



Friends of Ludhiana

Christian Medical College (CMC) Ludhiana
Punjab, North India

PRAYER TOPICS

November 2013

Prayer Topics – November

Week 45 : 4th to 10th November

The **DEPARTMENT OF PLASTIC AND MICROVASCULAR SURGERY**, independent since 1988, is known both nationally and internationally for its patient care. The department has a faculty of four senior and six junior consultants responsible for a wide range of plastic, reconstructive, microsurgery and burns work, including the re-implantation of limbs following industrial and agricultural accidents. It has pioneered techniques in a number of treatments and is credited with the first scalp replant in India and the first total face and scalp replant in the world. The **BURNS UNIT** has a separate sterile and air-conditioned unit.



The Department works in partnership with organisations such as Smile Train International, an organisation devoted to helping children with cleft conditions. CMC has seen a significant rise in numbers of patients treated for cleft lip and palate and the department runs a special clinic to attend to such patients.

PRAISE GOD FOR

- *pioneering techniques and skills developed in treatment*
- *the functioning of the air conditioning in the Burns Unit, a vital piece of equipment*
- *the dedication of staff in the long hours of treatment and care*

PRAY FOR

- *victims of industrial, agricultural and motor accidents who can be traumatised by the extent of their injuries*
- *strength and concentration for surgeons when undertaking intricate operations over many hours*

Therefore, since Christ suffered in his body, arms yourselves also with the same attitude, because he who has suffered in his body is done with sin. 1 Peter 4 v.1

Week 46 : 11th to 17th November

The **DERMATOLOGY DEPARTMENT** provides therapeutic treatment for skin diseases. It runs a daily OPD clinic including two sessions reserved for leprosy patients. Patch test is done for the diagnosis of allergic contact dermatitis. Clinical procedures include electrocautery, chemical cautery and excision of moles. It has a computerised whole body and localised Ultra-violet Rays Therapy Unit (PUVA chamber) for treatment. Academic activities include undergraduate teaching and a postgraduate course is planned once MCI and University inspection is completed.

The **DEPARTMENT of PSYCHIATRY and BEHAVIOURAL SCIENCES** is known for the quality of its service. It deals psychiatric and behavioural disorders, ranging from physical treatments to individual therapy, psychoeducational sessions, marriage counselling, family therapy for childhood disorders, and deaddiction programmes. Interdepartmental referrals have benefited patient care. **CLINICAL PSYCHOLOGY** recognises that even physical disorders are not purely so, psychological factors playing an important role in causation, precipitation, treatment and rehabilitation. The department treats all stress related conditions such as headache and sleep disorders and deals with childhood problems such as sleep walking and stammering.

PRAISE GOD FOR

- *the development of a psychiatric nursing course*
- *a biofeed laboratory, for diagnosis and guidance in psychotherapy*

PRAY FOR

- *the building up of faculty positions*
- *opportunities to contribute to more mental health awareness programmes*

So he went down and dipped himself in the Jordan ... and his flesh was restored and became clean like that of a young boy. Then Naaman and all his attendants went back to the man of God. He stood before him and said, "Now I know that there is no God in all the world except in Israel."
2 Kings 5 v.14-15

Week 47 : 18th to 24th November

The **DEPARTMENT OF SURGERY** has developed a number of specialities over the years. Apart from advances in specialities (such as chest surgery, microsurgery, neurosurgery and paediatric surgery) CMC has also developed minimally-invasive and endoscopic procedures which significantly reduce the recovery time of patients and therefore the number of days they are required to spend in hospital following surgery. The work of general surgery has doubled in recent years and the Medical Council of India has recommended the start of a new Unit of Hepatic and Transplantation Surgery. The 14 **OPERATION THEATRES** perform on average 28 operations each day and the Recovery Room facilities and air conditioning have recently been improved.

Endoscopy has been used as a diagnostic tool since the 1970s. A separate **GASTRO-ENTEROLOGY** Unit was set up in 1991, and converted to a **DEPARTMENT** in 2002. The department sees around 4,500 patients a year and performs 1,700 endoscopic procedures, the majority for patients suffering from chronic liver disease. Over the past two years the depart-



ment has made tremendous improvement in the quality of care being provided for patients and had the opportunity to provide much discounted or free services to the needy. The number of procedures done has increased exponentially and new quality Olympus endoscopes will shortly be purchased for the department which will enable them to provide the highest quality patient care at a par with international standards. A free community camp was recently organised in a remote village in Punjab.



PRAISE GOD FOR

- *the availability of surgical specialities at CMC*
- *adequate staffing in the department of surgery*
- *opportunities for staff training and experience overseas in recent years*
- *the new surgical department library*
- *new equipment for laparoscopic surgery*
- *improvement in quality of care to patients*
- *the grant of funds to allow the purchase of new endoscopes for gastroenterology*
- *the input of a UK gastroenterologist in his encouragement and effort in taking gastroenterology forward academically*

PRAY FOR

- *the development of more specialty units*
- *the health and early recovery of every patient*
- *wisdom for the staff of both departments to make the most appropriate decisions for their patients and progress of the departments*
- *plans to hold an international conference in Community Hepatology*

I have come that they may have life, and have it to the full.
John 10 v.10

Week 48 : 25th to 1st December

The **DEPARTMENT OF UROLOGY**, upgraded from a unit to encourage further growth and development of the speciality, remains one of the consistently busy departments. The department has comprehensive diagnostic and therapeutic facilities for urological cancers, renal stones, urinary incontinence, infertility, impotence, urooncology, female urology and other urinary problems. All procedures are carried out in state of the art facilities available in the institution. Part of comprehensive urooncological care includes treatments for renal cell carcinoma, bladder cancers and prostate malignancy. The department operates OPD clinics on three days a week with surgery on intervening alternate days.



Activities also include ongoing clinical trials and training for doctors (DNB) and urological technicians. A paediatric urological subspecialty seeks to create awareness of and help parents to understand the urological diseases that their children might suffer.

CMC was the first hospital in North India to start peritoneal dialysis and has performed regular peritoneal dialysis and percutaneous kidney biopsies. In 1988 an independent **NEPHROLOGY UNIT** was created with facilities for haemodialysis and later on for renal transplantation. Kidney failure continues to rise worldwide and the challenge is to offer high quality dialysis treatment that can help patients to live a normal, longer and healthy life.

CMC was the first to start **RENAL TRANSPLANTATION** in Punjab in 1991 and continues have excellent results. The first transplant involved a live related donor, but in 1997 the first successful operation in Punjab took place with a deceased unrelated donor was used for

transplantation. There are two separate fully equipped renal transplant ICU's for the post-operative care of recipients.



PRAISE GOD FOR

- *the recognition of the Urology Department by many organisations for employees claiming medical in-service benefit*
- *the excellent care given by the Nephrology Unit in dialysis treatment and kidney transplantation*
- *new equipment bought for endoscopic procedures*

PRAY FOR

- *the start of the pancreas and liver transplantation programme*
- *patients involved in clinical trials*

Jesus went through Galilee, teaching in their synagogues, preaching the good news of the kingdom, and healing every disease and sickness among the people.

Matthew 4 v.23

Pray for Dr. Abraham Thomas and the administrative team for wisdom to further develop the work of CMC – its pioneering treatments, its care for the poor, its training of doctors, nurses and dentists for the rural hospitals of India - so that it remains a beacon for Christ's grace in the Punjab.

Stories of those recently helped through the Good Samaritan Fund

This month we focus on some patients seen by the Department of Paediatric Medicine at CMC Ludhiana.



Fameen was just over 2 years old when he was brought to CMC. He lives with his parents and older brother in rented accommodation 20kms from CMC and his

father works six days a week as a scooter mechanic, earning around Rs.4,000 a month (about £40). He was admitted with a diagnosis of hypersplenism, severe anemia and thrombocytopenia and was started on vitamin B injection and given supportive care, including blood transfusion. A bone marrow aspiration and biopsy was done which suggested Gauchers disease. His general condition improved and he was discharged after six days to be followed up through OPD. The hospital bill came to over five times his father's monthly salary and the family had borrowed money from relatives towards the cost.

Karanvir, aged 13, lives in Jallander with his parents and two older brothers. His father works six days a week as a daily labourer, earning between Rs. 2,000 and Rs.4,000 each month. Karanvir was referred from



another Ludhiana hospital after having suffered near accidental drowning about 3½ hours before. He was admitted in a serious condition with respiratory failure, shock and possible hypoxic encephalopathy. He was immediately put on ventilator support and given IV fluids and antibiotics and in view of upper gastrointestinal and pulmonary bleeds, given blood. On the 4th day of his 10 day stay he was extubated and medication changed in view of fever and chest symptoms. His condition gradually improved and he was discharged on request to be followed up from the OPD. The cost of his treatment was eight times his father's monthly salary and the parents had borrowed money from relatives to pay around a third of the bill.

Sachin, the eldest of three brothers, lives in Ludhiana; his father works six days a week as a daily labourer, earning between Rs.2,000 and Rs.4,000 a month. He was admitted to CMC aged five with complaints of fever, vomiting and seizures. He was admitted with meningitis and a CT scan showed



multiple tuberculoma. He was started on steroids along with IV antibiotics and fluids and given supportive care. As the patient continued to have persistent vomiting an MRI scan confirmed the same findings and repeated tests corroborated with tubercular meningitis. Tests will continue through OPD and he was discharged after 19 days. The cost of his treatment so far was over a year his father's annual salary and the family were hoping to pay around 40% by borrowing money from relatives.



Japmanpreet was just 2½ months old when he was brought to CMC. He lives in Ludhiana in a joint family ancestral house with his parents and older brother; his parents are both well-educated and his father earns around Rs.12,000 a month working six days a week as a driver.

He was admitted with possible seizures and he was started on antiepileptic drugs, although USG and EEG tests done normal. He developed respiratory distress and stridor on 2nd day of hospitalisation and was given antibiotics and nebulizers for bronchopneumonia. He required ventilation on the 11th day for worsening respiratory distress. Other tests were performed including an ECHO done in view of a cardiac murmur. After 31 days he was symptomatically better, taking breast feeds well, gaining weight and was discharged. The parents had borrowed money to pay 90% of the Rs.85,000 hospital bill.

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