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KAKATIYA CHRONICLES

VOL.2

RESEARCH

INGENIOUS TO INNOVATE

CASES

ENIGMATIC TO EDUCATE

EVENTS

CAMPUS THAT IS ALWAYS READY TO CELEBRATE

"BRINGING PERCEPTION AND PERSPECTIVE TO REALITY"

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PRINCIPAL'S ADDRESS

Dear students,
I extend a warm and hearty welcome to all of you, especially to those who have recently joined the KMC family. Our institution has grown in stature over the years, and it fills me with immense pride to see the KMC community expand with the inclusion of the UG 2023 batch, 1st year PG students, and upcoming Nephrology and Emergency Medicine Superspeciality students. Your presence adds new energy and vibrancy to our academic fraternity.
At KMC, we are committed to providing the best possible learning resources to our students, and we believe that each of you has the potential to become the best possible version of yourself. Our students have consistently excelled, not just within our institution but also in various national and international forums. Your hard work, dedication, and aspiration is what drives our institution towards greater excellence.

In recent developments, Kakatiya Medical College- Mahatma Gandhi Memorial Hospital has introduced Emergency Medicine and will soon launch Nephrology as a super specialty. A Teachers' Training Program is on the horizon. Successful webinars, an Anatomy Department event, and outstanding performance in academic competition have highlighted our achievements. Our institution continues to excel and evolve, thanks to the dedication and collective efforts of our community.

As we approach the exam season, it is crucial to emphasize the importance of diligent and thorough preparation. Examinations are not just a test of your knowledge, but they are a stepping stone towards your future. The time and effort you invest in your studies will shape the path to your dreams and aspirations.

We want you to know that we are here to support you every step of the way. Our faculty andstaff are dedicated to providing you with guidance, resources, and a nurturing environment that encourages your success. Your accomplishments will be a testament to our collective efforts.

In conclusion, I would like to extend my heartfelt gratitude to the editorial team for their hardwork on the second issue of our monthly magazine. I encourage all of you to actively participate in this endeavor and help us make it a success for future issues. Your contributions, ideas, and perspectives are invaluable in shaping our community and promoting academic excellence.

I wish you all the very best in your academic pursuits and look forward to witnessing your achievements and growth at KMC. Welcome once again, and let us work together to make the future brighter and more prosperous.

Sincerely,
Your beloved principal

Dr. D. Mohandas,
MS, General Surgery
Principal, KMC

THE PROGRESSION

I come to you today with immense satisfaction at the progress we have made since this new journey was initiated by KMC US Alumni in the last one year with the help of our beloved Principal, Dr Mohan Das. A spectrum of activities was begun about a year ago to improve academic and research activities in Kakatiya Medical College. With medical schools throughout the country undergoing transformation, we have begun to work with students and faculty to help revitalize the campus activities.

One such activity is this college journal spearheaded by students with active input from alumni and faculty. With this edition being the second, I am immensely happy that this shaped up so well again, to follow the grand first edition released on First Kakatiya Research Day (KRD).

First KRD filled so much enthusiasm in the students that we were thrilled to bits. We have had students applying from about 100 prestigious medical schools from all over India. Out of this, we have short listed about 60 students from UG and PG category descended into the campus. The abstracts were presented in poster and podium formats. Apart from this, we arranged medical debates and jeopardy. Cash prizes and certificates were given to the winners. Dr Mohan Das, myself, Dr Anupama Gotimukula, Dr Venu Bathini and from the student body Dr Sai Kiran Kuchana, Dr Rohith Kode and Rohit Singaraju took part actively. We have a big group of student volunteers who worked tirelessly to make this a grand success. Special thanks to Dr Subramanyeshwara Arekapudi form Reno, Nevada for carefully judging all the abstract entries and scoring the abstracts for selecting the finalists! I thank Dr Shailendra, Vice Principal (Research), MediCiti Institute of Medical Sciences for delivering a lecture on "An Effortless Method for Effective Medical Research" & Dr Subramanyeshwara Rao, Director/ Chief Surgical Oncologist from Basavatarakam IndoAmerican Cancer Hospital for talking on the topic of "What's New in Cancer Surgery." We plan to make this an annual event and will strive to make it more and more useful to the students in the long run.

Since the monthly webinars were started, we have had four of our alumni delivering talks.
1) **Anemia- Ignorance is not a Bliss** was addressed by Dr Venu Bathini
2) **Cardiovascular changes in Pregnancy and Hypertensive disorders** by Dr Vivek Katukuri
3) **Pathophysiology and Management of Inflammatory Bowel Disease** by Dr Roopa Vemulapalli &
4) **Acute Coronary Syndrome- Pathogenesis and Management of ST Elevation MI** by Dr Kiran Cheruku.

We have speakers lined up for future monthly talks. These webinars are being attended by more than two hundred students at a time.
Since we do not have a Biostatistician faculty available in the campus currently, we have appointed a part time faculty, Dr Mallikarjun Reddy after discussing with Principal. He has already started delivering classes to students every month and is available to students/PG's doing research on coming up with methodology/statistical analysis. This will help increase the publications by our students.
Last but not the least, Teach the Teachers. We have identified that our faculty needs to be taught in the Research Methodologies so that once they get skilled in this, the knowledge they gain, will be transferred down to the junior faculty and students for years to come. Towards this direction, we are going to work with some experienced faculty from SHARE India Foundation and Indian Institute of Public Health, Hyderabad. We are planning 3-day Research methodology workshops in Hyderabad for 3 years in a row with a structured curriculum being imparted to our faculty. This will facilitate our faculty to come up with population-based studies to dwell into the local disease burden.
In the years to come, we anticipate the KMC Alumni from here in India to work with us and take over these objectives we are trying to accomplish and we wish to continue working with them in the process.
For these things to happen, we have a lot of our senior alumni in US and India who have encouraged, contributed, guided us and I would like to thank them here.
I wish the editorial team of Kakatiya Chronicles much success and hope they would continue to put in their mighty efforts to take this student journal to new heights!

With warm regards,
Sujeeth R. Punnam, MD, FACC
KMC Batch of 1988,
Interventional Cardiology, Stockton, CA, USA
Convener, Kakatiya Research Day
Co-Chair, NRI Alumni Educational Center

FROM THE NRI ALUMNI DESK

KMC Alumni Education Center was inaugurated on January 8,2009. It was built from funds raised by the alumni of Kakatiya Medical College (KMC) in the United States. The plan to build the education center came up during a convention attended by some of our alumni, including me in 2004. We were aware then that there will be Golden Jubilee celebrations of KMC in 2009. The alumni in attendance wanted to give a gift to our medical college which provided us with a great education at a nominal cost. We started fundraising at that meeting with the understanding that the nature of the gift would be decided later in consultation with KMC principal and the faculty and alumni in USA. In a very short period during the meeting, we received pledges totaling $200,000. Of note, Dr. Hanimireddy Lakireddy pledged $100,000. That pledge boosted everyone's enthusiasm for the project. Later, Dr. Tajuddin Ahmed also pledged $ 100,000 to this project. Fittingly, 0ur auditorium is named after these two largest donors.

L to R: Principal of KMC, Dr. Surender, Drs. Sreedhar Rao, Mahendar Reddy, Hanimireddy Lakireddy, Mr. Y. Dayakar Rao, MLA, Chief Guest, Mr. S. Jaipal Reddy

An **ad-hoc committee** was named with three members (Dr. Laxmipathi Garipalli, Dr. Sreedhar Rao Pulluru and Dr. Gopal Reddy Gade) to explore potential projects and continue fund raising. We met KMC principal and faculty in 2006 to discuss the needs of our medical college. It was decided to build an education center. The new building will have an auditorium with about 300 seats, with modern audiovisual equipment to facilitate educational activities at the medical college, a dining hall on the main floor, 7 guest rooms on the second for use by the examiners or our alumni visiting KMC, a large hall on the third floor for instruction (e.g., CPR demonstration) and a computer room. We requested Dr. Surender, principal of KMC, to allot an acre of land on the college campus for the new building. We were very happy to learn that land in a prime location was granted.

We established a construction committee in the USA and a separate one in Warangal. The goal of USA committee was to raise funds from our alumni in US and keep our communication with the committee in India. Our goal was to raise 1.5 to 2 million dollars. With our best efforts, we raised just over a million dollars from about 110 donors in a four-year period. The main goal of the committee in India was to supervise the construction and later maintenance of the building. We chose Dr. T. Ravinder Rao to lead the committee in India. He had considerable experience in constructing educational institutions, one well known among them is Kakatiya Institute of Science and Technology. He chose Mr. Satyanarayan Rao as the engineer and architect for the project. A few other local alumni were added to the local committee.

Construction committee (USA)	Construction Committee (Warangal)
Dr. Sreedhar Rao Pulluru	Dr. T. Ravinder Rao
Dr. Tajuddin Ahmed	Dr. V. Narasimha Rao
Dr. Gopal Reddy Gade	Mr. Satyanarayan Rao
Dr. i Lakireddy	Dr. Sudhakar Reddy
Dr. Laxmipathi Garipalli	Dr. Vishwanath Rao
Dr. Rojanandam Samudrala Dr. V. Haranath Reddy Dr. Suresh Reddy, Dr. Jitender Katkuri	KMC principal

Dr. Ravinder Rao established a bank account to receive funds from USA for construction. In USA, the donation checks were made out to Osmania University Medical Alumni Charitable foundation. Funds collected were transferred by the chairman of the foundation to the bank account in India that was established to receive them. Dr. Sreedhar Rao was the contact person for Dr. Ravinder Rao in India and the chairman of the charitable foundation in USA for money transfer.
Construction of the building started in early 2007 and the auditorium construction was completed in time to conduct the Golden Jubilee celebrations on January 8 and 9, 2009. The rest of the building construction was completed in 2010. All the donors were honored with a plaque embedded in the lobby of the educational center.
It is important to note that all the funds were raised from the donations from KMC alumni in the USA. Our project would not have succeeded with out enormous help from the team in India, chaired by Dr. Ravinder Rao. Mr. Satyanarayan Rao was of great help in coming up with building plans and completion of the project. Once the construction was completed and the building was ready to use, our USA based committee took the responsibility to maintain the building with help of India committee. There are five employees that maintain the education center. To avoid any future misunderstanding between the college administration and the USA committee, the district collector at that time recommended that both parties sign a memorandum of understanding (MOU) which spells out the agreement. It was signed by both parties. It has been an extremely useful document to facilitate the operation of the NRI Alumni Education Center.

Dr. Sreedhar Rao Pulluru,
Professor Emeritus of Pediatrics
SUNY Downstate Medical Center
Brooklyn, New York
KMC batch of 1960

KAKATIYA CHRONICLES

INTRODUCTION

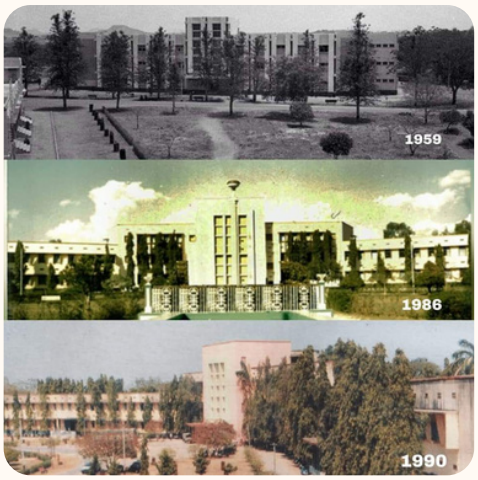
CASE CORNER

RESEARCH CORNER

MISCELLANEOUS

KMC OVER THE YEARS

AS TOLD BY DR.VLN RAO SIR



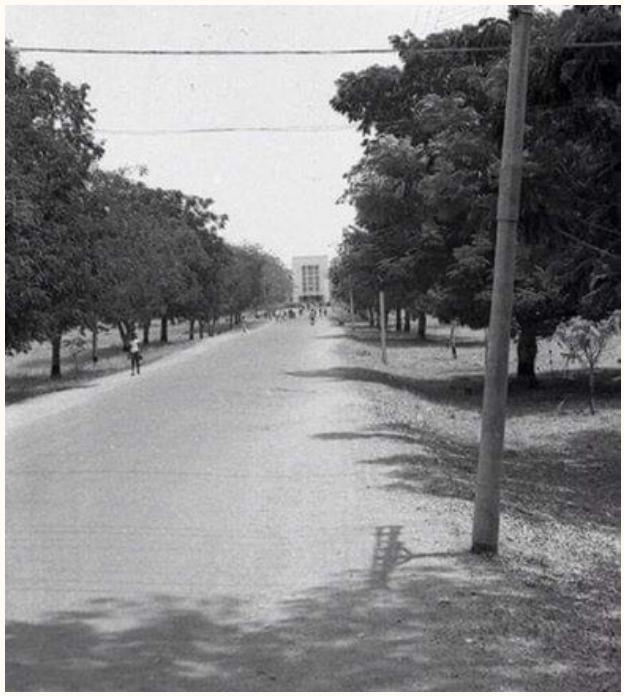
In this edition, we delve into the heart of Kakatiya Medical College, through a conversation with one of its first students (1959), Dr. VLN Rao sir. After MBBS, he completed his Post Graduation in Physiology and later joined as an Assistant Professor in the college. His retirement in 1996 did not stop his association with the college. He is an active member of the Alumni Committee and served as the Coordinator of the NRI Auditorium until recently. He has seen KMC grow from the stage of a seed to what it is today while viewing it through multiple lenses; a student, a resident, a professor and an alumni committee member.

An institution is much more than a building and the walls surrounding it; its true essence lies in the countless stories it weaves over time. Kakatiya Medical College which was established in the year 1959, has many such stories to tell. The residential building that served as its makeshift campus was generously donated by the Pingali family.

The surroundings were rustic, with kutcha roads and limited transportation connecting it to the collectorate. However what made this institution special was its association with the government, even in its early years as a private college. The Regional Medical Education Society, led by the Collectorate, ensured transparency in the admission process, providing students from various backgrounds a fair chance at quality medical education.

The college was set up, and the students were invited from all over the country to join. Their training involved subjects like Physics, Chemistry, Botany, and English. Each department consisted of a lecturer and an Assistant Professor. In its early days, the gender distribution among students was quite imbalanced. Out of the original batch of one hundred students in 1959, only 5 were girls, while the rest, 95, were boys, fast forward to 2023, the number of girls has surpassed that of boys, with 129 girls compared to 121 boys. The students' ages showed considerable diversity, ranging from 16-17 year old teenagers to 23 year old individuals who had already completed their post graduation but were pursuing a career in medicine. What stands out is the affordable cost of living, with monthly expenses including accommodation and rent, amounting to less than 30 rupees.

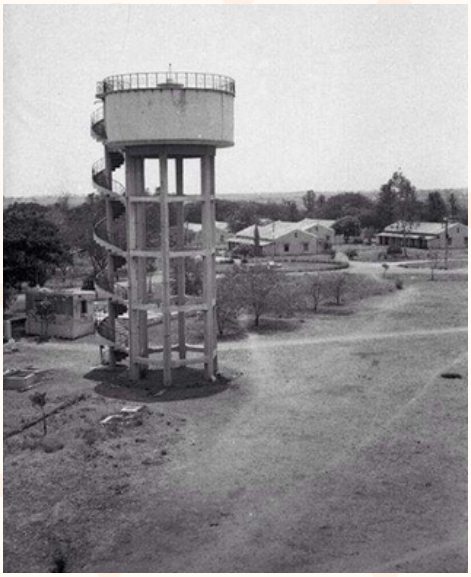
In the year 1959, electricity was a luxury. Although our campus provided modern amenities like ceiling fans and lights, the availability of electricity was far from reliable. The students who had enrolled in this prestigious institution from varying demographics and areas faced and successfully overcame this challenge by relying on kerosene lamps. But that was far from the only inconvenience faced by them; the commute was sparse. Students would often gather in groups of eight to ten and hire bicycles for their weekly journey to the city part of Warangal, where they would gather to enjoy theatrical performances and lunch. After the first show, they would return around 10:30 PM, usually in larger groups of 15-20 members. The shared experiences of their journeys fostered a strong sense of camaraderie among the students.



The campus's rural setting often unified students through the stories of their encounter with snakes and scorpions. What's noteworthy is that no one ever suffered a snake or scorpion bite, which demonstrates the wondrous harmony that blooms when humans learn to dwell peacefully in nature.

By A E

In the second year, the students began their formal training in Anatomy, Physiology and Biochemistry. Their respective laboratories were also housed in the same building. Dr. Kumar, hailing from Bihar, served as the Anatomy Professor, Dr. Tandon from Uttar Pradesh was the Physiology Professor, and Dr. Gousuddin was the Biochemistry Professor. This diverse group of professors brought a wealth of knowledge and wisdom to the students.



The introduction of practical learning was a significant event, as it allowed students to work with real specimens. The first cadaver was sourced from Hyderabad, and the initial set of bones came from Lucknow and Hyderabad.

The development of the Anatomy Museum was a particularly special project. Each student from the inaugural batch was entrusted with the task of preparing a specimen of a specific organ in a jar of formalin within two weeks. This collaborative effort not only enriched the museum's collection but also instilled a sense of responsibility and pride in the students.

The students-teacher relationship at Kakatiya Medical College was a vital part of the institution's culture. The teachers were not only educators but mentors who guided the students throughout their academic journey. The first principal of the college, Mr. LD Khatri, had an impressive background, having recently retired as the Director General of Health Services for Libya. His appointment as the principal was a significant milestone for the college. Dr Khatri was actively involved in life at the campus, frequently visiting and interacting with the students. The bond he shared with the students was that of an elderly, wise man whom the students looked up to for guidance and inspiration.
As the years passed, Kakatiya Medical College expanded significantly. The MGM Hospital, originally a 150-bed facility, grew into a 300-bed hospital by 1959, and today it can accommodate over 2,400 patients simultaneously. These junctures were instrumental in shaping the healthcare infrastructure of the region.
In 1962, Kakatiya Medical College transitioned to its current location in the Nizampura area, marked by 24 different buildings housing lecture halls, laboratories, and demonstration rooms. These buildings, which are now in a dilapidated state, were instrumental in shaping the educational experiences of the institution's early students who then went on to become exemplary doctors.

Initially, from 1959-1962, the students and faculty of Kakatiya Medical College witnessed numerous developments. It was a time when only a few cars could be seen on the roads, primarily government vehicles and jeeps. Senior students fondly recall relying on cycles, rickshaws and tongas as their primary mode of transportation.
However, since the mid-1960s, the number of cars on the roads gradually increased as the region experienced progress and economic growth. The improved accessibility not only benefited the college community but also indicated the overall development of the area.
Notably, around the same time, an engineering college was also established. Regular organization of sports and cultural events played a pivotal role in fostering stronger relationships between medical college and engineering students. These events provided a platform for interaction, collaboration, and healthy competition, allowing students to venture into new horizons.

Between 1961 and 1963, a momentous decision was taken to allocate 50 seats from each batch to the government in exchange for their support in administration and other areas. This arrangement substantially impacted the college's dynamics.
During the mid-1960s, there was a subtle shift in the student composition. The number of students from regions outside of Telugu States began to decrease, with those from the Telugu States forming the majority of the aspiring doctors.
In 1965, the serving Prime Minister of India, Indira Gandhi, inaugurated the new campus. The inauguration and the subsequent developments symbolized the transformation of Kakatiya Medical College from its early days as a modest institution to a more prominent and interconnected part of the educational landscape. The expansion of the campus and the establishment of the engineering college signified growth, not only in infrastructure but also in the bonds and relationships that defined the Kakatiya Medical College community.

An interesting piece of trivia about our college is that it pioneered the use of entrance examinations for admissions, beginning in 1971. It was the first in United Andhra Pradesh to do so. This move was instrumental in ensuring a transparent and merit-based admission process. Subsequently, in 1977, Kakatiya Medical College transitioned into a government college. This transformation brought about increased government funding and further development for the college, ushering in a new era of growth and progress.
It is worth noting that during the initial years, the fee was a mere 5000 rupees to be paid in the beginning of the first year, followed by an annual tuition fee of 1000 rupees.

In the past, the MBBS program at Kakatiya Medical College spanned seven years. The first year was dedicated to pre-medical studies, encompassing Physics, Chemistry, Botany, Zoology, and English. The subsequent five years focused on medical coursework. The initial two years emphasized Anatomy and Physiology, with Biochemistry integrated into Physiology. The second phase of MBBS included a two-year curriculum covering Pathology, Pharmacology, Forensic Medicine, Community Medicine, and Microbiology under the umbrella of Pathology. The final phase comprised specialized subjects like Medicine, Surgery, Obstetrics, Gynecology, Ophthalmology, with other areas such as Otorhinolaryngology, Orthopedics, and Pediatrics integrated into the final year. Following this rigorous education, students undertook a one-year internship at MGM Hospital, Warangal.
A highly influential figure in the lives of the first batch of KMC was Dr. T. Lakshmi Narayana, who had retired as the Director-General of Health Sciences in Tamil Nadu. Subsequently, he served with the Ministry of Health and Family Welfare in Delhi and eventually succeeded Dr. LD Khatri as the principal of the medical college. Students of KMC affectionately referred to him as "Tata," reflecting the warm and respectful relationship he maintained with them.
Dr. Lakshmi Narayana was known for his exceptional student-friendliness and genuine concern for their well-being. For instance, during examinations, he arranged for snacks and tea in the college mess upon learning that students had to travel outside for proper refreshments. He regularly interacted with the students, actively passing on the virtues of a good doctor to each one of them. He was among the first individuals to contribute to their holistic development and left a substantial imprint upon each of their minds.
Many such eminent personalities have put forth their heart and soul into steering this institution in the right direction during its formative years, and they will surely be immortalized in our memory, as well as KMC's history. All we can do is continue their legacy and do our best to make them proud as the alumni of Kakatiya Medical College one day.

CASE CORNER

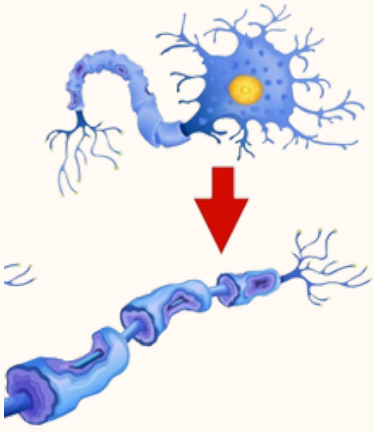
MEDICAL THEORIES &CLINICAL REALITIES!

01 Neuro Optic Blaze

Devic's disease, an infrequent and severe autoimmune disorder affecting the central nervous system, typically affects young females with a prevalence of 0.3-4 cases per 100,000.
In a recent case presented at MGM Hospital, a 20-year-old female patient manifested abrupt-onset acute flaccid quadriplegia accompanied by tingling sensation over her limbs. Devoid of cranial, cerebellar, GIT, urinary system's involvement and without spinal trauma or comorbidities.
Vital signs were stable, and neurological assessments revealed no memory deficits. Laboratory results and serological tests came negative. However, cerebrospinal fluid analysis indicated elevated protein and normal glucose levels, with no cellular presence.
Initial clinical suspicion leaned towards Guillain-Barré Syndrome (GBS), thus prompting the administration of intravenous immunoglobulin (IVIG). The patient's clinical trajectory was marked by an asymmetrical restoration of limb power, with certain limbs achieving a grade of 3/5 while others remained at 0/5.
However,in the second week, she developed blurred vision, with a visual acuity of counting fingers at 5 meters. MRI scans of the brain and spinal cord unveiled the presence of acute infarctions in the periventricular white matter of the left parietal lobe and the bilateral cerebelli. Notably, intramedullary hyperintensity was evident within the spinal cord, indicative of longitudinal extensive transverse myelitis (LETM). Axial images vividly displayed the characteristic "owl eye/snake eye" appearance.
Crucially, the patient successfully met the stringent "International Panel for NMOSD Diagnosis (IPND) Diagnostic Criteria" for Neuromyelitis Optica Spectrum Disorder (NMOSD), with two pivotal clinical features being the occurrence of acute myelitis associated with LETM and involvement of the Area Postrema.
Therapeutically, the patient underwent a course of methylprednisolone pulse therapy, which was subsequently followed by oral prednisolone, administered at a dosage of 1mg/kg (40mg) daily for one month, gradually tapering thereafter. The patient was discharged with precise instructions to engage in neurology follow-up.

- Dr. M. Pavan Kumar (Professor of Internal Medicine)
  Unit VI faculty and postgraduates

02 Are nervous and immune system frenemies?



Guillain-barre syndrome (GBS) is a post infectious polyneuropathy involving mainly motor but sometimes may also involve sensory and autonomic nerves. Weakness begins usually in the lower extremities and progressively involves the trunk, upper limbs.
A 26-year-old male patient presented to the OPD complaining of pins and needles sensation in his hands and toes for the past week. He also experienced weakness in his legs, making it difficult to walk and climb stairs. He had difficulty swallowing and speaking, and experienced fatigue with blurring of vision. High blood pressure and abnormal heart rhythm or fast heart rate were observed. The diagnosis of GBS can be challenging because its symptoms can mimic those of other neurological disorders.
CSF examination and nerve conduction studies, as well as spinal taps, confirmed GBS. On physical examination, the patient was unable to walk independently for 10 minutes. Upon this manifestation, sudden immunomodulatory therapy was started. As the patient's onset of disease was not more than 2 weeks, IVIg treatment was given. If the patient had come with a 4-week history of complaints, plasma exchange should have been done. Beyond these time periods, evidence on efficacy is lacking.

- Ankit Joshi, IInd year MBBS

03 Nerve tumor spotlight

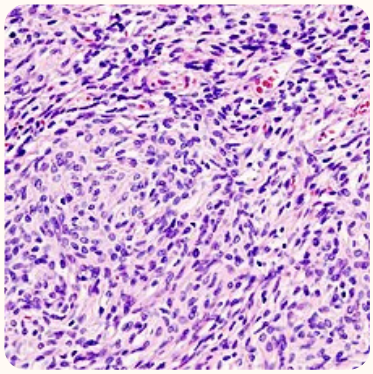
Peripheral nerve sheath tumors, like schwannomas, are rare, benign growths originating from Schwann cells. They typically manifest as painless, slow-growing masses. A 28-year-old patient, presented with a chief complaint of a swelling in the left forearm. The swelling had developed insidiously over seven years, with no associated pain or history of trauma.
Clinical examination revealed a well-defined, oval-shaped swelling measuring 7x3 cm in the flexor compartment of the left forearm. The skin over the swelling was normal, and it had a smooth surface with no tenderness. Ultrasound and MRI confirmed the presence of a fusiform lesion proximal to the carpal tunnel along the course of the median nerve.

Histopathology revealed cellular features consistent with a peripheral nerve sheath tumor, including round cells with eosinophilic cytoplasm, vacuolated cytoplasm, and spindle nuclei leading to the diagnosis of schwannoma.The patient underwent excision of the tumor with nerve grafting. Management of localized peripheral nerve sheath tumors involves surgical excision, which was performed in this case, followed by peri-operative chemo and radiotherapy.

-Sahithi Shivani Joshi, Final Year MBBS

04 Suspicion to Certainty : How a team of specialists uncovered a Rare tumour

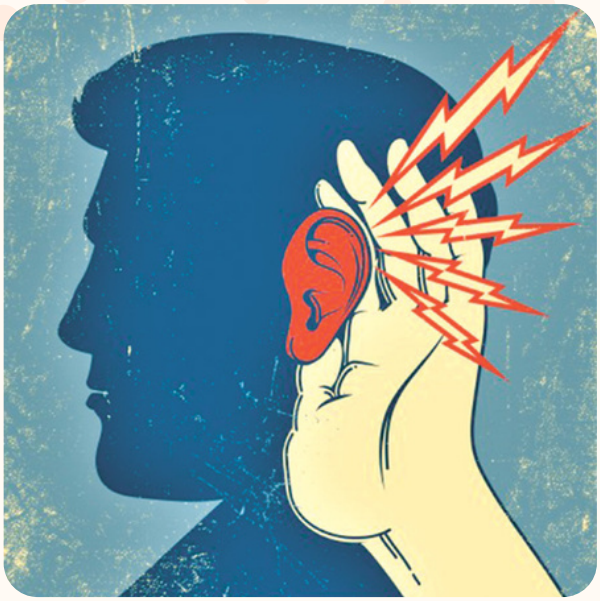
Described here is a scenario where the diligent work of a pulmonologist , a radiologist and a pathologist unveiled the enigma of a rare tumour. A 70 year old male smoker, retired electrician by occupation presented with dry cough and shortness of breath since 1 month with no other comorbidities. Clinically there were reduced breath sounds in right hemithorax with pleural rub. X ray showed a large homogenous opacity abutting the right heart border and cardiophrenic angle which looked like an anterior mediastinal mass and then turned out to be a pleural based tumour after CECT chest. USG guided transthoracic needle biopsy of the mass along with histopathology and IHC was done which revealed a rare pleural tumor "Solitary Fibrous tumour."



It is a rare mesenchymal, ubiquitous tumor, with an incidence of 1 new case per million people a year. Extrameningeal SFT cases were distributed as follows : abdominal cavity 31%, limbs 29%, pleura 22%, trunk 11% and others 7% .

- Dr. Madhurima, 2nd Year PG,
  Pulmonology

05 Rosenberg-Chutorian Syndrome



In a perplexing case at the Neurology OPD, a 55-year-old man arrived with a mysterious array of symptoms that left doctors scratching their heads. His complaints included a baffling six-month weight loss and a persistent itch for the past month, but the real puzzle lay in his medical history. He had been struggling with difficulties in walking for 25 years, suffered with progressive vision loss over two decades, and coped with hearing impairment for 15 years, ultimately leading to recent complete immobility.

Examination revealed signs of anemia - pallor, rapid heart rate, and alarmingly low hemoglobin levels. But what truly left doctors puzzled was the neurological assessment. His lower limbs were alarmingly flaccid. Severe ataxia rendered gait analysis impossible. Not only that, the patient exhibited a loss of fine touch and vibration sensation. Cranial nerves 2, 3, 4, 6, 8, and 12 were all compromised.

Further investigations only deepened the mystery. Ultrasound, renal, and liver function tests, as well as viral screening, uncovered no significant abnormalities. Ophthalmological examination revealed bilateral optic atrophy. The pure tone audiometry results painted a picture of bilateral sensory neural hearing loss. And nerve conduction studies hinted at a bilateral axonal neuropathy, leaving doctors with more questions than answers.

The final diagnosis? The rarely encountered Rosenberg-Chutorian syndrome. This exceptionally rare disorder presents with a triad of symptoms - neurological deficits, vision and hearing impairments, and hematologic abnormalities. There is no known cure for this enigmatic syndrome.

- Dr. Sangepu Saikrishna, IInd Year PG
  General Medicine

PCOS: THE SILENT SABOTAGE

Fashion magazines and so called influencers have persistently propagated unrealistic standards of beauty to women. This compels them to embark on an unending pursuit of the elusive ideal physique, making them more self-conscious, aggravating the torment of those afflicted with the oddly obscure disorder of the female body known as PCOS.

Polycystic ovary syndrome (PCOS) is a hormonal disorder which affects millions of women worldwide. It's a condition that doesn't discriminate, affecting women from diverse backgrounds.

Beneath the glamorous facade of the entertainment industry are the countless silent struggles, left unheard and unseen. PCOS is one such issue that is rarely addressed by these influencers, claiming to be the flag bearers of body positivity.

Nevertheless, there are always some who differ from the norm and genuinely strive for a positive change. Let's dive into the lives of remarkable celebrities whose lives serve as a beacon of hope to the affected across the world.

"The fear you have of me, there's a question behind it that hasn't been answered and that's why you fear me or you're intimidated or you're mocking me"

This statement highlights that the world does not absolve anyone from the mockery. Be it you, me, or even a famous model and motivational speaker like Harnaam Kaur, no one is spared from the taunts, the world bestows upon people it labels as different. Diagnosed with PCOS at the tender age of 12 years, her abnormal hair growth ostracised her from her peers, which caused her to shave regularly to fit in. The constant bullying led her to self-harm and suicidal thoughts, but rather than giving up, she chose to make a difference.

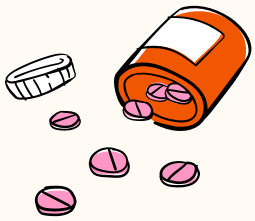
Now, at 32 years of age, Harnaam proudly displays her beard and holds a Guinness World Record for the same. She works as a social activist raising awareness about PCOS and the associated problems, as well as encouraging women all over the world to not shy away from self-expression.

Every individual is different; consequently, their approach towards a similar problem can vary greatly. Where, Harnaam was bullied in her youth and at last decided to embrace the gift nature bestowed upon her, Shruti Hassan, our beloved actress received a completely different treatment.

Having been diagnosed with endometriosis and dysmenorrhea early on in her life, she cursed her body, as she believed she had done nothing to deserve this suffering. But, her family and friends were always empathetic and treated her with care whenever they found her having a rough day. With their extraordinary support, Shruti understood that her contemptuous thoughts regarding her own body only served her harm. Slowly, her viewpoint transformed and instead of dreading her periods, she began to embrace them as a symbol of feminine strength and fertility.

Although 1 in 5 women in India suffers from PCOS, 70% of them remain undiagnosed. The pathogenesis of the disorder is chiefly attributed to the '2 Hit Hypothesis,' in which the first hit is the genetic variations which elevates the susceptibility, and the second hit are the provocative environmental factors like sedentary lifestyle, which activates the disease.

Treatment for PCOS is a question left largely unanswered. Primarily, lifestyle and dietary modifications are recommended to the afflicted to reverse the hormonal imbalances. Symptomatic treatment includes prescription of Oral Contraceptive pills with varying combinations of estrogen and progesterone. As our understanding of role of Functional ovarian Hyperandrogenism in pathogenesis of PCOS is improving, therapeutic reduction of androgen production or Androgen Receptor blockers are emerging as valuable strategies in PCOS treatment.



While there are no current AR antagonists approved for the treatment of PCOS, there is growing interest in the potential of therapeutic modulation of Sex Hormone binding Globulin(SHBG) to manage hyperandrogenism as well.

Now, PCOS as an area of research is as massive as the population it affects. An in-depth analysis of the various intricacies behind it would cost us an entire magazine, let alone an article. This piece may end here, but innovations for better diagnosis and treatment of PCOS have only begun.

RESEARCH CORNER

EPILEPSY & THE CULTURE THAT MASQUERADES IT

Seizures, Convulsions and Auras are all terms pertaining, but not only limited to epilepsy syndromes. They differ from each other in their pathogenesis and clinical manifestations. These symptoms hold historical importance in the fact that they have been mentioned in old Egyptian scriptures dating back to 2000 BC, yet the malpractices in dealing with such disorders persist even today.

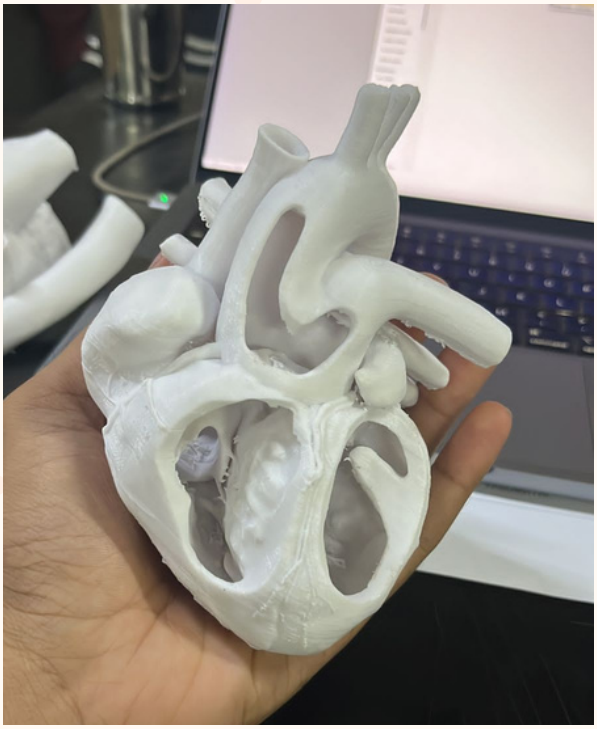
There have been many documented cases where attenders have resorted to extra-allopathic practices that have led to tragic demise of patients suffering with epilepsy. Such practices fall under the banner of faith-healing, exorcism, and phenomenon driven by superstitions. Even more, modern-day endorsers of such practices defend it under the pretext of placebo effect.

The working hypothesis of this research is that people who belong to lower socio-economic status have received lower educational opportunities and have had lesser exposure to modern scientific based practices but have always indulged in ancient cultural practices familiar to them. Such a trend has passed down among generations and due to lower awareness rates, the prevalence of such malpractices remains silently high. However, exorcism and faith healing practices are also observed even in the higher strata of society. This can be attributed to belief systems, religiosity and easy suggestibility. This entire hypothesis was then tested against a null hypothesis. The central objective of the research was to assess the extent of correlation between knowledge, attitude and practices towards epilepsy and religious exorcism rituals among the adults of Warangal. The entire findings of the research and the methodology devised is yet to be published.

- A community based study by Final Year MBBS Part 2 students

PRINTED PERSPECTIVES

ADVANCING MEDICAL EDUCATION THROUGH 3D INNOVATION



Congenital heart defects (CHDs) pose a complex challenge in comprehending their intricate three-dimensional structures. This study explores the utilization of advanced additive manufacturing, as an innovative tool for teaching and comprehending CHDs within the field of medical education.

Our aim is to introduce the 3D printed models in learning Congenital heart defects as a supplementary resource and to assess the efficacy and impact of these models in comparison to traditional learning methods. A randomized controlled study design was implemented, targeting students of MBBS phase-1 as the study population. The study was conducted over a period of two months, after approval from ethical committee. 103 students gave informed consent to take part in the study.

The key materials employed in this study comprised of 3D printed models, a developed questionnaire, and the application of Likert's scale. The participants were divided into two distinct groups: the control (traditional learning), and the study group (3D printed group). Following the completion of the lecture, both groups underwent an objective test on CHDs and a learner satisfaction scale utilizing the Likert's scale. The resulting data was analysed employing the SPSS statistical software version 23.

The 3D printed group, exhibited significantly higher objective, image-based, and overall scores in comparison to the control group ($p < 0.05$). Furthermore, the analysis of the learner satisfaction scale revealed a strong positive ($R2 = 0.791$, $p < 0.01$). 3d printed models enhance the understanding of the congenital heart defects along with traditional learning methods. However, further comprehensive evaluation needed.

-T Sudheer Kumar, Final Year MBBS Part 2

ICHOR SALVAGIUM

A STUDY ON BLOOD SCARCITY IN THE STATE OF TELANGANA

India grapples with a persistent blood shortage crisis, exacerbated by insufficient voluntary donations and inadequate infrastructure. The scarcity jeopardizes countless lives, particularly those in critical conditions, surgeries, or facing medical emergencies. Blood, a precious and irreplaceable resource, plays a vital role in various medical treatments, including transfusions for anaemia, surgeries, and managing chronic illnesses like thalassemia. Raising awareness about the critical need for regular, voluntary blood donations becomes paramount. Mobilizing communities to participate in donation drives and establishing robust blood banking systems are essential steps to ensure a sustainable and sufficient supply, ultimately safeguarding lives across the nation.

The study aimed to assess the extent of blood scarcity at different tiers within Telangana. Multiple blood banks were surveyed to gather relevant data. Identified were key deficiencies in the state's management of blood as a crucial resource. The study pinpointed areas where Telangana faced challenges in handling its blood supply and proposed actionable recommendations to enhance the current scenario.

- **A Community based study by Final year MBBS Part 2 students**

RAMPANT USAGE OF SMART PHONES & ITS EFFECTS ON SLEEP

Frequent poor sleep quality is closely linked to the escalating issue of problematic smartphone usage, with constant engagement disrupting natural sleep patterns. The emitted blue light suppresses melatonin production, crucial for sleep regulation. The addictive nature of smartphone activities leads to prolonged screen time, further compromising sleep. Persistent sleep troubles are associated with health concerns and cognitive issues, with emerging theories emphasizing the direct impact of mobile phone usage on sleep quality. Urgency in prioritizing sleep for physical well-being and cognitive function is evident.

Addressing sleep patterns becomes crucial in navigating the intricate relationship between technology and overall health.

The working hypothesis is that sleep quality of undergraduate students is largely effected by the excessive exposure to smart phone usage and increased screen time. The neurobiology of the same is not completely understood, however some theories have been put forward namely, Corticotrophin Releasing Factor (CRF) dysregulation causing hyper arousal or hypervigilance through the day and difficulty sleeping; Greater cerebral glucose metabolism during waking and non REM; Melatonin release from pineal gland being hampered by direct screen light causing altered diurnal rhythms.

The main objective of the study was to estimate the prevalence of digital addiction and generalised poor sleep quality in undergraduate students and ascertain the correlation between the two.
The results show a significant statistical correlation between poor sleep quality and problematic smart phone usage.

- AV Chinmay, Final Year MBBS Part 2

PROSTITUTION

CAGED UNTIL BROKEN

Sex work has long been in existence, from pre-modern societies, to the contemporary world today. It is ubiquitous worldwide, but socially invisible and stigmatized. Amidst the intricate tapestry of society, the lives of sex workers (SWs) remain a realm often veiled by judgment and secrecy. Although a substantial amount of research has been conducted with respect to their physical health, little attention has been paid to their mental health.

There are a multitude of psychosocial and psychosexual issues which plague **female commercial sex workers** (**FCSWs**). These include depression, anxiety, post traumatic stress disorder (**PTSD**) and substance abuse. It is the need of the hour to assess the extent of these issues and to approach prostitution as a multi traumatic phenomenon.

This research unveils a poignant narrative about the lives of Female Sex Workers in the shadowy red light areas surrounding Warangal. This cross-sectional study aims to scrutinize their mental health, burnout, and quality of life. It was conducted by administering pretested structured questionnaires to consenting participants in their respective localities. The entire findings of the research are yet to be published.

The study lays bare the torment that FSWs endure. It reveals alarming statistics, exposes their struggles, and urges a collective commitment to combat the stigma, offer mental health support, and create a more equitable, inclusive world for these individuals. This research serves as a pivotal step in honoring the strength and resilience of those who defy society's conventions in their relentless pursuit of survival.

-Vaishnavi Gulla and Team. (Final year MBBS Part 1)

GANESH CHATURTHI

Ganesh Chaturthi at our college, which took place from September 18th to 20th, was a vibrant and joyous celebration. This three-day extravaganza brought together students, faculty, and sponsors in a spirit of unity and devotion.

Lord Ganesha made his way into our campus on the 17th evening. Ganesh Aagaman happened with great enthusiasm and eagerness. On the morning of the 18th, the festivities kicked off with Pratisthapna Pooja, conducted by Evanderz. The Vice Principal, Dr. Ram Kumar Reddy joined in the puja. In the evening, Resilientz, our final-year students, illuminated the campus with the enchanting Deeparchana. The idol making competition and the mythology quiz also took place on the same eve, with spirited students participating in great numbers. The beautiful artwork done by our talented students was displayed. This elegant art gallery decorations adorned the event and was an attraction for many.

The 19th morning was marked by the Ganapathi Homam, a sacred ritual performed by Renokrantz. Our revered Principal, Dr. Divvela Mohandas Sir and the Superintendent of MGM Hospital, Dr. Chandrashekhar Sir participated in the homam as well. As the day progressed, the kite festival took place, and students flew their kites to reach for the clouds. Zenolentz, our dedicated house surgeons, conducted a heartwarming Pushparchana in the evening. Then happened the magical dandiya night, where one could feel the electrifying energy and festivities in the very air. Students danced to their heart's content, and it was indeed a delightful sight, with vibrant streets and radiant smiles lighting up the atmosphere.

The culmination of the celebrations took place on the 20th. In the morning, our esteemed faculty and postgraduate students performed the Vishesha Abhishekam, a ritual that radiated with reverence. The Rangoli competition took place as well, adding vibrant colors to the fest. In the evening, Xentaurianz led the Maha Harathi, filling the air with a divine glow. As the sun set, with heavy hearts, we bid farewell to our beloved Ganesha.

Ganesh Chaturthi at our college served as a reminder of the importance of tradition, unity, and cherishing moments of togetherness. In the midst of our hectic lives, we found solace in this celebration, strengthening bonds and fostering a sense of community.It was a reminder that amidst the rigorous pursuit of knowledge, we must take time to celebrate, connect, and create lasting memories.

Ganapati Bappa Morya!

Ashwini Navdeep, Vaishnavi Gulla, Sai Aneesh, Final Year MBBS Part 1

DEMONIC POSSESSION EXORCISM —VS— PSYCHIATRY

AN INDIAN PERSPECTIVE

Surrounded by the Aravalli range, at the border of Dausa and Karauli district in Rajasthan, lies a small village called Mehandipur, which is famous worldwide for being one the largest centres for exorcism. Everday, thousands of devotees flock the Mehandipur Balaji temple, many bringing with them a family member or friend who is behaving 'strangely'. Demonic possession is the phenomenon where people believe that a person's body, mind and consciousness have been taken over by spirits, while exorcism is the ritualistic practice by which those spirits are supposedly driven out of the body. Almost all major religions in the world have their own unique ways of exorcisms to expel such 'evil spirits'. The term exorcism itself became popular since the 1973 Hollywood horror film: 'The Exorcist'. In this article, first, we will briefly look at the practices and rituals regularly done in Mehandipur Balaji Temple, then we will gradually delve into the scientific background of this topic.

As the saying goes, even in the heat of Rajasthan, once you enter the village, you will feel a sudden drop in temperature. There are 4 chambers in the temple, dedicated to Balaji or, Lord Hanuman, Bhairav ji and Pretraj, the king of ghosts in Hindu mythology. The first 2 chambers are where mainly pujas or prayers are carried out. Unlike other temples, where the atmosphere of the temple is filled with the sweet smell of burning incense sticks and sounds of bells and chants reverberate, here it is quite the opposite.

You will be greeted instead by the screams and shouts of the 'possessed' as well as of the priests trying to exorcise them. Again, unlike other temples, you are not allowed to eat any prasad (sweet offerings). Infact you are not allowed to eat anything or even drink water while you are in the village. Instead, you will be given a black ball which you should throw into a fire burning in-front of the temple, which is supposed to protect you from the 'negative energy' you are soon going to experience when you enter the temple.

The third and fourth chambers are not for the faint-hearted. So, there are several exit doors in the second and third chambers from where you can leave anytime, if you feel overwhelmed or uncomfortable by what you see or hear. You will see people who are chained to the walls or tied up, people who are being whipped and beaten repeatedly by the priests or having boiling water poured upon them, all in the name of exorcism. You are advised beforehand not to look into the eyes of those possessed people or even touch anything inside the temple, as you might in-turn get possessed. Once you leave the temple, you are not allowed to look back, even if you hear someone calling out your name. You can finally eat or drink once you are out of the village. Man has always been afraid of what they do not understand. Hence, since time immemorial, they have attributed supernatural causes to many such phenomenas, the leading among them being psychiatric disorders.

As a man of science and a Psychiatrist in the making, we deal with hundreds of such patients everyday who are brought to us by their attenders, after having visited many temples, faith-healers and babas. It often becomes a real challenge explaining to the patient's attenders that what the patient is experiencing is purely a psychiatric disorder, or specifically, a disease of the brain and mind which is very much medically treatable.

Diseases of the body are easier to identify, diagnose and patient himself, or herself as well as patient's family members are aware of most of them. But diseases of the mind are elusive, in certain diseases patients themselves do not have the insight, or knowledge that there is something wrong with them.

One of my seniors who had completed his MD in Psychiatry from a reputed institute visited Mehandipur Balaji Temple a recently and decided to talk to a couple of patients there. The first patient he encountered complained that whatever he was thinking, his thoughts were leaking outside from his head and everyone was getting to know about them. This is a classical and salient symptom of a complex psychiatric illness called Schizophrenia, which has excellent medical management. According to him, we can see a multitude and diverse varieties of psychiatric patients who are brought there to be exorcised. It is to be noted here that since 2013 there is an international collaboration among scholars and Psychiatrists from Germany, Netherlands, AIIMS New Delhi and Delhi University (DU) who are conducting an ongoing study to evaluate all aspects of treatment and rituals at the temple.

Not only this temple in particular, many religious places all over India including temples, dargahs and missionary houses are filled with such people who are behaving in 'strange and inexplicable manner' according to the general population. But early identification of such symptoms is the need of the hour so that medical intervention can be started at the earliest with better outcomes.

In conclusion I can say with confidence that there is nothing like demonic possession and the long hauled and inhumane practices of exorcism is as unscientific as anything can be. But due to lack of awareness, flailing literacy rates and prevailing superstitions, such practices are in vogue, which is detrimental to the patient in the long run. My article is aimed to spread awareness regarding this particular topic and to dispel the eerie atmosphere and false notions around such unfounded beliefs so that overall patient care is improved.

Out of many patients I have treated successfully so far, I will end this article with the story of a 23 years old male patient, in his 3rd year of engineering from one of the best institutes in the country. He was brought to our hospital with complaints of the patient not talking to anyone properly since last 2 months, locking himself up in his room, staring at the wall for hours and talking to himself, as if he is addressing someone to go away. He had stopped taking his food, throwing away whatever was given to him, making his room extremely unhygienic by defecating and urinating in his own bed and not allowing anyone to enter his room. Many rituals were performed for him and on him but to no avail. Ultimately when he was brought to us, he was extremely thin and emaciated, unkempt and very poorly groomed with long hair and beard, barely maintaining eye to eye contact or talking. We admitted him in our Psychiatry Ward and started our treatment. Jump to 2 weeks later, the patient is almost unrecognisable. He is clean shaved, hairs cropped, in fresh clothes, talking normally and cordially interacting with everyone.

That is the victory of science, that is the power of our medications, and that is what we do in Psychiatry. Not the body, but it is the broken mind that we heal..

Dr. Sagnik Mukherjee, IIIrd Year PG,
Department of Psychiatry

TUSKEGEE SYPHILIS STUDY

Did you know that though research in the past was definitely path breaking & paved the way for the advancement of medical sciences, oftentimes they were also very revolting and unethical.

One such study is the Tuskegee Study of Untreated Syphilis conducted between 1932 and 1972 by the United States Public Health Services (PHS) and Center for Disease Control & Prevention (CDC) conducted on a group of nearly 600 African American men (399 men with syphilis and 201 men as control). The purpose of the study was to observe the effects of the disease when left untreated.

The sample population was neither aware nor informed about their diagnosis and the proposed '6 month treatment course' which was initiated was extended to almost 40 years with the subjects being given disguised placebos, ineffective methods and diagnostic procedures as treatment for so called "bad blood". It should be noted that none of the infected were treated with penicillin, despite its widespread availability by 1947 as a standard treatment for Syphilis. Also to be noted was the fact that this study was conducted without any form of consent from the sample population.

The study was eventually terminated in 1972 because of a leak about its details to the press. However, by then 28 patients had died directly of Syphilis, 100 died from related complications, 40 of the patient's wives were infected with syphilis and 19 children were born with congenital syphilis.

The 40 year Tuskegee Syphilis Study was a major violation of ethical standards and has been cited as one of the most infamous biomedical research studies in the history of medicine, inadvertently prompting many rules and regulations to come up for the protection of human rights in such studies.

ONE AMONG US

Dr. Kuchana Sai Kiran is a dedicated student from Zenolentz, belonging to the class of 2K18. With his remarkable academic and research record, he is set to graduate from college this year.

Dr. Sai secured 17 gold medals during his undergraduate studies and published 30+ research articles in national and international journals. In recognition of his academic excellence, he received the "Excellence in Academics Award-2022" from Dr. Randeep Guleria, former director of AIIMS in New Delhi. He also received the "Champions of Champions Award -2023" from Metropolis Labs for national-level excellence in research and academics.

He added to his crown by presenting numerous research articles in various national and international competitions. The Indian Medical Associaton, Warangal recently honored him on the occasion of Doctors Day.

From a young age, Dr.Sai was determined to pursue a career in medicine. He finished his primary and secondary education at St. Gabriel's High School in Kazipet, then moved to Hyderabad for medical entrance preparation, where he passed on the first try and chose his hometown college to pursue his dream. Dr. Sai's sister, Dr. Prathibha, is a Junior Resident in Dermatology at Vardhaman Mahaveer Medical College, Delhi. She guided him through the challenges of medical school and provided valuable insights into the profession. With her support and mentorship, Dr. Sai excelled in his studies and clinical rotations, consistently ranking among the top students in his class. He quotes, " It is extremely beneficial to have an elder sister who is in the same field, as it provides a unique opportunity to learn from someone with firsthand experience and to build a solid foundation for his own growth and development.

He embarks on his journey as a medical professional, grateful for the guidance and support of his family members, professors, postgraduates, and friends, who have all played a crucial role in shaping his career. With their encouragement, he has embraced every challenge and pushed himself to excel in his studies and research. He has actively sought out opportunities to expand his knowledge and skills, participating in research projects and attending conferences to stay updated with the latest advancements in medicine. This dedication has not only earned him respect among his peers but has also opened doors for exciting collaborations and mentorship opportunities. He recognizes that his success thus far is not solely attributed to his own efforts but also to the invaluable support system that surrounds him With gratitude and determination, he is ready to embark on his own path of growth and development, knowing that he has the backing of his loved ones, mentors, and Peers.

He says, " Sow the seeds of Dedication, Water it with Determination, Protect it with your Discipline and hard work, and enjoy the sweet fruits of Success "

SOCIAL SERVICES WING

India, one of the world's most culturally diverse nations showcases a very high soft power, yet as a backside to this misconceptions arising from culture still persist in society, often contributing to inequality, that is more pronounced in the health sector.

Superstitions, gender bias and many more misbeliefs continue to hinder progress. It falls on to the shoulders of young and budding doctors to educate the masses in busting such myths and misconceptions.

The reason lies in the fact that medical professionals are armed not only with knowledge but also a profound moral obligation making them the perfect vessels to dispel the aforementioned myths and malpractices. Their role extends far beyond clinics and hospitals; they are educators and advocates, uniquely positioned to challenge these deep-rooted beliefs.

The social service wing recognizes the vital role played by medical professionals and embarks on a mission to educate. The objective is to dispel myths, promote gender equality, encourage health literacy, and raise awareness about environmental conservation.

This effort is not merely an endeavor; it represents a transformative step towards building an enlightened and equitable India. By empowering the youth with knowledge and fostering critical thinking, we pave the way for a society where misconceptions dissolve, making room for understanding, tolerance, and progress.

In this context, addressing misconceptions about socially relevant medical problems and promoting awareness becomes an integral part of our mission. It is through such holistic efforts that we can truly transform society and build a more equitable, enlightened, and harmonious India.

Join the SOCIAL SERVICES WING to be a health ambassador working towards the betterment of the health awareness among the general public. Let us aim to change the conventional misconceptions.

GURUVANDHANA: CELEBRATING TEACHERS

Teacher's Day is celebrated worldwide, on different dates, but the essence remains the same - honoring our educators. In India, it is observed on September 5th, the birth anniversary of Dr. Sarvepalli Radhakrishnan, the second President of India and more importantly- a distinguished teacher.

The impact of a Teacher

A teacher is not just a dispenser of knowledge; they are mentors, guides, and role models. They have the power to ignite a passion for learning in their students and provide the tools to succeed in life. Teachers are the ones who help young minds grow and develop into responsible citizens, and wonderful doctors (in our case)!

Hence, on the occasion of Teacher's Day, on September 5,2023, an event by the name 'Guruvandhana' was organized by the students collectively in the NRI auditorium of our college. Various dance performances, quick 1 minute games, and activities were organized followed by the felicitations for the sports events that happened throughout the week.

Week leading to the D day

Quick games like musical chairs, gems color separation, tambola and carroms were played. Numerous sporting games like tug of war, badminton, table tennis, lemon and spoon race were conducted, a small compilation clip of which was later played in the event. The teachers participated enthusiastically in huge numbers. The camaraderie and bonds made during this active celebratory week will be cherished throughout the year. The events also promoted physical well being and good mental health, crucial in the field we are in.

The Day!

The auspicious day of September 5th started with lamp lighting and a welcome dance performed by the students to grace the start. Various felicitations took place department wise with the phenomenal dance performances, along with very melodious singing performances by our very own teachers. A beautiful memento in the form of a trophy with event details written on it was given to all the teachers and post graduates of each department, from anatomy to orthopedics.

Teachers showing off their talents

Proving their brilliance is not only in the subject but also on the dance floor, many teacher's enthusiastically participated in group dances for which they trained together beforehand, not just showing off their groove on the floor but also their camaraderie among their colleagues. The energized performances were given by mams showing off their grace and sirs showing off their macho energy. The beautiful dance performances were given by Dr. Sirisha Mam and co, Dr. Pavan Sir, Dr.. Jitender Sir, doctors of the Obstetrics and Gynae,Microbiology departments . A mesmerizing song was sung by Dr. Raza Malik, Dr. Praveen Sir.

The event was managed backstage by the student body and the cultural committee. A huge appreciation is also to be given to them for managing the sports events, dance practices, decorations, choreographers, and with the administration. Performances were cherished, snacks were served, beautiful backdrops were created along with a very well lit and decorated auditorium for this tribute to the teachers.
Keeping in mind the emphasis of physical and mental health along with the yoga initiative taken up by the college, a Yoga video was released made by the student body to encourage one and all to take care of their health.

Uthkharsha Promo

The promo for the annual fest for the year 2023 'Uthkarsha (U 23)' was also released later in the evening. The crowd and the auditorium was filled with vibrance and excitement for the promo. Events like these are what keep the zest and zeal alive in a college. They are a testament to the spirit and unity within our community. Having these events on a regularly boosts morale, and has a tremendous positive impact on the mental effect.

Teacher's Day is a day to recognize the silent heroes who shape our future. It's a day to honor the dedication, hard work, and passion of teachers. Let's take this opportunity to express our gratitude and make sure that the impact of teachers on our lives is never underestimated. To all the teachers out there. Thank you for your unwavering commitment to education and for being the guiding light in the lives of many.

Thank you, teachers.....

STUDENT CORNER

LOOKING BACK AT PSYCHEDELICS

Each one of us have heard about LSD, ecstasy, Acid, Magic Mushroom, Molly, MDMA and many other slangs for these drugs that are illegally abused. This particular group of substances are classified as "Psychedelics". The word 'psychedelics' literally means 'mind manifesting', They have the ability to change one's perception of reality.

In the early 1960s, these drugs were legal and an exciting area for medical research. They were easily available to the masses and the association of these drugs to the 'hippie culture' prevalent in the USA around that time involved widespread use of psychedelics. This unaccounted use had negative consequences on human lives, raising concerns regarding the free usage of psychedelics. There was sociopolitical backlash driven by fears of social disruption, moral concerns due to lack of comprehensive understanding at that time. Few policy changes were made which criminalized the possession of such drugs. These laws were collectively referred to as the 'War on Drugs'.

Subsequently, human research with these compounds was halted for several decades in regard to the safety concerns raised in response to the widespread non-medical usage of these drugs. Since the early 2000s, there has been a resurgence in the interest for the clinical usage of psychedelics. New researches have created a lot of buzz around these drugs. Psilocybin has shown substantial effects against depression, Generalized Anxiety Disorder (GAD), cancer related distress, and helped in the treatment of alcoholism and smoking addiction. MDMA has significant effects in managing PTSD.

In an era of growing depression and mental illnesses with a simultaneous need for better treatment, such breakthrough findings are valuable.

Yet, this does not change the fact that psychedelics are not for everyone. Psychotic episodes were observed in patients with a family history of schizophrenia on usage these drugs. This tale of psychedelics is a classic example of us, humans trying to control things we do not completely understand. We created fear, distress and unnecessary political intervention that drove decades of scientific research away that could have helped millions of people suffering from these illnesses. We are now beginning to see things differently. We are separating scientific questions from politics and public perception. Basing our judgement on pure science that is unbiased gives us hope. This shows a promising future in how psychedelics can benefit millions of lives, if used in a sensible manner.

V Sai Sarath, Ist Year MBBS
2022

MIND CONTROLLED PROSTHETICS

Recently, I visited the MGMH while accompanying my friend for his health checkup. While returning, I encountered a patient rushing to the Emergency department. On enquiring, I came to know that it was a case of a forty year old fisherman whose legs had been severely injured due to the blast of a transformer. One could clearly see all the muscles, ligaments and bone fragments coming out of his limbs.
As a first MBBS student with very less clinical exposure, I was devastated. So, I started researching on the treatment methods that could help people who lost their limbs due to various accidents. I was surprised to know that there are over one million limb amputations occurring globally every year.

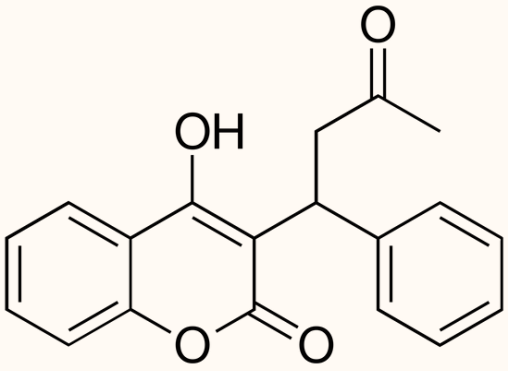
How can these people life a normal life?
There are several kinds of prosthetics in the market. But the prosthetic devices used today offer limited functionality or can also be too cumbersome for amputees to use effectively.
Through further research, I read about the newly invented brain-controlled Bionic limbs can help.
When a surgeon amputates a limb, the peripheral nerves are severed. But research has shown that even decades after an amputation, the brain still sends electrical signals along these nerves in an attempt to control the muscles in the phantom limb. These signals can be recorded and used to control a prosthetic leg.
This new approach centers on the Regenerative Peripheral Nerve Interface (RPNI) - a small graft of muscle tissue surgically attached to the end of a severed nerve in an amputee's limb. The grafts are stimulated by the neural impulses from the brain- the ones telling the body to stand, walk or change positions can communicate with the prosthetic leg through sensors and a computer that translates those instructions into actions, thus making a mechanical limb function intuitively or at least comparatively closer to a normal human leg.

This advancement is a spectacular innovation which is going to be on the frontline in the future of prosthetics. This, for sure is a blessing for many amputees all across the globe if proper research and execution is conducted so as to make this product available for the hospital as well as the masses in need to be used for their well-being.

Rishitha, Ist Year MBBS
2022

UNVEILING THE UNEXPECTED: THE ROAD TO THE REMARKABLE DISCOVERY OF WARFARIN

Many astonishing discoveries have their origins in unexpected events. The journey from an obscure cause of cattle deaths to being used as a rodenticide and, ultimately, to the most potent and widely used anticoagulant—Warfarin.



In the 1920s, numerous dairy farmers in the American Midwest faced the devastating loss of their cattle due to an unidentified disease that led to bleeding and eventually, death. This haemorrhagic condition was attributed to Moldy clover hay, which the cattle were fed. This ailment came to be known as Sweet Clover disease. Local veterinarians Frank W. Schofield and Lee M. Roderick discovered that replacing the moldy hay and administering blood transfusions could cure Sweet Clover disease. Unfortunately, many farmers lacked the financial means to replace their clover hay, and the disease continued to afflict their livestock.

One fateful day, a desperate farmer named Ed Carlson traveled 200 miles with a milk can full of unclotted blood, a stack of moldy clover hay, and a dead cow-all in search of a veterinarian. Finding most of the offices closed, he walked into the laboratory of Karl Paul Link- a professor at the University of Wisconsin-Madison. Link and his student, Eugen Wilhelm Schoeffel examined the condition and were curious about the can of unclotted blood.

After six years of dedicated work, Link's student, Harold Campbell, successfully isolated a pure crystalline substance chemically known as 3,3'-methylene bis(4-hydroxycoumarin), which was subsequently named Dicoumarol. In 1940, Stahmann and Huebner synthesized more than 100 related compounds, among which the 42nd variant, more potent in rats, eventually led to the development of the rodenticide- Warfarin.

In 1951, an inductee in the U.S. Army attempted suicide with multiple doses of rat poison, Warfarin, but was saved through the administration of Vitamin K. As the saying goes, "Every accident is an opportunity", studies on Warfarin as a therapeutic anticoagulant began, and in 1954, it was formally approved by the FDA as a medication to treat blood clots.

One of the early recipients of Warfarin was U.S. President Dwight D. Eisenhower, who was prescribed the drug after suffering a Myocardial Infarction in 1955. From then on, Warfarin gained official recognition for its use as an anticoagulant. Ultimately, this accidental discovery led to the development of the world's most widely prescribed drug, and now, is used to prevent and treat conditions such as stroke, heart attack, and deep vein thrombosis.

Naishkika Mosali, Ist Year MBBS student,
2022

HARMONY IN HEALING: A HEALTHCARE TEAM'S JOURNEY

As the sun began to rise over the bustling city, a new day unfolded at MGM Hospital. A hospital, where the corridors echoed with footsteps of hustle, the aroma of freshly brewed coffee lingered in the air,and the healthcare team which was already in motion. Each member played a crucial role in the intricate ballet of patient care.

Doctors-the seasoned attending physicians started their day by reviewing patient charts. They take a moment to reflect on the immense responsibility they carry on their shoulders. Their eyes focused on the list of patients they would see today, each one bearing unique challenges and hopes.

In the next room, nurses were preparing medications for all the patients. They make sure to meticulously double-check dosages and cross-reference them with patient's records. They are the heart of the team, always there to lend a compassionate ear or comforting smile to patients in their times of distress.

Meanwhile,the doctor was huddled with a group of medical students. He was not only responsible for his own patients but also for mentoring the next generation of healthcare providers. He believed in fostering a collaborative environment where questions were encouraged, and learning was a continuous process.

The hospital's pharmacist diligently reviewed medication orders,ensuring that they aligned with patients medical histories and allergies. His attention to detail was unwavering, knowing that even a minor oversight could have serious consequences.

In the 91st block, the lab technician was processing a huge number of blood samples. They understand that their role in the healthcare team was pivotal in helping doctors make accurate diagnoses. Every sample represented a life, and hence, they approached their work with the utmost care.

In the hospital's administrative wing, the patient liaison was on the phone with a patient's family. They provided updates, offered support, and ensured that they felt connected to their loved ones during their stressful hospital stay. They understand that healthcare was not just about treating illnesses but also about tending to the emotional well-being of patients and their families.

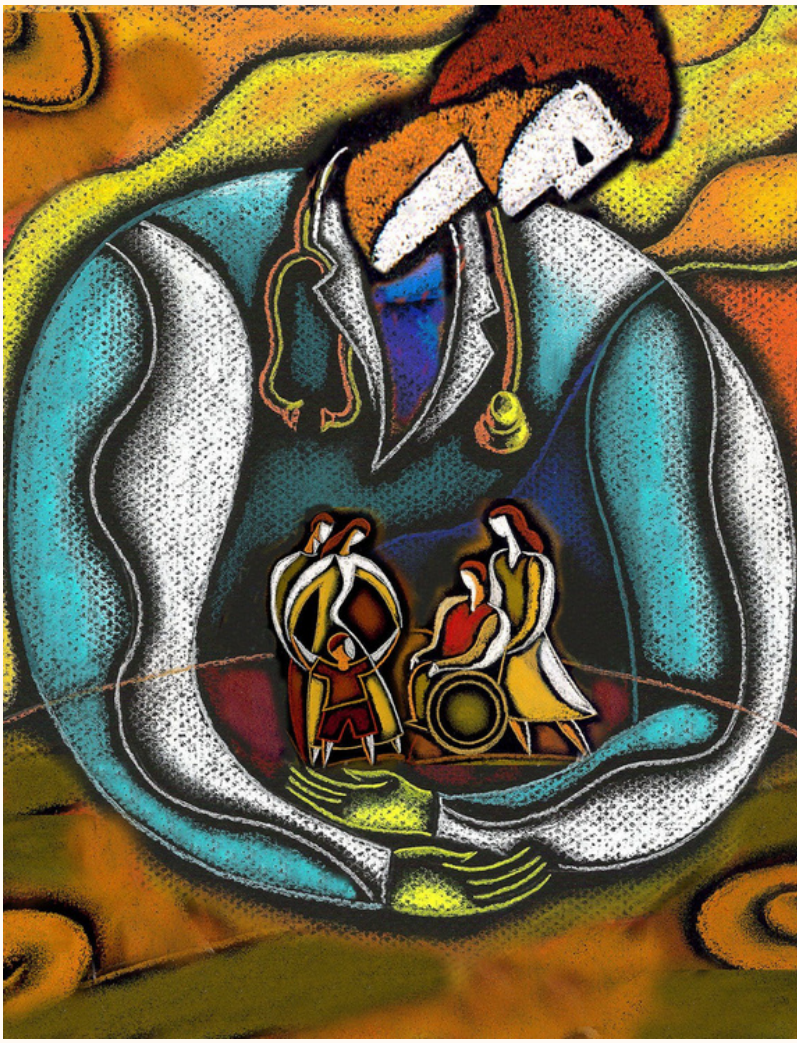
As the day progressed, the healthcare team gathered for rounds. The doctor led the discussion, bringing together their collective knowledge and expertise to make informed decisions. Each team member's input was valued, creating an environment where ideas flowed freely.In the evening, the team faced challenges- a patient's condition deteriorated, a family was forced to make a difficult decision ,and resources were stretched thin. However, their unity and unwavering commitment towards their patients kept them moving forward.

Finally, as the sun dipped below the horizon, the healthcare team could see the impact of their collective efforts. Patient's and their health improved, families found solace, and lives were touched. In the midst of the chaos and heartache of the healthcare profession, they found a deep sense of fulfillment in knowing they had made a difference, together.

Their work was far from over, but they knew that as a healthcare team, they could face any challenge that came their way. They were bound by a common purpose: the pursuit of healing. In their unity, they found strength, and in their shared journey, they discovered the true meaning of healthcare- caring not just for patient's bodies, but for their souls.

Vaishnavi Thirunagari, IInd Year MBBS
2021

EMBRACING COMPASSION: A DOCTOR'S JOURNEY THROUGH HEARTACHE AND HEALING



Whenever we Doctors see,
Their sad faces and broken hearts,
Pierces ours like darts.
We strive to impart,
That our souls and bodies depart.

The dejection on their face,
Expecting us to show grace.
Such a heart-rending case,
Strongly leaves a permanent trace.

The sounds of their cry and pain,
We cannot resist or feign.
Don't know when it'll wane,
But we will ease it, as we aim to sustain.

With each dawn the knowledge we obtain,
In the world of medicine, we strive to attain.
Though persistence is our gain,
Each challenge makes us better Doctors again.

Sheikh Sadiya, Final Year MBBS Part 1
2020

Dr. D Sai Divya Reddy, Junior Resident
Department Of Ophthalmology

VIRTUAL REALITY & EYE HEALTH

Technology is an essential part of our everyday life, for work and play. Many technologies are developing rapidly, making it challenging to understand how each affects our health. Screen time and video games have long been a debated topic for eye health, particularly with the effects of digital eye strain.

Virtual reality (VR), the act of immersing users into a fully digital world through headsets, has been around for many years, and its only picking up steam. It has been adopted to many aspects and elements in life already and is not limited to games and fiction.

A common concern is how VR impacts our health. As one of the most intimate technologies, VR is something we should consider in a large health context, especially as we spend more time working from anywhere and in the metaverse. However, VR can be assessed by the use of VR headset, and it is worn on one's head and focuses directly on the eye for an immense feel. The experience would bring the game or content closer to a person as they would feel like they are the ones in the game itself.

But, medical consensus is leaning in the other direction. According to American Academy of Ophthalmology, VR mimics the way our eyes already work by showing each eye a slightly different image through two separate displays, allowing us to perceive depth. The technology may be used therapeutically to tackle vision related issues like Amblyopia (lazy eye), reaction time, eye coordination, depth perception and hand-eye coordination. Luminopia One was the first FDA approved VR based therapy for childhood amblyopia. It combines VR technology with modified TV shows and movies that children can enjoy while improving their vision.

That being said, VR headsets are positioned right in front of the eyes, they can cause eye strain, blurry vision, and migraine. It could also dry out eyes due to decreased blink rate. The heat emitted from headsets also contribute to dry eyes.

If you have ever worked on a computer for an extended period, you will all be familiar with the drawbacks of being too close to a screen for too long. This is because the eye is forced to focus on a single plane at a close distance for a prolonged time, we often forget to blink during screen time, causing dryness. Like reading a book, focusing on small text for too long takes it toll, but screens cause this in another way as well: blue light. And thus, the same is true for VR.
Another common concern with VR is cybersickness, that is caused by confusion among what your eyes see, what your brain understands, and what your body undergoes in virtual environments. Cybersickness is more common in VR games and experiences that involve lots of motion like flying, driving or spinning.

There are also concerns with VR use that some experts believe that VR can create false memories in children twelve or younger, leading them to believe things happened in reality that were really in virtual reality.

HOW TO AVOID EYE STRAIN IN VR?

So what can you do about it? As much as your eyes will acclimate to the VR experience, that isn't to say you'll eventually shake off the effects completely. Digital eye strain isn't exclusive to VR. Stare at any one thing for long enough, and you'll experience it still, be it a computer screen at your desk, your laptop, phone or tablet.

The issue isn't with the screens being so close. It's that we are not taking sufficient steps to relax the muscles that eventually strain. Big tech now understands that the blue light emitted by most screens play a big part in the strain we get from looking at them for too long. It keeps us at night as well by stopping our brains from releasing the natural chemicals. It's why software-level blue light filters like Night Shift and True Tone, and tinted glasses are encouraged right now. And someone whose lifestyle revolves around staring at screens for up to 16 hours a day, we can confirm that these steps do help.

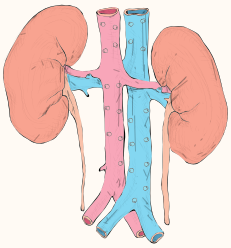
But we can't blame blue light for everything. And we can certainly can't expect a filter to solve all our problems. After all, books don't emit blue light, but we're still prone to straining during a good story. And it all boils down to distance.
The science is simple: eyes strain when they focus on something for too long. And a screen forces that. Looking at something from a set distance for too long doesn't stretch those muscles. Simply peering over to the wall behind the screen, at a tree out the window, or even just towards the door of the room are all good ideas. And taking 15 minutes break is a great time to have a glass of water, stretching legs and giving eyes something else to look at.
Lastly, its worthy trying to tailor your headset to your needs. Most premium headsets feature things like extra room inside to accommodate spectacles, adapters or even prescription lenses designed specifically for VR. And whether you wear glasses or not, a way to physically or virtually alter the spacing of the lenses to suit your own eyes.

Eye strain in VR is normal, and the fix is simple: take off the headset, hydrate yourself, and get away from the screens for a bit. Like many of the best things in life, moderation is the key to enjoying them for longer.

RECENT DEVELOPMENTS

ANATOMY EXTRAVAGANZA 2023

The department of Anatomy organized a special event for the batch of 2023 on 27 th October. Newbies of KMC got the overview of the basic anatomy and their understanding was made much smoother by poster presentations, clay art and also body painting of the same. These innovative learning methods not only captivated the students but also offered a hands-on and visually stimulating experience, which is crucial for grasping complex anatomical concepts



REVOLUTIONIZING HEALTHCARE!

The latest development at KMC involves creating emergency medicine specialty seats at KMC-MGMH, and upcoming Nephrology super speciality programs to be held at MGM and PMSSY hospitals. These additions enhance medical services, benefiting patients with better healthcare outcomes and improving the management of life-threatening situations in Warangal, especially for underprivileged populations.

BRIDGING HEALTH WITH BOND

World Breastfeeding Week, observed from August 1 to 7 annually, promotes breastfeeding to enhance global infant health. Led by the Department of Pediatrics' KMC Warangal organized a health run from the college to Hanamkonda public gardens. Medicine and nursing students actively participated in raising public awareness about breastfeeding benefits.

A HEARTY WELCOME TO OUR FRESHERS!

Last week, we had the pleasure of extending a warm welcome to our 2023 Freshers and PGs. They are from all over india from Himachal pradesh to Kerala. They came together to kick off the academic year with enthusiasm and camaraderie.Post graduates have already started their training and it's full fledged. The event was a promising start to their journey at the medical college.

DR. SAGNIK MUKHERJEE BRINGS LAURELS TO THE CAMPUS

Dr Sagnik Mukherjee, Junior Resident, Department of Psychiatry received the Dr.DS Raju Memorial PG award for his paper titled — Stability of ICD -11 Diagnosis of adjustment disorder and factors associated with its course and outcome- A one year prospective study. He will compete for the Bombay Psychiatric Society Silver Jubilee year award,along with the winners from four other zones of IPS, ANCIPS,Kochi in 2024.

MEDICAL EDUCATION TRANSFORMATION: TEACHER TRAINING

The college has launched a Teachers' Training program, inviting professors from other institutions. This initiative seeks to elevate the educational standards in the state through knowledge exchange and professional growth among faculty members. Its ultimate goal is to revolutionize medical college teaching, with the far-reaching benefit of improving education for students across Telangana and enhancing the medical community as a whole.

STUDENT SUCCESS AT OSMECON AND GOMECON

This year, students have expanded their academic horizons by participating in prestigious academic events. At Osmania Conference (OSMECON), they achieved recognition for their symposium presentation, poster presentation, and paper presentations, receiving awards for best research, best title, best speakers, best poster, and best overall presentation. They secured the second prize in the paper presentations and won the first prize in the Diogenes debate competition. Similarly, at Goa Conference (GOMECON) hosted by Goa Medical College, They claimed the first prize in debate as well as poster presentation and secured the third prize in MED-HACKATHON for providing a comprehensive solution to address PCOS. Both conferences offered cash prizes ranging from 25k to 30k, promoting innovation, networking, and knowledge exchange on an unprecedented scale.

PRACTICAL HEALTHCARE SKILLS TRAINING

Skill development programs provide students a hands-on approach beyond theory, enhancing their practical abilities with real patients. This encompasses basic life support, orthopedic plastering, administering various injections, basic surgical skills like sutures and catheter insertion, OB/GYN procedures including examinations, Pap smears, IUCD handling, and pediatric skills like neonatal resuscitation and intraosseous lines.

ALUMNI WEBINARS: BRIDGING THEORY AND PRACTICE

A Certified course in the form of Webinars organised by the US NRI ALUMNI is being conducted every month. Topics include- Cardiovascular changes and Hypertensive disorders in pregnancy, Acute Coronary Syndrome, Drug allergy and Anemia. Students are grateful to Dr Venu Bathini sir, Dr Vivek Katukuri sir, Dr Kiran Cheruku sir and Dr Rani Kommareddy Vatti ma'am. Attended by students in large numbers, these webinars encourage students to think beyond their textbooks and integrate their textual and practical knowledge.

FROM THE EDITOR'S DESK

Dear Reader,

I would like to express my heartfelt gratitude to our beloved Principal Dr. Mohandas sir and the entire editorial team for their tireless dedication in bringing forth the second edition of Kakatiya Chronicles. This publication is a testament to your unwavering commitment to quality and we hope we've come up with something that you appreciate.

I also extend gratefulness to all the professors, seniors, and juniors who actively contributed to the content of this edition. Your valuable insights and hard work have enriched this edition and made it truly remarkable.

'Kakatiya Chronicles' has become a platform for sharing knowledge and experiences, and it wouldn't have been possible without the collective effort of the entire team. Thank you for giving us this wonderful opportunity.

Sincerely
Rohit Singaraju
Editor-in-Chief
Kakatiya Chronicles

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