



Sri Ramakrishna
Hospital (MultiSpeciality)

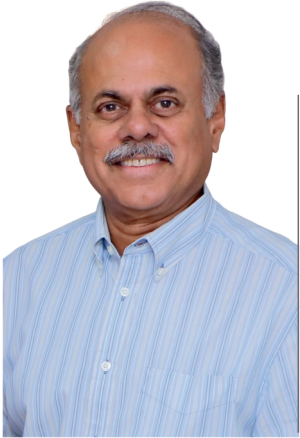
pulse

Happenings at Sri Ramakrishna...



**WORLD
BLOOD
DONOR
DAY**





D Lakshminarayanawamy
Managing Trustee

“It is an honour for me to lead this great organization and a privilege to be a part of an exceptional team of people who are passionate about providing the best care for patients.”

We stand committed in constantly raising the bar to deliver best-in-class healthcare. We recognise the vital role that technology plays in delivering

superior healthcare services and endeavor to be at the forefront in procuring the best of equipments. The core purpose of healthcare is to provide

dedicated service for the well - being of humanity. At Sri Ramakrishna Hospital, we have been continuously working towards transforming lives for the better , for the past 47 years.



Dr P Sukumaran
Dean / Medical Director

Sri Ramakrishna hospital has been a forerunner in conducting various academic programmes apart from regular clinical achievements. With possible impending fourth wave of COVID-19, it is always the rule of the land to adhere to the COVID appropriate behavior by wearing face masks, following hand hygiene practices and sufficient interpersonal distancing to avoid spread of the

disease again. Protect yourself and others as you follow these measures. We had interesting webinars, this month on “Childhood Obesity - A New Pandemic”.

Editorial Team

Dr P Sukumaran
Dean / Medical Director

Dr N Loganathan
Pulmonologist

Dr S Prahadeeshwaran
Head - Public Relations

Mr Murali Kaliappan
Head - Marketing

Sri Ramakrishna Hospital launches Interactive Flipbook to create awareness about ill-effects of Tobacco!



Observing the World No Tobacco Day, Sri Ramakrishna Institute of Oncology & Research (SRIOR) headed by its Director Dr. Guhan introduced a Digital Flipbook that elucidates the readers about the ill-effects of tobacco in an interactive manner, on

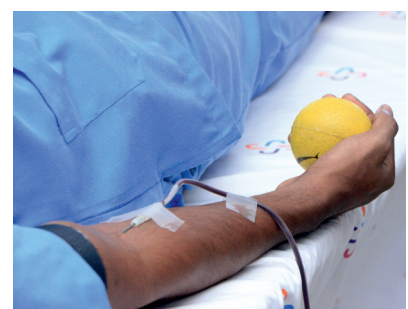
Tuesday. The 15-page Flipbook in both Tamil & English formats was launched by Deputy Commissioner of Police, Traffic Sri. S.R. Senthilkumar in the presence of R. Sundar, Joint Managing Trustee of SNR Sons Charitable Trust, Dr. Guhan and other members of SRIOR. A link was created to access the flipbook www.nosmokingsrior2022.digione.in.

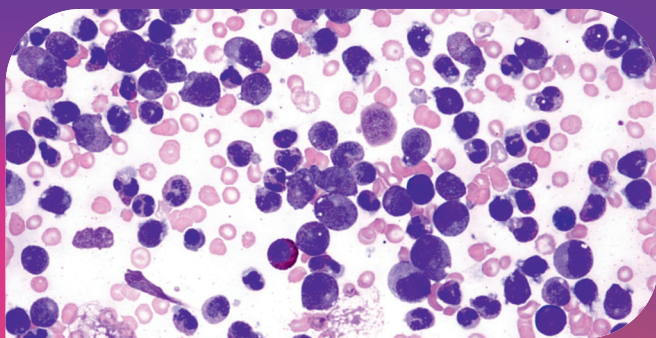
Dr. Guhan (Director - Sri Ramakrishna Institute of Oncology & Research (SRIOR)) urged that tobacco users need to quit immediately in order to reduce serious health risks that develops in their body. In order to quit Tobacco, he gave some tips like being physically active, keeping hands and mouths occupied with cinnamon or tooth picks, eating fruits, avoiding caffeinated beverages like coffee, soft drinks and also to avoid alcohol. Resisting Tobacco craving is a big step towards becoming totally tobacco-free, he opined.



On the occasion of World Blood Donor's Day Sri Ramakrishna Hospital coimbatore organized a blood donation camp. The camp was inaugurated by Ramkumar CEO, SNR Sons charitable trust and Dr. P. Sukumaran, Dean, SRH. More than 40 members of Sri Ramakrishna Dental college and including the staff and students donated blood. Moreover,

the members of Sri Ramakrishna Educational Institutions also took part in the blood donation Camp. Medical team from SRH collected blood from the donors.





Chronic myeloid leukemia (CML) in childhood with extremely high Leucocytosis

Chronic Myeloid Leukemia (CML) is a myeloproliferative disorder characterized by the presence of the BCR/ ABL1 fusion transcript encoded by the Philadelphia (Ph) chromosome, a result of a reciprocal translocation between chromosomes 9 and 22 t(9:22). The median age at diagnosis of CML is 60 to 65 years and is rare among children and adolescents. CML constitutes 2% of all leukemias in children younger than 15 years with an annual incidence of 1 case per million. Recent data highlight the distinct biological differences between adult and pediatric CML. Pediatric CML patients typically have higher mean WBC counts, more pronounced splenomegaly, and pursue a more aggressive clinical course when compared to adult CML patients. Here, we report a case of CML for a 13-year boy with unusually high WBC count (4,11,000 cells/ul).

A 13 year old boy presented with very vague complaints of hard mass palpable in the lower abdomen for 2 weeks. He did not have any abdominal pain, loss of weight, loss of appetite, low grade fever or any other symptoms. Local examination revealed a hard and distended abdomen. Gross Splenomegaly almost touching the lower part of abdomen was noted. Surprisingly, he was asymptomatic for the spleen size, which almost occupied the entire abdomen. The patient was admitted with a differential diagnosis of **Acute Leukemia, Myeloproliferative neoplasm and Storage disorder**. Biochemical parameters showed increased serum LDH. A routine hemogram was carried out, which revealed hemoglobin (Hb) 7.8 gm/dl with a markedly elevated total leukocyte count of 4,11,420/mm³ with normal Platelet count 2,88,000/mm³. A peripheral differential count revealed a shift to the left. Basophilia was noted. On peripheral smear examination, the diagnosis of Myeloproliferative neoplasm was given.

Bone marrow aspiration was carried out under all aseptic precautions, which revealed hypercellular bone marrow with myeloid predominance with the differential count of Blast = 03%, Myelocytes = 20%, Metamyelocytes = 12%, Neutrophils with band forms = 43%, Monocytes = 03%, Eosinophils = 05% and Basophils = 08%. With peripheral smear and bone marrow findings, differential diagnoses of Chronic Myeloid Leukemia - Chronic Phase (CML-CP) was made.

The cytogenetic study (Karyotyping) was carried out, which was positive for 46XX,t(9,22)(q34;q11.2) (Philadelphia chromosome) which confirmed the diagnosis of CML. Molecular studies on the bone marrow aspirate detected JMML - (Juvenile Myelomonocytic Leukemia) was ruled out as their into increase in monocyte count and BCR/ABC mutation was positive major BCR/ABL1 p210 fusion transcript.

Patient had a very high chance of Tumour Lysis syndrome with such high WBC counts. Leukapheresis (Removing WBC by apheresis machine) is recommended if patient develops priapism, breathing difficulty (pulmonary infiltrates) or any hyper-viscosity related symptoms. But the patient was managed successfully with hydration, xanthine oxidase inhibitor (Allopurinol) and Ribonucleotide Reductase inhibitor (Hydroxyurea). He was started on first generation Tyrosine Kinase Inhibitors (Imatinib) as standard of care of pediatric CML. His spleen size started to decrease



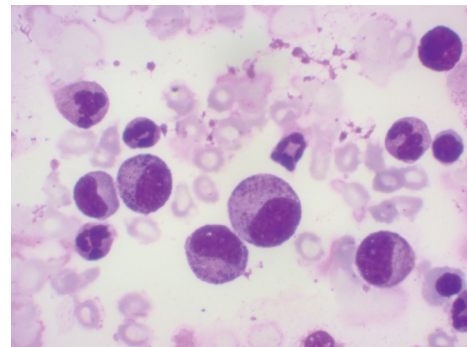
and he became clinically better. He is on regular followup.

CML in children has more aggressive clinical features. Treatment-free remission though well established in adults at present is not applicable in pediatric CML. Recent work has begun to reveal differences in CML biology in adults and children that may account for the clinical differences in CML presentation, progression, and response to treatment. Sokal score, Euro and European Treatment and Outcome Study scores that predict outcome in adult patients with CML do not predict response and outcome in paediatric CML. Most of all patients are CML-CP. 5 years overall survival and event-free survivals are 100% and 89.1%

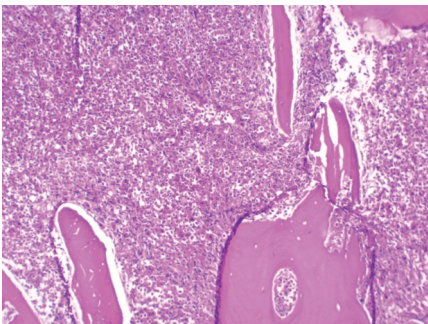
Karyotyping - showing translocation (9:22)



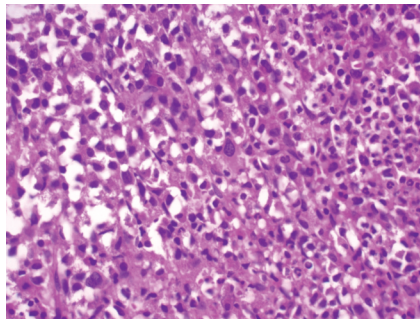
Bone marrow aspirate showing Myeloid bulge



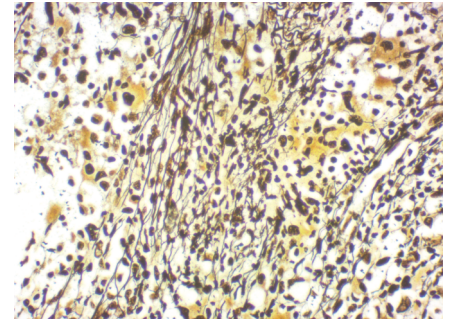
Bone marrow trephine biopsy - Hypercellular with shift to left



Dwarf Megakaryocytes



Marrow fibrosis (Reticulin stain)



Basophilia



Dr. Sridhar Gopal

MD, Fellowship in Clinical Haematology
Consultant Haemato - Oncologist &
Stem Cell Transplant Physician

Dr. T. Sethumadhavan

MBBS, MD(Pathology), PDF(Oncopathology)
Consultant Oncopathologist



Awarded as The Best Hospital of the Year 2022 - in Kongu Region

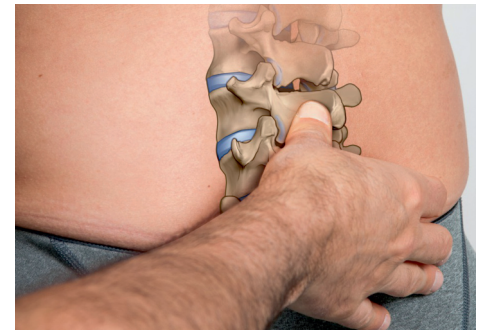


Physiotherapy Department challenging case studies

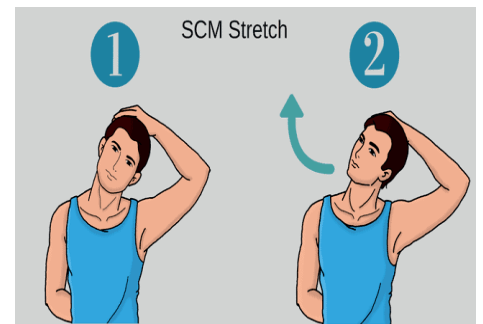
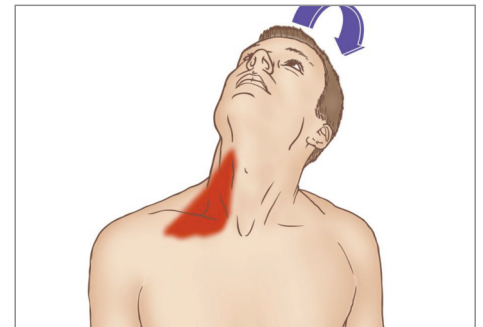
A case with a history of intermittent back pain for the past 10 years was reported by 52 years old bank manager. He suffered during evening hours pain with maximum intensity at lowback and unable to drive motorbike for more than 100 meters with a pain assessment score of 8 in visual analog scale, his postural observation showed loss of lumbar lordosis and forward stooping. Stiffness of lower thoracic and upper lumbar spine was found on palpation. Examination revealed restricted Lumbar spine extension range of motion, bilateral hip flexor, pectoralis minor tightness, weakness of lower abdominal and gluteal muscles. Physiotherapy intervention was initiated using active & passive manual graded mobilization, active stretching of hip flexor & pectoralis minor, stabilization & strengthening of back extensor and abdominals which drastically reduce the pain score to 2 and improve the spinal range of motion. After physiotherapy, the patient felt happy because of the capability of driving motorbike more than 5 km with mild pain and discomfort. Patient reviewed after a period of 1 month showed completely pain free and returned to full functional capacity.

A 45 years old female who was under going treatment came with the history of vertigo for past 10 years under medications. She experienced dizziness throughout the day and without medications, she was not able to do her routine day-to-day activities. On observation, neck protruded and examination showed bilateral sternocleidomastoid and scalene muscles tightness causing vertebrobasilar insufficiency leading to inadequate blood flow to the brain. Physiotherapy intervention of myofascial trigger release therapy, cryotherapy, passive and active stretching to sternocleidomastoid and scalene muscles done advised to continue exercises. Patient recovered from dizziness within week of time and completely came out of medications. She was advised to strengthening exercises of scapular stabilizers as a home program.

Lumbar Mobilization



Scalene Muscles Stretch



Prof. V.S. Seetharaman,
MPT (Ortho)
HOD, Department of physiotherapy



Sri Ramakrishna Hospital Celebrates INTERNATIONAL NURSES DAY MAY 12TH 2022



To commemorate the valuable contribution of nurses, International Nurses Day celebrated on May 12th every year, marking the birth anniversary of Florence Nightingale. On this day, the world comes together to honour the nurses for their selfless services to the society. The International council of nurses has defined the

theme for this year's International Nurses Day to be "Nurses- A voice to lead: Invest in Nursing and respect rights to secure global health" The inaugural function was followed by the nursing services Souvenir release.



Academic - Sri Ramakrishna Hospital, Coimbatore

June 2022



"Hidden" Haematological Disorders in Clinical Practice

Dr. SRIVIDHAR GOPAL

Consultant Haematologist - Oncologist & Stem Cell Transplant Physician
Sri Ramakrishna Hospital, Coimbatore

Date : 18.06.22 (Saturday)



Time : 4.00 to 5.00 PM

meet.google.com/eux-yvgs-nfq

July 2022



Childhood obesity - a new pandemic !

Dr. V. SHOBI ANANDI

MD, DNB, Fellowship in Paediatric Endocrinology
Consultant Paediatrician and Paediatric Endocrinologist
Sri Ramakrishna Hospital, Coimbatore

Date : 16.07.22 (Saturday)



Time : 4.00 to 5.00 PM

meet.google.com/yjf-oakp-fxe

Tune in to Safe Healthcare

Organizing a webinar authorizes you as a healthcare professional to share your knowledge and expertise from your experience in the healthcare field to a large audience.

Sri Ramakrishna Hospital offers free healthcare webinars 2022, led by industry experts from our healthcare space. Check into our website in the academics section, where you can find the upcoming healthcare webinars and the completed webinars for healthcare professionals.

You'll also get the opportunity to participate in a Q&A session when you tune in to the live webinars.



Sri Ramakrishna Hospital (Multi-Speciality)

395, Sarojini Naidu Road, Siddhapudur, Coimbatore

