

The official news letter of The Association of Surgeons of India

Dr. Dilip S. Gode President

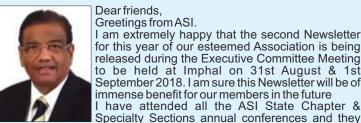
Dr. Arvind Kumar President Elect

Dr. J. W. Ebenesh Bensam **Honorary Secretary**

Dr. Sanjay Kumar Jain **Honorary Treasurer**

Dr. Abhay Narendra Dalvi

Dr. Narayana Rao T.



Dear friends, Greetings from ASI.

I am extremely happy that the second Newsletter for this year of our esteemed Association is being released during the Executive Committee Meeting to be held at Imphal on 31st August & 1st September 2018. I am sure this Newsletter will be of immense benefit for our members in the future I have attended all the ASI State Chapter &

performed extremely well in the scientific programmes.

Many of the State Chapters have conducted free Surgical Camps & Public awareness programme to help poor people.

ASI conducted Regional Refresher Courses in six different zones across the country which help Postgraduates for their examination and well appreciated by the Members.

It was a very satisfying experience to conduct a very fruitful executive committee meeting at Chennai in March 2018. In the month of May I was invited to State chapter conference of Kerala. I must congratulate the state chapter for increasing their membership strength so as to increase one member in their total no of executive committee member. This was followed by the meeting in Delhi with Dr Chintamani who has been entrusted with the job to formulate guidelines for common surgical procedures. I hope they would be ready by next EC meeting. Dr. Santhosh John Abraham, director surgical studies, organised training of trainers programme at Meril Academy, Vapi. It was a different experience for all the trainers & a very well thought activity to standardise the teaching in RRCs & other academic fora. during Indian Journal of surgery meeting in Delhi we discussed about how to enable our members to view the journal through our website. It was also discussed how the quality of journal could further be improved.

Yours truly Dr. Dilip Gode President ASI-2018

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Dear Esteemed Members of ASI, Greetings from the Head Quarters.

I am very happy to know the second Newsletter for this year of our esteemed Association is being published during the Executive Committee Meeting to be held at Imphal on 31st August & 1st September 2018. It is indeed a long needed publication and I am very much confident it will go a long way to inform our members regarding all the activities of our Association.



We have been regularly organising academic meetings and events which are always very well attended at City Branches, State Chapters and National Level. Our State Chapters and specialty sections in conjunction with our National ASI provide a forum for our members to exchange ideas, views and information.

The Regional Refresher Courses conducted across the Country were well attended and provided a platform for the exchange of Ideas. Training the trainers programme conducted at Vapi is a great initiative and will make the teaching process a standardized

This Newsletter will give ample opportunities to keep ourselves abreast about emerging advances in the field of our interest. It is really very heartening that our membership has grown in large numbers during the past few years.

Apart from organizing regular CME programmes, we are considering Continuous education, fellowship programmes and many more activities which will take our organization to greater heights.

I am sure this Newsletter will be of immense benefit for our members in the future.

Long Live ASI Your's always in ASI Service.

Yours truly Dr. J.W. Ebenesh Bensam **Honorary Secretary** The Association of Surgeons of India

Dear all, Our association was started with just 112 members in 1938 has grown to 18000+ now. Earlier the aim was to get together for the purpose of sharing each other's experiences and enhancing their surgical skills. This purpose has been more aggressively pursued and achieved in this year. The regional refresher courses focusing on surgery postgraduates and young surgeons are becoming more fine tuned, better attended and immensely beneficial.

There is another objective added to this which is stressed more is that of the association's social commitment.

The free surgery service camps are implemented with bigger force this year. They are more and more appreciated by the locals and the media. The IJS team has become more active and is doing a great job of educating our colleagues on publishing their scientific work

The preparations of ASICON 21018 at Chennai are at full swing.

Kudos to ...

- Kerala Chapter for introducing many single theme based meets for postgraduates this year.

- Karnatakata chapter for successfully conducting KSCASI-midcon for the first time in Mysuru.

Our heart goes to our brethren in Kerala who faced one of the worst floods in the history. Our ASI stood solidly with one voice and have been doing their best. Our members have shown good support and have rendered help in their own individual capacity too. Our ASI Kerala colleagues got themselves fully involved and have done yeoman service by coordinating various authorities / agencies and members.

We are not only fulfilling our objectives fully, we are adding to it and marching steadily to meet the expectations of our fraternity and society.

Thanks to our leaders and our members.

Dr. Sadashiv S. Soppimath Editor, "Scalpel"



Dear Friends

Greetings to all of you!

This message comes to you at a time when millions of our fellow countrymen and women are passing through harrowing time, worst affected being the state of Kerala. Thousands have lost their lives and millions have lost their livelihood as well as whatever they earned and collected in their life. Very dark future awaits many of them. As their fellow countrymen, it is

our bounden duty to do everything possible for them. While it is very heartening to see the support that has been forthcoming from all the state chapters as well as individuals, the real help will be to reach out to these individuals and offer them a personal helping hand. While I fully support donations by individuals and associations to official accounts like chief minister's relief fund and encourage people to contribute handsomely to it, I would recommend connecting with individuals and families and offer them moral and materialistic support on a long term basis and help them rebuild their life. To my mind this will be more effective use of our resources.

We have many things to do in the near future but I would leave them for our next newsletter and end this message by once again praying to god to give peace to those who lost their lives and to give courage to those who lost everything else and have hard task ahead to rebuild their lives. May god be merciful to all of us.

With Best Wishes

Prof. Dr. Arvind Kumar President Elect ASI-2018

Officer Bearers, ASI

Office Bearers

Dr. Dilip Gode,	President	9822737919	dilipgode@yahoo.com
Dr. Arvind Kumar,	President Elect	9810765405	arvindreena@gmail.com
Dr. Shiva K. Misra,	Imm. Past President	9415042116	shivaniknp@rediffmail.com
Dr. J W Ebenesh Bensam,	Hon. Secretary	9443135977	ebeneshrehan@yahoo.co.in
Dr. Sanjay Kumar Jain,	Hon. Treasurer	9424444195	jainskp@gmail.com
Dr. Abhay Narendra Dalvi,	Joint Secretary Administration	9821018751	abhaydalvi@hotmail.com
Dr. Narayana Rao T,	Joint Secretary Website	9849129709	drtnrao@yahoo.com

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The First RRC was organised in Guwahati Medical College. This brought out the issue as to how ASI could help our teaching fraternity to raise the standards of medical education in our country. This initiated me to form the working group to formulate the policy of surgical education in our country. This policy shall be submitted to the Govt of India. Subsequent RRCs at Patna, Vijayawada, Bangalore & Ahmedabad were great success. Most importantly post graduate students were very happy & satisfied. RRCs are financially supported by Torrent & we are grateful for their gesture for promoting surgical education in the country.

This year ASI has decided to work upon the social (service to non affording) service aspect of the association. Its convener, Dr. Bindey Kumar organised huge diagnostic camp at Sitamarhi in Bihar & Surgical operative camp at Dandeli in dense forest area of Karanatka. They have planned to do two more camps this year. I congratulate the Social service convener & committee for this activity.

As the President of ASI I was invited to Royal College of Surgeons meeting at Pattaya in Thailand & Colombo in Sri Lanka. We had fruitful discussion on surgical education & means to find ways to reach the surgical care to non accessible area of the countries & help each other to achieve this goal. I am happy to say that I was awarded Hon. fellowship of Royal college of Surgeons of Sri Lanka along with Dr Palanivelu & Dr Santhosh John Abraham.

I also had an opportunity to attend the state chapter conference of Tamil Nadu & Pondicherry chapter in Thekkady. I am grateful for their love & affection shown towards me during the entire event. Dr Geeta Laxmi Hon'ble Vice Chancellor of MGR health university was also present for the conference. We had a discussion on how we could improve our post graduate curriculum. In the coming week I shall be attending state chapter conference of Andhra Pradesh, Telangana & annual meetings of subsections like Trauma, colorectal. IASO. It has been great learning for me. I feel ASI is on right track, would be indulging in more academic & social activities. I look forward to much awaited academic extravaganza at ASICON 2018 at Chennai. All of us must work together to make it a great success.

Kerala states & people there are suffering due to heavy rains. We must help our brethren who are facing hardships. Some people have lost everything they had. Its time to extend the hand to help them in whatever ways we can. ASI had been quick to do something but its too little. Lets all come together to help them build their lives again. May God help us.

Yours truly

Dr. Dilip Gode

President ASI-2018

Long Live ASI

Kerala floods.....The disaster of the century

This is supposed to be one of the worst disaster since 1024 which has left more than 445 dead, a million people housed in temporary relief camps and fifteen reported still missing. As we all know most of these numbers are under reported. It is devastating to hear that a 19 year old boy took his life because he lost all his certificates, a 68 year old man commits suicide after seeing the state of his home in Kothad in Ernakulum district. We also have seen many horrific videos and images of the flood havoc. For the first time in history 35 out of 42 dams were open in the state. As usual the blame game continues than concentrating on immediate help. In our health care, there is no stress in implementing preventive policies, we see lot of lacunas in implementing preventive measures. We keep exploiting the rules & the nature and face such grave calamities.

This also has highlighted how the corrupt government policies and blind eye for many illegal activities have changed the ecosystem making us more vulnerable for such disasters. Some of such activities like allowing illegal stone quarrying, cutting down forests and grasslands, changing drainage patterns and sand mining on river beds have been blamed.

We also don't have a solid disaster plan in place and we react in an unorganized manner causing imbalance of utilisation of resources. We also fail to understand the prioritisation. As one of our senior member had put, first priority was saving / rescuing the ones in danger, second was housing them at safe place. Then follow the food, safe water, medications (both for immediate need and replenishing the regular requirement on daily basis due to preexisting diseases) and other supports. We could see the lack of co ordination in streamlining the help. There was enough confusion as to how the funds should be streamlined with dwindling trust in proper utilisation of government funds.

But as a great country, the citizens went out of the way to help the affected, burying all differences. We have shown what love and affection we have for fellow human beings. No one thought even for a moment on economic status or religious status while rendering help and support. Our military has consistently shown what it can do for saving lives and making them safe in such situation. The fishermen have been coined as supermen.

We salute our association and its members who were generous in rendering help in manpower, money and material. Our special salutes to our Kerala colleagues who not only faced this with bravery and maturity but also worked tirelessly in co coordinating with various agencies.

As it is limping back, now it has to face new challenges of rebuilding homes and infrastructure, poisonous bites, waterborne diseases and sanitation. Hope they happen with speed and precision.

- Editor

From President's Diary.....



Dr. Dilip Gode, President ASI with President of Royal college of Edinburgh, President of Royal college of Surgeons of Thailand & Past President of RCS Sri Lanka



Dr. Dilip Gode, President ASI with President of RCS Thailand



Dr. Dilip Gode, President ASI after receiving
Hon Fellowship of RCS Sri Lanka with
Dr. Shiva Kant Misra president SAARC & Dr. Palanivelu



Dr. Dilip Gode, President ASI with various Presidents of RCS Edinburgh, Glasgow & England along with Presidents of surgical societies of Asia



Dr. Dilip Gode, President ASI with President of RCS Sri Lanka

Animal Dung Ointments--!!!

The ancient Egyptians had a remarkably well-organized medical system, complete with doctors who specialized in healing specific ailments. Nevertheless, the cures they prescribed weren't always up to snuff. Lizard blood, dead mice, mud and moldy bread were all used as topical ointments and dressings, and women were sometimes dosed with horse saliva as a cure for an impaired libido.

Most disgusting of all, Egyptian physicians used human and animal excrement as a cure-all remedy for diseases and injuries. According to 1500 B.C.'s Ebers Papyrus, donkey, dog, gazelle and fly dung were all celebrated for their healing properties and

all celebrated for their healing properties and their ability to ward off bad spirits. While these repugnant remedies may have occasionally led to tetanus and other infections, they probably weren't entirely ineffective—research shows the microflora found in some types of animal dung contain antibiotic substances.

President Prof. Dilip Gode had attended Annual Conference of West Bengal State Chapter (SASICON 2018) between 16th –18thMarch 2018 at Sanjiban Hospital, Kolkata.







President Prof. Dilip Gode had attended Annual Conference of Tamil Nadu & Pondicherry State Chapter (TN&P ASICON 2018) between 10th – 12th August 2018 at Thekkady.







Independence Day Flag hoisting ceremony was done by National President ASI Prof. Dilip Gode on 15th August 2018 in the presence of Dr. Abhay Dalvi, Joint Secretary – Administration and Dr. K Vinayak Senthil, Organizing Secretary – ASICON 2018









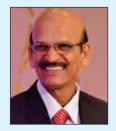
Chennai Trade Centre, Nandambakkam, Chennai.

26th - 30th December 2018

Hearty welcome and warm greetings from the Surgeons of Chennai and the surgeons of Tamilnadu state and Pondicherry state. Under the dynamic leadership of our beloved ASI National President Dr. Dilip S. Gode, Immediate Past President Dr. Shiva K. Misra, Dr. Arvind Kumar Vice President (President Elect 2018), Honorary Secretary Dr. JW Ebenesh Bensam, Honorary Treasurer Dr. Sanjay Kumar Jain, our head-quarters joint secretary Dr. Abhay Dalvi, website secretary Dr. Narayana Rao T, governing council members and the staff,we on behalf of the organizing committee cordially invite you to attend the 78th Annual conference of Association of Surgeons of India to be held from 26th to 30th December 2018.

We deem it as a great honour to host the prestigious Annual conference of our association.

Chennai is the largest city of Tamil Nadu known for its leadership in Medical Tourism especially in the field of Laparoscopic Surgery, Surgical Gastroenterology, Robotic surgery, Reconstructive Surgery, Cardio Thoracic surgery, Endocrine surgery, Vascular surgery, Transplant surgery and Oncology. Chennai is also the pioneer in Industry and Technology education.



Dr. A. Rathnaswami M.S., Mch., (Surgical Gastroenterology) Organising Chairman ASICON 2018



Dr. K. Vinayak Senthil M.Ch (CTVS), MRCS (Edin.) UK DNB (Gen. Surgery), FIAGES, FAIS, FMAS, FLS (SAGES) USA. Organising Secretary ASICON 2018



Prof. Dr. K. Vivekananda Subramania Nathan M.S., FAIS, FIMSA, FIAGES Organising Treasurer ASICON 2



Dr.G.Chandrasekar MS "FAIS.,FALS.,FICRS,FMAS., Organising joint Secretary ASICON 18

Unveiling the Pandora's box---

The magic wand I held in my hand And unleashed the mystery as I slowly scanned Every organ seemed to talk, Holding some sign towards me they walk!

The play boy bunny seemed to wink
The humble IVC was collapsing into the 'sink'.
The night seemed bright with a starry sky,
But all was not well with icterus in the eye!

That bright ball could be a venous ball, The target in my mind I could not miss at all! Was it a wheel within a wheel or the bull's eye...? And the water bags, signalled the parasite.

The tombs of bacteria within the gall bladder Were the cause of pain, which seemed to bother. Was it a SIN or a WES, I couldn't miss... ffailed to pick, it would lead to a mess.

Were the Kidneys in their original place? Or had taken a tour to the other ways The twinkle behind that little star Signalled the cause of pain so far.

Could it be ball or a bean? ...It was to be seen, To know the lesion I got very keen. The spokes of the wheel signalled the lesion was benign, But a calcification in the fat said all was not fine! Fascinating it was to see the colour...
On both sides there was a fire in the bladder!
A pocket seen attached to the wall...
The prostate also must take a call.

The aperistaltic tube that was blind Hiding often somewhere behind More fluid within, signalled a danger Obstruction by the 'lith' would cause it to rupture!

A ring of fire down in the pelvis Signalled a pregnancy in the wrong place. The whirlpool sign of the twisted pedicle The Dermoid was deceptive like the tip of the iceberg!

The womb failed its duty of nature When the tiny balls within changed its stature. The ovaries seemed kissing each other The idea of the chocolate didn't please either.

The Aorta seemed standing tall
Thank almighty!;Pepsi symbol was not to be seen at all!
Slowly and steadily I now mowed the lawn
The gut gave its signature and the final line was drawn!!

Dr. Naaz, Hospet, Karnataka

ASI SSS

ASISSS is marching ahead with current strength of 586 members. From April 2018, all members of SSS are depositing Rs 1000/- as Annual Contribution. We are happy to announce zero mortality since the beginning of scheme in 2014. We request all ASI Members to help this scheme grow by motivating colleagues to join. Our moto is to help fellow ASI Members family in that difficult phase of life when they need us the most. Be confident and join ASISSS. ASI cares for you!

RRC Reports

RRC - Guwahati- 30-06-2018 to 01-07-2018

The Regional Refresher Course of the Association of Surgeons of India was held at Gauhati Medical College & Hospital on 30th June & 1st Jul'18. National academic coordinators of the ASIDr.S J Abraham, Dr. ADalvy conducted the proceedings. Regional and local faculty attended the event organized by the Deptt. Of Surgery, Gauhati Medical college and Guwahati Branch of Assam State Chapter of the ASI. National President Dr. DilipGode, national secretary Dr. E Bensem graced the occasion as distinguished guest faculty.

All togather 109 Post graduate students from all over the north eastern states with some surgeons delegates attended the program along withnational and regional guest faculty during the 2days event (Table 1). The program conducted for post graduate students of the North East consisted with Clinical case presentation, PG lectures and academic video presentations.

Dr.Kishan Agarwala, from Agartala Govt Medical College has been adjusted the best in the competition of Clinical Case presentations.

Totally 124 students & 26 faculty members participated in the program

RRC - Patna- 06-07-2018 to 08-07-2018

Regional Refresher course (East Zone) 2018 was held on 6th-8th July 2018 at All India Institute of Medical Sciences, Patna. The team Dr. N. P. Narayan (Organizing Chairman), Dr. Bindey Kumar (Organizing Vice-Chairman), Dr. Prashant Kumar Singh (Organizing Secretary), Dr Manoj Kumar (Organizing Treasurer) and their team organised the same. First day a hands-on workshop was organized with the help of Johnson & Johnson. Forty students enrolled for this workshop. Sessions on knotting & suturing, Hands-on Lap training on endo-trainers and Hands-on stapling & bowel anastomosis were conducted. there was a lecture at the end on Energy devices ...Do's and dont's by Dr. Atul Verma.

Case presentations by the selected post graduate students, Some lectures by experts in the field and of video presentations of some common surgeries were held on second and third day. The event was inaugurated by Prof. P P Gupta, Dean, AIIMS Patna. Dr. Santhosh J Abraham & Dr. Arvind Kumar moderated all clinical case presentation sessions.

A special lecture on 'Radiology for Surgeons' was taken by invited guest faculty Dr Subhash Kumar. The students I Dr Ronmita Pal, IPGMER, Kolkata (First prize), Dr Anshu Kumar, RG Kar MC, Kolkata (Second prize), and Dr Nishi Kumari, NMCH, Patna (Third prize) received awards.

The clinical CME cum hands-on workshop was actively participated by members and office bearers of The Association of Surgeons of India (Bihar Chapter). The President, Dr Jaleshwer Pd. Singh, Honorary Secretary, Dr. Ashok Kumar Sinha, Governing body members, Dr. Bindey Kumar, Dr. Alok Abhijit and eminent surgeons of the city were always available for the support

Dr Santhosh John Abraham, Dr. Arvind Kumar, Dr Shiva K Mishra, Dr Chintamani, and many other faculty members imprted the knowledge to many postgraduates of this region.



RRC - Vijaywada- 20-07-2018 to 22-07-2018

RRC at Vijayawada organised by Dr Ramana Murthy on behalf of ASI AP Chapter from 20th to 22nd July 2018. More than 400 postgraduates from AP, Telangana, Odisha and Chhattisgarh participated. It was graced by presence of President Dr Dilip Gode, Dr Santosh John Abraham, president and two vice presidents of Royal college of Surgeons of Edinburgh along with 30 elite faculty.







RRC - Bangalore- 27-07-2018 to 29-07-2018

Regional Refresher Course was held at Bangalore Medical College, Bangalore between 27th – 29th July 2018.

Total No. of Registrations - 421 FAIS Credentialing course -62 Hands on workshop - 90

Faculty and delegates were invited from the south zone and everyone appreciated the content and the way the course was conducted with due importance to time. Dr. Santhosh John Abraham was pivotal in the smooth conduction of the event along with our Organizing chairman Dr. Seshagiri Rao and the organizing team, Dr. Mallikarjuna MN, Secretary and Dr. Sunil Kumar, Treasurer.







RRC - Ahmedabad- 17-08-2018 to 19-08-2018

West zone RRC held at B J Medical college Ahmedabad between 17to 19 August 2018 Skill course on 17 was attended by 103 pg students with four stations and 15 faculties FAIS course was attended by 40 participant and 20 lectures by faculties

On 18 and 19 RRC was held at BJMC auditorium, attended by around 350 pgs and 70 consultants Our president Dr. Gode sir and Dr Abhay Dalvi and Dr Sanjay Jain graced the occasion among other national faculties

President praised organisers efforts and was happy that program was organised at medical college.

16 cases and 10 lectures were well attended with live discussion from around 80 examiners Programme was moderated by Dr. Abhay Dalvi, Dr. Gunvant Rathod and Dr Pankaj modi

Chairman of program was Dr Apurv Shah and secretary was Dr Maulik Mehta who tirelessly worked for success of RRC

All candidates were good and performed well

Following is the list of winners

1st-Dr Priyanka Saha , JJ hospital, Mumbai 2nd-Dr. Abhijna soori , KEM med college, Mumbai

2nd-Dr. Nikita Kulkarni, NKPSIMS, Nagpur

3rd- Dr. Rytham Khanderia, MP Shah medical college Jamnagar







Be an expert in your field

In 1972, Jim Cathcart was working at the Little Rock, Arkansas Housing Authority, making \$525 a month, with a new wife and baby

at home, no college degree, no past successes, and not much hope for the foreseeable future.

One morning, he was sitting in his office listening to the radio, to a program called "Our Changing World" by Earl Nightingale, who was known as "the Dean of Personal Motivation." That day, Nightingale, in his booming voice, said something that would change Jim's life forever: "If you will spend an extra hour each day in study of your chosen field, you will be a national expert in that field in five years or less." five years or less.

Jim was stunned, but the more he thought about it the more it made sense. Although he had never given a speech, he had always wanted to help people grow in areas of personal development and motivation. He began his quest to put Nightingale's theory to the test by reading books and listening to tapes whenever he could. He also started exercising, became better organized, and joined a self-improvement study group. He persisted through weeks of temptations to quit, just by doing a little more each day to further his goal. Within six months he had learned more than he had in his few years of college, and he began to believe he could turn his goal of becoming a motivational speaker into reality. All the hard work, the discipline, and study paid off. Jim now has delivered more than 2,500 speeches worldwide and has won every major award in the speaking industry

Free Medical Check-up camp for Army Family Members organized by Dr. U S Dhaliwal, Amritsar on 21st March 2018.



A free health check-up camp for Senior Citizens was organized by Assam State Chapter on 22ndApril 2018.



A free health check-up camp was organized by Assam State Chapter on 7th April 2018 at Majuli, Assam.



Cancer awareness programme was organized by Delhi State Chapter on 19th May 2018 at Dr. R M L Hospital, New Delhi.



Karl Langer's Ice Pick Karl



Karl Langer was a 19th-century anatomy professor from Vienna who liked stabbing cadavers with ice picks. But he wasn't a pervert (as far as we know, anyway). He was doing some valuable research that just involved poking holes in a bunch of dead bodies.

As an anatomy professor, Langer did a lot of work with fresh stiffs. During his experiments, he noticed that whenever he cut a corpse, the incision looked a little weird. Instead of being a circle, the wound was more of an oval even though his ice pick had a rounded point.

The issue had to do with collagen fibers, the structure that makes our skin elastic. Thanks to collagen, certain parts of the body are stretchier than others. Other parts are really tight. So when Langer stabbed these particular spots, the tension pulled the skin in opposite directions, yanking the wound wide open. This was bad news for patients recovering from surgery. If doctors cut these superstressed areas, the wounds had to heal while the skin tore itself apart.

Determined to find the best spots for a surgeon to slice, Langer rounded up a lot of bodies. Armed with his trusty ice pick, he turned the cadavers into Swiss cheese. After his experiments were through, he developed an anatomical roadmap, showing where doctors should and shouldn't cut. These epidermal landmarks are known as "Langer's lines," and they're still proving useful today.

While modern surgeons refrain from using Langer's lines for certain spots, like the forehead, the diagrams are valuable when it comes to cosmetic operations like breast surgeries. And even though many doctors prefer cutting along natural wrinkle



Obesity awareness & Health Wellness camp was organized by Delhi State Chapter.



Maharashtra State Chapter of ASI in association with Association of Surgeons of Amravati arranged a diagnostic camp at five villages of Amravati District on 12th July 2018.



Bihar state chapter organized a free health check up camp Nanhkar on 21st April 2018. It was presided by National President ASI Prof. Dilip S Gode.



Report of Social surgical services By Association Of Surgeons Of India

In the executive meeting held at Jaipur during ASICON 2017 it was resolved to hold at least four meetings at different places specially at remote locations to address the surgical need of these underprivileged section of those areas and also to show the solidarity with our local surgeons colleagues. It was also decided to support financially to local units and office bearer attending it on the same pattern of regional refresher courses.

The chairman assigned (to conduct these services for this purpose) was Dr Bindey Kumar. The places selected were:

- 1.Remote place in Bihar
- 2. Forest area in Karnataka
- 3. The mountainous zone of Uttarakhand
- 4. The tribal area of Chhatishgarh
- 1. Report of first social surgical service camp at Sitamarhi

Place- Indo-Nepal Boarder,in a village school, 25 kilometer from Sitamarhi, Boarder district of Bihar-Nepal Name of village-Mahkar Date-21st and 22nd April 2018

Organised by- Sitamarhi City Branch of ASI
ASI Bihar Chapter
Department Of Surgical Specialities,
AIIMS Patna

Organising secretary-Dr Sitaramsingh The Participants from ASI were;

Dr DilipGode,President ASI Dr Nikhil Singh,EC from UP Dr Bindey Kumar,EC & Chairman Social Surgical Services



- About eight hundred patients were screened and were operated at Sitamarhi and AIIMS Patna
- Before actual camp ,a team of office bearer visited the place and did the basic work at that place on 31st March 2018..
- All patients operated were healthy at follow-up visits.
- Local city chapter Sitamarhi, ASI Bihar and local Mukhiya did the commendable job.



The Surgeon Who Gave Old Men Monkey Balls

Serge Abrahamovitch Voronoff was quite the crazy character. A Russian surgeon who trained with a Nobel Prize—winning doctor, he studied the effects of castration on eunuchs while working for the king of Egypt until 1910. Obsessed with testicles, Voron off believed the glands played a key part in the aging process. When he returned to Paris, he began offering "monkey gland operations" to aging gentlemen who wanted to regain their mental prowess and sexual potency.

The first step of a monkey gland operation involves getting your hands on monkey balls. Voronoff often used baboons and chimpanzees (which are technically apes), and the process was quite intense. The primates were anesthetized and placed inside a special box that kept the animals restrained while the doctors snipped away. You don't want an angry male chimp to wake up while you're trying to steal the family jewels.

Next, Voronoff sliced the testes into thin layers and grafted them onto the private parts of the gentleman lying on the operating table. As bizarre as it sounds, the operations were wildly popular, and by the time he retired in the 1930s, thousands of men had signed up for the procedure.

The Russian earned quite a bit of cash. He moved into one of the swankiest hotels in Paris and even set up a facility specifically for breeding future "donors." But as time went on, scientists realized that Voronoff was a major quack. Monkey gland operations were useless and didn't actually do anything. In fact, some theorize the surgeries helped transmit AIDS from monkeys to humans though others dispute that claim. Either way,

2. Report of second social surgical service camp at Dandeli Forest in North Karnataka.

Place- Dandeli Forest in North Karnataka.70 Kilometer from Hubballi

Date-4th & 5Th August 2018

Organised by- Dandeli City Branch of IMA

ASI Hubballi-Dharwar Branch ASI Karnataka State Chapter

Convener - Dr. Sadashivaya Soppinath

Local Co-ordinators - Dr. Mohan Patil Dr. S L Karki

The Participant faculty were :

Dr. DilipGode,President ASI

Dr. Nikhil Singh,EC from UP

Dr. Bindey Kumar, EC & Convener Social Surgical Services

Dr. Dayanand Nooli, Chairman, KSCASI Dr. Narayan Hebsur, Secretary, KSCASI

Dr. Gurushantappa Y, Dr. Ishwar Hosmani, Dr. Ramesh Hosmani,

Dr. Byakodi K.G. and Dr. Abhijit Hiregoudar.

- Fifteen patients were operated. The type of operations were:
 Cholecystectomies, Thyroidectomies, Parotidectomy, paediatric Inguinal Herniotomy, Breast lump, Anorectal and scrotum surgeries.
- Dr.Prakash Nadgouda, Dr.Shobha Mudareddy and Dr.Asif did a great job of managing anaesthesia.
- Before the camp, convener Dr. Sadashivaya Soppimath Dr. Mohan Patil and Dr. S. L Karki did the basic work.
- All patients operated were healthy at follow-up visits.
- Local IMA branch and Dr Mohan Patil along with his dentist wife who have completed 25 year at Dandeli in surgical care of tribal population, and Dr. S. L. Karki did the commendable job.





Amputation before the advent of anesthesia

"In case of amputation, it was the custom to bring the patient into the operating room and place him upon the table. [The surgeon] would stand with his hands behind his back and would say to the patient, "Will you have your leg off, or will you not have it off?" If the patient lost courage and said, "No," he had decided not to have the leg amputated, he was at once carried back to his bed in the ward. If, however, he said, "Yes," he was immediately taken firmly in hand by a number of strong assistants and the operation went on regardless of whatever he might say thereafter. If his courage failed him after this crucial moment, it was too late and no attention was paid to his cries of protest. It was found to be the only practicable method by which an operation could be performed under the gruesome conditions which prevailed before the advent of anesthesia."

"When you see that trading is done, not by consent, but by compulsion—when you see that in order to produce, you need to obtain permission from men who produce nothing—when you see that money is flowing to those who deal, not in goods, but in favors—when you see that men get richer by graft and by pull than by work, and your laws don't protect you against them, but protect them against you—when you see corruption being rewarded and honesty becoming a self-sacrifice—you may know that your society is doomed."Ayn Rand

ASI Professional Indemnity

Dear ASI Members,

Greetings from Secure Now!

The Association of Surgeons of India started carefully designed Professional Indemnity Campaign in October 2017 and enrolled 3000 plus members all across India including Medical Establishments also and got overwhelming response. Not only the Insurance that we focused on but understood the legal Assistance which is of utmost importance when legal notices are received to the doctors and hence we, Secure Now Insurance Broker are currently fighting 3 medico legal cases imposed on our doctor members and 120 plus overall medico legal cases.

Testimonials of our Doctor members:

1- Dr. Arvind - I Admire n thankful to secure now for prompt n fruitful action in my first litigation for false negligence charge on unfortunate death of one of my patient. Though I have adopted this policy few months ago it's right n prompt action is most appropriate. Thank you Secure Now.

It is my strong recommendation to my doctors fellow to adopt this policy for indemnity. Thank you

- 2- Dr.Umesh Excellent service. Really appreciated the way my insurance proposal was handled promptly and efficiently
- 3- Dr.Darshan Pal This discounted insurance is really money saver and protective and hassle free. The informative system and paper work is very quick. Overall it's a win win scenerio.
- 4- Dr. Nishi I appreciate the work culture of secure now who appointed Mr Anoop Kaushal as lawyer to handle the case. Mr Anoop Kaushal has incorporated important points into his reply to the court. I thank Mr Yogesh Khemani in facilitating the calls and meetings with Mr Anoop Kaushal.

"Our Vision is to register all the ASI members under this special campaign"

Thanks & Regards, Arpit Agrawal Assistant Manager - Sales

Surgeon is only one influence on outcome

EDITOR—Carter's editorial on the surgeon as risk factor is an interesting assessment of the various determinants of surgical outcome. The surgeon is not, however, an isolated factor but one of many interrelated factors determining surgical outcome. Good surgical results are the result of interdependent multiple factors, including anaesthetic, intensive care, medical, nursing, and paramedical support, and a culture in search of excellence.

The most important progress in the surgical management of patients during the past 100 years has resulted from non-operative components of surgical care: anaesthesia, antisepsis, and asepsis. However, just as all credit for success should not be attributed to the surgeon, neither should all the failure.

Surgeons and patients like to think that the surgeon is the most important ingredient in the surgical outcomes cake. That surgeons account for many referrals to the National Clinical Assessment Authority in England and the Health and Disability Commissioner in New Zealand is therefore perhaps not surprising. Focusing on the individual surgeon, however, is often a short sighted and simplistic assessment of the situation.

Technical skill, although very important, cannot overcome poor case selection or inappropriate indications for surgery. The structure of the clinical systems put in place in a clinical team and the culture of the unit can help to ensure that clinical decisions are correct.

If you take a surgeon with excellent clinical results and put him or her where the results are poor the change of surgeon alone is unlikely to produce a significant change in results. To isolate the surgeon as the most important factor is too simplistic and fails to recognise the complexity of surgical outcome, making the same mistake that league tables do.

Frank A Frizelle, BMJ. 2003 Sep 6; 327(7414): 564.

Swami Vivekananda says,

"Take up one idea. Make that one idea your life - think of it, dream of it, live on idea. Let the brain, muscles, nerves, every part of your body, be full of that idea, and just leave every other idea alone. This is the way to success."

Dear Esteemed Members,

Greetings from ASI Headquarters.

The Life Membership Certificate of our esteemed Association has been redesigned with the Photograph, Membership Number and Date of Joining.

Hence forth all new members will receive a new certificate.

If any existing member is desirous of getting a new certificate, they can obtain the same by remitting Rs. 100/- by NEFT / IMPS to the bank details provided below. please share the details of payment with ASI ID & your recent photograph with head office at headoffice@asiindia.org

Enclosed herewith is the sample of certificate.

Yours always in ASI Service

Dr. J W Ebenesh Bensam Honorary Secretary ASI

Name: LIFE MEMBERSHIP FUND ACCOUNT

Bank: Bank of Baroda Branch: Triplicane

SB a/c No: 0678 01 00 00 1648

IFS Code: BARB0TIRUVA (5th character is numeric zero)



The Meaning of Professionalism

A profession is a collegial discipline that regulates itself by means of mandatory, systematic training. It has a base in a body of technical and specialized knowledge that it both teaches and advances; it sets and enforces its own standards; and it has a service rather than a profit orientation, enshrined in a code of ethics.[1-3] To put it more succinctly, a profession has cognitive, collegial, and moral attributes. These qualities are well expressed in the familiar sentence from the Hippocratic oath, "I will practice my art with purity and holiness and for the benefit of the sick."

The escalating commercialization and secularization of medicine have evoked in many physicians a passionate desire to reconnect with the core values, practices, and behaviors that they see as exemplifying the very best of what medicine is about. This tension between commercialism, on one hand, and humanism and altruism, on the other, is a central part of the professionalism challenge we face today.[4] As the journalist Loretta McLaughlin once wrote, "The rush to transform patients into units on an assembly line demeans medicine as a caring as well as curative field, demeans the respect due every patient and ultimately demeans illness itself as a significant human condition."[5]

Historically, the legitimacy of medical authority is based on three distinct claims[6,7]: first, that the knowledge and competence of the professional have been validated by a community of peers; second, that this knowledge has a scientific basis; and third, that the professional's judgment and advice are oriented toward a set of values. These aspects of legitimacy correspond to the collegial, cognitive, and moral attributes that define a profession.

Competence and expertise are certainly the basis of patient care, but other characteristics of a profession are equally important. Being a professional implies a commitment to excellence and integrity in all undertakings. It places the responsibility to serve (care for) others above self-interest and reward. Accordingly, we, as practicing medical professionals, must act as role models by exemplifying this commitment and responsibility, so that medical students and residents are exposed to and learn the kinds of behaviors that constitute professionalism.

The medical profession is not infrequently referred to as a vocation. For most people, this word merely refers to what one does for a living; indeed, its common definition implies income-generating activity. Literally, however, the word vocation means "calling," and the application of this definition to the medical profession yields a more profound meaning. According to Webster's Third New International Dictionary,[8] a profession may be defined as

a calling requiring specialized knowledge and often long academic preparation, including instruction in skills and methods as well as in the scientific, historical, or scholarly principles underlying such skills and methods, maintaining by force of organization or concerted opinion high standards of achievement and conduct, and committing its members to continued study and to a kind of work which has for its prime purpose the rendering of a public service[.]

Most of us went to medical school because we wanted to help and care for people who are ill. This genuine desire to care is unambiguously apparent in the vast majority of personal statements that medical students prepare as part of their application process. To quote William Osler, "'You are in this profession as a calling, not as a business; as a calling which extracts from you at every turn self-sacrifice, devotion, love and tenderness to your fellow man. We must work in the missionary spirit with a breath of charity that raises you far above the petty jealousies of life."[9] To keep medicine a calling, we must explicitly incorporate into the meaning of professionalism those nontechnical practices, habits, and attributes that exemplify the compassionate, caring, and competent physician. We must remind ourselves that a true professional places service to the patient above self-interest and above reward.

Professionalism is the basis of our contract with society. To maintain our professionalism, and thus to preserve the contract with society, it is essential to reestablish the doctor-patient relationship as the foundation of patient care.

-Wiley W. Souba, MD, ScD, FACS; ACS Surgery: Principles & Practice

Judgement is a great asset; it makes the diagnostician and surgeon both supermen. Charles H. Mayo (1865–1939)

Upcoming Events

State Chapter Conferences

- 24th - 26th August 2018 APASICON 2018 ASACON 2018 - 26th - 28th October 2018 Delhi Chapter - 23rd – 25th November 2018 Gujarat Chapter - 15th - 16th December 2018 JAKASICON 2018 - 19th - 21st October 2018 JASICON 2018 - 25th - 27th October 2018 Manipur Chapter - 12th - 13th October 2018 Rajasthan Chapter - 20th - 21st October 2018 Telangana Chapter - 15th - 16th September 2018

National Conferences

TRAUMASICON 2018 - 24th – 26th Aug 18 IASGCON 2018 - 04th – 07th Oct 2018 ASRICON 2018 - 27th – 28th Oct 2018

Specialty Section Conferences

 IAESCON 2018
 - 28th - 29th September 2018

 AMASICON 2018
 - 15th - 18th November 2018

 IAPSCON 2018
 - 25th - 28th October 2018

 ASRICON 2018
 - 27th - 28th October 2018

 IASGCON 2018
 - 04th - 07th October 2018

 IASONATCON 2018
 - 21st - 23rd September 2018

International Conferences

IFSO 2018 - 26th – 29th September 2018 Association of American - 21st – 25th October 2018 College of Surgeons

The fear of making mistake

The German philosopher F. Nietzsche once said: "it is no use living arguing about everything; it is part of human nature to make a mistake now and again."

Yet we all know people who absolutely insist that they are right even down to the smallest details. We ourselves are often included in this category: we don't allow ourselves to make mistakes. All that we achieve with such an attitude is the fear of moving forward - because certain steps call for new decisions whose results are unknown to us.

The fear of making a mistake is the door that locks us up in the castle of mediocrity: if we manage to overcome this fear, we are taking an important step towards our freedom.

The biggest mistake lies in not trying, not living, not pushing our boundaries. As for the mistakes we make in the process - they are not mistakes - they are part of our education - Someone called it the 'school money'. Don't regret the mistakes, - they were all part of our learning curve, and there's no shame in learning

....By Paulo Coelho

Surgeons aren't known to be warm and cuddly. They're arrogant, impatient, mean as often as not. You would think they don't have friends. Who could stand them? But surgeons are like a bad cold, nasty but persistent. Surgeons...nasty, aggressive, unstoppable. Just the kind of people you want on your side when you're really screwed. Surgeons aren't known to be warm and cuddly. They're arrogant, impatient, mean as often as not. You would think they don't have friends. Who could stand them? But surgeons are like a bad cold, nasty but persistent. Surgeons...nasty, aggressive, unstoppable. Just the kind of people you want on your side when you're really screwed.

...Meredith Grey

In a century where the media publish endless stupidities, the cultured man is defined not by what he knows but by what he ignores." —Dávila

Surgery, like war, is hard . . . but it is better than war. It saves lives and binds men and women of good will together indeepest friendship.---J. Engelbert Dunphy (1908–1981)

The quality of care is in reverse proportion to the volume of paperwork forced by the system on its surgeons.

---Moshe Schein

My work essentially has been that of plumber of the alimentary canal. I have worked on both ends, but largely in between.---Owen H. Wangensteen (1898–1981)

He who wishes to be a surgeon should go to war....Hippocrates (460–377 bc)