infoKEM

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Autism Spectrum Disorder (ASD)

Autism Spectrum Disorder (ASD) is a neurological and developmental disorder that affects how children interact with others, communicate, learn, and behave. Although autism can be diagnosed at any age, it is described as a "developmental disorder" because symptoms generally appear in the first 2 years of life. Autism, or autism spectrum disorder (ASD), refers to a broad range of conditions characterized by challenges with social skills, repetitive behaviours, speech, and nonverbal communication.

Children with ASD may demonstrate absent, reduced, or atypical social interest, manifested by rejection of others, passivity, or inappropriate approaches that seem aggressive and disruptive. In young children, lack of shared, age-appropriate flexible pretend and symbolic play is observed. Autistic kids are often insistent on playing by very fixed rules. Kids with ASD may behave, communicate, interact, and learn in ways that are different from other children. Their physical appearance is mostly normal. Few ASD kids with syndromes have dysmorphic features. The abilities of children with ASD can vary significantly. For example, some kids with ASD may have advanced conversation skills whereas others may be nonverbal. Some children with ASD need a lot of help in their daily lives; others can work and live with little to no support.





ASD begins before the age of 3 years and can last throughout a person's life, although symptoms may improve over time. Some children show ASD symptoms within the first 12 months of life. In others, symptoms may not show up until 24 months of age or later. Some children with ASD gain new skills and meet developmental milestones until around 18 to 24 months of age, and then they stop gaining new skills or lose the skills they once had. As children with ASD become adolescents and young adults, they may have difficulties developing and maintaining friendships, communicating with peers and adults, or understanding what behaviours are expected in school or on the job. They may come to the attention of healthcare providers because they also have conditions such as anxiety, depression, or attention-deficit/hyperactivity disorder, which occur more often in children with ASD than in kids without ASD. The abilities and needs of autistic people vary and can evolve over time. While some Autistic kids live independently, others have severe disabilities and require life-long care and support. Autism often has an impact on education and employment opportunities. In addition, the demands on families providing care and support can be significant. Social attitudes and the level of support provided by local and national authorities are important factors determining the quality of life with autism.

Causes

As mentioned above Autism spectrum disorder (ASD) is a developmental disability caused by differences in the brain. Some people with ASD have a known difference, such as a genetic condition. Other causes are not yet known. Scientists believe there are multiple causes of ASD those acts together to change the most common ways people develop. We still have much to learn about these causes and how they impact people with ASD.

Autism spectrum disorder has no single known cause. Given the complexity of the disorder, and the fact that the symptoms and the severity vary, there are likely to be many causes. Both genetics and environment may play a role.

Genetics and Epigenetic:

Several different genes appear to be involved in autism spectrum disorder. For some children, autism spectrum disorder can be associated with a genetic disorder, such as Rett syndrome or fragile X syndrome. For other children, genetic changes (mutations) may increase the risk of autism spectrum disorder. Still other genes may affect brain development or the way that brain cells communicate, or they may determine the severity of symptoms. Some genetic mutations seem to be inherited, while others occur spontaneously.

Environmental factors:

Researchers are currently exploring whether factors such as viral infections, medications or complications during pregnancy, or air pollutants play a role in triggering autism spectrum disorder.





The link between vaccines and ASD



Available epidemiological data concludes that there is no evidence of a causal association between measles, mumps and rubella vaccine, and autism. Previous studies suggesting a causal link were found to be filled with methodological flaws. There is also no evidence to suggest that any other childhood vaccine may increase the risk of autism.

Nobody knows what causes autism, or if it has a cause. It can affect people in the same family. So it may sometimes be passed on to a child by their parents.

So, to summarise, Autism is not caused by:

- · bad parenting
- · vaccines, such as the MMR vaccine
- diet
- · an infection you can spread to other people

Other conditions

People with autism often have other conditions, such as

- Attention deficit hyperactivity disorder (ADHD)
- Learning difficulty
- Anxiety
- Depression
- Epilepsy

Intelligence

Some autistic people have average or above average intelligence.

Some autistic people have a learning disability. This means they may find it hard to look after themselves and need help with daily life.

Epidemiology

It is estimated that worldwide about 1 child in 100 children has autism . This estimate represents an average figure, and reported prevalence varies substantially across studies. Some well-controlled studies have, however, reported figures that are substantially higher. The prevalence of autism in many low and middle income countries is unknown.

Symptoms

Some children show signs of autism spectrum disorder in early infancy, such as reduced eye contact, lack of response to their name or indifference to caregivers. Other children may develop normally for the first few months or years of life, but then suddenly become withdrawn or aggressive or lose language skills they've already acquired. Signs usually are seen by age 2 years.







Each child with autism spectrum disorder is likely to have a unique pattern of behaviour and level of severity — from low functioning to high functioning.

Some children with autism spectrum disorder have difficulty learning, and some have signs of lower than normal intelligence. Other children with the disorder have normal to high intelligence — they learn quickly, yet have

trouble communicating and applying what they know in everyday life and adjusting to social situations.

Because of the unique mixture of symptoms in each child, the severity can sometimes be difficult to determine. It's generally based on the level of impairments and how they impact the ability to function.

Below are some common signs shown by people who have autism spectrum disorder.

Social communication and interaction

A child with autism spectrum disorder may have problems with social interaction and communication skills, including any of these signs:

- Fails to respond to his or her name or appears not to hear you at times
- Resists cuddling and holding, and seems to prefer playing alone, retreating into his or her own world
- Has poor eye contact and lacks facial expression
- Doesn't speak or has delayed speech, or loses previous ability to say words or sentences
- Can't start a conversation or keep one going, or only starts one to make requests or label items
- Speaks with an abnormal tone or rhythm and may use a singsong voice or robot-like speech
- Repeats words or phrases verbatim, but doesn't understand how to use them
- Doesn't appear to understand simple questions or directions
- Doesn't express emotions or feelings and appears unaware of others' feelings
- Doesn't point at or bring objects to share interest
- Inappropriately approaches a social interaction by being passive, aggressive or disruptive
- Has difficulty recognizing nonverbal cues, such as interpreting other people's facial expressions, body postures or tone of voice







Patterns of behaviour

A child or adult with autism spectrum disorder may have limited, repetitive patterns of behaviour, interests or activities, including any of these signs:

- Performs repetitive movements, such as rocking, spinning or hand flapping
- Performs activities that could cause self-harm, such as biting or head-banging
- Develops specific routines or rituals and becomes disturbed at the slightest change
- Has problems with coordination or has odd

movement patterns, such as clumsiness or walking on toes, and has odd, stiff or exaggerated body language

- Is fascinated by details of an object, such as the spinning wheels of a toy car, but doesn't understand the overall purpose or function of the object
- Is unusually sensitive to light, sound or touch, yet may be indifferent to pain or temperature
- Doesn't engage in imitative or make-believe play
- Fixates on an object or activity with abnormal intensity or focus
- Has specific food preferences, such as eating only a few foods, or refusing foods with a certain texture

As they mature, some children with autism spectrum disorder become more engaged with others and show fewer disturbances in behavior. Some, usually those with the least severe problems, eventually may lead normal or near-normal lives. Others, however, continue to have difficulty with language or social skills, and the teen years can bring worse behavioural and emotional problems.

When to see a doctor

Babies develop at their own pace, and many don't follow exact timelines found in some parenting books. But children with autism spectrum disorder usually show some signs of delayed development before age 2 years.

If you're concerned about your child's development or you suspect that your child may have autism spectrum disorder, discuss your concerns with your doctor. The symptoms associated with the disorder can also be linked with other developmental disorders.

Signs of autism spectrum disorder often appear early in development when there are obvious delays in language skills and social interactions. Your doctor may recommend developmental tests to identify if your child has delays in cognitive, language and social skills, if your child:

- Doesn't respond with a smile or happy expression by 6 months
- Doesn't mimic sounds or facial expressions by 9 months
- Doesn't babble or coo by 12 months
- Doesn't gesture such as point or wave by 14 months





- Doesn't say single words by 16 months
- Doesn't play "make-believe" or pretend by 18 months
- Doesn't say two-word phrases by 24 months
- Loses language skills

Risk factors

The number of children diagnosed with autism spectrum disorder is rising. It's not clear whether this is due to better detection and reporting, a real increase in the number of cases, or both

Autism spectrum disorder affects children of all races and nationalities, but certain factors increase a child's risk. These may include:

- Your child's sex. Boys are about four times more likely to develop autism spectrum disorder than girls are.
- Family history. Families who have one child with autism spectrum disorder have an increased risk of having another child with the disorder. It's also not uncommon for parents or relatives of a child with autism spectrum disorder to have minor problems with social or communication skills themselves or to engage in certain behaviours typical of the disorder.
- Other disorders. Children with certain medical conditions have a higher than normal risk of autism spectrum disorder or autism-like symptoms. Examples include Fragile X syndrome, an inherited disorder that causes intellectual problems. Tuberous sclerosis, a condition in which benign tumours develop in the brain. And Rett syndrome, a genetic condition occurring almost exclusively in girls, which causes slowing of head growth, intellectual disability and loss of purposeful hand use.
- Extremely preterm babies. Babies born before 26 weeks of gestation may have a greater risk of autism spectrum disorder.
- Parents' ages. There may be a connection between children born to older parents and autism spectrum disorder, but more research is necessary to establish this link.

Complications

Problems with social interactions, communication and behaviour can lead to:

- · Problems in school and with successful learning
- Employment problems
- Inability to live independently
- Social isolation
- · Stress within the family
- Victimization and being bullied

Prevention

There's no way to prevent autism spectrum disorder, but there are treatment options. Early diagnosis and intervention is the most helpful method, and can improve behaviour skills and language development. However, intervention is helpful at any age. Though children usually don't outgrow autism spectrum disorder symptoms, they may learn to function well with it.





Treatment

While there is no "cure" for autism, there are several effective interventions that can improve a child's functioning:

- **Applied behavioural analysis:** It involves systematic study of the child's functional challenges, which is used to create a structured behavioural plan for improving their adaptive skills and decreasing inappropriate behaviour.
- **Social skills training:** Done in groups or individual settings, this intervention helps children with autism improve their ability to navigate social situations.
- **Speech & language therapy:** It can improve the child's speech patterns and understanding of language.
- Occupational therapy: This addresses adaptive skills, deficits with activities of daily living, as well as problems with handwriting.
- **Parent management training:** Parents learn effective ways of responding to problematic behaviour and encouraging appropriate behaviour in their child. Parent support groups help parents cope with the stress of raising a child with autism.
- **Special education services:** Under an Individual Education Plan provided by their school, which accommodates for their social communication deficits, restricted interests, and repetitive behaviours, children with autism can achieve their fullest potential academically. This includes special day classes for very young children to address language, social, and life skills.
- Treating co-occurring conditions: Children with autism experience insomnia, anxiety, and depression more often than peers without autism. They also often have ADHD. Children with autism may have an intellectual disability and these needs to be addressed. The impact of these conditions can be reduced with the proper services, which include all of the above, in addition psychotherapy and/or medication treatment.
- **Medication:** A child psychiatrist can evaluate for co-morbid depression, anxiety, and impulsivity. Appropriate medications can possibly be helpful. For example, autism-related irritability can be reduced by medications such as antipsychotics, but they should be used wisely and judiciously.

Several complementary and alternative interventions involving special diets and supplements have been tried over the years by parents/caregivers seeking ways to help their child with autism function better. Till date, compelling evidence has not been found to clearly recommend any such specific interventions. Research into these types of interventions continues, and parents/caregivers interested in them should discuss them with their child's treating developmental paediatrician.

Tips For Parents

- Learn as much as possible about autism spectrum disorder
- Provide a consistent structure and routine
- Connect with other parents of children with autism
- Seek professional help for specific concerns
- Take time for yourself and other family members





Having a child with autism affects the whole family. It can be stressful, time-consuming and expensive. Paying attention to the physical and emotional health of the whole family is important. Many national and local advocacy organizations provide information, resources and support to individuals with autism spectrum disorder and their families.

Inclusion of autistic kids in schools

Inclusion in a general classroom is a positive option for children with autism. Inclusion has often been a highly debated topic, and if schools are prepared, students with autism should be able to be in inclusive settings. Most students on the autism spectrum are included within general classrooms, because they have the right to be taught in an inclusive classroom. Inclusion can benefit all children, including peers within the classroom. Inclusion of students with autism in the general classroom can minimize stigma against autism while students learn how to communicate appropriately with one another. Having a student with autism in a general classroom also reduces negativity associated with autism, and children will learn how to work with one another. Inclusive classroom settings teach students to build relationships with all peers. Teachers already practise beneficial differentiation techniques for all students, and it should be continued. For teachers to feel comfortable with successfully integrating a student with autism in a general classroom, it would be beneficial for the teacher and the family to meet prior to school starting. Teachers can consider teaching to the students' interests and abilities so that a student with autism is successful in an inclusive classroom. Teachers should ensure that they have some education on autism so that they can successfully integrate a child with special needs in the classroom setting, because a more knowledgeable teacher is more comfortable with inclusion. Inclusion can benefit more than just a child with autism and should be an option for that child. Inclusion means allowing child to learn in social environments together. Children with autism who are in inclusive classrooms show better cognitive adaptive functioning.



Dr. Sharmila PatilConsultant,Developmental Paediatrics





KNOW YOUR HEALTH



Parkinson's Disease

AN OVERVIEW

Parkinson's disease (PD) is a slow progressive brain disorder that causes unintended or uncontrollable movements, such as shaking (tremors), stiffness, and difficulty with balance and coordination.

The most prominent signs and symptoms of PD occur when the nerve cells producing a neurotransmitter called Dopamine die prematurely. Dopamine is responsible for the regulation of movements and mood. A reduction in the normal levels of Dopamine causes PD. The exact cause of this is unknown - but research attributes it to a combination of genetic and environmental factors.

Symptoms usually begin gradually and worsen over time. As the disease progresses, people may experience slowed movement, tremors, and difficulty walking and talking. Later on, people develop loss of balance. They may also suffer from mental and behavioural changes, sleep problems, depression, memory difficulties, and fatigue.

Although there is no cure for PD, medicines, surgical treatment, and other therapies can help to relieve symptoms and make life easier. Medicines can help treat the motor symptoms of Parkinson's by increasing the level of dopamine in the brain.

For people with PD who do not respond well to medications or develop untoward side effects of dopaminergic drugs, deep brain stimulation may be recommended. It involves a neurosurgical procedure that uses implanted electrodes to electrically stimulate movement related areas in the brain leading to reduced movement issues.





Other therapies that may help to manage Parkinson's symptoms include- physical, occupational, and speech therapies; muscle strengthening exercises; healthy diet plans; yoga/tai chi to improve flexibility.

While the progression of PD is usually slow, eventually daily routines may be affected. Daily activities of working jobs, household chores, and participating in social activities may become challenging.

Support groups can help people cope with these difficult changes by providing information and resources for those living with PD and their caregivers and provide relief to some of their problems.

Team Neurosciences Department









Basic Paediatric Ventilation Workshop

The Basic Paediatric Ventilation Workshop was held on 8th and 9th April 2023 by the Department of Paediatrics in association with Indian Academy of Paediatrics, Pune, under the guidance of Dr. Madhumati Otiv, PICU In-charge, KEM Pune. Workshop was attended by 63 delegates, which included both paediatric residents and practicing paediatrician. Workshop consisted of lectures in morning and workstations in the afternoon. The sessions were kept interactive. The faculties were Dr.Madhumati Otiv, Dr. Ambrish Mishra, Dr. Manoj Patil, Dr. Abhijeet Botre, Dr. Neha Shah, Dr. Bhagyashree Parmar, Dr. Noopur Kulkarni.























The response from delegates was overwhelming.

"This was excellent conference informative, interactive, easy to grasp, practically important message conveyed, resolved many queries which we face day today in PICU, excellent Hands-on sessions and last but not the least the food was excellent, parking arrangement was good- we all enjoyed and learned. Thank you Dr. Neha and team for excellent conduct and Dr. Otiv mam for expert guidance"

Dr. Tushar deshpande

"The workshop was very helpful and practical oriented. The overall management was very excellent and the efforts taken by Respected Dr. Otiv mam, Dr. Neha mam, Dr. Mishra Sir, Dr. Noopur, Dr. Bhagyashree and all team were awesome.

The venue and menu both were excellent. In a real manner we got the feast of knowledge and food together. Many concepts were made simpler. The modes of ventilation, graphics and loops were learned with ease. Thank you very much for such a nice workshop. Hats off to team"

Dr. Nitin Waghmare

"It was a really good and helpful workshop which helped understand seemingly difficult concepts. Having attended such an informative workshop at the start of my residency shall definitely help me. Thank you for the session"

Dr.Avanti (Paediatric resident)

"I would like to thank Dr. Otiv madam, Dr. Neha and team to refresh our basics and sensitising us to the importance of graphics and judicious use of ventilatory modes and setting to give optimum benefit to patient .Looking forward for more such interactive sessions."

Dr.Mubashir khan

"I'm very thankfull to Dr. Otiv mam and KEM PICU team Dr. Neha Mam, Dr. Noopur, Dr. Bhagyashree for arranging this workshop. I have enjoyed learning in this 2days. Difficult lecturers physiology and modes of ventilation and ventilation concepts were made simple for understanding. Also all work stations were good .Also thanks for providing ventilation workshop module that will help us replicate knowledge with our colleague and juniors. Thank you very much!"

Dr.Ganesh Badge (consultant PICU)

"It was very good workshop. Difficult things were made very simple to understand. Also very good in sensitising thinking process. Graphics understanding is better after this workshop."

Dr.Amol choure





Cochlear Implant Accessories by Advanced Bionics

25 February is International Cochlear Implant Day. This day celebrates cochlear implants, which have provided access to sound for hundreds of thousands of people around the world. The day serves to raise awareness of this life-changing technology and encourage the general public to think about cochlear implants.

Advanced Bionics is a cochlear implant manufacturer approved by US FDA, holds more than 1000 patents and is the recognised technology leader in cochlear implants. AB offers one of the most comprehensive product portfolios in the industry - from hearing aids to cochlear implants and wireless communication solutions. For many years, AB has supported Big Ears to give the gift of hearing to many families and improve their quality of life.

On the occasion of International Cochlear Implant Day, Advanced Bionics has come forward to help Big Ears in its mission to provide families with the gift of hearing. Through their generous donation of spares and accessories, Big Ears has been able to continue its work of helping children to experience the full range of sound. This contribution has not only made a lasting impact on the lives of many families but has also been a testament to the commitment of Advanced Bionics to the cause. It is through such meaningful collaborations that we can truly make a difference in the world.







Celebration of World Autism Awareness Day















Special event to mark World Parkinson's Day

KEM Hospital, Pune recently hosted a special event to mark World Parkinson's Day. The event was jointly organized by KEM Hospital Pune, 'B K Parekh Parkinson's Disease and Movement Disorder Society' (BKP -PDMDS)' and Deenanath Mangeshkar Hospital. Dr. Pradeep Divate, Head of Department of Neurosciences at KEM Hospital, Neurologist Dr. Shripad Pujari, along with Kavita Nimbalkar, Program Manager at Mumbai Support Group, Jyoti Mehta, Admin Care Manager Dept., Janine Garda, Neuropsychologist & Coordinator at KEM Hospital, Dr. Nikita Chhajed Physiotherapist and Coordinator of KEM and DMH Support Group, Volunteer Sampada Padhe, BKP-PDMDS Senior Psychologist Neha Rane and Psychologist Shibani Khanna were present on the occasion.

About 60 members of the support group at KEM Hospital and Deenanath Mangeshkar Hospital created public awareness through dance-singing performances (Creative Therapy). Several patients expressed their thoughts about the experience after joining the support group and the transformation in their lives.

Dr Pradeep Divate mentioned that this progressive disorder affects the nervous system and subsequently the parts of the body that are controlled by them. The symptoms progress with age and may include tremors in the body, loss of movement, deterioration in posture and balance, inability to walk and maintain weight, stiffness, the rigidity of muscles, changes in speech, etc. The deterioration in movements and other symptoms also play on confidence and affects individuals emotionally and psychologically. Therefore, apart from regular medication, the need of the hour is such support groups. The support group programmes are meant to help not only individuals with PD but also for their caregivers.

Neurologist Dr. Shripad Pujari gave information about medication and treatment. Vasumita Desai was the compere for the event, while Dr. Nikita Chhajed and Sampada Padhye proposed the vote of thanks.

Parkinson's Disease Support Group Programs are conducted free of charge by BKP-PDMDS through several centers in India. It is a multifaceted program which mainly consists of occupational and speech therapy, physical exercise (physiotherapy), laughter therapy, dance and music, movement therapy along with proper nutrition, yoga-pranayama, doctor's lectures and awareness sessions on other common brain diseases among senior citizens. Guidance is provided. These activities are conducted free-of-cost by trained professionals of BKP - PDMDS.

PD support group sessions are conducted weekly at KEM Hospital on Wednesdays and at DMH on Saturdays.



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EVENTS AND ACTIVITIES

पार्किन्सन्स विनानिमित्त पुण्यातील केईएम हॉस्पिटलमध्ये विशेष कार्यक्रम

पुणे : पुण्यातील केईएम हॉस्पिटल येथे जागतिक पार्किन्सन्स दिनानिमित्त विशेष कार्यक्रमाचे आयोजन करण्यात आले होते. केईएम हॉस्पिटल पूणे, बी.के.पारेख पार्किन्सन डिसीज अँड मूव्हमेंट डिसऑर्डर सोसायटी (बीकेपी-पीडीएमडीएस) आणि दीनानाथ मंगेशकर हॉस्पिटलसह संयुक्तपणे या कार्यक्रमाचे आयोजन करण्यात आले होते. याप्रसंगी केईएम हॉस्पिटलमधील न्यूरोसायन्सेस विमागाचे प्रमुख डॉ.प्रदीप दिवटे, मेंद्विकारतज्ञ डॉ.श्रीपाद पुजारी, मुंबई सपोर ग्रुपमधील कार्यक्रम व्यवस्थापिका कविता निंबाळकर, केईएम हॉस्पिटलच्या न्यूरोसायन्सेस विभागातील समन्वयक न्यूरोसायकॉलॉजिस्ट जेनिन गार्डा, केअर मॅनेजर विभागाच्या ॲडमिन ज्योती मेहता, केईएम व डीएमएच सपोर्ट ग्रुपच्या फिजिओथेरपिस्ट व समन्वयक डॉ.निकिता छाजेड आणि वॉलेंटिअर संपदा पाध्ये, बीकेपी-पीडीएमडीएसच्या वरिष्ठ मानसोपचारतज्ञ नेहा राणे आणि मानसोप-चारतज्ञ शिबानी खन्ना आदी मान्यवर उपस्थित होते.

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jari gave information at
medication and treats Vasumita Desai was the pere for the event, wh Nikita Chhajed and Se Padhye proposed the thanks.

Parkinson's Disease port Group Programs are conducted free of charge by BKP-PDMDS through sev-BKP-PDMDS through sev-eral centers in India. It is ausilis-faceted program which mainly consists of occupa-tional and speech therapy, physical exercise (physio-therapy), laughter therapy, dance and music, movement dance and music, movement therapy along with proper therapy along with proper nutrition, yogs-pranayama, doctor's lectures and aware-ness sessions on other com-mon brain diseases among senior citisens. Guidance is provided. These activities are conducted free of cost by resignal emofacularies of turn ned professionals of BKP

PD support group sessions are conducted weekly at KEM Hospital on Wednesdays and at DMH on Saturdays.



दीनानाथ मंगेशकर रूप वतीने जागतिक पार्किन्सन कार्यक्रमाचे आयोजन केले याप्रसंगी केईएम रुग

(बोकेपी-पीडीएमडीएस)

स्नणांकड्न नृत्य-गायनाच्या सादरीकरणाद्वारे जनजागृती पुजारों, कविता निवाळकर, जे विशेष कार्यक्रमाचे आयोजन करवात आले होते. विशेष कार्यक्रमाचे अपोर्त केर्यम होस्पटल केर्य जातिक पाकित्सम हिनानिमन पुजारों, कविता निवाळकर, जे विशेष कार्यक्रमाचे आयोजन करवात आले होते. केर्यम होस्पटल ज्योती मेहता, डॉ. निकिता क्या ज्योती महता, डॉ.निकिता छात्रे पुणे,बी.के.पारेख पार्किन्यन हिसीज औड मूख्स्पेट डिसऑर्डर सोसायटी पाइटे नेवा गारे जाते हिसी हिसीज कार्यक्रमाचे आयोजन करण्यात आल हात. कहण होता स्थापित हिसीज औड मूख्स्पेट डिसऑर्डर पाच्ये, नेहा राणे आणि शिबा (बीकरी-पीडीएमडीएस) आणि दीनानाथ मंग्रेशकर हॉस्पिटलसह अपने स्थानाथ संग्रेशकर हॉस्पिटलसह (भाकपा-भाडापगडाप्तः) आण् भागात्म नामान्यः स्टब्स्यः संयुक्तपणे या कार्यक्रमाचे आयोजन काण्यात आले होते. याप्रसंगी सबुक्तरूप या कायक्रमाय आयाजन कारण्यत आत हात. यात्रस्या केर्रएम हास्पिटलमधील ज्यूरोसायन्त्रेस विभागाचे प्रमुख डॉ.प्रदीप कड्यम सास्वटात्म्याल न्यूरासावानात व्यवस्थात प्रवासीत कार्यक्रम रिवटे, मेट्विकारतम् डॉ.बीपाट पुजारी, मुंबई सपाट पुचमधील कार्यक्रम १८वट, भट्रावकारतम डा.जापाद पुजार, भुवड सपाट प्रपमाल कापक्रम क्रवस्थापिका कविता निवाद्यकर, केडेएम हॉस्सिटलच्या न्यूरोसायन्त्रेस क्रमण्यापका कावण स्वयंक्रक, करून हाएक्टलका जुल्लास्वर विभागातील समन्वयक व न्यूरसायकॉलाजिस्ट जीवन गाडी, केअर संनजर अवनामातार सक्त्यक्षक व न्यूरसावकारसावनर आवन गाउन, काजर बाजर विभागाच्या अँडमिन ज्योती मेहता, केईएम व डीएमएच सपोट सुपच्या ावमागाच्या अञ्चल ज्याता महताः, क्यूपम् व अत्युष्य समार अञ्चल वित्तिओदेरियस्य व समन्वयक् डॉ. निकिता छात्रेड आणि वॉलॅरिअ संपदा ्रेस्ती-पीडीएमडीएमड्या वरिष्ट मानसीप्यास्तक नेहा राणे आणि े ज्वा आदी मान्यवर उपस्थित होते. या कार्यक्रमात पार्किन्सन्स दिनानिमित्त पुण्यातील केईएम हॉस्पिटलमध्ये विशेष कार्यक्रम हक्ते

पूर्वः, पुण्यतीत केद्राम श्रीमस्टल वेथे
व्यक्तिकः पर्वक्तिमस्त दिश्यविम् विक्रियः
कार्यक्रमाने अस्तिकः स्वरूपात आहे शेतेः
केद्राम श्रीमस्टल पूर्वः के स्वरूपात आहे शेतेः
केद्राम श्रीमस्टल पूर्वः को के प्रारेख पर्वक्रमाने
विश्रीयः औह पुरुष्टिकः श्रीकः सीमस्टल (विभ्रीनो -विक्रियसीयाः) आणि दीनाताव वर्षात्रका सीमस्टलकः संवुक्तपने वा कार्यक्रमाने आरोजन कार्याम आहे शेतेः वाप्रमाने केद्रियः सीमस्टलकारील कार्यक्रवाचे आशीवन मरण्यात आले होते. वाप्तांची केईएस हाहिंदाट्सभीका न्यूरीमावक्री माणाचे प्रमुख डॉ. क्टीप दिन्दे, वेद्वीविक्ताता हो ब्रीच्य दवती, कुंब सर्चेट पुस्तपील वार्यक्रम कार्यक्रमाधिक कर्याता विकासक, केईएस हाहिंदाटाला न्यूरीमावनीस विकासील सम्प्रवास व

आदी उपस्थित होते.

्वित्रावकोशाजिकः जेनेन गार्ड, कञ्च प्रोत्ता विभागाच्या अंडीवन क्यांचे वस्ता, क्रेड्राण व डीपक्षण मर्गाट द्रश्यका क्रिड्राण्याच्या अस्त्रावक ज्ञां विकता प्रारोड आणि वालिटिआ प्रारोड आणि वालिटिआ भावक आण बल्लिटआ संपदा पाच्ये,बीकेपी-वीडीएयडीएसच्या बरिष्ठ वान्य, बाक्या मानसीपचारतज्ञ नेहा राणे आणि मानसीरचारतज्ञ निवानी खत्रा अस्त्री मानकस यशिष मानारंपनाता प्रावाना सना अस्य भाननार उर्वित्ता होते.या कार्यक्रमात केर्डपन प्रावित्तात व गीनाया गोतावर शॉफ्टरत वर्वता सन्देश पुरुष्टा पुरुषे ६० स्टर्सकी कृत-गामनाच्या स्वद्रतिकारवार्थ प्रित्तारिक्त स्वती अस्त्रामुक्त केर्ना, स्वतानी रूपानी स्वतानारं स्वतानारं अस्ति। करणा, करवामूम करणा, करमाणा करणाना सर्पोर्ट हुनकरोबर जोडले गेल्यानंडरचा अनुभव

व त्यान्त प्रालेखा त्रीवनातील बदलाकका वर्त बनाम कात केले केव्य हॉस्प्टिलक्पील न्यूग्रेसार विभागाचे प्रमुख डॉ.प्रदीप दिवरे महणाले की विभागाचे प्रमुख डॉ. प्रदोष रिस्ट ध्वामते की, कालांतराज बाहत जाणावां मा विकासमध्ये कालांतराज बाहत जाणावां मा विकासमध्ये मा वामांत्रमा आणि कालांच्यारे निर्माति होती. राज्या डॉल भागांच्या परिस्ताव होती. वाबाताज्ञां स्वाप्ति वाबाताज्ञां कालांच्यां कालां वावात, न्यामध्ये मुख्याले श्रीत्रमाच्ये कालांच्यां होती. राज्यां हात्यांच्यां चंद्रपणे, शार्विका संस्ताव विचार्ति, बाताचाल चंद्रपणे, शार्विका संस्ताव विचार्ति, बाताचाल चंद्रपणे, शार्विका संस्ताव विचार्ति, बाताचाल चंद्रपणे, शार्विका संस्ताव विचारित होती. येथे, अर्थिर छड्ड होने (क्रीक्रिम),स्नाय कडक होने,बोलकात बदल होने इत्यादीचा समावेश असनो

पार्किन्सन्स दिनानिभित्त पुण्यातील केईएम हॉस्पिटलमध्ये विशेष कार्यक्रम

पुने : पुन्धारीत बेर्ड्स शॉमिटन केवे जारीक पाकिताल दिवसिंग विशेष कर्णकाले अधीक करावार आने पर्किनम दिसीत और पृथ्मेंट दिसओईट सोमावटी (बीकेपी-पीडीएपडीटस) अस्मि टेसावय मोठकर हमियटमस्ट संयुक्तपरे या बार्गक्रमचे प्राचेत्रम बरम्बार आने assist labor afficiently न्त्रांसावनंत्र विश्वापाचे प्रमुख हो. प्रदोष दिख्ये, वेद्विकारता हो.बीपाद पुजारे, पुंची वार्चेट पुजायेल बार्वका स्वामार्थिका कवित निवादका, स्वीत्म शॅनिस्टारच्या न्यूरेसायचीम विपानशैल सम्बद्धम च न्यूरेसायकीलीजनः जैनित end, wan iften finerrise steller



ज्योती येहता, वेईएम व डीएमएम सपेर्ट पुरस्का विजिञ्जेकेरीयत च सम्भवनक र्श निका सामेर आणि बर्निट्स संबद्ध पान्ने,बीक्ट-विद्यंग्यद्वीतरम्ब चीत्र चनमोरकातत्र नेता राने आणि मसोप्पाल विश्वनी खा आहे मानाम उपनिधा होते

का कार्यक्रमान केल्प मंत्रियान

व दोनामाध मरिताबन हॉनिपटल बेचीर सपोर्ट प्रपच्या सुमते ६० सहस्यांनी enghamugik (क्रिएटिक चेली) जनजाती केली separation thinks this this वाजनः जोडले गेल्यानंतरचा अनुभव व बदलाबाब) अधने प्रतेशन बाना केले.





Lecture series on infectious diseases

KEM Hospital organised a series of lectures on infectious diseases. Dr Bharat Purandare, consultant ID physician, Deenanath Mangeshkar Hospital, spoke on "Vaccination in Adults" covering schedules and dosing of various vaccines. Dr Parikshit Prayag spoke on "Antibiotics Boon or Bane?" and covered the need for use of antibiotics judiciously. He stressed the need for antibiotic stewardship. The lecture series was attended by over a hundred doctors, residents, nurses and managers.





Twelfth DASII Workshop

The 6-day DASII (Developmental Assessment Scale for Indian Infants) workshop was held between 27th March and 1st April 2023. This workshop has been held every year for the last 12 years. This test is the equivalent of the IQ test in children below 3 years of age and was developed in our TDH Centre by late Dr. Pramila Phatak. It is the Indian adaptation of Bayley Scales of Infant Development, which is used all over the world. We are the only center which trains physicians and psychologists in this test.

The workshop was attended by neonatologists, pediatricians and psychologists from all over India. They really appreciated the hands-on training given by us.









Reliva Supported Saree Run

Event was organised by JJ group and TANEIRA "Saree Run" for women empowerment. It was an event to create fitness awareness among women to encourage them to focus on themselves. First-aid and physiotherapy services were provided by the Reliva physiotherapy team to aid the injured and the weak people to help them complete their goal. Women of the age group between 5 and 87 years were covered.









Addiction Free Youth

An Initiative by KEM Pune & NCB Unit 1

KEM Hospital Pune in association with Narcotics Control Bureau (NCB) unit 1, Pune at Shivaji Maratha College held an event to educate youth about the dangers of addiction. Around 100 to 120 students attended the event to learn more about the risks associated with addiction.

The event was moderated by Dr. Sucheta Agarwal, Consultant Psychiatrist KEMH, Pune and Dr. Sanad Pawar, Senior Resident at the Department of Psychiatry at KEMH, Pune. Mr. Lakshman Dhengale, Police Inspector NCB Unit 1, Pune also attended the event to provide his expertise on the matter.

The event discussed various types of addiction, the reasons why people get addicted, and the possible solutions for dealing with addiction. The experts also shared tips on how to stay away from addiction and how to help those who are already addicted. The event concluded with a Q&A session, where the participants were able to ask questions and get further clarifications from the experts.

The event was an eye opener for the students, providing them with information and knowledge that will help them lead an addiction-free life. The joint venture between KEM Hospital and NCB Unit 1, Pune is a step in the right direction towards creating an addiction-free youth.









First Aid Training Session for Non- Clinical KEM Staff Members





















OSA Programme

Sound and Peaceful sleep is essential for life. Acute or chronic sleep deprivation affects the quality of life. As obesity becomes more prevalent, so does the prevalence of obstructive sleep apnoea. It has been estimated that 40 - 50 % of moderate to severe OSA remain undiagnosed. Untreated OSA has got serious consequences on health including increased risk for AMI, pulm hypertension, resistant hypertension, metabolic and neurocognitive complications.

The health talk on "Obstructive Sleep Apnoea (OSA)" was organised on 15th April, 2023 to increase the awareness of OSA in health professionals. The session was conducted by Dr. Smita Dhadge (Sleep Specialist), Dr. Neelam Vaid (ENT Surgeon) and Dr. Swapnil Kulkarni (Chest Physician).

The programme started with Dr. Neelam Vaid's lecture on "Evaluation of a snoring patient" It was an academic feast to listen to her as she shared of her vast experience in the field. She talked about history to be taken and general & specific examination to be carried out in a patient who attends the clinic with complaints of snoring. She also highlighted about the advanced investigations like sleep MRI & DISE (Drug induced sleep Endoscopy).

Dr. Smita Dhadge talked about "Diagnosis & Management of OSA". She covered all the practical aspects about sleep study procedure, report generation, treat modalites of OSA.











EVENTS AND ACTIVITIES





She explained in detail- How to read the sleep study report, how to decide about PAP therapy and what are different options available for treatment of OSA.

Dr. Swapnil Kulkarni spoke about complications of OSA. He shared the various clinical studies and their results to explain complications of untreated OSA on various systems. The main attraction of this programme was live demonstration of sleep study procedure, various models of CPAP & BiPAP & different types of masks which are available.





DR. BELA GANDHI

MD (Paediatrics),
M Sc Allergy (UK) has
joined us as an Associate
Consultant (Allergy &
Immunology) in the
Department of Paediatrics.

OPD Timing:
Every Monday & Friday

01:30 PM - 03:30 PM



DR. HEENA SHAH,
MD (Pathology)
has joined us as an
Associate Consultant
Histopathologist on a
part-time basis.



DR. SURESH JAIN,
MS (General Surgery)
has joined us as a
Panel Consultant
GI Endoscopist &
Gastroenterologist.







Rotary Best Social Worker Award

In a recently held award function by the Rotary Club Pune Central Ms. Jyoti Pillay of the KEM Hospital Department of Medical Social Work received a 'Vocational Excellence Award' (along with five other individuals doing excellent work in their respective fields). The award – a citation "for her unique & selfless work in the field of disease treatment" was presented to the winners by Mr. Nitin Desai of Desai Brothers.

'Prerana Support Group' comprising patients and family members of cancer afflicted children received special mention as did Jyoti's efforts to consistently raise large donations for her patients treatment

Some of our invited cancer afflicted patients and their family members shared their experiences about their fight against the dreaded C and expressed their grateful thanks to the Rotary Club for its timely and invaluable financial support .

The Department of Medical Social Work KEM Hospital, Pune

49th, Annual Conference of the Research Society of Byramjee JeeJeebhoy Government Medical College and Sassoon General Hospitals, Pune.

on 18th and 19th APRIL, 2023.

DR. KARTIK C. BALPANDE,

Post DMRD, DNB Resident in Department of Radiodiagnosis and Imaging, got an award in the category of Best Interesting Case.

His topic was: Role of Dot in Circle Sign on USG and MRI in cases of Mycetoma. There were total 54 Interesting Cases presented in the Conference.

DR. SRUTHI V.

Second year Primary DNB Resident In the Department Of Radiodiagnosis and Imaging. She got Second prize of all the Oral Paper Presentations of the Conference, and Roentgen Trophy for Best Radiology Paper presentation.

Her topic was: Lung involvement on HRCT between vaccinated and non vaccinated COVID 19 patients in tertiary care hospital.

There were total 170 Oral Papers presented in the Conference.

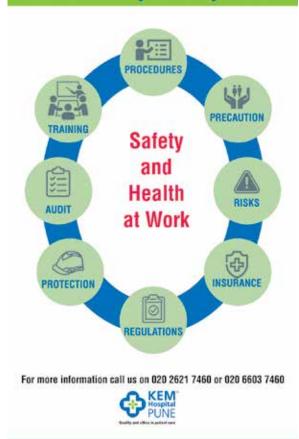


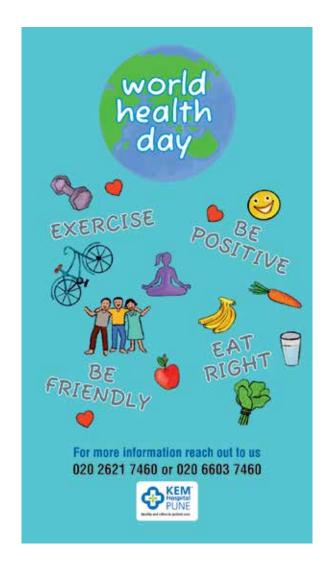






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WORLD PARKINSON'S DAY



For more information reach out to us 020 2621 7460 or 020 6603 7460











