are three prerequisites for a clinician to pass the real message to a patient. The clinician must:

- have the accurate information about the risk of an objective(materials) and subjective(man) outcome
- Understand the information delivered for the purpose
- Be able to convey the information in a way that is reasonably sound to be understood by the patient and relatives. The objective is failed when a patient is presented with a positive outcome only while negative fields are carefully avoided. The risk of an irreversible damage reduces the quality of life. This state of unacceptable situation leads him to decline to do surgery. There are potentially ambiguous terms like 'probably' 'common' or 'rare' should be carefully avoided if not explained well. It is always acceptable to either side to *talk in a real situation rather anticipating the good hope always*.

Advancement in procedural approach in relation to *time* when risk and benefit is assessed in terms of a *fare business* that is how much to gain out of mu investment. Removing a bullet from the spine invites major risk of damaging the vital structures around. We do need for assessment from our gathered knowledge and pre assessment is essential about our cost and benefit in relation to the life only and nothing else. We have learned about the ongoing procedures, interventions, review to go ahead just to keep life in force²....the life saving is a must where as limb setting is time bound.

The knowledge has restricted us through the system management as 'Triage' in emergency trauma care⁷. This technique tells us the knowledge of categorisation

in the emergency management and assessment for saving life. These are only a few as below.

Emergency care developed as an evidence for saving life in 'ancient world to modern times'

1. Started living in a cave
2. Save guard of head end
3. Physical assessment
4. Application of drugs for fever
5. Temperature lowering system
6. Different types of operations -god has given us organs not to cut it for the permanent solution. It appears that the method of removing water by tumblers rather stopping it by a stopcock.
7. Interventions under imaging
8. Evidence based procedures
9. Robotics
10. Nanotechnology
11. Different types of cytology
12. Histology
13. USG
14. Endoscopy
15. Laparoscopy
16. Capsule endoscopy
17. Carbon dating
18. Forensic study
19. Invasive and non-invasive imaging
20. LASER, Diathermy,

The practice of touch as a healing method derives from customs and techniques rooted in ancient history. Civilizations in the East and West found that natural healing and massage could heal injuries, relieve pain, and prevent and cure illnesses. What's more, it helped reduce stress and produce deep relaxation³.

Knowledge does not mean a new technology but in true sense of the term it can be defined as the safe technology for life care system.

A better knowledge of ourselves cannot be acquired merely by selecting positive facts in the mass of information concerning man, and by making a complete inventory of his activities-The need of a better knowledge in man⁴.

Evolution of knowledge is a change in the in its vector quantity that indicates its direction and magnitude in defining the learning curve. These characteristics of percolating knowledge have been developed continuously through the pre-modern –modern society also. Knowledge has crossed through different contours and phases in its evolution. Thus it has become evidence based and universalized in its character.

As we move into the new millennium it is becoming

increasingly clear that the biomedical sciences are entering the most exciting phase of their development. Paradoxically, medical practice is also passing through a phase of increasing uncertainty, in both industrial and developing countries. Industrial countries have not been able to solve the problem of the spiraling costs of health care resulting from technological development, public expectations, and—in particular—the rapidly increasing size of their elderly populations. The people of many developing countries are still living in dire poverty with dysfunctional health care systems and extremely limited access to basic medical care.

The use of speech, like that of hand, has greatly aided the development of brain. The cerebral area of hand, tongue, and the larynx extended over a large area of the brain surface⁴

After steady progress during the 18th century, the biological and medical sciences began to advance at a remarkable rate during the 19th century, which saw the genuine beginnings of modern scientific medicine. Charles Darwin changed the whole course of biological thinking, and Gregor Mendel laid the ground for the new science of genetics⁵

The second half of the 20th century has witnessed major progress in the diagnosis and management of cancer (reviewed by Souhami and others 2001). Again, this progress has followed from more sophisticated diagnostic technology combined with improvements in radiotherapy and the development of powerful anticancer drugs and devices including modalities.

Although this approach should be followed as a matter of urgency that developing countries build up their own research capacity is equally important. *Genomics and World Health 2002* (WHO 2002a) includes some encouraging accounts of how this capacity is being achieved in Brazil, China, and India. The establishment of the Asian-Pacific International Molecular Biology Network is a good example⁶.The art of management has changed and categorized to a common method and is practiced in a sequence like

Resuscitation in the primary phase of emergency care includes a steady and confident approach of a team

These are to assess,

Pulse

Respiration

Temperature

Urine output

Intravenous access of fluids, antibiotics,

Restitutions means an *unstable state* that may pass to the next stage

Restoration is a stable phase in the process of emergency care system

This time is the prime time for making *any major* and permanent intervention. This is the long drawn knowledge that is universalized over the periods for the management of a critically ill patient and this is followed all over the world- the dictum for managing a critically ill patient is, 'minimum you do maximum you yield'.

The need of a better knowledge of man is clearly defined by Alexis Carrel as,

1. The sciences of life have progressed more slowly than those of inert matter.
Our ignorance of ourselves
2. This ignorance is due to our ancestors' mode of existence, to the complexity of man and to the structure of our mind.
3. How mechanical, physical and chemical sciences have modified our environment.
4. The result of such changes
5. The change is harmful, having been made without due consideration of our nature.
6. Need of a more complete knowledge of ourselves⁴.

This application is percolating knowledge for a still better management is yet to come. We all are teachers and receiving things as a *learner* in the dark. But I believe in facts that teach us that *'there is not enough darkness in the world that can put off the light of a candle of knowledge'*.

A pilot retrospective study in pie diagram is the directional evidence for the ongoing process of knowledge in the event of gradual gear up in the risk-benefit ratio in process of life care system.⁸

The effective response to a critical event based on an all-hazards approach. the tool is structured according to nine key components, each with a list

of priority action to support hospital managers and emergency planners in achieving: (1) continuity of essential services; (2) well-coordinated implementation of hospital operations at every level; (3) clear and accurate internal and external communication; (4) swift adaptation to increased demands; (5) the effective use of scarce resources; and (6) a safe environment for health-care workers.¹⁰

The structured process in India is another example for doing augmentation in check list for emergency care system. 2011-MoH, Govt. Of India-launched national cyclone Risk Mitigation Project-1 Fire & Emergency Services and other emergency/first responders;¹¹

References:-

1. Surgery 23:12, Risk assessment, Henson E Arrowsmith & Iain Mackenzie, (surgeryjournal.co.uk), p 442-444.
2. Bailey & Love, p420, Disaster surgery, Short Practice of Surgery, 26th ed. Taylor & Francis Web site, <http://taylorandfrancis.com> and <https://en.wikipedia.org/wiki/Triage>
3. <https://www.naturalhealers.com/massage-therapy/history/>
4. Man the Unknown, Alexis Carrel, P15,63&99: Pelican Books, 1943
5. Chapter 5 Science and Technology for Disease Control: Past, Present, and Future David Weatherall, Brian Greenwood, Heng Leng Chee, and Prawase Wasi.
6. <https://www.ncbi.nlm.nih.gov/books/NBK11740/>
7. <https://en.wikipedia.org/wiki/Triage>
8. Emergency Department Overcrowding: A Retrospective Spatial Analysis and the Geocoding of Accesses. A Pilot Study in Rome; *ISPRS Int. J. Geo-Inf.* **2020**, *9*(10), 579; <https://doi.org/10.3390/ijgi9100579>
9. <http://www.who.net>>docs
10. Hospital emergency response checklist: <https://www.who.int>>docs
11. <https://darpg.gov.in>>files



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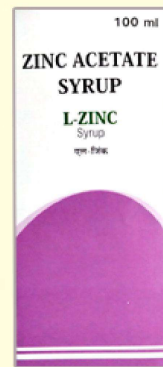
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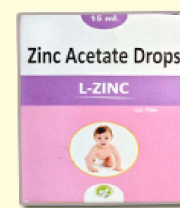
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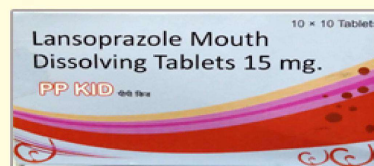
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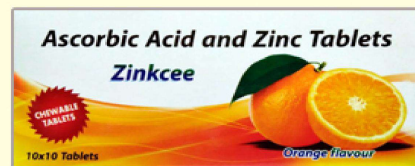
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