

SCISSORS–Delhi

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



Prof. Anurag Srivastava,
Medical Director,
BALCO Medical Centre, Naya Raipur (Chattisgarh)
Ex-Head, Department of Surgery
All India Institute of Medical Sciences, New Delhi

HONORABLE MEMBERS,

Namaskar,

Dussehra and Diwali Greetings to all,

Another fruitful year comes to close. Sadly, we witnessed the worst of the Covid pandemic and lost so many of our near and dear ones including many of our surgical colleagues. To name a few eminent stalwarts of surgery in Delhi, we lost during the last year: Professor IK Dhawan served as Chief of surgery at AIIMS New Delhi for a long period and established the disciplines of renal transplant and plastic surgery. He continued his academic interests till the last day of his life and regularly attended all the teaching /training activities of our chapter and at All India Institute of Medical Sciences, New Delhi. He authored many text books in surgery. Professor MM Kapur served as a senior professor of surgery at AIIMS New Delhi and established the discipline of endocrine surgery. The contribution of Professor UC Biswal retired Head department of surgery at Dr. RML Hospital in the uplift off academic activities of Delhi Chapter will always be remembered.

Through these hard times we learned to be resilient and cope with the worst. Covid or no Covid, our chapter continued to serve the society through a plethora of academic endeavors, namely public awareness camps, webinars and clinical meetings.

SCOPE had been one of the most popular academic programs across country for last few years exclusively dedicated to the exam-oriented training of the post graduate students. Its popularity has uniformly spread across the country. **SCOPE 2021** was organized flawlessly under the aegis of Delhi State Chapter of ASI on virtual platform. The program was organized as webinar over a period of five days starting from 1st September 2021 till 5th September 2021. The program was based on live online case presentation by post graduates candidates from different institutes of the country. The SCOPE 2021 saw registration of more than 400 postgraduates with attendance of approx. 300 postgraduates even during the late-night sessions. ASI President Prof Abhay Dalvi and ASI President Elect Prof G Siddesh graced the inaugural as well as valedictory functions.

We also conducted live workshops and hands-on training of young surgeons. One such hands-on training on suturing and stapling workshop was conducted at AIIMS New Delhi by Prof Sunil Chumber, Prof V Seenu, Prof Suhani and Prof Mohit Joshi on 25th September 2021.

The executive committee of our chapter met physically on 24th of September and decided to conduct the annual conference of our association in the form of SURGICON 2021 in a hybrid format. We hope that gradual returning to normalcy will bring sanity to teaching and professional activities. We request all heads of surgical departments to guide their postgraduates to actively participate in SURGICON 2021.

I am glad to inform that Professor Niti Kapur is going to take the prestigious Presidentship of our chapter next year in 2022. I am sure and certain that she will outperform all the previous presidents and will raise the academic accomplishments to the highest ever level.

JAI HIND
JAI ASI
JAI Delhi State Chapter of ASI

Executive-Delhi

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Anurag Srivastava

President Elect-
Neeti Kapur

Immediate Past
President & GC
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Pawanindra Lal

Past President
Rana A.K. Singh

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Rajeev Bansal (Action)
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Rajiv N. Sahai (HRH)
Ravi Patcharu (R&R)
Sameer Nain (RML)
Sanjeev Singhal(NRCH)
Suhani (AIIMS)
Suruchi (UCMS)
Vivek Bindal (Pvt.)

International
Collaboration
Saumitra Rawat

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

Dear Seniors and Colleagues,

As we all know that we all were going through very tough and challenging times. I am thankful to all of you for your constant support and guidance for continuation of the chapter's academic activities.

We have been organizing a lot of online academic activities. As the Covid situation has improved and the number of vaccination has increased, few offline CME's are being organized around Delhi under the aegis of DSC-ASI. We are planning to conduct the Annual meeting of the Delhi ASI "SURGICON 2021" from 19th to 21st November at India Habitat Center as an onsite event with live operative workshop and didactic lectures but we need to be vigilant about the Covid situation and keep a close eye on it.

I request all of you to actively participate in the Annual conference of DSC-ASI and make the event a grand success. We will also be organizing our chapter online elections for various posts of Delhi Chapter Executives 2022.

As I conclude, I would like to express my heartfelt gratitude to all the Executives, Seniors, and Colleagues of the Delhi State Chapter ASI for their overwhelming support in all the endeavors of the Society. Past 4 year as the Secretary of the Chapter have been a very fruitful and enriching journey for me.

I would like to thank you all for your blessings.

Regards



Dr. Tarun Mittal

यथा चित्तं तथा वाचो यथा वाचस्तथा क्रिया ।
चित्ते वाचि क्रियायां च साधूनामेकरूपता ॥

As is the mind, so is the speech; as is the speech so is the action.
Of the good people there is uniformity in mind, speech and action.

“POST PANDEMIC RESUMPTION OF ELECTIVE SURGERY: CHALLENGES AND CONSIDERATION”

Covid-19 had a substantial influence on waiting times for elective surgery. In the early phase of the pandemic, waiting times paradoxically decreased but later it has, increased rapidly. Extended waiting time for elective surgeries is one of the myriad problems facing health-care systems which do not have simple solutions. These patients should not, and cannot, be ignored. Delays in surgery have been shown to have an impact on outcomes. It caused worse prognosis in many diseases, increased mortality and morbidity. Hence, the benefit of surgery decreased due to longer waiting times.

The increased waiting time was attributed to: (1) Cancellation of elective surgeries and outpatient clinics (2) Postoperative Surgical care (3) Shortage of blood components (4) Shifting of surgeons and OT staff to Covid care area. (5) Covid-19 surgical pathway and (6) Limited visit or time. Thus elective surgical patients were sidelined and devoid of much needed surgery. Moreover, patient testing for Covid-19 caused cancellations of scheduled procedures, leading to an empty operating room, and even still, more patients on the waiting list.

Patients waiting for elective surgeries had anxiety or depression, which adversely affected quality of life and eroded the trust in the health-care system. The impact of waiting on mental health was greater among women and new immigrants, and those of younger age, lower socio-economic status and with lesser coping ability. Acknowledgement of the burden of waiting, peer support and periodic communication to updated wait-list status could alleviate the mental health. Painful conditions like stone disease, arthritis, etc often leads to substance abuse and impaired psychological well-being, and loss of wages.

Regarding cancer patients, surgical backlog lead to delay in surgery and ultimately advanced disease endangering the patient's life while the surgery could have simply solved the problem.

To address and manage the backlog of elective surgical patients, traditional perioperative care protocols may need to be revised to enhance the patient flow and hence respond to the cumulative burden. Carefully designed preparation plans for national emergencies with a possibility of rapid response to changing circumstances as well as proper restrictions enacted by the authorities and politicians are needed to secure the capacity and procedure rates in surgical units despite the pandemic.

Although elective surgeries, may not be an immediate life threatening situation, but the suffering of these patients cannot be ignored. It will undoubtedly take many years to grasp the totality of the consequences of delayed elective surgeries, both with regard to long-term health outcomes for patients and costs to health systems and societies.

Planning and scheduling of surgery becomes complex on clinical, ethical and technical grounds. Therefore, urgency based clinical prioritization has been proposed. To mitigate the crisis, digital tool as '**Surgical patient's waiting list Information system**' may be designed. Centralized, Inter-hospital, Multidisciplinary service to elective surgery may be acquired to reduce long waiting time.

Hospitals and clinics must start overthinking their current processes and to create strategies responding to the long surgical waiting lists. The implementation and usage of digital tools, can fasten up the hospital processes via remote and automated patient data exchange, leading to shorter waiting times for patients and decreasing surgery backlog. Digital tools enable hospitals to provide their patients with the procedures they need in a timely manner. Establishing a communication channel and providing reliable information to the patient helps to address the patient's concerns and misconceptions. As of now, there is no end in sight to Covid-19 pandemic. Different variants of the virus continuing to spread. At this point of time, the current hospital systems will not be sufficient to deal with the enormous backlog of surgery.

The COVID-19 pandemic should be considered as an important lesson for future policy making and during possible future pandemics and similar conditions.

DR. SHYAM LAL
MS,FMAS,FAIS,FIAGES,DHM
Professor of Surgery
All India Institute of Medical Sciences, Bhopal, MP

“You Learn More From Failure Than From Success. Don't Let It Stop You. Failure Builds Character.”

“PILLARS OF SURGERY”

Anatomy is considered to be the first pillar on which the foundation of surgery rests and grows. History of anatomy is as old as the history of Mankind. Anatomy was studied since ancient times but was hardly accurate.

People knew about various organs including the heart and the vessels. In fact, the etymology of the word artery is from the Greek word “arteria” meaning windpipe as after death the arteries were empty and most thought it contained air! So, one can imagine how accurate knowledge of anatomy was!

Many philosophers contributed to the study of human anatomy but as dissection of humans was always looked with suspicion, most knowledge of human anatomy was got from dissection of animals and this was broadly applied to humans.

Galen Vs Vesalius.....

Galen was a Greek architect in the early Roman empire. He claimed Asclepius came in his dream to instruct him to study medicine. He was an ambitious man whose ultimate dream was to replace Hippocrates as the father of medicine. To be a true celebrity surgeon he needed a high-profile job and what could be more glamorous than being a surgeon of the Gladiators. He tried getting the job but failed numerous times till he got a brilliant idea. He took along a monkey with him for the next interview, where he cut the monkey 's abdomen open to display its innards and sewed it back. The monkey lived and Galen got his job. His new job gave him an opportunity to observe all kinds of injuries and human organs. He had both dead and injured gladiators as subjects to study, but most of his knowledge about anatomy came from public display of dissection of squealing pigs!

Galen during his lifetime compiled knowledge about anatomy from his predecessors and together with his observations after dissecting animals. He penned his theories, though most were inaccurate, into two books. These were considered an authority on anatomy for next 1300 years; till it was challenged by a Belgian named Andreas Vesalius who was enterprising, daring and persistent in his beliefs.

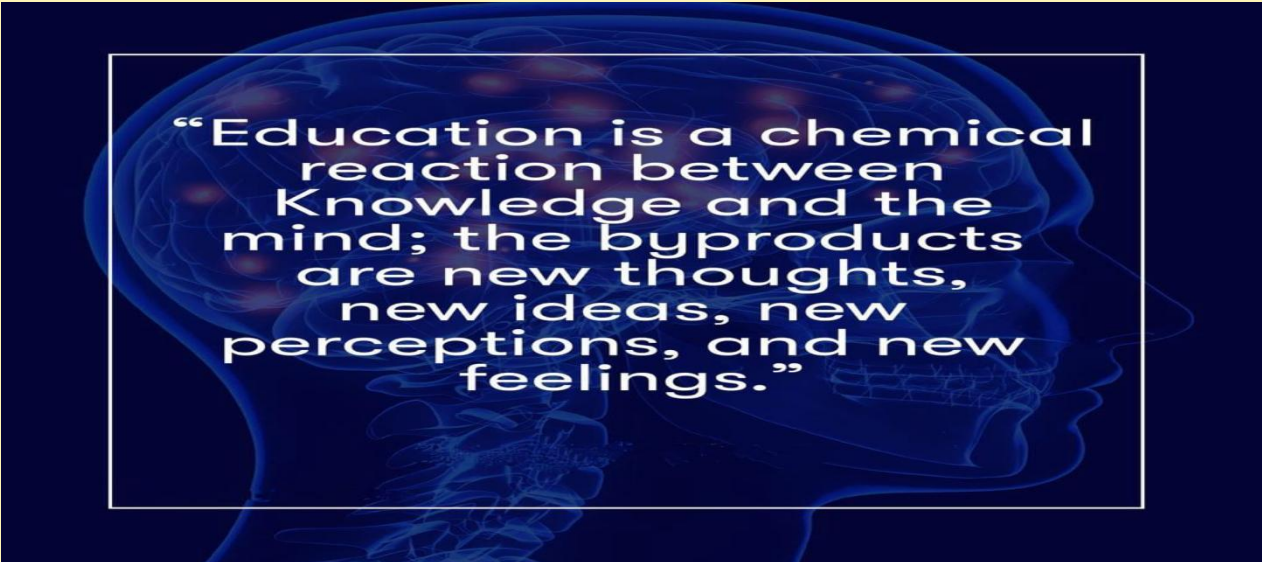
The First Pillar of Surgery – Vesalius and Anatomy as we know it.

Public hangings were common during Vesalius' time (1536). Criminals were hung outside the city gates as a warning to other criminals. Getting hold of bodies to dissect was difficult and a hanging decomposing corpse was a great temptation to acquire and of course an ideal element for dissection. So, Vesalius, seeing a dangling decomposing corpse tried to bring it down secretly late in the night.

As the corpse was much larger than Vesalius, he decided to take the corpse part by part home starting with the limbs. He then studied each part closely making intricate diagrams of each structure till he could painstakingly put back the whole body together on paper. He carried this on for next 6 years demolishing almost all the theories put forward by Galen. He was finally ready to publish his seminal work titled 'De Humani Corporis Fabrica' (The Construction of the Human body).

Vesalius had constructed the first pillar in the development of Modern Surgery – “Anatomy” as we know it!

Dr. R.N. SAHAI,
Senior Consultant,
Department of Surgery,
Hindu Rao Hospital, Delhi



“Education is a chemical reaction between Knowledge and the mind; the byproducts are new thoughts, new ideas, new perceptions, and new feelings.”

Chapter Activities

DDU MONTHLY MEETING

A monthly meeting & PG Masterclass of Delhi State Chapter was organized by DDU Hospital on July 17, 2021.

PG Master Class – 2 to 3 pm

Chairpersons: **Dr. Anurag Srivastava, Dr. P S Sarangi, Dr. Ratna Chopra**

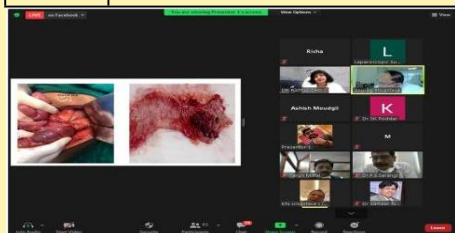
1. Ulceroproliferative lesion over tongue – Dr. Avinash Vijay,
2. Soft tissue swelling chest wall – Dr. Sajay K Ray

Monthly meet - 3 to 4 pm

Chairpersons: **Dr. Anurag Srivastava, Dr. K N Srivastava, Dr. P S Sarangi**



S.NO	TOPIC	UNIT/MODERATOR	PRESENTER
1	Surgical Revascularization in a case of Diabetic foot ulcer	Unit-1/ Dr P S Sarangi	Dr Humayon Iqbal
2	An Unusual case of Intussusception	Unit-2/ Dr Puneet Chhibber Dr Maninder Chhabra	Dr Jeeshan Khan
3	Spontaneous Pneumothorax and Surgical Emphysema in Covid-19 patients	Unit-1/ Dr P S Sarangi	Dr Nishanth M
4	A Tale of Two Misses	Unit-2/ Dr Puneet Chhibber Dr Maninder Chhabra	Dr Shishir Anand



WEBINAR

Delhi Breast Cancer Survivorship Initiative (DBSI) under the aegis of the Delhi State Chapter ASI organized a **Live Webinar / Panel Discussion on “Survivorship Care in Breast Cancer: a round table on managing the late and long term effects of Breast Cancer Treatment”** on 24 July 2021.

Program was as follows:

Introduction : **Survivorship Care in Breast Cancer**

Dr. Pawanindra Lal, Executive Director & CEO, NBE & Dir. Prof Surgery, MAMC & LNJP, Delhi

PANEL DISCUSSION

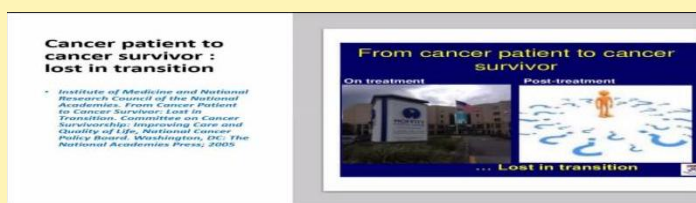
Moderator: **Dr. Navneet Kaur**, Convener DBSI & Dir Prof surgery, UCMS & GTBH, Delhi

Managing the late and long term effects of breast cancer treatment

Panelists

- **Dr. Anurag Srivastava**, President, Delhi State Chapter, ASI & Ex Prof & HOD Surgery AIIMS, Delhi
- **Dr. SVS Deo**, Prof Head, Surgical Oncology, IRCH, AIIMS Delhi
- **Dr. Chintamani**, Prof Surgery, VMMC & Safdarjung Hospital, Delhi, President & Governor-ACS India Chapter.
- **Dr. Amita Suneja**, Dir Prof & HOD Obs & Gyn , UCMS & GTBH, Delhi
- **Dr. Manoj Sharma**, Prof Radiation Oncology , Clinical coordinator, DSCI
- **Dr. Anup Nath**, Sr. Medical Officer, DGHS, GNCT OF Delhi
- **Dr. Asmita Jain**, Sr. Consultant & Unit Head, Oncology, Primus Hospital, Delhi
- **Ms Dimple Bawa**, Founder & President, Cheers to life foundation

Wrap up – Rapporteur – **Dr. Maninder Chhabra**, Specialist Surgery, Incharge, Breast Clinic, DDUH, Delhi



Chapter Activities

WEBINAR

A Live Webinar / Panel Discussion on **"Advances in Colo-Rectal Surgery"** on **24 July 2021** was organized by **Sir Ganga Ram Hospital**, New Delhi and **KRISH** (Knowledge Research and Innovation in Science of Health) Foundation under the aegis of Delhi State Chapter, ASI.

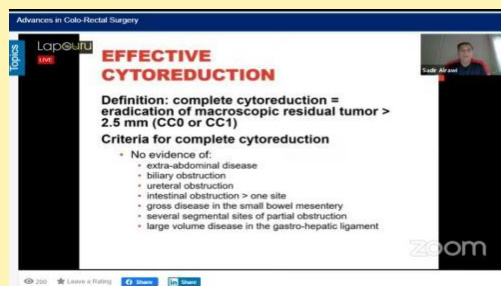
The program was as follows:

Welcome Address: Dr. Anurag Srivastava, Delhi ASI President

Introduction to the Speakers - Dr. Neeraj Dhamija (Moderator)

Vote of Thanks - Dr. Tarun Mittal, Secretary ASI Delhi State Chapter

Speaker	Topic
Dr. Roy Patankar (Mumbai)	Technical Pearls in Cancer Rectum Surgery
Dr. Brij B Agarwal (Delhi)	Low Anterior Resection Syndrome
Dr. Sadir Al Rawi (UAE)	HIPEC- current Status
Discussion- Moderator-Dr. Neeraj Dhamija	All three speaker and Attendees



NRCH & HRH MONTHLY MEETING

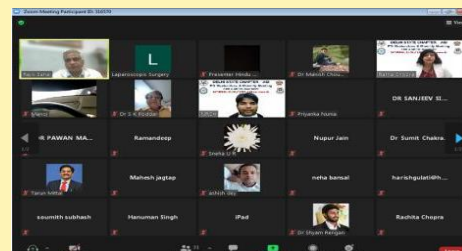
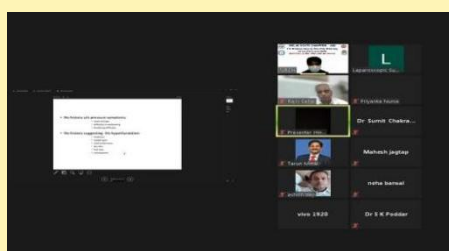
A monthly meeting & PG Masterclass of Delhi State Chapter was organized by **NRCH & HRH** on **July 31, 2021**.

PG Master Class – 2 to 3 pm

- o **Upper midline Lump** - Presenter Dr Jithu, HRH
- o **Thyroid swelling** - Presenter Dr. Sudhir, NRCH

Monthly meet - 3 to 4 pm –

S.No	Topic	Presenter
1	BCS with a new flap for primary reconstruction	Dr. Gautam (DNB), NRCH
2	Renal mass with Covid	Dr. Vasu Dev (DNB), NRCH
3	Axillary freckling with lump along mammary line	Dr Manish (DNB), HRH
4	Ticking bomb in the abdomen	Dr Rakesh (DNB), HRH
5	The confounding history in a patient of peritonitis	Dr Nupur (DNB), HRH
6	SILS in dual pathologies	Dr. Solai Raj (DNB), NRCH



Chapter Activities

RML MONTHLY MEETING

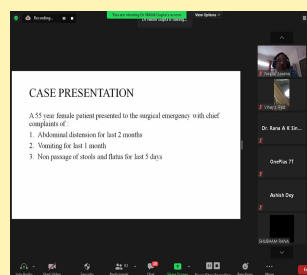
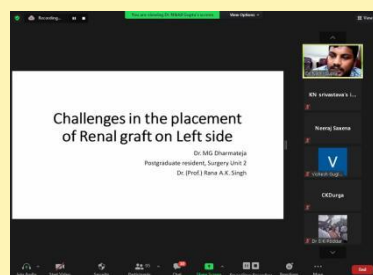
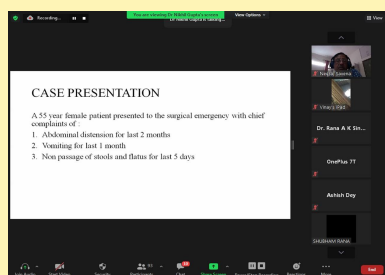
A monthly meeting & PG Masterclass of Delhi State Chapter was organized by **Dr. RML Hospital on August 21, 2021.**

PG Master Class – 2 to 3 pm

- o **Malignant phyllodes breast** - Presenter Dr Parikshith
- o **Multi nodular goiter** - Presenter Dr. Sagun Agarwal

Monthly meet - 3 to 4 pm –

S. No	Topic	Presenter & Moderator
1	A rare complication of acute necrotizing pancreatitis	Dr. Adarsh (PG) Dr. C K Durga Unit 1
2	Contralateral placement of renal graft challenges encountered	Dr. Dharma Teja (PG) Dr. Rana AK Singh Unit 2
3	Unusual complication of Mini Gastric bypass (MGB)	Dr. Yajushi (PG) Dr. Neeti Kapur Unit 4
4	A histopathological surprise in a case diagnosed as duodenal obstruction due to periampullary carcinoma	Dr. Prashant (PG) Dr. Neeraj Saxena Unit 5

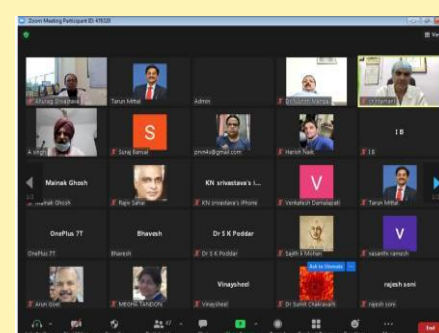
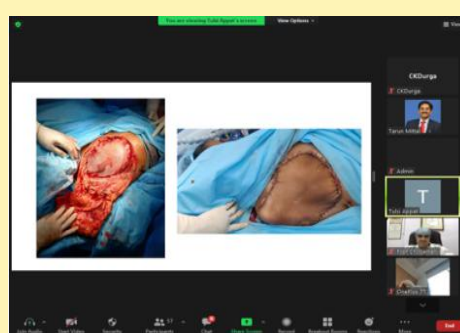


VMMC & SJH MONTHLY MEETING

A monthly meeting of Delhi State Chapter was organized by **VMMC & Safdarjung Hospital on September 11, 2021.**

Cases were as follows:-

Topic	Presenter	Unit
Oncoplastic workhorse in breast cancer	Dr. Junaid Ansar	Dr. Chintamani Unit
Rare clinical scenarios in duodenal tuberculosis	Dr. Srishti	Dr. A S Chawla Unit
Rare presentation of intestinal obstruction	Dr. Pradeep MS	Dr. R K Soni Unit
Phyllodes tumor – an enigma	Dr. Tulsi Appat B	Dr. Shivani B Paruthy Unit



Chapter Activities

WEBINAR

Sir Ganga Ram Hospital under the aegis of Delhi State Chapter of ASI organised a **LIVE Webinar- An update in Pancreatic Surgery on 18th Sept, 2021**. The webinar was organized by **Dr. Brij B. Agarwal & Dr. Neeraj Dhamija**

The Event Highlights were

- Making of a Pancreatic Surgeon
- Evidence based types of Pancreatic-Enteric Anastomosis
- Technology Complimenting Pancreatic Surgery
- Panel Discussion on management of Locally Advanced Pancreatic Cancer
- Interesting Video based discussion on Pancreatic Surgery



PUBLIC AWARENESS PROGRAM

Department of Surgery, **ESI-PGIMSR**, Basaidarapur, New Delhi organised a public awareness programme "**PROSTATE HEALTH AWARENESS AND MANAGEMENT**" on **23rd September, 2021** in OPD premises under the aegis of Delhi state chapter of ASI.

Dr. Atul Jain, Assistant Professor and **Dr. Suhas Agarwal**, Senior Resident deliberated the programme under the leadership of **Dr. Tanweer Karim**, Prof & Head, Dept of Surgery, ESI-PGIMSR.

Approximately 120 persons attended the talk and got benefitted out of it.



Chapter Activities

WORKSHOP

Delhi State Chapter in collaboration with AIIMS had organized two Hands-on- Session & workshop on 25 Sep 2021.

Morning session 9 - 1 pm

TOPIC: Skin & Abdominal wall suturing

Afternoon session 2-5 pm

Topic: Gut Anasotmosis workshop

These workshops were organized by **Prof Anurag Srivastava and other AIIMS faculty.**

The Delhi State Chapter organized this course free for benefit of post graduates.



LHMC MONTHLY MEETING

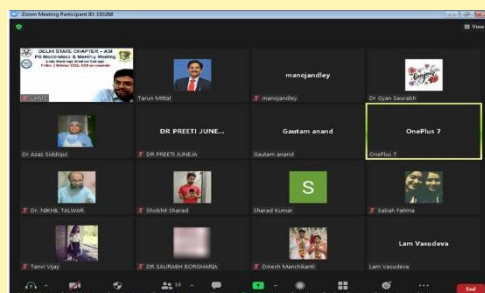
October PG Masterclass & monthly meeting of Delhi State Chapter was hosted by Dept of Surgery, Lady Hardinge Medical College, New Delhi on October 1, 2021.

Post graduate clinical case presentations: 2-3 pm

- a. Bilateral salivary gland tumour- Dr. Rahul Choudhary
- b. Parietal wall tumour- Dr. Shobit

Clinical Meeting : 3-4 pm

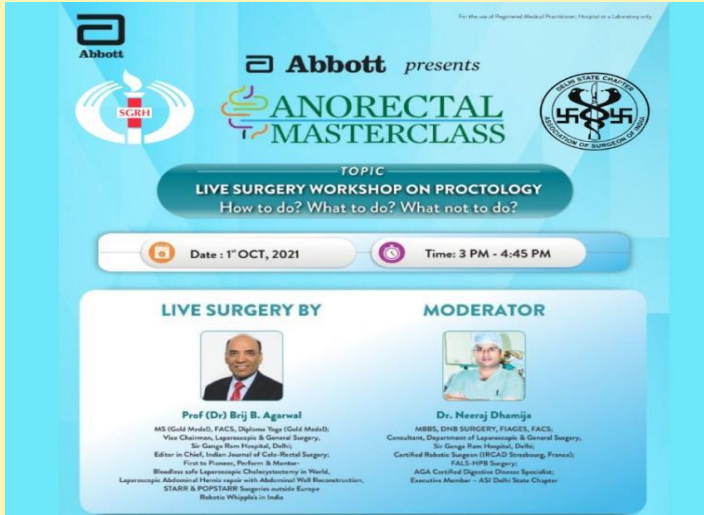
S.No	Case	Unit
1	Massive retroperitoneal tumor	Dr. O P Pathania
2	Paraneoplastic syndrome in a case of Squamous cell carcinoma	Dr. Romesh Lal
3	Laparoscopic management of functional paragangionoma	Dr. S Thomas
4	Challenges in the management of hepatic hemangioma	Dr. A Mohta



Chapter Activities

WORKSHOP

Under the aegis of Delhi State Chapter, ASI, Unit I, Department of General & Laparoscopic Surgery has organized a Live Operative Workshop on proctology in collaboration with M/s Abbott India Limited on **1 October 2021** in the premises of the OT Complex at **Sir Ganga Ram Hospital**. The surgeries were live via "Webstream" platform and were performed by **Dr. Brij B Agarwal** as Faculty, moderated by **Dr. Neeraj Dhamija**. The surgeries covered were **MIPH: Stapled hemorrhoidopexy** and **STARR procedure**.



PUBLIC AWARENESS PROGRAM

Delhi state chapter, ASI in association with RML hospital organised a **Cancer Awareness Programme** for public on 9 October 2021.

In this we had made posters of various cancer in OPD for public. The general public also interacted with doctors and asked questions about various posters. The senior faculty **Dr. Rana AK Singh** also delivered public lectures about cancer awareness and its prevention.



Chapter Activities

PANEL DISCUSSION

H.O.P.E Oncology Clinic in association with Delhi State Chapter, ASI organized a **Panel Discussion on "Colon Cancer: Role of Surgery in stage IV - curative ? palliative"** on 16th October 2021, 7:30 pm at India Habitat Center, Magnolias.

Program was as follows

Speaker - Dr. Amish Vora, Co-founder & Director, HOPE Oncology Clinic

Panelists

1. Dr. Arun Prasad, Lap & Robotic Surgeon, Indraprastha Apollo Hospital
2. Dr. Naimish Mehta, GI & Liver transplant surgeon, Sir Ganga Ram Hospital
3. Dr. Rudra Prasad Acharya, Oncsurgeon, PSRI Hospital



DELHI STATE CHAPTER OF ASI

with **H.O.P.E**
H.O.P.E. ONCOLOGY CLINIC

PRESENTS ON

Date- 16th October 2021
Venue- India Habitat Center, Magnolias
Time- 7:30 pm onwards

Topic- Colon Cancer
Role of Surgery in Stage 4- Curative? Palliative?

PANELIST

Dr. Arun Prasad
Laparoscopic & Robotic Surgeon
Indraprastha Apollo Hospital

Dr. Naimish Mehta
GI & Liver transplant Surgeon
Sir Ganga Ram Hospital

Dr. Rudra Prasad Acharya
Onco Surgeon, PSRI Hospital

Dr. Anurag Shrivastava
President

Dr. Tarun Mittal
Secretary

Dr. Neelgi Kapur
President Elect

Dr. Nikhil Gupta
Treasurer

SPEAKER:
Dr. Amish Vora
Co- Founder & Director
H.O.P.E. Oncology Clinic

Dr. S K Poddar
Joint Secretary

PUBLIC AWARENESS PROGRAM

Department of Surgery, **ESI-PGIMSR**, Basaidarapur, New Delhi organised a public awareness programme **"KIDNEY STONES; PREVENTION AND MANAGEMENT AWARENESS"** on 22nd October, 2021 in OPD premises under the aegis of Delhi state chapter of ASI.

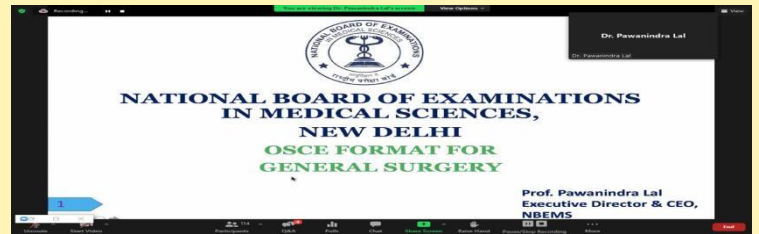
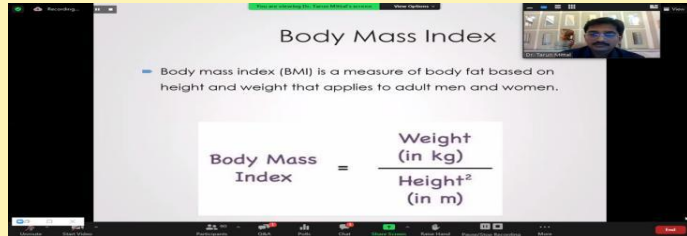
Dr. Atul Jain, Assistant Professor and **Dr. Manisha Dua**, Senior Resident deliberated the programme under the leadership of **Dr. Tanweer Karim**, Prof & Head, Dept of Surgery, ESI-PGIMSR.

Approximately 100 persons attended the talk and got benefitted out of it.

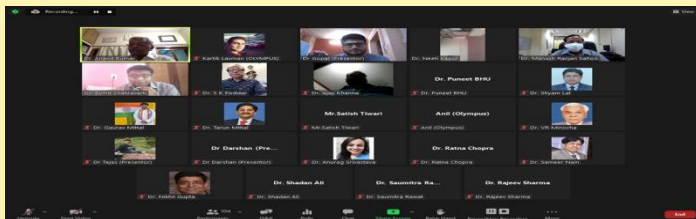


“SCOPE SEPTEMBER 2021”

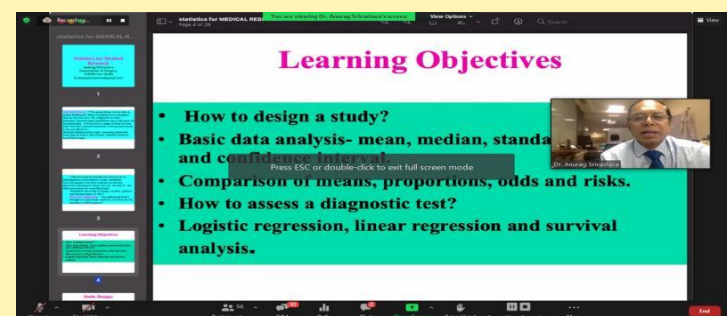
Surgery Clinical Oriented Post-Graduate Examination course i.e. **SCOPE** has become one of the most popular academic programs exclusively dedicated to the exam-oriented training of the post graduate students. Its popularity has uniformly spread across the country. **SCOPE 2021** was organized flawlessly under the aegis of Delhi State Chapter of ASI and leadership of **Prof. Anurag Srivastava**. The program was organized as webinar over a period of five days starting from 1st September 2021 till 5th September 2021. The program was based on live online case presentation by post graduates candidates from different institutes of the country.



The sessions were divided based on the organ system. A total of 9 sessions spread over five days were organized with 4 cases presentation in each session. Thirty-six 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 during the valedictory function which was attended by the ASI President **Prof Abhay Dalvi**, ASI President Elect **Prof G Siddesh** & ASI Secretary, **Dr. Sanjay Kr Jain**. The student who answered the Examiners favorite question were also awarded cash prize.



The SCOPE 2021 virtual course saw registration of more than 400 postgraduates with attendance of approx. 300 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 and was meticulously planned and ably organized by the organizing team under the leadership of **Prof. Anurag Srivastava** ably supported by **Dr. Nikhil Gupta**, **Dr. Anubhav Vindal**, **Dr. Lalit Aggarwal**, **Dr. Sameer Nain**, **Dr. Suhani**, **Dr. Suruchi** and **Dr. Anmol Ahuja** and whole of the executive of DSC-ASI. We take this opportunity to thank all the eminent Faculty and the Executives for constant support and participation.



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“RENAL TRANSPLANT SURGERY: INDIA AND THE WORLD”

Chronic kidney disease (CKD) is an increasing global public health problem, both in developed and developing countries. The global prevalence of CKD is estimated to be 8-16%. In India, studies have shown a variable prevalence ranging from 4% to 17.2% with wide regional differences. CKD is associated with high morbidity and mortality globally with approximately 735,000 deaths annually. CKD 5 or end-stage renal disease (ESRD) represents the terminal stage of CKD and is defined by a glomerular filtration rate (GFR) of <math><15 \text{ mL/min/1.73 m}^2</math>. At this stage patient requires renal replacement therapy (RRT) in the form of dialysis or transplantation. An Indian population-based study determined the crude and age-adjusted ESRD incidence rates at 151 and 232/million populations. RRT can be temporary in the form of hemodialysis or peritoneal dialysis; and permanent after kidney transplant. However, kidney transplantation (KT) remains the treatment of choice for ESRD as it leads to longer survival and better quality of life. ESRD treatment is a major financial burden for the family especially in a developing country like India, however among all forms of RRT, KT was found to be least expensive.

India and the world:

The first successful renal transplantation in India was performed in 1971 by the team led by Dr. Mohan Rao and Dr. K V Johny at Christian Medical College, Vellore. At our center, first successful renal transplant was performed in 1973 by a team of doctors led by Dr I.K Dhawan. At present, more than 200 centers in India are performing renal transplants majority of them from living donors from near relatives (>90%).

As per the Indian transplant registry maintained by the National Organ & Tissue Transplantation Organisation (NOTTO) on their website <http://www.notto.gov.in>, a total of 28,707 transplants of various organs have been reported to them till date with a deceased (1448) donor rate of 5.31%. Out of 27,259 living donations majority are living related 20,663 (75.80%) and 6596 (24.19%) are living unrelated.

Availability of donors is a major cause for the ever-increasing gap between the patients awaiting a renal transplant and the patients who undergo a transplant which ultimately results in a gross mismatch between demand and supply. Statistics suggests that about 150,000 people in India are waiting for renal transplantation. Only 1 out of 30 people undergo kidney transplant. Ninety percent of people on the waiting list die without getting an organ.

Deceased donor (DDT) transplant can bridge this gap to some extent and can reduce the waiting time for KT. In the USA, 17,107 kidney transplants took place in 2014. Out of these 11,570 grafts (67.64%) were obtained from deceased donors and 5537 (32.35%) from living donors. There are currently 121,678 people waiting for lifesaving organ transplants in the U.S. Of these, 100,791 await kidney transplants (as of 1/11/16).

Deceased organ donation program is still being developed in India but is largely restricted to big institutions. Only 35 out of 200 approved renal transplant centers perform DDRT regularly. The deceased donation rate in 2013 was 0.26/million populations, and this has gone up to 0.36/million population in 2014. The deceased donation program has generally done relatively better in states from the South such as Tamil Nadu, Puducherry, Kerala, and Andhra Pradesh. The overall deceased donor rate as of 2015 is 0.5/million population.

The Transplantation of Human Organs and Tissue Act (1994):

Before 1994, organ transplantation in India was unregulated with a large incidence of commercialization of live organ donation. To curb the menace of commercialization and to streamline the process of transplantation, the Govt of India passed an act known as “**The Transplantation of Human Organs And Tissue Act of (1994)**”. The main aim was to prevent organ exploitation and facilitate deceased organ donation including from brainstem death patients. The act was further amended in (2011) and framed certain legislations to increase the donor pool and expand the definition of "near relatives." Besides those previously defined as near relatives (father, mother, brother, sister, siblings and spouse), it also includes grandparents and grandchildren as near relatives. The main purpose of the Act is to regulate the removal, storage and transplantation of human organs for therapeutic purposes and to prevent commercial dealings in human organs. Given below are the certain recommendations of the amended act of 2011:

1. Formation of a committee in each state to advise the appropriate authorities of the state in matters related to organ donation and transplantation
2. Establishment of a National Human Organs and Tissues Removal and Storage Network and provides for the development and maintenance of a national registry of the recipients of human organ transplants
3. It is compulsory to appoint a "transplant coordinator" in all hospitals registered for organ retrieval and transplantation to help with counseling of relatives in the event of brain death.
4. It is mandatory for the treating medical staff to request the relatives of brain-dead patients' permission for organ donation
5. It makes possible for a surgeon or a physician and an anesthetist or an intensivist to be included in the medical board in the event of non availability of a neurosurgeon or a neurologist for certification of brain death
6. It regulates the transplantation of organs for foreign nationals
7. It prevents the exploitation of minors for organ donation.
8. It provides for swap donations of organs
9. It suggests enhancing the penalties provided under the Act for commerce up to Rs. 20 million from the previous Rs. 20,000.

Continued...

India has approximately 200 kidney transplant centers and one-third of these are in the major metropolitan cities, majority of them in the private sector. In the government-run tertiary care hospitals, treatment modalities like dialysis, transplantation, and follow-up are conducted free of cost. In the private/ corporate sector, the cost of transplantation and follow-up is high for the average Indian patient. In India, most of the KT relies on live donor transplantation (94.9%); however, many states have established a strong cadaveric transplantation program like Tamil Nadu Cadaver Transplant Programme, which is the most efficient and effective in the country. Many other non government organizations (NGOs) have established organ sharing network, which promotes deceased donation program. The Foundation for Organ Transplantation and Education-Bangalore, Multi Organ Harvesting Aid Network, Narmada Kidney Foundation, Zonal Transplant Coordination Committee-Mumbai, Organ Retrieval Banking Organization-Delhi, and Delhi Organ Procurement Network and Transplant Education are a few.

Despite the THO legislation, organ trafficking and kidney scandals are regularly reported in the Indian media. The Voluntary Health Association of India estimates that about 2000 Indians sell a kidney every year. In Cross-sectional survey conducted in February 2001 among 305 individuals who had sold a kidney in Chennai, India, it was found that Ninety-six percent of participants (over 300) sold their kidneys to pay off debts. The shortage of organs is a universal problem. It has led to the development of the international organ trade. In India, despite the THO act, neither has the commerce stopped nor have the number of deceased donors increased to take care of organ shortage. The high demand of organs has led to its commoditization, more so in countries where there is a large proportion of the population below the poverty line with weak regulatory authorities.

Kidney donors:

Organ donors are broadly classified into live and deceased. Live donors are further subdivided into live related, live unrelated or authorized and altruistic donors. Deceased donors are further divided as brain stem death or heart beating donors and non heart beating donors. Each category of deceased donors is further classified as standard criteria and expanded criteria donors depending on various clinical and laboratory parameters. Kidneys that come from a deceased donor having age over 60 or >50 years with two or more risk factors such as a history of high blood pressure, death due to stroke or has some kidney damage with Sr. creatinine >1.5 mg/dl are labeled as expanded criteria donors. Similarly, non heart beating donors are divided as controlled and uncontrolled. Uncontrolled donor is the one who is deceased on arrival to the hospital or who has a failed cardiopulmonary resuscitation (Maastricht type I, II) whereas a controlled donor suffers cardiac arrest after withdrawal of support in operative room settings.

Operative procedure:

Donor nephrectomy is traditionally done by open method, although there is a strong tendency for performing laparoscopic and lap assisted donor nephrectomy. Laparoscopic surgery has led to smaller incisions, less blood loss, less post operative pain and hospital stay and better cosmetic outcome.

Open recipient surgery: Right sided oblique curvilinear incision is made in right iliac fossa (Gibsons incision). Extra peritoneal plane is entered, and space created by meticulous blunt dissection ensuring no injury to the peritoneum. An effortless dissection of the recipient's target blood vessels is done and graft vessels are anastomosed to external/ internal iliac artery and vein. Kidney transplantation is traditionally performed by open surgery. With advances in minimally invasive procedures (MIP), transplantation with laparoscopic and robotic assistance are also described.

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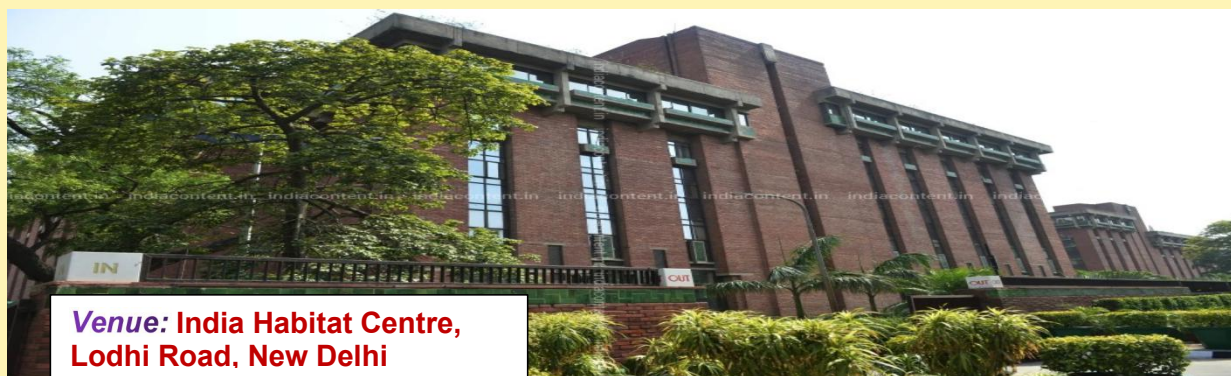
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*The idea is not to live forever...
But maybe to help another live
a little longer...*

SURGICON 2021

Respected Seniors, Dear Colleagues and Friends

It gives us great pleasure to invite you to the Annual Conference of Delhi State Chapter, ASI, SURGICON 2021 from 19th to 21st November 2021 at **India Habitat Centre, Lodhi Road, New Delhi**. Keeping the planned programme in mind, we have kept the theme of the conference as **“To the Future & Beyond”**.



**Venue: India Habitat Centre,
Lodhi Road, New Delhi**

The first day of the conference on 19th November 2021 will feature “Live operative workshop” that will include basic and advanced open & laparoscopic procedures. It will also feature “Competitive paper session” and “preliminary Quiz rounds”. We expect the first day’s program to set the tone for the rest of the conference.

The second and third day i.e. 20th & 21st November 2021 will include symposiums, free oral paper sessions, competitive E-poster sessions, Orations, invited video sessions and the final session of the Quiz.

Through this advance communication, we invite you to send abstracts of your scientific papers to the Secretariat at the earliest through email at delhistatechapter@gmail.com. Please clearly indicate if you want your paper to be included in competitive session, free paper session, poster session or video session.

Please block your dates in advance for the conference. Looking forward to your esteemed presence and wholesome participation.

Link to fill the registration form online

<https://forms.gle/jTSAnsa8HcxDm1fN8>

Link for payment <https://asidelhi.com/surgicon-2021.html>

Link for abstract submission: <https://asidelhi.com/abstract.html>

Free Paper Link : <https://asidelhi.com/form-free.html>

Competitive Paper Link : <https://asidelhi.com/form-comp.html>

Video Paper Link : <https://asidelhi.com/form-video.html>

Poster Paper Link : <https://asidelhi.com/form-poster.html>

For further queries, please contact

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Best wishes

ORGANIZING TEAM, SURGICON 2021

Dr. Anurag Srivastava, President

Dr. Tarun Mittal, Secretary

Dr. Nikhil Gupta, Treasurer

Delhi State Chapter




SURGICON 2021

Annual Conference of
Delhi State Chapter, ASI

Organized by: Delhi State Chapter, ASI

THEME: TO THE FUTURE & BEYOND

SAVE THE DATE

19th – 21st November, 2021

Venue: India Habitat Centre,
Lodhi Road, New Delhi

Conference Secretariat

Room No. 1200, 2nd floor, Sir Ganga Ram Hospital, Delhi 110060,
Mob: 9811743877, 9810396769, Email: delhistatechapter@gmail.com

From the Editor's Pen

Dear Seniors and colleagues,

It was 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. Although my tenure coincided with the COVID pandemic situation but it was an exciting experience. I was privileged to carry forward the legacy of our previous editors.

I hope I have been able to live up to expectations of our members and seek apology for any shortcomings.

It is my pleasure to thank **Prof. Pawanindra Lal, Prof. Anurag Srivastava, Dr. Tarun Mittal** and all executives for their guidance and cooperation during publications of various issues of the newsletter. I must thank my associates, **Dr. Atul Jain** and **Dr. Suhas Agarwal** for their continued support as an editorial team. It is also my duty to thank the authors who have contributed to achieve new heights.

Penning off for now.

I wish all the members a happy, safe and prosperous Diwali.

"The greatest religion is to be true to your own nature. Have faith in yourselves."



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