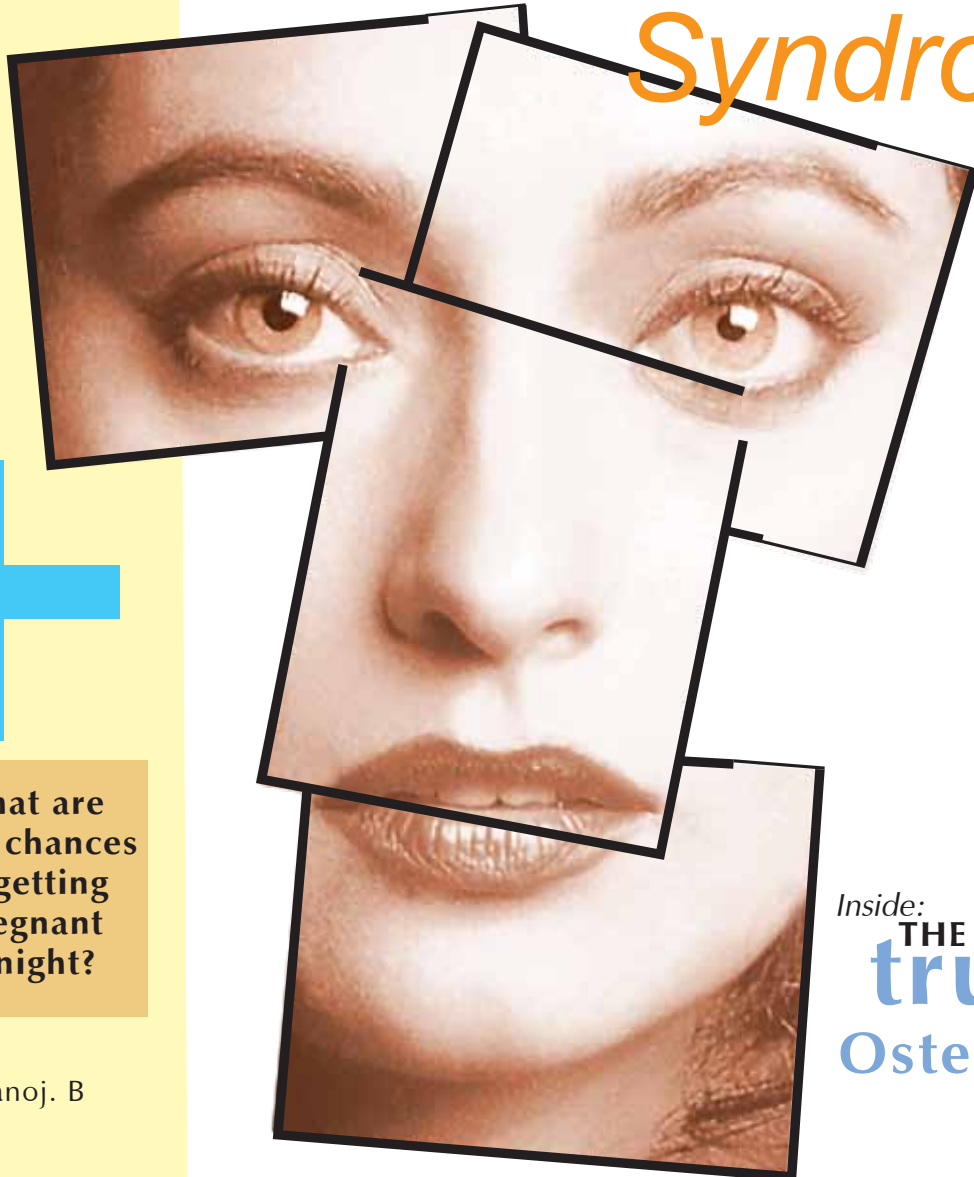


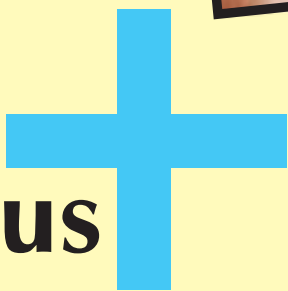
MARUTHUVA VIVEKAM

Doctors Advice - For a Healthier Life

The Chandramukhi Syndrome

The truth
behind
multipersonality
disorders



Plus 



What are
your chances
of getting
pregnant
tonight?

Inside:
THE
truth
about
Osteoporosis



From the Chairman's Desk



Dear friends,

Greetings! This is the third issue of our healthzine, "Maruthuva Vivekam". We have received an encouraging response. We thank those of you who have written in, appreciating this initiative. In this issue too, we examine topical issues which will be of relevance to you. Our doctors fill you in on advanced methods in cataract cure, how brain strokes can be reversed, whether children need vitamins, and more. As always, your feedback is welcome.

With a booming economy, advances in technology and healthcare and higher standards of living - there is so much to enjoy in life. So, stop worrying and start living! Take care of your physical and mental wellbeing so you can live life to the full.

Good luck and Good health!!

Mrs. Mallika Mohandas

Inbox

"Both issues contain useful information on medical ailments and how to prevent them.

Wish you all success in your endeavour to reach the common man, with easily understandable expert advice, free of cost. Keep it up."

N Palaniandavan - Mahalingapuram

"Congratulations on the excellent June 2005 issue. It was informative and educative."

D. A. Rajan - Parrys Corner

" Interesting and informative"

Moti Shivdasini - Chetpet

"Layout and contents are impressive. No doubt Maruthuva Vivekam will provide a great service to the cause of healthcare."

Ramesh Daga - Chamiers Road

"Oh My Aching Back!" written by Dr. Mohandas was worth reading."

S Bageerathi Sivanesan - Indira Nagar

Front Piece

The truth about Osteoporosis

Prof. Dr. P.V. A. Mohandas continues his series on back problems. In this issue he examines the causes and treatment of Osteoporosis.

In the last two decades, the public has been fed alarming details on osteoporosis and its treatment. This is due to the lack of scientific understanding of the problem fueled by the pharmaceutical industry. In my younger days I used to see many elderly hunch-backed women - and if we were mischievous, our parents used to frighten us that "Koonai Kezhavi", would catch us and carry us away in a bag. At that time I didn't realize that the "Koonai Kezhavi" had osteoporosis.

What is osteoporosis?

Osteoporosis is decaying of the bone. Osteoporosis has nothing to do with calcium deficiency. Bone is made up of a protein matrix in which minerals - calcium & phosphorous, are deposited. They can be compared to concrete pillars, consisting of a scaffolding made up of iron rods with concrete being poured into them. Deficiency of calcium is not osteoporosis but rickets in children and osteomalacia in adults. Osteoporosis, or decaying of the bone, usually sets in, in the menopausal stage and thereafter.

Causes of osteoporosis

- Lack of hormones and ageing
- Lack of physical activity and exercises
- Usage of drugs like cortisone,

- anti-epileptic, anti-psychotic drugs
- Chronic alcoholism, smoking, drug addiction
- Poor nutrition
- Renal failure
- Malignancy (multiple myeloma)

Recognizing the symptoms

- Feeling of weakness and generalized bone pain
- Generalised back pain



- Progressive hunching
- Thinning of the hair
- Fracture of the wrist bones, fractures around the hip, fractures of the vertebra followed by trivial injuries

For all of this you should consult the doctor immediately. If you're around 50 years of age you may be menopausal and consultation is a must for the doctor to rule out osteoporosis. It is interesting to know that men also have a menopausal stage!

Treating osteoporosis

After investigations, osteoporosis can be effectively treated through several drugs. If osteoporosis is severe and you are not suffering from cancer, or there is no

family history of cancer, osteoporosis can be treated by taking estrogen. If you have any such symptoms, you can try Livial - synthetic estrogen, which does not cause any harmful side effects. Next best is Raloxifene, or Diphosphonates - Didronil or Osteofos 70, but these drugs cause severe gastritis.

More calcium?

Calcium plays a very small role in osteoporosis. Excess calcium can lead to problems like deposits on the arteries to the heart, formation of kidney stones and gall bladder stones. Extensive research regarding calcium metabolism shows that a tablespoon of milk is enough for a person in the age group of 30 years and above, to get his or hers sufficient intake of calcium. Our normal diet has enough calcium.

So, in the battle against osteoporosis, the following points are worth considering:

- Undergo investigations to rule out malignancy - especially occult malignancy which may escape your attention.
- Do not overdose yourself with calcium.
- The best way to overcome osteoporosis, is to take estrogen for women and testosterone for men.
- If you have a strong history of cancer, it is advisable to take synthetic estrogen like Livial or Raloxifene or diaphosphonates.

I was reading the autobiography of J.R.D. Tata, the other day. He says that he remained young and active despite his advanced age, because he insisted on his doctor giving him an injection of Testoviron every week!



Back to Life: A Teenager's Story

A lively, young girl had her life disrupted by a terrible disease. Could MIOT's surgeons work a miracle?



Aliya (16) was a normal child, doing well in her school and considered the cutest kid in her family. But when she was 6 years old tragedy struck. Complaining of severe back pain, she was taken to a doctor. The specialist who examined her back had bad news for her parents. He told them that Aliya had severe complications in her back and in her chest. The vertebral column in her lower back had begun rotating to one side. He also said that her ribs would change position giving her breathing difficulty and disfigurement.

Tragedy strikes

Horrorstruck, her parents took her to doctor after doctor for opinions. All of them confirmed the original diagnosis and warned that operating on the vertebral column may damage the spinal cord resulting in irreversible paralysis.

Her disappointed parents gave up hope and resigned themselves to fate. Like the doctors predicted, Aliya's condition deteriorated. Chronic respiratory infection set in. Her lung was not expanding adequately to allow her to do even routine work - so she was crippled and confined to bed.

Aliya finds a solution

One day when she was watching TV a

young gentleman came on air and began narrating his experience - he too was a spinal cord patient suffering several of the same symptoms that Aliya did. He went on to describe the "miraculous" effect of the surgery he had undergone at MIOT. To Aliya, this was like seeing a light at the end of the tunnel.

As soon as possible Aliya came to MIOT Hospitals. Investigating surgeons observed that she was badly disfigured, and that her respiratory function was severely compromised. She underwent a thorough evaluation including lung physiotherapy. A day was set and Aliya's spine was surgically corrected and fixed using multihooks and screw system. MIOT doctors deployed the latest technology, rehearsing the surgery virtually, so that there would be no damage to the spinal cord. The surgery was a success. Not only did Aliya's appearance improve dramatically, her respiratory problems were solved as well.

She will now be returning to school to continue her education.

From the Case Files of :
Department of Spine Surgery

**LAUGHTER IS
IS THE BEST
MEDICINE**



Case Files

The Chandramukhi Syndrome



*"Is it "possession"?
Is it schizophrenia?
Is it pretence?
Dr. Muthulakshmi
exposes the truth behind
multiple personality
disorders."*

Multiple personality syndrome is a very rare psychological disorder in which a person has two or more distinct personalities, each with its own thoughts, feelings and behavioural patterns. The personalities are often directly opposite in nature, with only one personality controlling the body at any given time - usually triggered by a distressful memory or event. Each personality may be unaware of the other's existence, but certainly aware of the gaps in remembered time.

Why does it happen?

The "Chandramukhi" syndrome is invariably associated with severe physical/sexual abuse and neglect during childhood, when the mind blots out the unbearably painful experience from consciousness, by blanking out the memory.

Only a small fraction of humans beings express themselves as multiple

personalities. Of course some philosophers contend that the unity of the self is an illusion and that everyone is fundamentally multiple. We in the East are familiar with people who go into a trance and communicate with or are "possessed" by Gods or spirits. Here, multiplicity is not a dysfunctional but a spiritual goal!

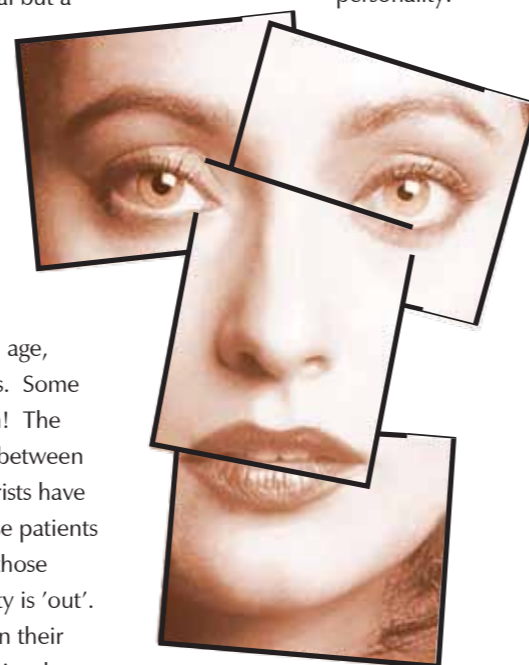
"Is it you or is it...?"

Technically called "Dissociative Identity Disorder (DID), the "Chandramukhi" type of patients have alternate personality states known as 'alters'. Each 'alter' has a different name, history, gender, age, nationality and personality traits. Some 'alters' may not even be human! The average DID patient may have between 2 to 10 'alters'. A few psychiatrists have reported over 100 'alters'! These patients have 'lost time' or amnesia for those times when the other personality is 'out'. They may report finding items in their homes that they have not consciously purchased, notes in different handwritings, evidence of unexplained activity, and may even fail to recognize close friends and relatives in their 'alter' states.

The switch to an 'alter' can occur within seconds of a traumatic or stressful experience. Some DID patients may have hostile or suicidal 'alter' personalities, and exhibit erratic performances in schools and jobs during the stress of examinations or inspections. Many DID patients are diagnosed as schizophrenics because they hear their 'alters' talking inside their heads, or as depressives, as core 'alters' may be subdued and withdrawn.

Role of hypnosis

Diagnosis of DID is usually through hypnosis and interviews. Treatment lasts 5 to 7 years, when therapists first uncover the 'alters', treat traumatic memories and then attempt to fuse the 'alters' and consolidate the patient's newly integrated personality.



Medications are kept to the minimum. While hypnosis is the main mode employed to recover repressed ideas, memories and control problematic behaviour like self mutilation, eating disorders and to fuse 'alters', yoga, massage, art therapy, family therapy and hydrotherapy are also useful adjuncts. Prevention of DID requires outside intervention in case the victim is still in an abusive situation. Next time you see someone exhibiting erratic behaviour, don't call an exorcist. Call the psychiatrist.

DR. MUTHULAKSHMI
Critical Care Service

Your headache is a doctor's headache



Ever had headaches so unbearable that they made you feel like jumping off a roof? You're not alone. **Dr. U.S. Srinivasan** explains the phenomena of "suicide headaches" and their cure.

One pleasant evening a young couple entered the consulting room of the Neurosurgeon. On seeing them, the doctor's heart sank. The husband complained that despite taking all the drugs the doctor had prescribed, he still suffered from a terrible headache. The wife, a volatile young woman, lost her temper and shouted at the doctor, "You ordered so many investigations and all are normal. None of your drugs have given any relief. Do you know my husband wants to commit suicide because of his headaches?"

At these words a revelation struck the doctor - "Of course, the patient was suffering from no ordinary headache, but a suicide headache!" Immediately he reached for his prescription pad and wrote the names of three drugs - Verapamil, Divalproex and Sumatriptan injection.

The young couple were perplexed - "Doctor, what's the diagnosis?"

The doctor looked at the young man and said, "You are suffering from cluster headache - also known as a "suicide headache". People who are afflicted by this suffer at nights - as sleep triggers this headache and awakens them. The headache takes 5 to 10 minutes to enter the severe phase - and can last from 15 minutes to 3 hours.

"Like a hot poker!"

The headache recurs with remarkable regularity each day for 6 to 12 weeks (hence the term "cluster"), followed by complete freedom for months or even years. Generally only males are affected. It is usually localized to the eye and temple but can involve the cheek area and can be associated with nasal congestion. Usually the nasal discharge is clear and colorless in contrast to sinus headaches. Other symptoms can include tears from the eye on side of the face that's hurting, sweating of the face and forehead, drooping of the upper eyelid, decrease in the size of pupils (miosis).

There will be no nausea or vomiting. Sometimes these headaches can be triggered by beer. The intense pain drives patients desperate. Earlier almost 50% of them attempted suicide!

Relief, at last!

Recently Positron Emission Tomographic (PET) studies have shown that posterior inferior hypothalamic gray matter is activated during the episodes of cluster headache and is considered to be the generator of this headache. It can be treated with a single anticipatory dose of ergotamine or sumatriptan at bedtime. Inhalation of 100% oxygen for 10 to 15 minutes at the onset of headache may abort the attack, but is not always practical.

Drugs like verapamil, divalproex, topiramate, lithium carbonate, methysergide, prednisone are used to prevent cluster headaches. In cases where there is no response to the drugs, deep brain stimulation has been found to be moderately successful.

A happy ending

The young husband said, "Okay doctor, I trust you and I will take the drugs." He better get well, or else..." put in the fiery young woman. "Two months later the doctor noticed the lady sitting outside his chambers. He immediately called his wife on the phone and checked with her how strong her "thali packiam" was! Then, he reluctantly summoned her into the room. Once inside she headed straight towards quaking doctor and ... fell at his feet! Her husband had experienced a complete recovery.

DR. U.S. SRINIVASAN
Chief Neurosurgeon

Her Health

What are your chances of getting pregnant tonight?

Family planning through use of contraceptives allows intercourse and yet prevents conception. This contraception may be temporary, with a return to fertility immediately, or within few months of its discontinuation - or, it may be permanent. Most permanent contraceptive methods are surgical - for instance, Tubectomy.

Methods of Contraception

- Natural methods
- Barrier contraceptives
- Spermicidal agents
- Diaphragm or cervical cap
- Female condom
- Intrauterine contraceptive devices
- Hormonal contraception
- Post coital contraception
- Surgical sterilization

Let's look at some of the most effective contraceptive methods available.

Hormonal oral contraceptives:

In other words, birth control pills. Widely used, the pregnancy rate with these oral pills is the lowest amongst all contraceptives in use today.

One pill is to be taken from the first day of the cycle (periods) or any of the next 6 days and continued at bed-time for 21 days. In most cases periods start after 2-4 days of stoppage of the pill.

Starting the pill on the first day of the cycle has reduced the failure rate. If you forget to take a pill you can take two pills the following day. If you forget to take the pill more than once in a cycle you are no longer protected and must use barrier methods. The main reason for the failure of oral pills is the inability to take the pill regularly.

There are many benefits to these pills.

They control fertility, cause regular periods, reduce menstrual loss and reduce the occurrence of functional cyst of the ovary. They reduce the chances of ovarian cancer and uterine cancer.

Side effects include inter menstrual bleeding, nausea, vomiting, headache and irritability. These are usually tolerated reasonably well. Please consult your doctor before starting on the pills.

Minipills :

There are pills called minipills which can be used by lactating women, women over 35, those with migraine, diabetes and hypertension.

Injectable contraceptives:

These need to be administered once in 3-months or once in 6 months. They are suitable for nursing mothers. The disadvantages are - menstrual irregularity and heavy bleeding in some, weight gain, bloated feeling and breast pain for some.

Sub dermal implants:

These are implants (rods) inserted under local anaesthesia on the upper arm. They contain hormones responsible for contraception. They are effective for 3-5 years. Advantages include good compliance, no nuisance of daily pills or frequent injections, can be used by nursing mothers and ladies over 40. Disadvantages include irregular cycles, local infection, the requirement of insertion and removal, and cost.

Post coital contraception

Emergency contraception is used for preventing pregnancies usually following accidental rupture of condoms, rape or unprotected intercourse. Pills containing relatively high doses of hormones are used for this purpose.



Limit the possibility of unplanned or unwanted pregnancy by exploring the array of contraceptive devices available today.

Dr Saraswathi
reviews options

Intra uterine contraceptive devices (IUCDs)

This is an effective reversible and long-term method of contraception which does not require replacement for long periods and does not interfere with sexual activity. One time insertion gives protection for a long period. There are no systemic ill effects. There are different types of IUCDs, with life spans ranging from 3 - 7 yrs. Side effects include heavy bleeding and infection.

The right choice?

It's left to every couple to find the method they are most comfortable with. A discussion with your doctor can help steer you towards the right choice.

DR SARASWATI
Consultant Gynaecologist & Obstetrician





What's What About Vitamins

Before you spoon that tonic into your child's mouth, check out

Dr. Muthu Rajan's advice on vitamins.



Vitamins are non energy producing, essential substances, vital for growth and development. The word comes from vital + amines. Vitamins belong to two groups, the fat soluble (Vitamins A, D, E & K) and water soluble (Vit C & B complex). Each vitamin has a special contribution to make towards good health. Vitamin A is required for good vision, Vitamin D for strong bones, Vitamin C for wound healing, Vitamin K for blood clotting and so on. Deficiency of any one of these causes diseases - most often seen in the developing countries

due to poor dietary intake, gut diseases that affect absorption or increased demand that outstrips supply, usually during adolescence and pregnancy.

Eggs or tonics?

It is quite usual for parents to purchase tonics for their children hoping that it will promote intelligence and growth. This is usually not the case, as a balanced diet contains all the required micro-nutrients that the average individual needs. Eggs, milk, seafood, wheatgerm, nuts, carrots, spinach and green leafy vegetables are rich in Vitamins A & D. Citrus fruits, gooseberries and guavas are good sources of Vitamin C. Sprouts contain an abundance of Vitamin B.

Vitamin supplements like glucose and other dietary supplements are often over promoted, over prescribed and over used. Eating two eggs would easily outclass two bottles of proprietary

'tonics'. Increased vitamin intake must be reserved for situations where there is an increased demand, e.g. adolescence, pregnancy and convalescence. Overdose of the fat soluble vitamins can actually be detrimental to good health!

Juice up!

Natural foods and juices are the best insurance against vitamin deficiencies. So reach out for that bowl of tossed salad, instead of popping in that attractively packaged vitamin tablet sent by your sister living abroad. When in doubt, consult your doctor!



DR. MUTHU
RAJAN
Critical Care

Pain Free Surgeries

Mrs. Vimala (50) was confined to her house with severe osteoarthritis of both knees. She hobbled around in pain envying her friends heading for the club and leading full, active lives. Her doctor, advised her to undergo total knee replacements for both knees.

Remembering the pain she suffered after her hysterectomy a few years ago, she was mortally terrified of undergoing such a major operation.

A painful decision?

Mrs. Vimala went through a battery of tests at MIOT and met up with the Chief Anaesthesiologist for pre operative evaluation. The gentleman promised to keep her totally pain-free through both surgeries. She allowed herself to be

persuaded to undergo the operation.

On the morning of her operation, a nurse smeared a pain-killing EMLA cream over her hands. Half an hour later, the anaesthesiologist placed an intravenous cannulae without the usual sting that one experiences. As the saline was flowing, he performed a combined spinal and epidural procedure that made the lower half of her body numb. Fully conscious throughout the surgery that lasted an hour, Mrs. Vimala was truly amazed that she had endured the procedure so well.

Press-button relief

In the post operative ward, the epidural line was connected to a computerized syringe pump that kept her totally pain free and enabled her to go through her

physio routines without any distress whatsoever. To top it all, she was also connected to a PCA pump. She had only to press a button to get a preset dose of morphia whenever the pain broke through the epidural.

Her second knee was operated using the same intravenous and epidural lines and, within a fortnight of her admission Mrs. Vimala was back to her active self. Her friends were amazed to see her breeze into the club for a game of rummy, just one month after her hospitalization.

Unbelievable? It's 100% true!!

DR. COL. TREVOR NAIR
Chief-Anaesthesiology & Critical Care

Article

Tuberculosis: No longer a disease of the lower classes

A surprising number of people of all classes are now discovering they are victims of TB. Pulmonologist, Dr. Prince James reports on this trend.

Till the mid 20th century, Tuberculosis or T.B. was considered a social stigma and a fatal disease. Patients were isolated from society and treated in TB sanatoriums. These days, with the development of new effective Antitubercular drugs, TB is completely curable. New drug regimens have reduced the duration of treatment to 6-8 months.

Tuberculosis is caused by a germ called Mycobacterium Tuberculosis. It spreads from one person to other by inhalation of droplets, coughed out by a sputum positive TB patient. When we have a strong immune system, TB bacteria cannot produce disease and becomes dormant. Half of the people you see around you are carrying TB bacteria in their lungs in a dormant stage. Whenever the immune system becomes weak, due to old age, diabetes, cancer or HIV disease, these dormant bacteria become active and produce TB.

Typical symptoms

Recently I had an experience of treating a TB patient from the affluent class. A software engineer from an IT firm in Chennai began feeling an irritation in his throat while in office. When he went to clear his throat, he was shocked to see that his sputum was blood stained. He

lost about a litre of blood in a coughing bout and was rushed to MIOT. We resuscitated him. Sputum examination revealed presence of tuberculosis. He recalled having a bad cough for the past 4 weeks and a weight loss of 5 kgs. But being from a higher socioeconomic group, he never thought that he could have tuberculosis.

More widespread than we know

TB is now increasingly cutting across boundaries. Every year 9 million people worldwide, develop TB, out of whom, 95% live in developing countries. Every day about 1000 people die of tuberculosis in India, more than one person every minute.

With the onset of HIV epidemic, rise in number of diabetic patients, longer lifespans, and an increase in number of multidrug resistant tuberculosis patients, there will be more and more people affected by TB in our country, irrespective of socioeconomic status.



A simple test

Any cough of more than 3 weeks duration, evening fever, loss of appetite and weight, coughing of blood in sputum - can be signs of tuberculosis. In the presence of any one of these symptoms, you should contact your doctor. A simple test called microscopic examination of sputum can detect the TB bacteria.

It's only with early detection and regular TB Chemotherapy that we can stop the spread of TB bacteria in our beloved country.

DR. PRINCE JAMES
Head - Dept. of Pulmonology

A Patient Speaks

"For 15 years I suffered a severe back pain - in spite of treatment by many specialists. Finally I decided to consult Dr Mohandas. He examined me and advised spinal cord surgery. Meddle with my spinal cord at my age (73)? My initial reaction to his suggestion was not positive.

Dr. Mohandas then sent me off to the wards to talk to a patient who had undergone a similar surgery. After speaking with the recovering patient I made up my mind to repose absolute faith in the competency of Dr. Mohandas and proceed with the surgery.

I got admitted in June, this year, and the operation was done by Dr. Mohandas. What a wonder! I am completely relieved of backache and other infirmities. I was discharged from the hospital on 20th and I am now able to walk and sleep well, during nights. I wish to convey my gratitude to Dr Mohandas for his faultless operation. I may say without fear of contradiction that MIOT is one of the best hospitals in Asia particularly for orthopaedic surgery."

A letter to MIOT from Mrs.S Bageerathi Sivanesan, Indira Nagar, Chennai

Brain Strokes - Now easily reversible!

Advances in medicine and prompt action can reverse the effects of the dreaded stroke.

Dr. Zaheer Ahmed Sayeed tells us how.

A stroke is a paralytic attack, also known to you as a brain stroke. As many as 1800 people lose their lives from stroke everyday, in our country. A stroke or a paralytic attack is a situation where there is loss of blood flow (ischaemia) or bleeding (hemorrhage) in a portion of the brain, causing death of brain cells, through lack of nutrition or through pressure.

"Magical" improvement

Advances in technology have led to the development of specific drugs directed towards dissolving the clot - in a blocked artery, or in the brain. These drugs have to be administered within the prescribed time limit, and can produce remarkable and near magical remission of the paralysis and other clinical signs.

The time window and the cost of the drugs are major hurdles to their wider usage. Improvement of transport facilities and greater familiarity with the drugs in the future, will ensure that within an hour of the onset of a stroke attack, a CT scan/angiogram is obtained and

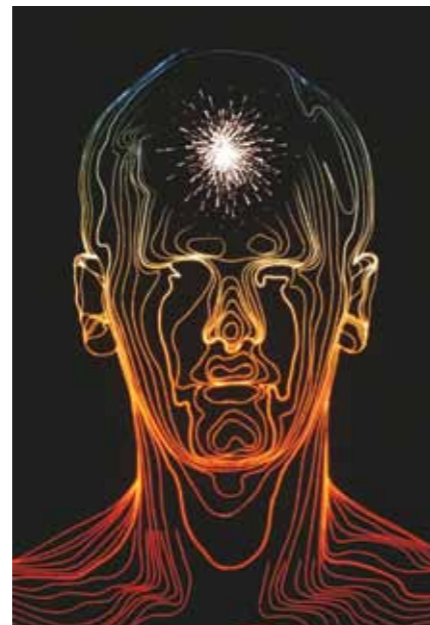
the appropriate drug administered, to cure the patient completely.

The right medication

Earlier generation drugs like streptokinase or urokinase were hazardous as they could themselves precipitate brain hemorrhage. For several years now rt-PA has been used to dissolve the clot. The clot-bursting drug is safe, although expensive, and should be used within 3 hours of the onset of an attack. Administering this drug beyond 3 hours is risky. rVIIa (Recombinant factor VII) is a new and promising drug and the only molecule which controls the bleeding. This drug too should be administered within 3 hours of the onset of the attack.

Look for these symptoms

Just as angina heralds a major heart attack, transient ischemic attack (TIA) denotes the onset of a major



paralytic stroke. It may manifest as blindness, weakness of one limb, or facial muscle dysfunction. An individual with a history of TIA is 10 times more prone to suffer a major episode of stroke than an individual who has not had TIA. In many cases of TIA, the obstruction may be in the major neck vessels, like the carotid artery. Such problems can be managed by a stent or by a surgery called endarterectomy.

Sometimes, when the BP shoots up, a small blood vessel of the brain bulges in a balloon-like manner and bursts. This is termed an aneurysmal hemorrhage and can be lethal. Interventional radiologists can facilitate clotting of blood in the bulge through various methods or it can be treated surgically by a neurosurgeon, using silver clips to nip the aberrant blood vessel.

Whatever the cause, modern day medicine holds the answers to the brain stroke problem. Seek early neurological consultations for the best results, as the time window to achieve dramatic cures is very short - less than 3 hours in most cases. Stay healthy!

DR. ZAHEER AHMED SAYEED
Consultant Neurophysician

Cutting Edge

Fighting Obesity Through Surgery



Obesity is fast overtaking smoking as the leading cause of mortality in the today's world. Diets and drugs are of limited benefit, as it is difficult to lose more than 5 kgs in a year.

Bariatric surgery offers a quick and permanent solution to grossly overweight individuals. Two options are available. The first shortens the length of the intestine to reduce food absorption. The other newer method, aims to decrease the size of the stomach so that the individual feels full after a small meal. The latest development in the area, is laparoscopic bonding. Through a 'key-hole' procedure an adjustable synthetic band is stapled across the stomach. This procedure can cause a 35-50% weight loss at the end of a year and is far superior to liposuction does not affect fat accumulated in other parts of the body.

Surgical treatment of obesity is an exciting and inexpensive alternative to the obese individual.

DR. RAJESH DANIEL
Consultant General Surgeon

Did You Know?

TOOTH LOST - TOOTH REGAINED

Dental reimplantation

Got a tooth knocked out of your mouth by accident? Relax. Act quickly and it can be completely reimplanted by a dental surgeon. The dislodged tooth must be preserved to keep it from drying. Keep the tooth



immersed in a saline solution or in milk, at room temperature. Better still, place the dislodged tooth within the mouth itself until the dentist sees you. Reimplantation has a high degree of success if done within 24 hours of the accident. The earlier the better. In fact the best results are when the tooth is reimplanted within 30 minutes of the injury.

So the next time you loose a tooth, rush to the dentist and keep smiling!!

DR. JAGDISH
Consultant Dental Surgeon

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