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International Collaboration

Saumitra Rawat

From the Desk of the President, ASI, **Delhi State Chapter**



Dr. Pawanindra Lal Executive Director, NBE. Director Professor of Surgery & Chairman MAS, MAMC

Dear Members,

Firstly wishing you all a very happy new year. As we enter 2021, we hope and pray that this year sees us through the end of the pandemic and allows us to resume normal working in our professional and personal lives. The vaccination against COVID has started and the second round has also started from 13th February 2021. This would give us added protection while we continue to use the masks and follow social distancing and hand hygiene as additional guards.

The chapter organised the flagship post graduate course SCOPE on a virtual platform from 7-10 January 2021 and this was a resounding success with more than 500 surgical trainees as participants and more than 100 faculty members who delivered the case based discussions. I would like to particularly mention Prof. Anubhav Vindal, Prof. Nikhil Gupta and Dr. Tarun Mittal who worked tirelessly to make it a resounding success.

The chapter has continued to host monthly clinical meetings and I congratulate all the members of the executive committee who have helped to coordinate the activities. I hope that very soon physical format of monthly meetings will be started but we will continue to use the web based platform actively for teaching activities.

I am thankful to the membership to have elected me as your President and I hope I have delivered the mandate of my duties to the best of my abilities and to the best of your expectations. I look forward to handing over the mantle of responsibility and the collar to the next incumbent Prof. Anurag Srivastava at the next possible physical meeting. Thank you for this opportunity and singular honour to serve the membership and the Association. I thank Dr. Tarun Mittal for his dynamic support at all times which is critical to the running of the office of the association. I also thank each and every member of the executive committee who stood by me as rock solid support in all the decisions taken during critical phases of the pandemic and for their unanimous support. I also congratulate Dr. Sumit Chakravarti for bringing out the "Scissors" most regularly and raising it's standards with every subsequent edition.

Long live ASI and Delhi Chapter of ASI!

Pawanindra Lal

From the Desk of the Secretary, ASI, Delhi State Chapter

Dear friends,

We continue to endeavour for the normalcy of the chapter activities. "Thanks" will be just a word to express my gratitude towards the guidance of our senior members of the chapter who functioned like a beacon to sail us through these tough times.

We successfully completed all the scheduled monthly educational activities of the chapter till date and look forward to an active year ahead for our chapter.

With the government's vaccination drive we anticipate for a brighter and safe future ahead for all of us and our family.

Looking forward for your constant guidance and support as always.

Stay safe

Regards



Dr. Tarun Mittal

Are General Surgeons Worth Fulfiling Need Of Surgical Treatment During COVID 19 Pandemic?

General surgeons are facing tough competition with super speciality branches .The trend has taken new heights since the beginning of current century . All super speciality branches originated from brain of hard working ambitious surgeons who gave up their day and night concept to get excellence in certain field and this was possible after investing years of service practising general surgery.

After finishing three years of residency in general surgery almost 100% residents rush for super speciality course exams. The old policy of senior residency will become obsolete in coming time soon. It seems general surgery has become so easy to give it more than three years time. The question of worthiness need to be answered after thorough introspection.

Nowhere in India super specialities in government and private sector run 24 X7 emergencies, usually they are on call. It means the first responders are general surgery residents only. In resource poor country like ours it is prudent to train our residents in such a manner to handle cases pertaining to general surgery as well as other specific branches so the GOLDEN HOUR is utilised well.

Change is the rule of nature. Humans are always thriving for better and surgeons always want best. Hope we as teachers leave no stone unturned to create best surgical residents taking lessons from COVID pandemic. When all surgeries were stopped general surgery residents were working round the clock. A big salute to all of them.

Together all of us work towards retaining the originality of general surgery.

Dr. Kusum MeenaProfessor of Surgery
LHMC, New Delhi

Perspective Of a "Second Victim" – A Silent Sufferer

With time, all as a surgeon start believing that in spite of your best intention and effort you can't always be hundred per cent certain of the result. In another words, you can't really choose the desired outcome. Worst of all, sometimes the consequence of your action performed with complete honesty and sincerity can be so devastating that you start wondering whether you made the right choice in taking up surgery as your profession. It sounds very pessimistic and gloomy but God forbid, when things go wrong and even your own fraternity starts cornering you, soon you start struggling on your own with limited potential of human mind. It is needless to say that there is no dearth of these sort of incidents and probably all of us must have faced or witnessed such situations once or twice in our long careers.

There is no doubt that the main sufferer here is the first victim i.e., the patient and his/her family. For them it may be like losing everything or loss of the world. Our system, social structure, news media and all the legal framework revolves only around the primary victim. But nobody realizes that how much undue guilt and emotional turmoil (which is directly proportional to the harm of the victim) is faced by the surgeon which may haunt him/her throughout his entire life. In view of the severe negative impact, varying from mental trauma, humiliation, harassment in the form of enquiry, legal battle, loss of reputation and sometimes even job, there is nothing wrong in calling such surgeon a "second victim." The term "second victim" in this context was first used in 2000 by Dr Albert WU. Even though everybody does not agree with the usage of the term "second victim" but so far, no alternative term has been coined.

Career as a medical professional and especially surgeon is not a simple cake walk. For a surgeon nothing is more rewarding if the patient goes home happy and fully satisfied. But in spite of the best of intentions, mistakes are bound to occur and, in this context, surgeons are more prone and vulnerable than other medical practitioners like physicians. In the present era of social and electronic media, the slightest error on the part of the surgeon may blow the thing out of proportion and makes it worse. Gone are the days when doctors were treated like God and people used to humbly accept their action and advice with folded hands. In the current situation of pragmatic world everyone tries to play the victim and derive full advantage from any awkward situation.

Also, with time peoples' expectations from the doctor too have grown in direct proportion to their knowledge and awareness and that is why they are not ready to condone even an inadvertent mistake or error committed by the doctor. They refuse to realise that at the end of the day, the surgeon is also a human being and as another human they are also prone to commit an error. Hospital management also finds it convenient to put all the blame on the doctor and shrug its shoulder from all of its responsibility. This attitude of victimizing the doctor straightway is more rampant in today's corporate culture where primary target is business and eye on profit. This is the reason why in the event of any mishap there is a tendency to hide and sweep this under the carpet. This attitude is disastrous not only for second victim but it keeps open the door for ongoing suffering faced by the first victim too.

First and second victim are interrelated and do not exist independently alone. Our society must see both of them together with one eye... rather than victimising one and demonising other. So, unless we take care of this second victim, it is not possible to address this gigantic problem. We must create an environment where everybody fearlessly comes forward to notify the mistakes so as to prevent them in future. First responsibility to handle the second victim lies with their colleagues and co-workers who need to support him/her emotionally and morally rather than cornering and stigmatizing the victim. Second victim should be given break from work along with professional help and counselling. Clinical incident stress debriefing (CISD) customized to individual needs is also very important in reducing trauma of the second victim.

Dr. Jitendra Kumar

M. S, F.A.I.S, F.I.A.G.E.S, F.M.A.S, F.A.L.S (Metabolic & Bariatris Surgery) Head, Department of Surgery, Dr. B.S.A. Medical College & Hospital, Rohini, Delhi

"SURGICON 2020"

The annual conference of the Delhi State Chapter of Association of Surgeons of India: **SURGICON 2020** was held from **06**th- **08**th **November 2020** (Friday to Sunday) on a virtual platform amidst the ongoing COVID 19 pandemic. The conference was hosted by the **Department of Surgical Disciplines**, **All India Institute of Medical Sciences (AIIMS)**, **New Delhi**. The theme for the conference was **Rē** *vizitSýnora tis Genikís* **Cheirourgikís**, i.e. revisiting the frontiers of General Surgery. Keeping in line with the theme, the scientific deliberations covered major sub-specialities of the general surgical armamentarium.

Highlight of the conference was inauguration, where none other than Prof P Raghu Ram, President ASI was our chief guest. The Guest of Honor was Prof Randeep Guleria (Honorable Director, AIIMS Delhi)





As a token of appreciation, we announced the name and contribution of our DSC members those who made the whole surgical fraternity very proud. We also announced the name of those members who helped us in pursuing our goal of imparting knowledge to postgraduates and our esteemed colleagues by contributing in organizing ASI Skill course, Webinars, Endorsed meetings & CMEs and also doing free patient awareness programs. Inaugural function was held on November 6, 2020 at 4.15 pm.

Despite the ongoing COVID 19 pandemic, there were around 250 delegate registrations with 30 teams registering for the participation in the quiz. Around 80 abstracts were received for various categories as mentioned above.

HIGHLIGHTS

DAY 1: 6 NOVEMBER 2020

Competitive Paper session

Free oral paper session

Competitive E-poster session

Golden Jubilee Oration

Inaugural function

Symposiums

DAY 2:7 NOVEMBER 2020

Competitive paper session

Free oral paper session

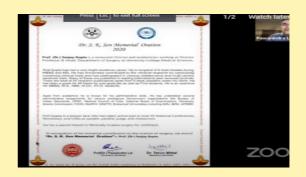
Competitive E-poster session

Quiz Preliminary Session

Dr. S K Sen Oration

Symposiums





DAY 3:8 NOVEMBER 2020

Symposiums

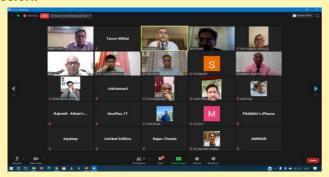
Dr. TJ Aggarwal Oration

General Body Meeting & Election result

Quiz Final session

Prizes were given to awardees like President Medal, Travelling Fellowship award, Rolling trophy of the best presentation of the institute.

There were three orations, a surgical quiz, free as well as competitive oral paper and competitive poster session.





The following delegates stood meritorious in the various sections as detailed below:

Competitive e-poster:

FIRST: Dr. Komal Gupta, AIIMS Delhi - A rare case of COVID 19 related stomach gangrene after an abortion: a case report and literature review

SECOND: Dr. Ishita Chugh, UCMS & GTBH - Co-existence of xanthogranulomatous cholecystitis and carcinoma Gall bladder

THIRD: Dr. Raghav Yelamanchi, ABVIMS & Dr. RMLH - Spontaneous splenic rupture: a rare complication of acute pancreatitis

Competitive Oral Paper

FIRST: Dr. Venu Gopal, AllMS, Delhi - A RCT for evaluating the effect of PRP on wound healing in chronic diabetic foot ulcers

SECOND: Dr. Prashanth, LHMC - Direct methylene blue cholecystocholangiography for assessment of intraoperative biliary anatomy during laparoscopic cholecystectomy

THIRD: Dr. Dhruv Gupta, ABVIMS & RMLH - Comparison of Absorbable versus Non-Absorbable Tacks for Fixation of Mesh in Laparoscopic Midline Anterior Abdominal Wall Hernia Repair : A Randomized Study

Free Oral Paper:

- 1. Dr. Komal Gupta, AIIMS Delhi A comparison of NIFTP & FVPTC
- 2. **Dr. Janitta Kundaikar, LHMC** Effect of neoadjuvant chemotherapy on steroid hormone and Her2 neu receptor status in breast cancer patients
- 3. **Dr.Hethuchebrolu, VMMC & SJH** Breast volume measurement as a predictor of cosmetic outcome and patient satisfaction following oncoplastic breast surgery for breast cancer

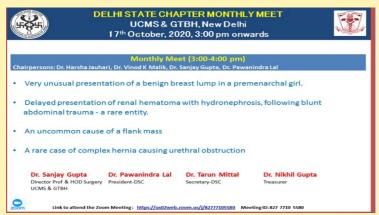
Quiz:

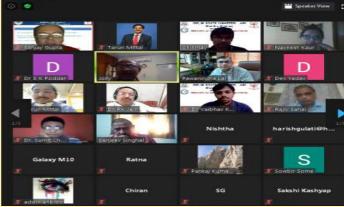
- 1. FIRST: Dr. Priyank Bhargava & Dr. Harshit Agarwal : AIIMS, Delhi
- 2. SECOND: Dr. Gopal Puri & Dr. Komal: AIIMS, Delhi
- 3. THIRD: Dr Naveen & Dr Raghav: ABVIMS and RML DELHI

Chapter Activities

OCTOBER MONTHLY MEETING

The October monthly meet of DSC was organized by UCMS & GTBH on October 17, 2020 (Saturday), 3 to 4 pm.







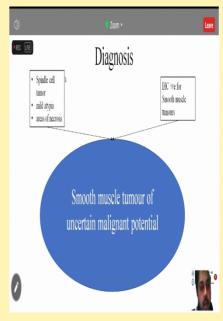


DECEMBER MONTHLY MEETING

The December monthly meeting of DSC was held in ESI-PGIMSR Hospital, Basaidarapur, New Delhi on December 26th, 2020 (Saturday), 3.00 pm - 4.00 pm on virtual mode.







"SCOPE 2021"

Surgery Clinical Oriented Post-Graduate Examination course i.e. **SCOPE** has become one of the most popular academic programs exclusively dedicated to the exam-oriented training of the post graduate students. Its popularity has uniformly spread across the country. The COVID- 19 pandemic threw new set of challenges before us in form of lockdown and travel restriction apart from the fear of transmission of COVID-19. But keeping up with the spirit of overcoming all challenges by careful planning, **SCOPE 2021** was organized flawlessly under the aegis of Delhi State Chapter of ASI and leadership of Prof. Pawanindra Lal. The program was organized as webinar over a period of four days starting from 7th Jan 2021 till 10th Jan 2021. The program was based on live online case presentation by post graduates candidates from different institutes of the country.





Surgery Clinical Oriented Postgraduate Examination Course

Delhi State Chapter, ASI

SCOPE COURSE - 2021 (VIRTUAL)

January 7th -10th , 2021 4:30 pm to 9:30 pm (4 days program)

Highlights of the course

- Case presentation
- Mock examination using clinical scenarios
- · Attempting an examination both theory and practical-the tips and tricks
- Short operative instructional videos for operative surgery
- Interactive question answer session ["stump the chair"]

The sessions were divided based on the organ system. A total of 8 sessions spread over four days were organized with 4 cases presentation in each session. Thirty-two clinical cases were presented overall with involvement of over 150 dedicated senior faculties who whole heartedly participated and supported this endeavor. There were sessions on clinical examinations by experts and video demonstrations of the surgical procedures. Sessions on Radiology, instruments and ward rounds were included in the program.

Marks were awarded by examiners for each clinical case presentation. The student with maximum score for each session were awarded with cash reward of Rs 5000 each during the valedictory function which was attended by the ASI President Prof. Dr. Abhay Dalvi. The student who answered the Examiners favorite question were awarded cash prize of Rs 3000 each.

The SCOPE 2021 virtual course saw registration of more than 550 postgraduates with attendance of approx. 500 postgraduates even during the late-night sessions with active discussions live as well as in Q and A sections.



We are thankful to all the postgraduates who participated, the presenters and the faculties for making this program a huge success. The SCOPE 2021 was an intensive program of high value academic content of 28 hrs was meticulously planned and ably organized by the organizing team under the leadership of Prof. Pawanindra Lal ably supported by Prof. Nikhil Gupta, Prof. Anubhav Vindal, Dr. Anmol Ahuja and whole of the executive of DSC-ASI.

We take this opportunity to thank all the eminent Faculty and the Executive for constant support and participation.



Dr. Tarun Mittal

"Vaccines For Covid-19: The Way Forward For Surgeons"

Dr. Suhas Agarwal, Senior Resident, PGIMSR & ESIC Model Hospital, New Delhi

COVID 19 pandemic has been a factor leading to long lasting and substantial effects on surgeons as well as surgical patients. While the tally of COVID 19 cases was rising, the surgical workforce faced a seemingly steep uphill task of discharging the best of surgical care in terms of dealing with issues relating to:-

- 1) protection of both surgeons and patients,
- 2) maintenance of safe and efficient surgical care,
- 3) detrimental COVID and non-COVID effects on surgical patients,
- 4) financial burden on patients and health care systems,
- 5) meeting the COVID induced shortage of surgical hands
- 6) alleviating the psychological impacts being faced by all.

Adoption of universal precautions is known to be best safety measure^{1,2,} and therefore, the first thing to be taken care of while delivering optimum surgical care is a healthy workforce that is functional round the clock and for which adequate personal protective equipment(PPE) is a necessity - something which, given the demand versus supply being heavily titled in favour of the former, seemed nearly impossible in the initial days of the pandemic but with the coming forward of more and more helping hands, better protection is now available to surgeons. Likewise, following infection prevention guidelines issued by MOHFW, GOI³ time to time, add up to limiting the risk of spread of COVID 19^{1,2}. The most problematic concern for surgeons after personal protection has been the spread of aerosols in most of the surgical procedures as aerosols are the most notorious of all the modes of spread for COVID 19 which led to the restricted number of surgeries, especially endoscopic and minimally invasive procedures. Hence, came the need of universal smoke evacuators to get rid of the aerosols and smoke plumes generated in minimally invasive procedures and by electrocautery in order to avoid exposure of aerosolized tissue to health care personnel ², however, the absence of these in public hospitals still happened to be a limitation for surgical procedures.

Since elective surgeries were largely abandoned in wake of the scare generated by the pandemic, one of the major challenge was to triage the patients based on the emergency and urgency of the required surgical intervention. Moreover, rationing of manpower led to the manning of operating stations with fewer hands and thereby not only straining the already stretched healthcare system but also potentially jeopardizing patient care. However, now that PPE kits are available commensurate with their demand and also testing for SARS-CoV2 is widely available, surgeons need to tighten their belts to compensate not only for the backlog created by the delays in elective surgeries but also prevent any complications that may arise thereof. This pandemic has not only hindered health care but has also set medical education back by hindering the training of young budding surgeons due to the suspension of training programmes, in addition to medical services; having been removed from clinical rotations, losing clinical exposure and experience in operating upon the patients due to

shutdown of elective OTs, losing confidence and touch leading to damages much beyond repairs, students have faced the worst in their training. Moreover, limited surgical exposure and increased risk of acquiring COVID infections due to requirement of close doctor-patient contact while operating has created a sense of anxiety and an atmosphere of depression for the surgeons with loss of credentials and challenging the calibers of the surgeons.

This pandemic has taken lives of more than 500 doctors as stated by the Indian Medical Association (IMA) till date. Fortunately, the year 2021 has started on a positive note of hope and enthusiasm to live life fully due to the advent of new vaccines showing promising results. As of January 2021 India, has started the largest vaccination drive in the world using two vaccines approved by the national regulatory authority for emergency use, millions of healthcare workers will be vaccinated across the country since the launch of COVID-19 vaccination drive on 16th January 2021.

Furthermore, the rapidly falling incidence of new cases across the country has been widely appreciated on various scientific and public health platforms and has given hope for restoration of life to the pre-COVID times in the days to come. This should reflect in the surgical practice as the risks to healthcare personnel associated with COVID is likely to be grossly reduced due to vaccination and with more trained manpower available to the system, the backlog in providing treatment will be cleared at a faster pace. Similarly, cost of surgical care borne by the patient will be lesser. Young surgeons are anticipated to be back to practical surgical learning as more and more patient doctor interaction, more number of surgeries and clinical teachings will be available, thereby helping in nurturing well-trained and confident surgeons. Thus the potential benefits of vaccination shall far outweigh the costs associated with the disease and so it is in everyone's best interest to believe in the word of science above that of rumours propagated by naysayers with no understanding of the former and, opt for vaccination to keep the evil at bay.

References:

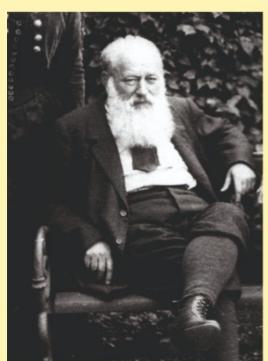
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- 2. Livingston EH. Surgery in a time of uncertainty:a need for universal respiratory precautions in the operating room. JAMA. 2020;323(22):2254-2255.doi:10.1001/jama.2020.7903
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2021: Beacon of Hope



Revisiting The Masters....

Christian Albert Theodor Billroth (26 April 1829 - 6 February 1894)

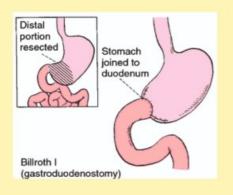


An Austrian surgeon and amateur musician.

As a surgeon, he is generally regarded as the founding father of modern abdominal surgery. As a musician, he was a close friend and confidant of Johannes Brahms, a leading patron of the Viennese musical scene, and one of the first to attempt a scientific analysis of musicality.

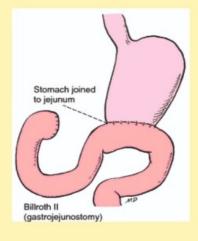
An early adopter of the "white coat" (as shown in Seligmann's c. 1890 painting), Billroth was directly responsible for a number of landmarks in surgery:

He conducted first esophagectomy (1872), first laryngectomy (1873), first surgeon to excise a rectal cancer and by 1876, he had performed 33 such operations.



By 1881, Billroth had made intestinal surgery seem almost commonplace. His most famous accomplishment is unquestionably the first successful gastrectomy for gastric cancer. On January 29, 1881, after many ill-fated attempts, Billroth performed the first successful resection for antral carcinoma on Therese Heller, who lived for almost 4 months and died of liver metastases. He accomplished this operation by closing the greater curvature side of the stomach and anatomizing the lesser curvature to the duodenum, in an operation that is still known as the Billroth I to this day.

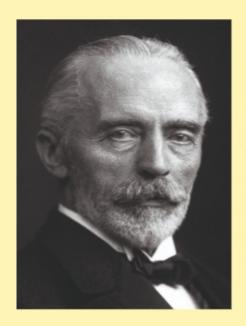
Billroth I, more formally **Billroth's operation I**, is an operation in which the pylorus is removed and the distal stomach is anastomosed directly to the duodenum. The surgical procedure is called a gastroduodenostomy.



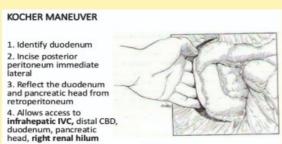
Billroth II, more formally Billroth's operation II, is an operation in which the greater curvature of the stomach is connected to the first part of the jejunum in end-to-side anastomosis. This often follows resection of the lower part of the stomach (antrum). The antrectomy (resection of the antrum) is not part of the originally described procedure. The surgical procedure is called gastrojejunostomy.

....Revisiting The Masters

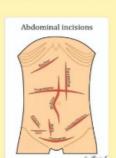
Emil Theodor Kocher (25 August 1841 - 27 July, 1917)



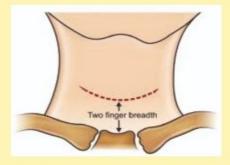
A Swiss physician and medical researcher who received the 1909 Nobel Prize in Physiology or Medicine for his work in the physiology, pathology and surgery of the thyroid. Among his many accomplishments are the introduction and promotion of aseptic surgery and scientific methods in surgery, specifically reducing the mortality of thyroidectomies below 1% in his operations. He was the first Swiss citizen and the first surgeon to ever receive a Nobel Prize. He was considered a pioneer and his leader in the field of surgery in time.



Kocher manoeuvre – a surgical manoeuvre to expose structures in the retro peritoneum



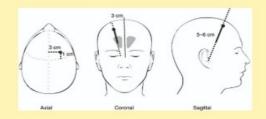
Kocher's subcostal incision - Cholecystectomy



Kocher's collar incision - Used in thyroid surgery Kocher's middle thyroid vein Kocher's test for tracheal compression



Kocher's forceps - a surgical instrument with serrated blades and interlocking teeth at the tips used to control bleeding



Kocher's point - common entry point for an intraventricular catheter to drain cerebral spinal fluid from the cerebral ventricles

Kocher - Debre - Semelaigne syndrome - Hypothyroidism in infancy or childhood characterised by lower extremity or generalized muscular hypertrophy, myxoedema, short stature and cretinism

Kocher's sign - Eyelid phenomenon in hyperthyroidism and Basedow's disease

Kocher's method - For reducing dislocations of shoulder

Kocher - Lorenz elbow fracture - Osteochondral fracture of capitellum

Kocher's invagination method - for radical operation for inguinal hernia

Kocher's arched incision - for opening the knee joint

EDITOR's VIEW

Dear Seniors and colleagues,

Editorial team wishes all our esteemed members a "Happy New Year" through this first edition of 2021. It Is an honour to contribute as an editor of "SCISSORS" and present the achievements and the activities of one of the best state chapters of Association of Surgeons of India. Newsletter is a medium through which we can express ourselves. Even in Covid era, chapter has continued its intent towards academics, although in virtual mode. While COVID Vaccination drive for health care workers are on full swing, we can say that - "Today's Accomplishments Were Yesterday's Impossibilities." I request all my colleagues to speak up their mind and actively contribute to the Newsletter. Looking forward for your support and guidance.

"Life imposes things on you that you can't control, but you still have the choice of how you're going to live through this"



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