



Care With Compassion: That's Palliation

IMA President's Message



Dr. Dattaram Dessai

Dear Colleagues & Friends,

We are releasing 2nd issue of Doc-Talk with great enthusiasm.

All branches of IMA Goa have started their 2025 activities. IMA Goa state collaborated with Nagesh Maharudra Sansthan, IMA Ponda, IMA Ponda Charitable Trust and Dr. V. B. Dhaimodkar Academy for a palliative care seminar at Nageshi-Bandora. One state CME took place at South Goa District Hospital Margao on 22nd February. IMA Margao & Aster CMI Hospital Bengaluru were our co-hosts for the event.

I would like to remind our members to get their clinical establishments registered permanently as the last date for application is 15th March. Also sincere request to all members to work towards spreading awareness about this year's IMA theme "Care with compassion, That's palliation".

Goa is getting hotter year after year as a result of climate change. Please take care of yourselves and keep fit.

Bye!

From the Editor's Desk



Dr. Vrushali Prabhudesai

Hi,

Please find the second issue of Doc-Talk. The response to our first issue was very encouraging. And heartening. Thank you very much.

This edition has a couple of articles, (i) on quackery by Dr. Shailesh Kamat, Chairman, Legal Cell, IMA Goa State, & (ii) a case report by Dr. Suraj C. Prabhudessai, Founder Director, Sunshine Hospital, Margao. Appreciative of your efforts, Drs.

Let Doc-Talk be about CMEs, community service events and more. Awaiting special moments spent by you with your special ones ... be it excursions/expeditions, achievements in curricular/extracurricular activities, hobbies/special interests, quotes/anecdotes/jokes/tributes, any other to lighten our mood/share in your joy. Service above self is good, servicing our own selves is better.



Care With Compassion: That's Palliation



Dr Shailesh Kamat

Chairman, Legal Cell, IMA, Goa State

Menace Of Quackery: Way Forward

Quackery can be defined as practicing something dishonestly, claiming skill and knowledge of some field which one does not possess.

The Origin of the word can be traced to the Dutch word "Kwackzalver" meaning an unlicensed medical practitioner who sold dubious medicines over the counter without a doctor's recommendation or supervision.

Consequences of quackery range from ineffective treatment to mortality. The Biggest setback is the erosion of public trust in health professionals. These illegal

services are available at a cheaper price and many a time it is poverty that leads a victim to these charlatans. Ineffective treatment, delayed diagnosis and consequential worsening of prognosis affect the outcome and impoverish the poor further leading to a vicious cycle.

In spite of the excellent literacy status, the health indicators which we can boast off, fantastic infrastructure in nooks and corners and easy accessibility to the free health services, it is really shameful that quackery is still existing in our tiny state of Goa.

Qualified v/s Unqualified Quacks

When we talk about quackery, what comes to our mind is someone who has not received any training in medicine or might have worked as an assistant to some doctor or in a pharmacy, obtained some working knowledge of routinely used medicines, and then practices pretending to be a doctor. This entity is what we describe as "an unqualified quack". An unqualified quack may not be smart enough to know the consequences of his action. Roadside vendors selling so-called herbal medicines are included in this category.

Another entity is equally dangerous to the health of the community and that is described as "qualified quackery". The person practicing this type of quackery is qualified in some alternative branch of medicine like Homeopathy or Ayurveda but prescribes allopathic drugs or vice-versa. This type of practice has to be dealt with more sternly as these people are smart enough to know or anticipate the damage that can be caused due to their practice. Bharatiya Nyay Sanhita looks at crime done with the knowledge that the action may be harmful (*mens rea*) as a more serious form of crime and mandates severe punishment. The argument put forth by such practitioners is that they are qualified doctors and shall not be addressed as quacks. But the Supreme court in *Suman Verma v/s Ashwin Patel* (case No 8856/1994 dated 10-05-1996) has laid down that

- "A person who does not have knowledge of particular system of medicine but practices in that system is a quack and a mere pretender to medical knowledge and skill, or to put it differently, charlatan"

The situation is worsened due to pronouncement by certain states allowing AYUSH practitioners to prescribe allopathic medicines after a bridge course. This is done using a provision in the Drug and Cosmetics Act, 1940 which allows a state to provide for such measures in contingency situations.



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It is clear from the above SC judgment that the prescription of ayurvedic drugs by an allopath also amounts to quackery. The Drugs and Cosmetics Act, 1940 has special provisions which define Ayurvedic drugs.

Crosspathy v/s Mixopathy

The Concept of crosspathy is very clear. It refers to a doctor of one system of medicine prescribing medicines from another system of medicine.

But what exactly is Mixopathy? Is it the same as crosspathy? Is it prescribing medicines from 2 systems of medicine at the same time? Or is it patient consuming medicines from 2 different systems of medicines procured after consulting 2 different practitioners of respective systems of medicine? To find an answer to the above questions, I tried Google Scholar search and returned equally confused. The word "Mixopathy" is found in many communications of IMA HQ. Here also it is used many times to mean crosspathy. A unique situation where it was used was when The Central Council of The Indian system of medicines issued a notification allowing Ayurveda consultants to practice surgery after stipulated training. The final word about said programme is not said and I shall not discuss it further.

Another occasion where IMA raised the issue of Mixopathy was in matters of training of undergraduate doctors. On a thorough search I could find the Government reference for the same in National Education Policy, 2020, which refers to the concept of "Integrative Medicine" and I quote

"Given that people exercise pluralistic choices in healthcare, our healthcare education system must be integrative meaning thereby that all students of allopathic medical education must have a basic understanding of Ayurveda, Yoga and Naturopathy, Unani, Siddha, and Homeopathy (AYUSH), and vice versa. There shall also be a much greater emphasis on preventive healthcare and community medicine in all forms of healthcare education."

I leave it up to the reader's wisdom to decide whether the move is right or wrong.

Over the counter medicines

Pharmacists providing medicines directly to patients without a prescription from a Registered Medical Practitioner (RMP) also amounts to quackery. The Exception to this is medicines enlisted under Schedule K of the Drugs and Cosmetics Act Rules, 1945. Drugs mentioned under this schedule do not need a license and can be dispensed over the counter.

Quackery as a crime

Quackery is an offense which can be dealt with under provisions of various acts as follows:

NMC Act, 2019 : Section 34 (2) provides for punishment with imprisonment for a term which may extend to one year, or with a fine which may extend to five lakh rupees or with both, for any person practicing modern medicine without registering on Indian medical register/ state register.

Indian Pharmacy Act, 1948 : The Act stipulates that no person other than a registered pharmacist shall compound, prepare, mix, or dispense any medicine on the prescription of a medical practitioner. This sub-section shall not apply to the dispensing by a medical practitioner of medicine for his own patients, or with the general or special sanction of the



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State Government, for the patients of another medical practitioner. Violation of this section is punishable with imprisonment for a term which may extend to six months, or with a fine not exceeding one thousand rupees or with both.

Goa Medical Council Act, 1991 and Rules 1995: Section 26 of the Act makes it clear that this act has to be read with NMC Act, 2019. NMC Act 2019 delegates powers of regulating practice of modern medicine to State Medical Councils. Thus Goa Medical Council can conduct an enquiry under Goa Medical Council Rules, 1995, and fix punishment for the culprits of quackery.

Bharatiya Nyay Sanhita, 2023 : Bharatiya Nyay Sanhita (BNS,2023) has replaced (Indian Penal Code) IPC. Various provisions of BNS,2023 which can tackle quackery are as follows, respective sections of erstwhile IPC are mentioned in brackets.

- Section 319 (1) (IPC 416) : Cheating by impersonation
- Section 100 (IPC 299) : Culpable homicide, applicable if death after treatment
- Section 125 (IPC 336) : Act endangering life or personal safety of others
- Section 114 (IPC 319) : Act causing bodily pain, disease or infirmity
- Section 116 (IPC 320) : Grievous Hurt
- Section 271 (IPC 269) : Negligent act likely to spread infection
- Section 336 (1) (IPC 463) : Forgery of documents
- Section 227 (IPC 191) : Offences of false evidence
- Section 61(1) (IPC 120A) : Offences of criminal conspiracy.

Practical Ground Reality:

Everyone concerned wants quackery to be abolished but

- The victim does not know whom to approach
- Genuine doctors are the first contact for victims of quackery and as such are the ones who are aware of quacks but usual approach when it comes to reporting is "Why me?"
- Goa Medical Council has powers of civil court but lacks the manpower required for raid/inspection and execution. Also, time has proved that a Civil trial is not a very good deterrent.
- Police departments cannot differentiate between various systems of medicine and find it difficult to differentiate between legal and illegal practitioners especially when it comes to cross-pathy (qualified quackery).
- Local Health officers are responsible for community health and duty-bound to take action on suspected quacks but are burdened with other work and not willing to invoke legal issues involved.

WAY AHEAD: team effort is the only way out if we are serious about weeding out quacks from our tiny state. The proposed SOP can be as follows

- The victim approaches the Police or DHS or Goa Medical Council
- The health officer or Police or Anti-Quackery officer of Goa Medical Council inspects/verifies whether the concerned person is registered under The Clinical Establishment Act. Police shall provide logistic support for inspection.
- If Not registered under CEA, Collector orders to close down the clinic.
- If Registered, the complaint can be forwarded to Goa Medical Council Or Ayurvedic Council or Homeopathy Council as then the matter must be related to cross-practice.
- Suitable action by the Police can be initiated once the report is received from the respective council.



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- Police can work in coordination with the Anti-Quackery officer of Goa Medical Council for the smooth functioning of the arrangement.

Amongst all the options discussed, the victim of quackery who has suffered some morbidity or mortality at the hands of the quack will have motivation enough to take quackery heads on, others are usually mute spectators. The biggest hurdle in tackling quackery lies here. If Quackery has to be eliminated, all genuine doctors across all branches of medicine have to wake up and report all forms of quackery with evidence to the appropriate authorities. Goa Medical Council needs to act proactively in such matters. Police have to be sensitized and proper mechanism to address the issue have to be put in place. Some special cell like Anti-Quackery Cell with officers, who are well versed with medical law will be a great help. Directorate of Health Services have to put in extra effort as quackery is a major health hazard.

To conclude, Quackery is a menace that needs to be eradicated but is easier said than done. If we are serious about tackling the same, a team effort with participation from all stakeholders is required.

Brain Teasers

1

Can you solve this?

1. A two-digit number is such that the sum of its digits is 10
2. When the digits are reversed, the new number formed is 36 more than the original number.

Find the Original Number?

2

What word can you form using all the letters in the box?

G	E	T
I	C	A
S	T	R

Please find answers on page no.14



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Doc Talk



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Dr Suraj C Prabhudessai.

MS. DNB. FMAS. FIAGES. FELLOWSHIP IN LAPAROSCOPY.
FOUNDER DIRECTOR SUNSHINE HOSPITAL, MARGAO.

LAPAROSCOPIC MANAGEMENT OF PATENT URACHUS: A CASE REPORT. MINIMIZING MORBIDITY AND MAXIMISING RECOVERY.

Urachal remnant is a rare congenital anomaly which is an allantois remnant that connects umbilicus to bladder dome and usually obliterates after birth. The incidence of urachal remnant is 1 in 5000 in adults. Various types of urachus remnants include patent urachus, diverticulum, cyst and sinus. Many of these are asymptomatic. Most common presenting symptom is umbilical discharge and recurrent urinary tract infections. Patent urachus should always be surgically treated even when asymptomatic because of possibility of malignant transformations. Classical surgical approach has been open surgical approach which is a semi-circular infra-umbilical incision or lower midline laparotomy which is quite a morbid operation.

Laparoscopic surgery presents a viable and effective alternative treatment option in treating patent urachus. Laparoscopic surgery has more advantages of being minimal access surgery with better cosmetic results, less post-operative pain and faster return to daily activities.

CASE REPORT: 2 patients presented with complaints of recurrent umbilical discharge and pain since last five to six months. One patient was male and the other female. On examination there was purulent discharge from umbilicus. Rest of the examination findings were normal. Routine blood tests were normal. Urine analysis showed no evidence of pus cells. Ultrasonography in both patients revealed linear tubular structure traveling from umbilicus to the Dome of the Bladder in the subcutaneous plane suggestive of patent urachus. Bladder examination was normal on ultrasound. Diagnosis of patent urachus in both patients was established and both patients were posted for laparoscopic excision of patent urachus under GA.

SURGICAL TECHNIQUE: Patient well placed in supine position. General anesthesia given with endo-tracheal intubation. Part painting and draping were done. The first port 10 mm was put 5 cm supra-umbilical in the epigastric region with open technique. Two 5 mm ports were put in the right hypochondriac and left hypochondriac region in the mid clavicular line. Diagnostic laparoscopy was done and diagnosis of patent urachus was confirmed by finding of a cystic lesion at the umbilicus. The rest of the abdominal organs were normal. With the use of mono-polar endo-cautery and hook the urachus was dissected from the umbilicus by staying in an extra peritoneal plane between two medial umbilical ligaments on either side. The urachus was entirely traced up till the bladder. Bladder was distended with 250 ml of normal saline diluted with methylene blue. The attachment of the Urachus to the bladder was well defined. Endo loop made up of chromic catgut no. 1 was applied at the base of the patent urachus. Urachus was then excised and the



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specimen was retrieved. Bladder was examined for any methylene blue leakage. Procedure was completed without any intra-op complications. Procedure lasted for around 30 to 45 minutes. Recovery was also uneventful. There were no postoperative complications. Patient was discharged on 2nd postoperative day after removing catheter and patient passing urine freely. Histo-pathological examination of the excised specimen confirmed diagnosis of patent urachus.

DISCUSSION: Patent urachus is an embryological remnant of the allantois and usually obliterates at the time of birth to form the median umbilical ligament. In case of failure to obliterate of the urachus it may present during infancy or adulthood as various clinical manifestations like urachal cyst, urachal diverticulum, urachal sinus or a complete patent urachus giving rise to recurrent urinary tract infections and umbilical discharge.

Congenital patent urachus is usually rare occurring 1 in 5000 of all adults. The diagnosis of patent urachus is suspected when the patient comes with recurrent umbilical discharge or recurrent urinary tract infections. It may be diagnosed by abdominal ultrasound. In certain cases CT scan abdomen may be needed and if there is a doubt then a cysto-graphy or cystoscopy may be needed to ascertain the diagnosis. Whether patent urachus is symptomatic or asymptomatic it should always be treated surgically because spontaneous resolution of patent urachus is uncommon. The second reason why it should be treated surgically, is because of risk of developing of malignancy in the urachal tract. The classical surgical approach has been infra-umbilical midline laparotomy with excision of umbilicus staying in the extra-peritoneal plane, reaching to the bladder dome and excision of a small cuff of bladder along with the patent urachus. However open surgery is morbid, needs catheter to be in place for a prolonged time and with large cosmetically unacceptable scar.

The first laparoscopic excision of urachal remnant was described in 1993 by Trondsen et al. Laparoscopy offers multiple advantages such as excellent visualization of the extra-peritoneal urachal structure, less postoperative stay, much less pain postoperatively, and better in cosmetic results besides being minimally invasive. In laparoscopic surgery we do not perform umbilectomy. However if there is severe inflammation or granuloma formation at umbilicus this may be curated and left open to heal by secondary intention. The bladder dome needing to be excised along with patent urachus is a matter of controversy. After reviewing the literature there is no consensus about a routine resection of the cuff of the bladder especially in adult patients. If the cuff of bladder is not excised then such patients may be kept under observation to avoid any possible recurrence and possible occurrence of carcinoma in the residual urachal tissue.

CONCLUSION: On review of literature and our experience in laparoscopic surgery, we conclude that laparoscopy is a very useful alternative for diagnosis as well as treatment of a patent urachus. The procedure is associated with low morbidity and better cosmetic outcome and early return to the work.



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Branch Activities

IMA BARDEZ

CME:1st Feb 2025

A CME was conducted on February 1st, featuring the following topics:

- Headache** – Presented by Dr. Parul Dubey, Consultant Neurologist, Manipal Hospital, Dona Paula.

- Old Disease, New Initiatives: En Route to TB**

- Elimination** – Delivered by Dr. Govind Desai, Consultant in Respiratory Medicine, South Goa District Hospital. The event was attended by 59 participants and accredited with 2 credit points.



Community Service Activity: 5th Feb 2025

- Talk on Health, hygiene, child abuse and physical safety conducted by Dr Suniana Thakur at Govt Primary School Arambol.

Community Service Activity : 16th Feb 2025

IMA Bardez(Bardez Knights) participated in a cricket tournament held in Sal, Bicholim, organized by Vision Hospital. A total of six teams, primarily consisting of hospital staff, took part in the event, aimed at promoting sports for a healthier lifestyle.



Community Service Activity : 24th Feb 2025

A COLS workshop was conducted for 30 staff members of Faber -Castell Industry at Corlim Industrial Estate. Dr. Sidharth Naik delivered a talk, followed by a hands-on demonstration on mannequins by Dr. Sidharth Naik and Dr. Shema Shirodkar.



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IMA BICHOLIM

CME: 15th Feb 2025

Monthly meeting & CME was held on 15/02/2025 at Lions Club Hall, Bicholim 08:00pm onwards. Dr Sindhu Arjun, Consultant Nephrologist, spoke on 'Diabetes & Chronic Kidney Disease: Newer Treatment'. 15 members attended.



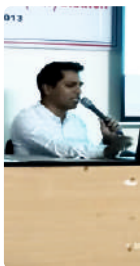
Community Service Activity : 19th Feb 2025

Eye Screening Camp was held on Wednesday, 19th February 2025 at Lions Day Care Centre, Chodan. The camp also carried out BP check, FBSL, RBSL, Hb checks. 100 people visited the camp of which 94 had their eyes screened. State Program Officer, Lion Lady & Past President IMA Goa state Dr. Medha Salkar was the Chief Guest. She provided free reading glasses to 41 patients under the scheme. 5 newly diagnosed diabetes mellitus patients, 4 patients with anemia & 1 newly detected hypertensive patient were referred to health centre. The camp was jointly organized by Lions Club of Chodan, Lions Club of Bicholim, IMA Bicholim, PHC Mayem & DHS, Govt of Goa under 'National Program for Control of Blindness & Visual Impairment'.

IMA CQS

Community Service Activity

Dr. Deepak Lotlikar conducted his routine weekly check-up of inmates of the Home for the Destitute run by Missionaries of Charity at Igramoll, Quepem.



CME : 14th Feb 2025

Monthly CME was organised on 14th February 2025 at IMA CQS Hall, Curchorem. Dr. Joel Quadros talked on 'Interesting cases in Cardiology'. It was attended by 26 members of CQS.



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IMA MARGAO

Community Service Activity : 01ST Feb 2025

A medical camp was held at Police Station, Fatorda on 1st February 2025 by Dr. Suraj Prabhudesai & Dr. Sudhir Shet. Blood sugar levels & BP were checked. 20 police personnel attended.



Community Service Activity : 04th Feb 2025

IMA Margao organized a walkathon on 4th February, 2025 to observe World Cancer Day. A distance of 3km was covered. 40 participants were part of the event. They were provided with fruits & hydration at the end.

Community Service Activity : 07th Feb 2025

A medical camp was organized at Konkani Bhasha Mandal School, Aquem on 07th February 2025 in association with Sunshine Hospital & Sapphire Laboratory for the teachers & staff of the school. FBSL, Uric acid, Hemoglobin & BP checks of 48 attendees were done. Dr. Suraj Prabhudesai, Dr. Saharsh Thorwat, Dr. Sudhir Shet, Dr. Jagruti Nadkarni & Dr. Aditya conducted the camp.



CME : 14th Feb 2025

A CME was held on 14th February, 2025 at Hotel Nanutel Margao. Drs. Amol Mahaldar & Jagdish Hiremath spoke on the topics "Kidneys under pressure" and "Elevated BP in Indians, too early to worry" respectively. The CME was moderated by Dr. Rajesh Naik with Dr. Antonio Rodrigues as chairperson. 102 delegates attended. CME accreditation was 2 points for speakers & 1 point for delegates.

State Level CME : 21th Feb 2025

A state level CME was held on 21st February, 2025 at South Goa District Hospital, Margao. Dr. Rajendra Borkar was the Chief Guest, and Drs. Sunil Kumar K & Avinash T S were the speakers. The topics covered were "Interventional Pulmonology, Cutting Edge" and "Surgical challenges during kidney transplantation". 96 delegates attended. CME accreditation 2 points for speakers & 1 point for delegates.





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IMA MARGAO

Community Service Activity : 23rd Feb 2025

A medical camp was held in association with Sevda Clinic & Diagnostic Centre, Chinchinim at their premises on 23rd February, 2025. FBSL, HbA1c, uric acid, microalbuminuria, lipid profile & BP were checked of 67 residents of Chinchinim. Dr. Samuel Arawattigi was the resource person for the camp.



Community Service Activity : 28th Feb 2025

As part of the Pradhan Mantri TB Mukta Bharat Abhiyan, IMA Margao supplied eight food baskets to newly detected TB patients on 28th February, 2025.

IMA MORMUGAO

CME : 01st Feb 2025

IMA Mormugao held a CME on 01/02/2025 at Hotel HQ, Vasco da gama. Dr. Shital Lengade and Dr. Sarang Kanekar spoke on 'Diuretics in clinical practice' and 'Kidney stones and its management' respectively. 30 members attended the CME.



Community Service Activity : 07th Feb 2025

To commemorate 'World Cancer Day' (4th February) and 'Sexual & Reproductive Health Day' (12th February), IMA Mormugao's Dr. Poornima Naik spoke to students of class 6 & 7, 07/02/2025, at PM Shri Kendriya Vidyalaya one on 'Menstrual hygiene' & 'Cervical cancer prevention/HPV vaccination'. It was followed by an interactive session, assisted by Dr. Ana Pereira & Dr. Ruth Viegas. 100 girls benefitted from the talk.



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IMA MORMUGAO

Community Service Activity : 14th Feb 2025

IMA Mormugao's Dr. U. J. Wanda Viegas and Dr. Ruth Viegas conducted a talk in association with the Red Ribbon Club at the Fr. Basilio Andrade's Memorial Higher Secondary School on 'Health and Hygiene' and 'HIV/AIDS awareness' on 14/02/2025. 70 students and 10 staff members benefitted from the same.



Community Service Activity : 22nd Feb 2025

IMA Mormugao in association with YouWeCan and Indian Cancer Society under project Satark conducted a Breast Cancer Screening camp at Anganwadi, Municipal Garden, Vasco on 22/02/2025.

Dr. Anuradha Suryawanshi gave an Awareness talk on Breast cancer screening and self breast examination. iBreast screening done for 20 women.

IMA TISWADI

CME : 07th Feb 2025

IMA Tiswadi successfully arranged CME on Friday, 7th February at 08:00 PM at Hotel Delmon, Panaji Goa. Dr Shital S Lengade, Consultant Nephrologist discussed the management of Diuretics in Clinical Practice. Dr Manish S Kushe, Consultant Endocrinologist discussed the role of Gut Microbiota in Health and Disease. Nearly 80 delegates attended CME which was accredited with 1 credit point by Goa Medical Council.



IMA PONDA

Community Service Activity : 05th Feb 2025

Regular camp at Matruchaya by IMA Ponda, Matruchaya Seva 25 & IAP Goa State. Dr. Purnima saw 8 kids. Medicines were sponsored by Matruchaya & IMA Ponda Charitable Trust.





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IMA PONDA

Community Service Activity : 06th Feb 2025

IMA Ponda and IMA Ponda Charitable Trust celebrated World Cancer Awareness week at GVM's College of Education. Over 200 BEd students and teachers participated. Resource Person Dr. Piyush Gupta, Secretary Cancer Aid Society & Secretary National Association for AYUSH and Integrative Medicine.



Community Service Activity : 07th Feb 2025

A talk by Dr. Purnima Usgaonkar on adolescence for the girl students of Navodaya Vidyalaya Valpoi. It was attended by 175 students from std VIII to std IX. Dr. Ashok Amshekar introduced the topic. Dr. Purnima gave simple but catchy tips towards minute issues of health in relation to growth, menstruation, behaviours & HPV vaccination, yoga & pranayam during this delicate period of life.

Community Service Activity : 22nd Feb 2025

Talk on emerging health problems today & childhood cancers was organized under Adolescent Health Cell of IMA Goa State, Lions Club Ponda, IMA Ponda and IMA Ponda Charitable Trust. Dr. Purnima Usgaonkar spoke on the subject given today's lifestyle, social behaviours, risk factors affecting health resulting in different health problems including cancers.



Community Service Activity : 16th Feb 2025

Dr. Purnima Usgaonkar delivered an informative talk on anemia, its causes & preventive measures. She emphasized the importance of a nutritious diet in combating anemia. Four girls from Matruchaya shared their experiences, expressing gratitude to Dr. Purnima for guiding them in improving their dietary habits to overcome anemia. Dr. Santosh Usgaonkar, Chairman IMA Ponda Charitable Trust & Founder Member of IAP Goa State provided valuable insights into essential healthcare measures for children. A dedicated team of eminent

doctors conducted medical check-ups during the camp including : Dr. Santosh Usgaonkar – Chairman IMA Ponda Charitable Trust, Founder member of IAP Goa State, Dr. Purnima Usgaonkar – Chairperson Adolescent Health Cell Goa State & Member Indian Academy of Pediatrics, Dr. Smita Usgaonkar – Member IMA Ponda, Dr. Vandana Pathankar - Member IMA Ponda, Dr. Nutan Dev - Member IMA Ponda & IAP Goa, Dr. Rajdatta Timble - Member IMA Ponda & IAP Goa, Dr. Jaya Shenoy – Pedodontist, Dr. Laxmikant Naik – ENT Specialist, Member IMA Ponda, Dr. Samidha Khandekar – Microbiologist, Member IMA Ponda. The entire event was conducted voluntarily by IMA Ponda as a commitment to the well being of Matruchaya children. A total of 60 children & 10 staff members from Dhavali Balika Kalyan Ashram and Wade-Talauli Balika Kalyan Ashram underwent health check-ups during the camp. As a act of encouragement to the children towards eradication of anemia at Matruchaya, Dr. Purnima distributed a pen and writing pad each to all the children of Matruchaya as gifts from her side to encourage writing notes and tips given during awareness programmes.



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IMA PONDA

Community Service Activity : 19th Feb 2025

Regular weekly health check-up under Aao Gao Chale was held by IMA Ponda and the IMA Ponda Charitable Trust in association with IAP Goa State and Adolescent Health Cell of IMA Goa State. 16 kids & 2 adolescents were examined by Dr. Purnima Usgaonker. Guidance on hygiene and diet was given. The adolescents were also guided towards compliance in taking the medicines prescribed.



A Nobel Gesture : 20th Feb 2025

Dr. Shweta Khandeparkar donated Rs. 1,11,000/- (One lakh & eleven thousand only) towards IMA PONDA CHARITABLE TRUST on her birthday.

Community Service Activity : 23rd Feb 2025

PES College SBSI unit in association with IMA Ponda held a talk for women of Mardol & Priol villages on importance of diet & nutrition for long term health, 11am to 1pm at Village Panchayat Mardol. Dr. Samidha Khandeparkar was the speaker. She highlighted the importance of balanced diet & need for healthy eating practices. Around 45 ladies & few students of PES College participated in the programme. It was followed by a competition of healthy food dishes which received enthusiastic response with many entries.



Brain Teasers' Answers

Elementary, my dear Watson...

1. 37
2. Strategic



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IMA GOA STATE

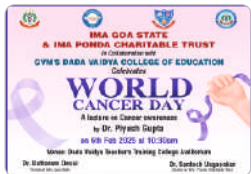
Community Service Activity : 03rd Feb 2025

IMA Disaster Management Committee Goa State held a Fire Disaster Mockdrill, on 3/2/25 in association with The Verna Industrial Association & BPCL and Goa State Government at BPCL premises, Verna. The Mock Drill was presided by Mr. Ramesh Kumar, Dy. Collector South Goa. IMA DMC Goa were represented by IMA Goa State President, Dr. Dattaram Desai, Dr. Shekhar Salkar (Eminent Surgeon), Dr. Vallabh Dhaimodker (Disaster Management Consultant), Dr. J.S.N. Ravi Krishna (Chairperson, IMA DMC Goa), Dr. Smita Parsekar (Disaster Management Consultant), Dr. Naresh Phadte (Secretary, IMA DMC Goa), Dr. Luis Ataide (South Goa Coordinator, IMA DMC). There was participation from all the members of Verna Industries Association, Vasco RTO, Fire services and Verna Police. The aim of the mockdrill was to enact a disaster situation of a gas leakage and explosion near BPCL premises and the immediate response of all to it. The mockdrill helped to identify various issues for improvement and gave a first hand practical experience to all. Inputs of IMA DMC members and other experts were taken at a post Mockdrill interactive session presided over by the Dy Collector, Mr. Ramesh Kumar. These will be noted to improve preparedness for Disaster Management in Verna Industrial Estate. More Disaster Management Orientation programmes are planned for the Verna Industrial Estate in future.



Community Service Activity : 06th Feb 2025

Lecture on Cancer Awareness organized by IMA Goa State, February 6, 2025: The Indian Medical Association (IMA) Goa State in collaboration with Goa Vidya Prasarak Mandal's Dada Vaidya College of Education organized a lecture on cancer awareness by Dr. Piyush Gupta, Honorary Secretary of the Cancer Aid Society. The session took place at the college auditorium on February 6, 2025, at 10:30am. Dr. Dattaram Desai, President of IMA Goa State, welcomed the gathering and highlighted the importance of palliative care. He introduced the theme "Care with Compassion, That's Palliation" and emphasized the need for greater awareness and accessibility of palliative care services. Dr. Piyush Gupta delivered the keynote address.



Community Service Activity : 07th Feb 2025

Shree Nagesh Maharudra Arogya Seva Manch and Global Chamber of Saraswat Entrepreneurs under the aegis of National Association of Palliative Care for Ayush & Integrative Medicine (Goa Chapter), IMA Goa State, IMA Ponda and Dr. Vallabh Dhaimodker Foundation organized a seminar on "Palliative Care". Date: Friday, 7th February 2025, Time : 4.00pm to 6.30pm, Venue : Mayuresh Hall, Shree Saunthan Nagesh Maharudra, Nageshi-Bandora, Ponda. Dr. Dattaram Desai thanked the organisers for bringing the stakeholders together in the hope of palliative care awareness. He informed the gathering about this year's theme of IMA GOA STATE 2025, "Care with compassion, That's Palliation". Distinguished President of Nagesh Devasthan Mr. Damodar Bhatkar chaired the planning session, joined by an impressive panel of healthcare experts including Dr. Vallabh Dhaimodkar, Mrs. Vandana Kakodkar, Mr. Dinar Mardolkar with notable participation from Mr. Prashant Kerkar. The initiative garnered strong support from the Global Chamber of Saraswat Entrepreneurs (GCSE), represented by prominent members Mrs. Meena Parulekar, Mr. Shirish Pai Angle, Mr. Narayan Nadkarni and the dynamic duo of Suchendra and Nidhi Agni.





Indian Medical Association Goa

Doc Talk



Care With Compassion: That's Palliation

IMA GOA STATE

Community Service Activity : 07th Feb 2025

A talk by Dr. Purnima Usgaonkar on adolescence for the girls students of Navodaya Vidyalaya Valpoi was held on 7/2/25. It was attended by 175 students from std viii to std ix. Dr. Ashok Amshekar introduced the topic. Dr. Purnima gave simple but catchy tips towards the minute issues of health in relation to growth, menstruation, behaviours, and HPV vaccination, yoga, and pranayam during this delicate period of life. The programme was organised by IMA Ponda, IMA Ponda Charitable Trust, in association with IAP Goa and Adolescent Health Cell of IMA Goa State.



Community Service Activity : 15th Feb 2025

Talk on 'Emerging health problems today and Childhood cancers' was organised under Adolescent Health Cell of IMA Goa State, Lions Club Ponda, IMA Ponda and IMA Ponda Charitable Trust on 15th February 2025. Dr. Purnima Usgaonkar gave a talk on this subject given today's lifestyle, social behaviours, risk factors affecting health resulting in different health problems including cancers. The venue was Sanjeevan lecture hall for higher secondary. It was attended by around 65 people including students, teachers and members of Lions Club. The talk was followed by discussion and queries put to the speaker by the audience. Pamphlets with Dr. Purnima's guiding tips were distributed to the students through her book "Kishorevayantle Poshan".



Community Service Activity : 16th Feb 2025

Shree Nagesh Maharudra Arogya Seva Manch and Global Chamber of Saraswat Entrepreneurs under the aegis of National Association of Palliative Care for Ayush & Integrative Medicine (Goa Chapter), IMA Goa State, IMA Ponda and Dr Vallabh Dhaimodkar Foundation organized a seminar on "Palliative Care". Date: Friday, 7th February 2025, Time : 4.00pm to 6.30pm, Venue : Mayuresh Hall, Shree Saunsthan Nagesh Maharudra , Nageshi-Bandora, Ponda. Dr Dattaram Desai thanked the organisers for bringing the stakeholders together in the hope of palliative care awareness. He informed the gathering about this year's theme of IMA GOA STATE 2025, "Care with compassion, That's Palliation". Distinguished President of Nagesh Devasthan Mr. Damodar Bhatkar chaired the planning session, joined by an impressive panel of healthcare experts including Dr. Vallabh Dhaimodkar, Mrs Vandana Kakodkar, Mr. Dinar Mardolkar with notable participation from Mr. Prashant Kerkar. The initiative garnered strong support from the Global Chamber of Saraswat Entrepreneurs (GCSE), represented by prominent members Mrs. Meena Parulekar, Mr. Shirish Pai Angle, Mr. Narayan Nadkarni and the dynamic duo of Suchendra and Nidhi Agni.





Indian Medical Association Goa

Doc Talk



Care With Compassion: That's Palliation

IMA GOA STATE

A team of eminent doctors conducted check-ups during the camp

Dr. Santosh Usgaonkar – Chairman IMA Ponda Charitable Trust, Founder Member IAP Goa State,

Dr. Purnima Usgaonkar – Chairperson Adolescent Health Cell Goa State & Member IAP,

Dr. Smita Usgaonkar - Member IMA Ponda,

Dr. Vandana Pathankar - Member IMA Ponda,

Dr. Nutan Dev - Member IMA Ponda and IAP Goa,

Dr. Rajdatta Timble Member IMA Ponda and IAP Goa,

Dr. Jaya Shenoy – Pedodontist

Dr. Laxmikant Naik – ENT Specialist, Member IMA Ponda,

Dr. Samidha Khandeparkar – Microbiologist, Member IMA Ponda.



State Level CME : 21th Feb 2025

A state level CME was organised by IMA Goa State and IMA Margao Branch in association with Aster CMI Hospital Bengaluru, Friday 21st February 2025. Venue: South Goa District Hospital. Chief Guest: Dr. Rajendra Borkar (Medical Superintendent, SGDH Margao) The formal function was conducted in the presence of Dr. Dattaram Desai (President, IMA Goa State) and Dr. Aaron Soares (Secretary, IMA Goa State).

Topics:

1) INTERVENTIONAL PULMONOLOGY: CUTTING EDGE Speaker: Dr. Sunil Kumar K, Lead Consultant, Interventional Pulmonology

2) SURGICAL CHALLENGES DURING KIDNEY TRANSPLANTATION

Speaker: Dr. Avinash T S, Lead Consultant, Urology

Total number of attendees: 82. ACCREDITATION: One point by Goa Medical Council