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.M.A.G.S.B. NEWS BUL	LETIN	NOVEMBER-2013 / N	MONTHLY NEWS
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G	UJARAT MED	CAL JOURNAL	
INDIAN MEDICA	LASSOCIATIO	N, GUJARAT STATE I	BRANCH
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	Website : www	.lmagsb.com	
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PROFESSIONAL PROTE	CTION SCHEME	Contraction of the second s	and the second se
Managing Dir Dr. Dilip C. Vaidya	Ahmedabad	Chairmar Dr. Vidyut J. Desai	n Ahmedabad
LABORATORY MEDICI	INE CELL (LMC)	HEALTH SCHEME	_
Chairmar Dr. Sudhir Marchant	n Vadodara	Chairmar Dr. Navneet K. Patel	n Ahmedabad

### STATE PRESIDENT'S MESSAGE



#### Dear friends,

As samvat 2069 ended and samvat 2070 started, may the festival of lights be the harbinger of joy and prosperity. As the holy occasion of Diwali is here and the atmosphere is filled with the spirit of mirth and love, here's hoping this festival of beauty brings your way, bright sparkles of contentment, that stay with you through the days ahead.

#### Best wishes for New year.

New year has begun but our challenges are old. since India became independent in 1947, there has been steady progress on all fronts of human and economic development. India has matured as the largest democracy in the world and also earned the reputation of being one of the fastest growing economies during last two decades. However, the country remains challenged with several pressing issues which includes maintaining good health for the second largest population in world. As a signatory of Alma Ata declaration, provision of primary health care has remained a priority area in the planning process.

IMA is the largest NGO of the world and it has helped government in the past and will help government in the future on issues related to health care of the people of the country.

IMA is conducting various CME's for doctors and various programmes for public awareness.

I urge all local branches to do more programmes related to public awareness and invite local media persons so such programmes carry more impact in the society.

I urge all local branches to celebrate various days so that local people get encouragement.

I am glad to inform you that with the effort of IMA, government has started the process to reconstitute the democratically elected body of Medical Council of India.

I congratulate all who are elected or nominated from Gujarat in newly formed body of Medical Council of India.

Most recently, the Hon'ble Supreme Court of India has awarded a compensation of approx. Rs. 11 Crores with interest in a Court case related to medical negligence based on the earning capacity of the affected patient and relatives.

#### I.M.A.G.S.B. NEWS BULLETIN

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Some members feel that this base for compensation is not correct.

IMA suggest that the following alternatives may be considered:

1. Formation of a Medical Tribunal to examine the grievances and to fix compensation.

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- 2. Formation of a corpus fund from contribution from patients, doctors and the Government.
- 3. When there is a complaint of medical negligence, a Committee can fix the liability,

If any, and recommend the compensation which can be paid from the corpus fund.

IMA HQs. has written to the Hon'ble President of India, Medico Parliamentarians, Parliamentary Standing Committee on Health, Health Ministry and Law Ministry about the views of IMA.

I urge all of you to give your valuable suggestion for same, so that I can convey it to our parent association for consideration.

Friends, we are all different, but this is precisely where our strength lies, as well as in our ability to hear, understand and respect each other, to tackle challenges together and achieve success.

This is always a hopeful time, as we celebrate the end of one year and the beginning of another. We must also look back on this year with the knowledge that brighter days are ahead of us – that although our challenges are great, each of us has the courage and determination to rise up and meet them.

It is that spirit that has kept the Indian Dream alive for generations, and it is that spirit that will keep it alive for generations to come. Happy New Year, everyone.

As we celebrate the New Year, we look with hope to the year ahead and the opportunities it will bring. Let me conclude by quoting from the great classic Bhagvad Gita where the Teacher propounds his views and then says, and I quote, "ÿathaicchasitathakuru" "even as you choose, so you do". I do not wish to impose my views on you. I have presented to you what I think is right. Now it is for your conscience, for your judgement, for your mind to decide what is right." (unquote)

On your decisions rests the future of health of our society.

Jai Hind.

Long live IMA.

Yours Truly,

Dr. Bipin M. Patel (President, G.S.B.,I.M.A.)

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### HON. STATE SECRETARY'S MESSAGE

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#### Dear members,

Warm warm wishes for cool cool winter.

At the outset, I would like to congratulate members of the Bhuj branch for exhibiting their unity by resolving their election dispute without any external support and guidance. On behalf of GSB office bearers, I salute leaders of Bhuj branch for showing their brethren and unity.

In this world, only one thing is permanent and that is CHANGE. All other things are temporary and still we human beings want all good things permanent. The monsoon has gone and little warm and humid season came. That has also gone and first cold wave has already started.

The same way at our Gujarat State Branch our veteran Honorary Secretary DR BIPIN PATEL, who has served for more than fifteen years and now his position has changed from Honorary Secretary to the president of GSB. I am fortunate to work as an Honorary Secretary of GSB under able and experienced president ship of him. So CHANGE is part of life everywhere.

This year, we need some changes in our news bulletin too to make it more interesting. As we know, it's not any single one's cup of tea. So I seek input from each one of you. We want to add different sections like sports, entertainment, bollywood, Hollywood, national and international current affairs, humor, poems, quiz, general information etc. We are going to form a bulletin committee. They will invite such stuff from our members through email or hard copy. They will assess and select the matter out of that stuff on quality basis. We will also cover our regular health related issues and activities as mentioned in the president's message.

We invite suggestions, feedbacks, positive criticism to make our bulletin more informative and interesting. Looking forward for your active participation.

Yours Truly, Dr. Jitendra N. Patel (Hon. State Secy., G.S.B.,I.M.A.)

#### I.M.A.G.S.B. NEWS BULLETIN

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### STATE PRESIDENT-HONY. SECY. & OFFICE BEARERS TOURS/VISIT

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- 23/10/2013 Dr. Bipin M. Patel; President, I.M.A. G.S.B. and Dr. Ashok D. Kanodia; Convener Family Planning Centre attended C.M.E. and Installation ceremony of New team I.M.A. Gandhinagar Branch
- 15/11/2013 Dr. Bipin M. Patel; President, I.M.A. G.S.B. attended Diabetes Public Awareness programme on the occasion of World Diabetes Day 2013. Diabetes Walk, Diabetes Cycle Rally along with Dr. Vivek Arya, Dr. Dinkar Goswami and Dr. Anant Yadav was organized by Community Healthcare Charitable Trust, Ahmedabad.

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### **CENTRAL WORKING COMMITTEE MEETING**

Indian Medical Association, 210<sup>th</sup> Central Working Committee meeting was held at Hotel Samdareeya, Dr. Barat Road, Russel Chowk, Jabalpur, Madhya Pradesh on Sunday, November 10, 2013

Following members from our State attended the meeting.

Dr. Jitendra B. Patel	Ahmedabad
Dr. Bipin M. Patel	Ahmedabad
Dr. Kirti M. Patel	Ahmedabad
Dr. Yogendra S. Modi	Ahmedabad
Dr. Pragnesh C. Joshi	Surat
Dr. Vinod C. Shah	Surat
Dr. Rajiv D. Vyas	Bardoli
Dr. K.J. Ganatra	Bhuj

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			(10)	IMA Standing Committee for Medical Ethics Dr. Pravinaben M. Santwani	Jamnagar
	In IMA Standing Committee following member Gujarat State Branch. We Congratulate all of mittee are as under.		(11)	Dr. Mayank J. Bhatt	Vadodara
(1)	IMA Special Committee on IMA Pension Schem Dr. Bipin M. Patel	e Ahmedabad	(13)	Dr. Narendra M. Jariwala	Surat
(2)	IMA Special Committee on Nationwide Action fo Fight (Presently with Special Emphasis on Con on Medical Profession) Dr. Jitendra N. Patel	•	(14)	Dr. Shiril B. Shah	Surat Navsari
(3) (4)	IMA Standing Committee for Finance <b>Dr. Bharat V. Trivedi</b> IMA Standing Committee for Drugs & Medical E	<b>Bhavnagar</b> guipments	(15)	5	Ahmedabad
(5)	Dr. Mahendra B. Desai IMA Standing Committee for ESI Dr. G. K. Patel	Ahmedabad Mehsana	(17)	Dr. Jayesh P. Sachde IMA Standing Committee for Control of Enviror Dr. Dinesh L. Patel	Ahmedabad Imental Pollution Ahmedabad
(6)	Dr. Ashok D. Kanodia IMA Standing Committee for Family Welfare (Mater Dr. Girdhar P. Patel	Ahmedabad nal & Child Welfare) Palanpur	(18)	IMA Standing Committee for Establishment of Dr. Parth N. Patel	Trade Union <b>Ahmedabad</b>
(7)	IMA Standing Committee for LIC & Medical Scheme Dr. Anil J. Nayak	Protection Insurance Mehsana		<b>Bid Invited for I.M.A. G.S.B. New</b>	vs Bulletin
(8)	IMA Standing Committee for Medical Education Dr. Jayesh K. Sheth	Mahuva		Applications are invited for Title - II, Title - III, & Title - "I.M.A. G.S.B. News Bulletin", in Sealed Cover, before the Pick of the State of the	ore 31 <sup>st.</sup> December,
(9)	IMA Standing Committee for National Plans Dr. Ketan L. Patel	Bhavnagar		2013. There will be Bid for these five pages, the Pers the highest amount will get the privileged advertiseme	-
_	(16)			(17)	

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Hon. Sec., State Sc. Cor	<b>n.</b> Dr. Shailesh S. Shah	Anand			

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#### I.M.A.G.S.B. NEWS BULLETIN

NOVEMBER-2013 / MONTHLY NEWS

Family Planning Committee & Projects allotted to IMA Gujarat State Branch by IMA (HQ) New Delhi & Govt. of Gujarat - India Convenor Dr. Ashok D. Kanodia Ahmedabad \* \* \* \* \* ZONAL REPRESENTATIVES (STATE WORKING COMMITTEE) Dr. Mangalam Rathod Ahmedabad Ahmedabad Dr. Tushar B. Patel Ahmedabad Vadodara Dr. I. C. Patel Vadodara Dr. Vinod K. Mehta Vadodara Surat Dr. C. S. Jardosh Surat Dr. Bhupesh Chavda Surat Dr. Ambalal V. Patel Patan Central Dr. Prakash Gandhi Modasa Dr. Rashmi Upadhyay Rajkot West Dr. Kumud M. Patel Rajkot South Dr. S. S. Vaishya Daman Dr. Vanrajsinh Mahida Bharuch Bhuj-Kutch Kutch Dr. K. J. Ganatra \* \* \* \* \*

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	(19)	

(18)

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**GUJARAT MEDICAL JOURNAL** 

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#### I.M.A.G.S.B. NEWS BULLETIN

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Vadodara

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### I.M.A. NATIONAL SOCIAL SECURITY SCHEME DFC No. 18

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Following members have not paid their DFC No.18 amount.

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12092	Dr.Prajapati Dineshbhai Somabhai	Mehsana
12097	Dr.Patel Hardik Nathalal	Modasa
3458	Dr.Thakkar Taraben Chhaganlal	Vadodara
5692	Dr.Das Abhijit Panchanan	Vadodara
5693	Dr.Bhagat Shilpa Das Abhijit	Vadodara
8098	Dr.Parekh Dipak Chimanbhai	Vadodara

If we will not receive the payment on or before 15-12-2013 their membership will be terminated from scheme.

For any query contact office No. 079-26585430 between 2-00 p.m. to 6-30 p.m.

Dr. Yogendra S. Modi Hony. Secretary Dr. Kirti M. Patel Chairman

### **ATTENTION PLEASE !**

### PRESIDENTS AND SECRETARIES ALL LOCAL BRANCHES

Please send two (2) passport size photographs and your details (Address, Telephone Numbers, Mobile, STD Code & Email ID etc.) for our office record and mention your name behind your photographs to State Office immediately.

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### **SCIENTIFIC UPDATE**

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### Varenicline: A breakthrough medicine for smoking cessation

Tobacco smoking can lead to nicotine dependence and serious health problems. Nicotine is the psychoactive substance in tobacco products that produces dependence. Most smokers are dependent on nicotine. *Research suggests that nicotine may be as addictive as heroin, cocaine, or alcohol.* 

Breaking free from nicotine dependence is not the only reason to quit smoking. Tobacco smoke contains a deadly mix of more than 7,000 chemicals; hundreds are toxic, and about 70 can cause cancer. Tobacco use can also lead to heart disease, stroke, and lung diseases (including emphysema, bronchitis, and chronic airway obstruction). For every person who dies from a smoking-related disease, 20 more people suffer with at least one serious illness from smoking. On average, smokers die 10 years earlier than nonsmokers. In fact, tobacco is the only legally available consumer product which kills people when it is used entirely as intended.

Inspite of these known facts, tobacco use still remains the leading preventable cause of death. Worldwide, tobacco use causes more than 5 million deaths per year, and current trends show that tobacco use will cause more than 8 million deaths annually by 2030. In India, currently estimated 14.0% of the population are tobacco smokers. Prevalence is very much higher in males (24.3%) as compared to females (2.9%).

Fortunately, people who stop smoking greatly reduce their risk for disease and premature death. Although the health benefits are greater for people who stop at earlier ages, cessation is beneficial at all ages.

Smoking cessation is associated with the following health benefits:

- Lowers the risk for lung and other types of cancer.
- Reduces the risk for coronary heart disease, stroke, and peripheral vascular disease. Coronary heart disease risk is substantially reduced within 1 to 2 years of quitting.
- Reduces respiratory symptoms, such as coughing, wheezing, and shortness of breath. The rate of decline in lung function is slower among people who quit smoking than among those who continue to smoke.

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 Reduces the risk of developing chronic obstructive pulmonary disease (COPD).

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• Women during their reproductive years reduce the risk for infertility. Women who stop smoking during pregnancy also reduce their risk of having a low birth weight baby.

In fact, time spent by a practitioner with a smoker to pursue him to quit smoking can be one of the most effective uses of a practitioner's time in terms of preventing mortality or morbidity. One premature death can be avoided with every 2 smokers a clinician persuades and helps to stop smoking. In other words, a clinician who motivates 10 smokers to stop smoking, would have prevented five avoidable early deaths.

#### Methods to quit smoking :

The majority of cigarette smokers quit without using evidence-based cessation treatments. However, the following treatments are proved to be effective for smoking cessation:

 Behavioral cessation therapies and counseling. The combination of medication and counseling is more effective for smoking cessation than either medication or counseling alone.

Cessation medications found to be effective for treating tobacco dependence include the following :

- Nicotine replacement products
  - o Over-the-counter (e.g., nicotine patch, gum, lozenge)
  - o Prescription (e.g., nicotine inhaler, nasal spray)
- Prescription non-nicotine medications, such as Bupropion and Varenicline tartrate.

Unfortunately, tobacco dependence is a chronic disorder that is difficult to treat despite the availability of pharmacologic aids, such as Nicotine Replacement Therapy (NRT) and Bupropion Sustained-Release (SR). For these reasons, novel pharmacotherapies are being developed in an attempt to improve long-term abstinence outcomes. Among the most promising of these newer treatments is **Varenicline**, a partial agonist selective for the  $\alpha_4\beta_2$  nicotinic Acetylcholine Receptor (nAChR).

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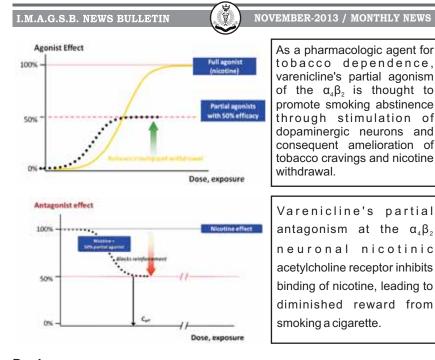
Varenicline received a priority U.S FDA review because of its significant potential benefit to public health and was approved in May 2006 for smoking cessation. In India the drug is marketed from the year 2008.

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The positive reinforcing (pleasurable) effects of nicotine and the presence of craving and withdrawal symptoms (negative reinforcing effects) associated with tobacco cessation are important factors that prevent smokers from achieving long-term tobacco abstinence. Addressing both the positive reinforcing effects of nicotine and the withdrawal symptoms with a single drug would be expected to improve the efficacy of tobacco dependence treatment. Varenicline was developed to achieve both of these aims. A basic understanding of the neurobiologic effects of nicotine is necessary for understanding the mechanism of action of varenicline.

Upon inhaling cigarette smoke, nicotine is quickly absorbed into the bloodstream and readily penetrates the blood-brain barrier. The pleasurable effects of nicotine are mediated by the mesolimbic dopaminergic system that consists of the neurons in the ventral tegmental area with projections into the nucleus accumbens and prefrontal cortex. The release of dopamine in the nucleus accumbens is a key component of the pleasurable and rewarding (positive reinforcing) effects of nicotine. The  $\alpha_4\beta_2$  nAChRs are located at the presynaptic terminals in the nucleus accumbens and play an important role in dopamine release. Based on this understanding, it was hypothesized that a partial agonist of the  $\alpha_4\beta_2$  nAChR (i.e., a compound with a high affinity for the  $\alpha_4\beta_2$  nAChRs but less reinforcing effect than the primary agonist, nicotine) would likely attenuate the nicotine withdrawal symptoms and craving and reduce the positive reinforcing effects of nicotine, while not causing habituation itself.

The partial agonist activity of varenicline at the  $\alpha_4\beta_2$  neuronal nAChR promotes a sustained, low level of dopamine release, which reduces withdrawal symptoms. Through its higher affinity, lower efficacy, and relatively long half-life compared with nicotine, varenicline is able to prevent nicotine from occupying and activating the  $\alpha_4\beta_2$  nAChRs during a smoking cessation relapse. In this way, varenicline acts functionally as an antagonist at the  $\alpha_4\beta_2$  neuronal nAChR, and so has the potential to inhibit the immediate rewarding effects of nicotine from tobacco and reduce smoking satisfaction.



#### Dosing:

Varenicline treatment is initiated one week prior to the patient's target quit date. Dosing begins at 0.5 mg once daily and increases to 0.5 mg twice daily on day 4. On the target quit date (day 8), the dose is increased to 1 mg twice daily and maintained for 12 weeks.

#### Efficacy and safety trials and reviews :

There are numerous literatures which prove that varenicline is more effective than Placebo, Nicotine Replacement Therapy (NRT), Bupropion and other smoking cessation modalities. Some of the very recent studies and reviews are summarized below.

A Cochrane review entitled 'Pharmacological interventions for smoking cessation: an overview and network meta-analysis' was published in May 2013. It was an overview of 12 Cochrane reviews of different treatments conducted between 2008 and 2012, which included **267** *trials, covering more than 101,000 smokers.* In this it was concluded that *Varenicline helped about 50% more people to quit than nicotine patch and 'other' NRT (tablets, sprays, lozenges and inhalers),* 

#### NOVEMBER-2013 / MONTHLY NEWS

and about 70% more people than nicotine gum. Varenicline more than doubled the chances of quitting compared with placebo, so that for every 10 who quit with placebo about 28 could be expected to quit with varenicline. In the review they have further added that, they didn't found any evidence from the trials that it is linked to an increase in neuropsychiatric problems, or with increased heart and circulatory problems.

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In a recent review article published in American Journal of Psychiatry (September 2013) entitled 'Varenicline, Smoking Cessation, and Neuropsychiatric Adverse Events' in which the authors analyzed data of more than 43,000 patients, it was noted that in terms of efficacy. 12 weeks of treatment with varenicline produced a 124% increase in the rate of abstinence relative to placebo and 22% relative to bupropion. The number needed to treat based on the estimated abstinence rates at 12 weeks was 2.63. Smoking abstinence was significantly greater for patients treated with varenicline relative to those who received placebo (p<0.0001) or bupropion (p<0.0001). Analysis of longitudinal neuropsychiatric event data revealed no evidence of an increased risk of suicidal ideation or behavior or of neuropsychiatric events (depression, aggression, and agitation potentially associated with a greater risk of suicidal behavior) with varenicline. Moreover, they did not detect an increased risk of depression-related events after treatment discontinuation.

In a study done by Kralikova E et.al which included 855 smokers it was concluded that smokers in the same behavioral support programme who use varenicline appear to have a greater probability of achieving *long-term abstinence* than those using their choice of Nicotine Replacement Therapy (NRT) options, even after adjusting for potentially confounding smoker characteristics. In another study done by Kotz D et. al in 1,579 smokers, it was concluded that varenicline use with minimal professional support in the general population of smokers appears more effective than NRT treatment in achieving *short term abstinence*.

Depression and smoking behavior is interlinked. The presence of 1 condition increases risk for the other to the extent that *roughly half of smokers seeking treatment have a history of depression*. A study done by

#### I.M.A.G.S.B. NEWS BULLETIN

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Anthenelli RM et. al (published in Annals of Internal Medicine,2013) concluded that varenicline even increased smoking cessation in smokers with stably treated current or past depression without exacerbating depression or anxiety. So it can be concluded that varenicline can be used both safely and effectively in these patients.

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In a large scale observational study, Gunnell et al. examined reports of depression and suicidal thoughts and behavior in patients taking nicotine replacement therapy, varenicline, or bupropion in a cohort of over 80,000 patients in the United Kingdom and found no evidence of an effect of varenicline on these neuropsychiatric events relative to bupropion and nicotine replacement therapy.

In fact most common adverse reactions (>5% and twice the rate seen in placebo treated patients) noted with varenicline are just nausea, abnormal (e.g., vivid, unusual, or strange) dreams, constipation, flatulence, and vomiting.

#### Conclusion:

Benefits of smoking cessation are tremendous but unfortunately not many smokers are motivated to present themselves for the same. Clinicians should actively inquire for smoking history in each and every patient and pursue smokers to quit smoking. Smoking cessation clinics can be very helpful in this regard and we all should actively support for formation of such clinics or OPDs in hospitals so that patient from different departments can be referred there and they can be successfully managed to quit smoking. We should also note that not every quit attempt made by a smoker will be successful, but combined behavioral therapy and pharmacotherapy significantly improves the odds of achieving tobacco abstinence. Smokers taking varenicline have the most success quitting compared with those taking other first-line pharmacotherapies for treating tobacco dependence. With this backdrop it can be stated that varenicline really adds significantly to our armamentarium of treatment options and should be considered a first-line therapy for smoking cessation.

> - Dr. Parth Desai (M.D. Pharmacology)

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## NEW LIFE MEMBERS

## I.M.A. GUJARAT STATE BRANCH

### We welcome our new members

L_M_No.	NAME	BRANCH
LM/22813	Dr. Lakhani Ruhi Sadiq	Amreli
LM/22970	Dr. Prasad Jitendra B.	Jamkhambhadia
LM/22971	Dr. Vakharia Mehul Anilkumar	Surat
LM/22972	Dr. Bhargava Bharat Sushilbhai	Surat
LM/22973	Dr. Bhargava Neelma Bharatbhai	Surat
LM/22974	Dr. Patel Suresh Shankarlal	Nadiad
LM/22975	Dr. Makwana Dipak Jashubhai	Bhavnagar
LM/22976	Dr. Dodiya Himanshu Maheshbhai	Bhavnagar
LM/22977	Dr. Vakani Jayesh Labhubhai	Bhavnagar
LM/22978	Dr. Raiyani Parag Bharatbhai	Gondal
LM/22979	Dr. Pitroda Gautam Vinodkumar	Gondal
LM/22980	Dr. Sharma Arvindkumar Y.	Surat
LM/22981	Dr. Dhanavadiya Nimeshkumar D.	Palanpur
LM/22982	Dr. Meman Mahmadrafik M.	Palanpur
LM/22983	Dr. Patel Sapnesh Shankarbhai	Bilimora
LM/22984	Dr. Patel Binita Mohanbhai	Bilimora
LM/22985	Dr. Prajapati Khushbu Kandarp	Modasa
LM/22986	Dr. Pandya Dhaval Devendrabhai	Bhavnagar
LM/22987	Dr. Oza Nimit Nikhilkumar	Bhavnagar
LM/22988	Dr. Shah Bhavik Nareshbhai	Himatnagar
LM/22989	Dr. Nagori Maksuda R.	Palanpur
LM/22990	Dr. Patel Dipak Motilal	Palanpur
LM/22991	Dr. Shah Akshat Shirilkumar	Navsari
LM/22992	Dr. Soni Kunal Ashokkumar	Anand
LM/22993	Dr. Patel Shalin Ramjibhai	Jamkhambhadia
	(30)	

### I.M.A.G.S.B. NEWS BULLETIN

#### NOVEMBER-2013 / MONTHLY NEWS

LM/22994	Dr. Patel Bijal Bharatbhai	Jamkhambhadia
LM/22995	Dr. Khatri Naushad Harunbhai	Bhujkutch
LM/22996	Dr. Tiwari Manishkumar C.	Anand
LM/22997	Dr. Rathod Mital Devjibhai	Amreli
LM/22998	Dr. Faldu Mithil Rameshbhai	Amreli
LM/22999	Dr. Patel Pradipkumar Ratilal	Mehsana
LM/23000	Dr. Meman Asif Sabbirbhai	Mehsana
LM/23001	Dr. Patel Mehulkumar Amrutbhai	Mehsana
LM/23002	Dr. Gosai Tushar Rasikpuri	Jamnagar
LM/23003	Dr. Gauswami Kajal H.	Jamnagar
LM/23004	Dr. Patel Shishir Sudeshbhai	Vadodara
LM/23005	Dr. Dua Siddharth Anilbhai	Vadodara
LM/23006	Dr. Trivedi Chinmay Kiritkumar	Vadodara
LM/23007	Dr. Vaghani Sanjay Gordhanbhai	Vadodara
LM/23008	Dr. Khatri Deepak Mohanlal	Vadodara
LM/23009	Dr. Prajapati Bhoomi Babubhai	Vadodara
LM/23010	Dr. Gandhi Bhavin Jaykishor	Vadodara
LM/23011	Dr. Christian Pratixa D.	Vadodara
LM/23012	Dr. Gohil Krunal Kaushikkumar	Vadodara
LM/23013	Dr. Sharma Subodh Kumar	Vadodara
LM/23014	Dr. Rajani Bharti	Gandhinagar
LM/23015	Dr. Trivedi Harit Chaitanyabhai	Surat
LM/23016	Dr. Parmar Harshal Maheshkumar	Surat
LM/23017	Dr. Kapadia Parth Bharatbhai	Surat
LM/23018	Dr. Prajapati Girish Ramanlal	Santrampur
LM/23019	Dr. Masi Sadikmohammad Ismail	Santrampur
LM/23020	Dr. Patel Hitesh Devendraprasad	Santrampur
LM/23021	Dr. Raval Jignesh Champaklal	Palanpur
LM/23022	Dr. Namera Harshida Kishorbhai	Rajkot

(31)

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LM/23023	Dr. Vyas Krushnakumar C.	Rajkot
LM/23024	Dr. Tilva Ruchi Sonam	Rajkot
LM/23025	Dr. Khandvi Yogesh Parmabhai	Rajkot
LM/23026	Dr. Pansora Samip Maheshbhai	Rajkot
LM/23027	Dr. Chauhan Mahipal Jayeshbhai	Rajkot
LM/23028	Dr. Gajipara Sandip Nitinkumar	Rajkot
LM/23029	Dr. Patel Dhaval Chandrakant	Ahmedabad
LM/23030	Dr. Patel Mehulkumar Kantilal	Ahmedabad
LM/23031	Dr. Jadav Deepa Natvarlal	Ahmedabad
LM/23032	Dr. Patel Kunjalkumar Babulal	Ahmedabad
LM/23033	Dr. Desai Rajesh Ranabhai	Ahmedabad
LM/23034	Dr. Merai Rajan Vinaychandra	Ahmedabad
LM/23035	Dr. Popat Hiren Vinodkumar	Ahmedabad
LM/23036	Dr. Dhroov Parul Manishbhai	Ahmedabad
LM/23037	Dr. Shah Vatsal Hemantbhai	Ahmedabad
LM/23038	Dr. Shah Shraddha Vatsalbhai	Ahmedabad
LM/23039	Dr. Darji Vipul Chhanalal	Ahmedabad
LM/23040	Dr. Aagja Bhavik Natvarlal	Ahmedabad
LM/23041	Dr. Thakkar Bhavesh Hiralal	Ahmedabad
LM/23042	Dr. Thakkar Amruta Bhavesh	Ahmedabad
LM/23043	Dr. Mundra Neetu	Ahmedabad
LM/23044	Dr. Patel Vaidehi Rajnikant	Ahmedabad
LM/23045	Dr. Sondarva Pankaj Valjibhai	Ahmedabad
LM/23046	Dr. Shah Alpesh Zaverchandbhai	Ahmedabad
LM/23047	Dr. Parmar Manish Prakashbhai	Ahmedabad
LM/23048	Dr. Patel Rushik Bhupendrabhai	Ahmedabad
LM/23049	Dr. Bankar Shailesh Chimanlal	Ahmedabad
LM/23050	Dr. Bankar Kinjal Shailesh	Ahmedabad
LM/23051	Dr. Shah Pathik Kiritkumar	Ahmedabad
LM/23052	Dr. Sharma Mukesh Narendrabhai	Ahmedabad

#### I.M.A.G.S.B. NEWS BULLETIN

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### COMMUNITY SERVICE

A CONTRACTOR

### MORBI

01/10/2013

Blood Donation Camp. 30 blood bottles were donated by IMA members & general public. 5000 pamphlet were distributed with news papers

\* \* \* \* \*

### BRANCH ACTIVITY

#### AMRELI

23/10/2013	"Vertigo" by Dr. Gurumukhani
26/10/2013	"Meningitis-CNS Infection" by Dr. Dhaval Solanki
	"Trauma management of head injury" by Dr. Dijesh Shah
14/11/2013	"Risk satisfaction before non-cardiac surgery" by Dr. Kinjal Bhatt
	"Approach to patient with diabetes in young age" by Dr. Pankaj Patel
JETPUR	
23/10/2013	"Management of organophosphrous poisoning" by Dr. M.C. Amipara
	"Standard protocol and guideline in diabetes every doctor should know" by Dr. Wadhvani
MORBI	
13/10/2013	"Key to stress free living for doctor" by Dr. Dharmesh Shah
26/10/2013	"Basic of arthritic knee" by Dr. Amit Agrawal
	"Total knee joint replacement" by Dr. Maharshi Bhatt
PALITANA	
15/11/2013	"Resent update in Neurology, case based discussion" by Dr. Dhaval Solanki

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### HEALTH SCHEME I.M.A. G.S.B.

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Dear Members,

#### **BE A MEMBER OF HEALTH SCHEME**

#### **Benefits:-**

- Member of Health Scheme can avail the benefit from the scheme over & above your MEDICLAIM for stipulated six major disease groups.
- 2) The benefit of the treatment taken by the member for stipulated disease groups at the approved hospitals listed in the scheme. The approved hospitals are Govt. hospitals, municipal hospitals & majority of renowned, reputed multi specialty establishments having more than 50 beds or NABH or NABL certificate.
- 3) In approved hospitals members will be given the benefit either 75% of the total bill or Rs.50/- per member as actual members on the date of operation, whichever is less.
- 4) The beneficiary member has to submit the Claim in 2 files Original & Xerox copy of the documents like Covering Letter, Summary of Expenses, copy of health scheme certificate, all bills & vouchers of treatment authorizes by the hospital. The original file will be returned back to you after the verification.
- N.B.:- Following members have not paid AFAC-15, are requested to pay at the earliest:-

### No. Name of Member

### City

110.		Oity
108	Dr. K. Seetharama Rao	Ahmedabad
194	Dr. Pathak Jyotsna Ashok	Ahmedabad
271	Dr. Fonseca Nicholas Leo	Ahmedabad
764	Dr. Gandhi Chaitanya Govindlal	Ahmedabad
1263	Dr. Patel Kamlash Kantilal	Ahmedabad
1541	Dr. Patel Ankit Manibhai	Ahmedabad
2162	Dr. Arjun Vijayaraghavan	Ahmedabad
2342	Dr. Patel Shaileshkumar Dhulabhai	Ahmedabad
2638	Dr. Aggarwal Somesh Vedprakash	Ahmedabad
2833	Dr. Patel Dhara Raxit	Ahmedabad
(24)		

#### I.M.A.G.S.B. NEWS BULLETIN

2935	Dr. Solanki Vipula Kaushik	Ahmedabad
2980	Dr. Vasoya Chandresh Becharbhai	Ahmedabad
3318	Dr. Patel Kirankumar Kalidas	Ahmedabad
3422	Dr. Patel Mukesh Amrutlal	Ahmedabad
3428	Dr. Vala Rohitkumar Devabhai	Ahmedabad
3504	Dr. Prajapati Yagnesh Keshavlal	Ahmedabad
3514	Dr. Shah Nilesh Manubhai	Ahmedabad
3709	Dr. Patel Mitesh Bhagwanbhai	Ahmedabad
3962	Dr. Solanki Jelam Chandrakant	Ahmedabad
3555	Dr. Adha Arun Kumar Kailash Dan	Ahwa - Dist. Dang
2027	Dr. Patel Shailesh Maganbhai	Anand
3265	Dr. Patel Kiranbhai Ramanbhai	Anand
3461	Dr. Patel Nitinkumr Karsanbhai	Bardoli
1577	Dr. Nayak Jigna Naranbhai	Baroda
3098	Dr. Brahmbhatt Krutik Jaydevbhai	Baroda
3452	Dr. Gupta Ajaykumar Shaligram	Baroda
3476	Dr. Maniar Chandragupta Dhirajlal	Baroda
3614	Dr. Shah Dineshkumar Shantilal	Baroda
3713	Dr. Trivedi Pratin Balashankar	Baroda
3647	Dr. Parmar Kanubhai Punjabhai	Barwala, Ahmedabad
517	Dr. Shah Hirenya Kishor	Bharuch
2868	Dr. Patel Natwarbhai Prahladbhai	Bharuch
3102	Dr. Saxena Sunilkumar Tejbahadur	Chandol Vapi
2280	Dr. Roza Ranchhodbhai Malabhai	Dahod
2929	Dr. Patel Narharibhai Gokalbhai	Dahod
3301	Dr. Bhaiya Nilesh Dhruvkumar	Dahod
161	Dr. Shah Bhanuben Kanaiyalal	Dakor
3776	Dr. Garana Shahid Bashir	Dhoraji
1012	Dr. Dholakia Vrajlal Kapurchand	Gandhinagar
3361	Dr. Patel Anilkumar Jivanlal	Gandhinagar
3704	Dr. Rathod Lalitkumar Kuberbhai	Gandhinagar
694	Dr. Kadakia Ashok Punjalal	Halol (PMS)
124	Dr. Shah Ashokkumar M.	Jamnagar
493	Dr. Patel Mohanlal Savdas	Jamnagar
930	Dr. Mehta Manjula Rameshchandra	Jamnagar

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1812	Dr. Buch Bakulbhai Chandrakant	Junagadh
996	Dr. Jethva Prakash Mohanlal	Kodinar
3370	Dr. Prajapati Dineshbhai Somabhai	Mehsana
1354	Dr. Patel Naginbhai Maganbhai	Morali
1826	Dr. Patel Kiritkumar Bhagvanji	Navsari
2909	Dr. Gadhvi Madhusudan Hinglajdanji	Palanpur
3006	Dr. Patel Jayantibhai Gordhanbhai	Palanpur
514	Dr. Patel Vipinchandra Gordhanbhai	Petlad
115	Dr. Dedania Kanjibhai H.	Rajkot
1510	Dr. Bhayani Bhaumik Naranbhai	Rajkot
221	Dr. Acharya Rasiklal Tulsidas	Surat
230	Dr. Shah Chandrakant Dalichand	Surat
268	Dr. Nagarsheth Navinchandra Babubhai	Surat
823	Dr. Talati Rajnikant Atmaram	Surat
1011	Dr. Tilavat Narendrakumar Dalpatrai	Surat
1808	Dr. Jehangirji Rohinton	Surat
2583	Dr. Chauhan Monali Vinodchandra	Surat
2686	Dr. Channiwala Salim Huseinbhai	Surat
3099	Dr. Apte Rita Sanjay	Surat
3246	Dr. Desai Pranav Suresh	Surat
3382	Dr. Shah Reshma Shirish	Surat
3523	Dr. Dhanani Hiren Jasmatbhai	Surat
3537	Dr. Sapariya Brijeshkumar Jayantilal	Surat
3877	Dr. Jariwala Chitrang Hemant	Surat
417	Dr. Hiregovdar Danppagovda S.	Vadgam
1877	Dr. Arlekar Shailesh Ramchandra	Vapi

If we will not receive the payment on or before 15-12-2013 their membership will be terminated from scheme.

For any query contact office No. 079-26585430 between 2-00 p.m. to 6-30 p.m.

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Dr. Navnit Patel Chairman Dr. Abhay Dikshit Hony. Secretary I.M.A.G.S.B. NEWS BULLETIN

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ATTENTION PLEASE !! 📻

The office has received back News bulletins of the following members from Postal department with note as "Left", "Insufficient address" etc. The concerned member / friends are requested to inform the office immediately with change of address, L.M. No. & Local Branch.

L_M_No.	NAME	BRANCH
LM/03945	Dr. Ahmedi Bashir A	Ahmedabad
LM/19835	Dr. Baria Hina N.	Ahmedabad
LM/09256	Dr. Bhatt Pragnesh M	Ahmedabad
LM/00006	Dr. Dwivedi Rajendra S.	Ahmedabad
LM/14845	Dr. Patel Arvindkumar N	Ahmedabad
LM/07374	Dr. Patel Babubhai A.	Ahmedabad
LM/12141	Dr. Sangani Jaykant K	Ahmedabad
LM/12142	Dr. Sangani U J	Ahmedabad
LM/15658	Dr. Shah Dhrumil M.	Ahmedabad
LM/04120	Dr. Shah Suman V	Ahmedabad
LM/04533	Dr. Thakkar Pankaj A.	Ahmedabad
LM/00027	Dr. Zaveri Virbala K.	Ahmedabad
LM/09913	Dr. Bhatt Hemantkumar M	Anand
LM/11724	Dr. Chudasama Chetankumar J.	Anand
LM/03662	Dr. Patel R.N.	Anand
LM/03663	Dr. Patel N.A.	Anand
LM/10311	Dr. Dalal Prafula N	Gondal
LM/15559	Dr. Popat Vijaykumar C.	Jamnagar
LM/15560	Dr. Popat Devalben V.	Jamnagar
LM/05633	Dr. Roy Sibendu	Porbandar
LM/18256	Dr. Chopra Ravindra S.	Surat
LM/18257	Dr. Chopra Omlata R.	Surat
LM/09794	Dr. Chauhan Jyoti Kishor	Vadodara
LM/15285	Dr. Griglani Lalit H.	Vadodara
LM/21669	Dr. Rathod Chirag Chandrakant	Vadodara

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**NOVEMBER-2013 / MONTHLY NEWS** 

# Report of The 65<sup>th</sup> Annual Conference of I.M.A. Gujarat State Branch GIMACON-2013 hosted by IMA Surat.

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 $18^{\text{th}}$  and  $19^{\text{th}}$  October, were epoch making, eventful days in the history of IMA Surat. It was on these days that  $65^{\text{th}}$  Annual Conference of Gujarat State Branch of Indian Medical Association was hosted by IMA Surat.

The total number of delegates registered for this conference was an all time high -1680 to be precise. These consisted of 100 patrons and 150 reception committee members. The total number who took part in this conference was more than 2000. The jamboree was a huge success, and we can say with pride and priviledge that there were no large hiccups. A preconference CME workshop was held on 17<sup>th</sup> and it drew large number of participants, 230 to be precise. This workshop was held at Mahavir Cardiac Auditorium. The conference venue was Gandhi Smriti Bhavan and Jivan Bharti Rangbhavan. The conference was named GIMACON 2013.

The other highlights of this conference included, exemplary scientific programmes- (which ran simultaneously in two halls), about 54 posters and 36 free papers, impeccable and fault free audiovisuals, mouth watering food, a very innovative souvenir, kit of immense utility value and of course a grand gala banquet at lush green lawns of RAJPALACE on Chandni padwa day. The banquet along with the lilting melodies of Mrudulaben and her troupe were enthralling.

The inauguration of the conference was done by MP Shri C.R.Patil. The inauguration was attended by Hemalbhai Gandhi, Omprakash Tuteja. **The chief guest of the evening was President Elect IMA- HQ, Dr.Jitendra Patel.** All dignitaries applauded the efforts put in by GIMACON office bearers and all executive members, especially the efforts put in by the Chairman. Installation ceremony of President IMA GSB Dr. Bipinbhai Patel was also held at the same venue and the same time.

#### I.M.A.G.S.B. NEWS BULLETIN

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A significant event of this conference was 'LIFETIME ACHIEVEMENT AWARDS' given to our senior members Dr. Vasantben Shah and Dr. Nanubhai Desai.

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We have received many letters appreciating, congratulating the GIMACON 2013 committee for the success of this conference. The efforts of all are lauded, and the letters received a mention of the new benchmark set by GIMACON 2013. This conference could not have been so successful, but for the presence of enthusiastic delegates and large hearted contributions by the sponsors.

Dr. Nitin Garg Dr.Prashant Desai Organising Secretaries, GIMACON 2013.



We send our sympathy & condolence to the bereaved family



### Dr. Maheshkumar R. Pandya

(30/11/1942 -	18/09/2013)
Age	: 71 Years
Qualification	: M.D., D.G.O.
Name of Branch	: Vadodara

Dr.	Vipin M. Pandya	
Dr.	Renuka S. Shah	

19/04/2013 Ahmedabad 04/10/2013 Vadodara

We pray almighty God that their soul may rest in eternal peace.



Opinions in the various articles are those of the authors and do not reflect the views of Indian Medical Association, Gujarat State Branch. The appearance of advertisement is not a guarantee or endorsement of the product or the claims made for the product by the manufacturer.

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### Family Planning Centre, I.M.A. Gujarat State Branch

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Respected Members,

Indian Medical Association, Gujarat State Branch runs 9 Urban Health Centers in the different wards of Ahmedabad City.

These Centres performed various activities during the month of October 2013 in addition to their routine work. These are as under :

01-10-2013 to	:	Intra domestic house to house survey by
31-10-2013		the centers of Ahmedabad

Rander - Surat : Vitamin 'A' Solution - 20 Children, Iron : 1000 tables & Calcium - 1000 tablets, were distributed.

Nanpura - Surat : Vitamin 'A' Solution - 50 Children, Iron : 1000 tablets & Calclum - 2000 tablets, were distributed.

The total number of patients registered in the OPD & Family planning activities of Various Centers is as Follows :

OCTOBER-2013

No.	N	ame of Center	New Case	Old Case	Total Case
(1)	Ambawadi	(Jamalpur Ward)	1013	765	1778
(2)	Behrampura	(Sardarnagar Ward)	1195	319	1514
(3)	Bapunagar	(Potalia Ward)	1688	749	2437
(4)	Dariyapur	(Isanpur Ward)	1340	444	1784
(5)	Gomtipur	(Saijpur Ward)	1647	495	2142
(6)	Khokhra	(Amraiwadi Ward)	2370	669	3039
(7)	New Mental	(Kubernagar Ward)	832	175	1007
(8)	Raikhad	(Stadium Ward)	489	978	1467
(9)	Wadaj	(Junawadaj Ward)	944	241	1185
(10)	Khambhat		—	—	_
(11)	Junagadh				
(12)	Rander-Surat				
(13)	Nanpur-Surat				
(14)	Rajkot		415	485	900
		(40)			

#### I.M.A.G.S.B. NEWS BULLETIN

### **OCTOBER - 2013**

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No.	Name of Center	Female Sterilisation	Male Sterilisation	Copper-T	Condoms Ocpills
(1)	Ambawadi (Jamalpur Ward)	28	—	95	11400 716 P
(2)	Behrampura (Sardarnagar Ward)	19	04	56	6800 1216
(3)	Bapunagar (Potalia Ward)	38	03	79	13200 60 U
(4)	Dariyapur (Isanpur Ward)	20	_	32	21650 854 P
(5)	Gomtipur (Saijpur Ward)	27	04	41	1825 825 P
(6)	Khokhra (Amraiwadi Ward)	49	03	80	11500 159
(7)	New Mental (Kubernagar Ward)	14	_	35	10680 421 P
(8)	Raikhad (Stadium Ward)	32	_	44	17190 1110 P
(9)	Wadaj (Junawadaj Ward)	10	—	31	10000 1181P
(10)	Khambhat	02	_	15	— 28
(11)	Junagadh	09	_	50	3200 233
(12)	Rander-Surat	25	_	73	1600 85 P
(13)	Nanpura-Surat	18	_	71	2000 100 P
(14)	Rajkot	03	—	47	200 280

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### IMA Anti Quackery Wing

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#### JUDGEMENTS AND DOCUMENTS

#### PREFACE

The purpose of this compendium of court orders and various rules and regulations is to acquaint doctors regarding specific provisions and orders barring quackery by unqualified people, practitioners of Indian & Integrated Medicine to practice Modern Medicine. This ready reckoner of provision of Acts and rules and court orders will allow you to decipher whether one is a quack and what actions are required to be taken against him.

We read/view in print and electronic media about many cases of patients who have suffered major health setback or even died due to receiving allopathic treatment from unqualified quacks. This is the tip of the iceberg as most cases of malpractice go unreported. It has been reported that number of quacks are increasing in India, both in urban and rural areas. It is estimated that about 10 lakh quacks are practicing allopathic medicine, out of which 4 lakh belong to practitioners of Indian Medicine (Ayurvedic, Sidha, Tibb and Unani). The health of the gullible people including poor, critically ill, women and children are at stake. Therefore, there is a greater need to act against quacks wherever any of us come across them. Quacks can be divided amongst three basic categories as under :

- 1. Quacks with no qualification whatsoever.
- Practitioners of Indian Medicine (Ayurvedic, Sidha, Tibb, Unani), Homeopathy, Naturopathy, commonly called Ayush, who are not qualified to practice Modern Medicine (Allopathy) but are practicing Modern Medicine.
- 3. Practitioners of so called integrated Medicine, Alternative System of Medicine, electro-homeopathy, indo-allopathy etc. terms which do not exist in any Act.

There is acute lack of awareness amongst State Governments, the legislature(s), judiciary and even doctors themselves regarding threat to nation's health from quackery and about non-entitlement of practitioners of Indian Medicine who are practicing Modern Medicine. The confusion has been compounded due to various contradictory Govt. and court orders.

Act& Rules has been framed by Central Govt. which lay down distinct area of practice of each system of medicine as under:

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### Medical Acts

Central Acts	Indian Medical Council Act 1956	Central Council of Indian Medicine Act 1970	Central Council of Homeopathic Medicine Act 1973
State Register Person register thereunder and	State Medical Register Register Medical Practitioenrs	State Register of Indian Medicine Register practitioners of Indian Medicine	State register of Homeopathic Medicine Register Practitioners & Homeopathic Medicine
Area of Practice	Modern Medicine (Allopathic)	Indian Medicine (Ayurveda, Sidha, Unani & Tibb)	Homeopathic
Minimum Qualification	MBBS	BAMS/BUMS	BHMS
Practitioners are called as	Register Medical Practitioner	Registered Practitioner of Indian Medicine	Register practitioner of Homeopathic Medicine

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Even a cursory scrutiny of the chart above, it will be apparent that the Central Medical Acts have laid down separate area of practice for each system of medicine. However, CCIM has used a clause "modern advances" in Section 2(e) of CCIM Act 1970 to interpret that BAMS/BUMS are entitled to practice Modern Medicine and CCIM have issued a notification/declaration accordingly. Hon'ble High Court of Kerala vide its order dated 12.12.2006 in Writ No.1260/2006 reaffirmed by the Hon'ble Supreme Court of India in Special Leave to appeal (C) Nos...CC.6116/2007 has ruled that the word "modern advances" contained in Section 2(e) of Act 1970 would be referable to modern advances made in respective fields of Ayurveda, Sidha and Unani. The learned judge has placed reliance upon Supreme Court order in Mukhtiar Chand Vs. State of Punjab (AIR 19999 SC 468). Hence, the modern advances mentioned in Section 2(e) of the Act of 1970 cannot be interpreted to mean allopathic Medicine." Though CCIM has been requested to cancel their notification, they have not done it so far on the ground that they are seeking legal advice. Obviously, their ulterior motives appear to be questionable. It is blatant violation of courts order.

Second subterfuge adopted by practitioners of Indian Medicine is that provisions of Drugs and Cosmetics Act/Rules 1945 allow them to practice Modern Medicine. Unfortunately certain State Govts. have issued notifications under Drugs and Cosmetics Act/Rules in such vague words so as to appear that practice of Modern

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Medicine by practitioners of Indian Medicine has been permitted. Such notifications are altogether faulty in the eyes of Law. Such notification needs to be withdrawn by the Govt. of State immediately. Power to practice a system of medicine flows from the Central Acts under which one has acquired a qualification and the central or state register where one is registered in. Hon'ble Supreme Court has ruled in <u>Mukhtiar Chand Vs. State of Punjab (AIR 19999 SC 468)</u> that "The right to practice Modern Scientific Medicine or Indian System of Medicine cannot be based on the provisions of the Drug Rules and declarations made thereunder by State Governments". State governments have been approached to rescind their notifications which run contrary to Indian Medical Council Act 1956.

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Having not succeeded to take advantage of ambiguity in State Medical Acts and Drugs and Cosmetics Act and Rules some practitioners of Ayurvedic, Sidhaand, Unani and Tibb, commonly called Ayush, have concocted a fake name like integrated Medicine and practice Modern Medicine (Allopathy) under its grab. The Govt. has clarified that they have not recognized integrated system of Medicine and currently there is no proposal to develop integrated system of Medicine by Govt. of India. Even CCIM in their letter dated 5.12.2008 has announced that the term" Integrated System of Medicine" has not been defined in their Act and it is not one of the approved system of medicine in India. "The practitioners of Integrated System of Medicine are quacks and should be treated alike them.

Then there is a variety of fake medical degrees like electro-homeopathy, indoallopathy etc. who call themselves Alternative System of Medicine and under this guise practice Modern Medicine. Alternative System of Medicine is not recognized by law. Since they are a danger to the nation, there is a need to take action against such quacks wherever we find them. In fact, practitioners of Ayurved, Sidh, Unani, Tibb keep jumping from their original system of medicine to integrated or Alternative System of Medicine just to keep practicing Modern Medicine under different façade. If required, they are not averse to concoct new system of Medicine just to avoid detection.

Hon'ble Supreme Court has ruled in <u>Mukhtiar Chand Vs. State of Punjab (AIR</u> <u>19999 SC 468)</u> that "A harmonious reading of Section 15 of 1956 Act (Indian Medical Council Act) and section 17 of 1970 Act (Indian Medicine Council Act) leads to the conclusion that there is no scope for a person enrolled on the State Register of Indian Medicine or Central Register of Indian Medicine to practice modern scientific medicine in any of its branches unless that person is also enrolled on a State Medical Register within the meaning of 1956 Act." In another

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case titled <u>Poonam Verma Vs. Aswin Paatel (AIR 1996 SC 2111)</u>, the Hon'ble Supreme Court has given a definition of a quack a "A person who does not have knowledge of a particular system of medicine but practices in that system is a Quack and a mere pretender to medical knowledge or to put it differently a chariatan." The same was reaffirmed by Supreme Court in <u>Civil Appeal No.3541</u> <u>of2002 in Martin E D'Souza vs Mohd Ishfaq</u> and it was held that "a professional maybe held liable for negligence on the ground that he did not possessed of the requisite skill which he professes to have, thus a doctor who has qualification in Ayurvedic, Unani or homeopathic medicine will be liable if he prescribes allopathic treatment...."A reading of above court orders will make it abundantly clear that no person other than those possessing qualifications mentioned in First, Second and Third Schedule of Indian Medical Council Act 1956 and registered with State Medical Register under the provisions of Indian Medical Council Act 1956 can practice allopathic or the modern scientific system of medicine anywhere in India.

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The main roadblock to eradication of quackery is CCIM which keeps issuing clarifications/notifications without any authority of gazette notification that practitioners of Indian Medicine are allowed to practice Modern Medicine. They are deliberately misguiding the Govt. authorities and courts so that confusion may continue. Many times they have misled the prosecutors themselves who then start advocating on their behalf. Misled by them, State Governments **under Drug and Cosmetic Rules** keep issuing notifications under **2(cc)iii & Cosmetic Rules 45** which appear to allow practitioners of Indian Medicine to practice Modern Medicine. Back they have elicited many court orders in their favour by misleading the courts. Neither Para-Medics nor quacks are allowed to use prefix of Doctor, however, CCIM has persuaded the courts to rule to the contrary. These endeavours of CCIM is simultaneously harming the Indian System of Medicine and defaming Modern Scientific Medicine. CCIM do not clarify that the practitioner of Indian Medicine are registered in State register of Indian Medicine and not State Medical register.

Supreme Court in case of <u>Mukhtiar Chand Vs. State of Punjab</u> and others has file that "for the purposes of Clause iii of Rules of (ee) what is required is not the qualification in Modern Scientific System of medicine but

- 1. Declaration by the State Government
- 2. That a person is practicing modern scientific systems
- 3. And that is registered in a Medical Register of the State" (i.e. State Medical Register)

"A Supreme Court has further held "A notification can be faculty with only those requirements are not satisfied".

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Non of the practitioner of Indian System are registered in State Medical Register; practitioners of Indian System are registered with State Register of Indian Medicine. Hence, any notification issued by State Government for the purpose of Clause 2(ee) (iii) is faulty, in the eyes of Law it is illegal.

Supreme Court has further ruled 'But after Sub-section (2) of section \_\_\_\_ was inserted in the 1956 Act, with effect from 15.9.1964 which, inter-alia, provides that no person other than a medical practitioner enrolled on "State Medical Register" shall practice modern scientific medicine in any State, the right of non-allopathic doctors to prescribe drugs be virtue of the declaration issued under the said Drug rules by implication, got obliterated."

It was further field by the Supreme Court that 2(ee)iii is not repugnant to Medical Council Act 1956.

There is also complete apathy on the part of Govt. to eradicate quackery and though IMA/MCI have submitted a draft Anti Quackery Bill, the Govt. has not taken any action to place it before parliament. On the contrary Govt. keeps issuing assurances that the interests of unqualified health professionals will be protected to meet rural health requirements. This really emboldens the quacks who are assured of their position and encourages more to swell their ranks. Govt. has not carried out any survey of quacks though repeatedly insisted upon them. Fake Medical Institutions distributing fake medical degrees are prospering and multiplying under the patronage of Govt. functionaries and politicians and no action is taken against them even though they are reported to Govt. police.

The drug suppliers are also giving a helping hand to quacks by supplying drugs directly and send their medical representation to them to promote sale of their drugs. These drug suppliers stoop down to supply of drugs without cash memo also.

The Central Governments has laid down Indian Medical Council Act (MCI) which governs and regulates practice of Modern Medicine. The provisions of the Act are worded in crystal clear terms and there is no ambiguity whatsoever. However, when it comes to State Medical Acts, it has been conducted in terms which some times appear to be confusing. Further they do not implement changes in State Medical Acts in pursuance to changes in Indian Medical Council Act 1956.

The purpose of this compendium is not only to educate the doctors regarding anti quackery provisions but also to encourage them to give active support to IMA in

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fight against quackery. Whenever they come across a quack they must intimate the same to police, district authorities and always send a copy of your complaint to IMA. All doctors are requested to disseminate the information contained in this compendium to other doctors and to send copy of Govt. or Court orders to IMA which is not part of this compendium. Doctors must realize they are fighting against fraud perpetrated against common people who does not have means to fight quackery.

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After insertion of Section 15(2) of Medical Council Act 1956 with effect from 15-9-1964 the right of non-allopathic practitioners i.e. practitioners of Indian System of Medicine got obliterated.

Section 2(ee) (iii) of drug rules as effected from 14-5-1960 was applicable of those practitioners who were already registered in State Medical Register i.e. State Medical Council (meant for MBBS only). Prior to a date on which a practitioners registered under Bombay Medical Act 1912 or under the Bombay Medical Practitioners Act 1938. Those were two exceptions, where, such practitioners were registered in Medical Register of a State. The said notification under Drug Rule 2(ee) (iii) was inserted to escape from rigors of Sub-section 15 of MCI Act 1956. In present scenario no one can get benefit of Section 2(ee) (iii), as none has been registered in State Medical Register after 1956 Act of MCI.

More over Indian Medical Degree Act 1916 (which is still operational) covers all registered degrees i.e. modern medicine, Indian System of Medicine, Homeopathic. The Western Medical Science (Modern Medicine) was defined to mean the Western method of allopathic medicine of obstetrics and surgeries but has excluded homeopathy, ayurvedic and Unani System of Medicine from its purview.

For any clarifications or queries, please feel free to contact the undersigned.

**Dr. Narendra Saini** Hony. Secretary General Indian Medical Association **Dr. V. N. Sharma** Former Chairman IMA Stdg. Committee on Anti Quackery

Dr. Bipin M. Patel President I.M.A. G.S.B. Dr. Jitendra N. Patel Hony. State Secretary I.M.A. G.S.B.

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### **TB** Notification

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Revised National TB Control Programme provides mechanisms to ensure treatment adherence support including Directly Observed Therapy (DOT). But a large number of patients are not benefitted with these programme services and leads to non adherence, incomplete, inadequate treatment leading to M/XDR TB, mitigating all the efforts of the program to prevent emergence and spread of drug resistance. Non standardized prescribing practices among some of the providers (Quacks, Chemists) with unrestricted access to first and second line TB drugs including without prescription. This frequently leads to treatment interruptions and subsequent drug resistance.

In order to ensure proper TB diagnosis and case management, reduce TB transmission and address the problems of emergence of spread of Drug Resistant-TB, it is essential to have complete information of all TB cases. Therefore, Govt. of India declared Tuberculosis a notifiable disease on 7th May 2012. All public and private health providers shall notify TB cases diagnosed and / or treated by them to the nodal officers for TB notification.

Notification gives an opportunity to support private sector for following standardized practices in terms of Standard TB Care It help sthe patients to get right diagnosis, treatment, Follow up, Contact Tracing Chemoprophylaxis & facilitates social support systems. complete and accurate date obtained from notification will allow continuous evaluation of the trend of the disease with better estimation of burden / impact

#### **Objectives:**

- 1. To establish Tuberculosis surveillance system in the country
- To ensure proper TB diagnosis and case management and further accelerate 2. reduction of TB transmission
- 3. To extend mechanisms of TB treatment adherence and contact tracing to patients treated by all health care providers
- 4. To mitigate the impeding Drug resistant TB epidemic in the country

#### Minimum information requirement for TB notification :

- TB Case name 1.
- 2. Age
- Sex 3.
- Gol-issued personal unique identification number (Aadhaar, Driving license etc) 4.
- Detailed address of TB case with pin code 5.
- Phone number 6.
- Basis of diagnosis: Micro biologically confirmed TB case / Clinical TB case 7.
- 8. Patient category: New/Recurrent TB case/Treatment change
- 9. Site of disease : Pulmonary / Extra-pulmonary only
- 10. Rifampicin resistance : Resistant / sensitive / not available (& other drug resistance pattern by laboratories)

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homes	tification	Treatment started (No /First line/ second line)							
TB Notification reporting format for medical practitioners / Clinics / Hospitals / Nursing homes	/	Basis of diagnosis (sputum microscopy/ culture/PCR/ LPA/Clinical exam/X-rav	C						Signature : Date : /
ospitals /	Period of reporting : From / / To / /         facility / practitioner :	Patient type (New TB case/ Recurrent TB case/ Treatment change)						e are treated	ate :
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<b>B</b> Notific	Period of reporting : From / / To / / model the health facility / practitioner :	Name of TB Patient (Surname first)						* Aadhaar, driving license, voter ID, ration card, PAN no, passport no etc Private practitioner / Clinic (single) will include any Health Establishments where TB cases are treated or liagnosed clinically / radiologically and the medical services are provided by single medical practitioner Hospital / Clinic / Nursing Home (multi-practitioners) will include any Health Establishments where TB case are treated or diagnosed clinically / radiologically & medical services are provided by more than one practitioner.	
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- PROFESSIONAL PROTECTION SCHEME

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Diabetes Public Awareness Programme Organized by Community Healthcare Charitable Trust, Ahmedabad



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#### NATIONAL SOCIAL SECURITY SCHEME MEETING, JABALPUR

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# INDIAN MEDICAL ASSOCIATION GUJARAT STATE BRANCH

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**NOVEMBER-2013 / MONTHLY NEWS** 

### **COLLEGE OF GENERAL PRACTITIONERS**

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Dear Friends.

Happy New Year

Hope you are well in health & spirit.

It is our great pleasure to introduce courses run by I.M.A. College of G.P. HQs are as under.

### DEPARTMENT OF FAMILY MEDICINE

#### FELLOWSHIP IN COLLEGE OF GENERAL PRACTITIONER (FCGP)

All India Examination for	the title of Fellow of College of General Practitioners.
Duration of Course	: 1 year
Examination	; Twice a year - May / November
	: Local Exam center per state will be provided depending upon registered candidates. Minimum 10 candidate per center
Pattern of Exam	: 4 theroy paper Clinical / VIVA examination
Last date of registration	: March / Auigust
Eligibility	: Life Member of IMA & CGP
E. 10	5 years of General Practice
Fee	: Rs. 6,000 DD in favour of IMA CGP HQ

#### **DEPARTMENT OF FAMILY MEDICINE (DFM)**

#### DEM SRTI ANKA (Affiliation to PGIM Colombo University)

Duration of Course	: 1 year (January to December)
Eligibility	: Life member of IMA & CGP
Last date of Registrati	on March 31st
Examination Center	: Chennai Examination Month : December
Advantage	: Those who pass DFM with 60 % can register for MD Family Medicine by Thesis and all those who pass can register for MD by Clinical Training.
Fee	: Registration Fee - Rs. 7,500/~ in favour of IMA CGP HQ Examination Fee : 600/- USD in favour of PGIM Colombo
Examination Pattern	: MCQ., MEQ., SEQ., OSCE / OSPE / 4 days Log Book VIVA
Course : Text	Book of Family Medicine - Contact Training Programme.

### DFM - INDIA (In affiliation with Vinayaka Mission University)

Duration of Course				
Last date of Registra	tion 30th Septem	iber		
Examination	: Twice a year	: Twice a year, July / August		
Eligibility		: Life Member of IMA		
Course Fee	: Rs. 65.000/-	in two installments		
		contact session		
Nature of Course	: Monthly 2 days contact class at local accredited center			
3 months training i				
Online tutorials		<ul> <li>Online Examination (Trimester)</li> </ul>		
Final theory Log Book, VIVA exam		<ul> <li>OSCE / OSPE Clinical Exam</li> </ul>		

### I.M.A.G.S.B. NEWS BULLETIN

### **MD IN FAMILY MEDICINE**

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In affiliation with the PGIM Colombo

- Eligibility : Pass in DFM (PGIM) with 60% mark
- Pattern : 1) Thesis DFM (60% Marks)
  - DFM Pass 2) Training

#### i)Thesis

- Eligible Candidate must submit a pre proposal of relevance to General/Family practice noting the title, clear statement of problem, Rationale and objective with methodology in 1000-1500 words through the college.
- After the application is approved by the university, the eligible candidate shall submit a detailed proposal of the research project in 3000 to 4000.
- When it is approved by the board of Family Medicine he/she will be permitted to register for MD course. An India supervise and external guide from PGIM will be assigned.
- The supervisors shall be consulted and guidance obtained during the research project and in the preparation of the thesis.
- At the end of the minimum period of two years after approval of detailed proposal the candidate shall submit the thesis with approval of supervisor to the Director PGIM. Thesis should contain 15000 to 20000 words and in the final exam candidates need to defend the thesis.
- Candidates will have to complete two assignments in the first year and two in the second year and get 60% of Marks in these assignments.

#### Duration of Course : 2 Years after the approval of proposal

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#### PGDEM in affiliation with George Washington University USA

Duration	: 1 year
Nature of Course	2 days hands on contact training / month in accredited Centre On line tutorials Viva and Practical exam after completion 12 Modules Certificate issued by George Washington University and IMA CGP
Last Date of Registration	September 30 <sup>m</sup>
Course Fee	1600 USD in two installment + 1000 per contact Class

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: 1600 USD in two installment + 1000 per contact Class

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### PGDEM in Affiliation with Vinayaka Mission University (INDIA)

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Duration	: 1 year
Nature of Course	: 10 contact class at local accredited centre Log Book + work based training
Examination	: By University
Course Fees	: Rs.70,000/- and Rs.1000/- per contact class

#### MRCGP (International)

IMA CGP conducts the structured programme at its IMA CGP Hgrs. Chennai - 45.

It will be eight modules each of two days duration conducted on Saturday and Sunday once in two months. The course fees is Rs.25,000/- payable to IMA CGP Hors. Chennai along with the filled in application form.

Course	Faculty	\$3.	Prof.	Dr.	Alka Ganesh
			Prof.	Dr.	Subanthani

The basic books and CD will be available in the college Library

Examination form will be available in www.rcgp.org and www.imacgpindia.com from specified date before the examination which is schedule in May and November during every year.

The filled form with the necessary pay order payable to the Royal College of General practice in pounds will need to be send to the CGP National Secretary, IMA CGP HORS, Chennai.

Fee : Part I - 280 Pounds

Eligibility to appear for Part I

1. Three year structured training course inclusive of experience in Family Medicine / General Practitioner and accredited by the South Asia Region MRCGP (International) Board.

#### Or

2. Should have complied three years of Clinical experience in Family Medicine of which two years must be in Family Medicine / General Practitioner certificate by IMA CGP and completed the accredited one year programme.

#### Or

3. Minimum of five year's experience of which a minimum of three years should be in Family Medicine / General practice and the other years in specialties allied to Family Medicine / General Practice certified by the local accrediting organization IMA CGP and approved by the reginal MRCGP (international) Board.

> On passing both the Part I and Part II you will be admitted as member of Royal College of General Practitioners (International)

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#### DEPARTMENT OF SUB SEPCIALITY MEDICINE

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	COURSES OF IMA CGP		
These cours empower th	es are not recognized by any C e practitioners to deliver evide	Council for regist enced based med	ration, but intended only to ficine to the community.
FELLOWSHIP (VIth Batch)	CERTIFICATE IN DIABETOLOGY -	FELLOWSHIP C	ERTIFICATE IN COMMUNITY
Course co-ordi	nator : Dr. VIJAY VISWANATHAN, MV Diabetic Centre		ator: Dr. RAMAKRISHNAN Chennai
Course fee	:20,000/-	Course Fee	:40,000/-
Duration	: 1 year	Duration	: One year
Terms	: 6 contact class (each one day) : Five days hands on training : Three online examinations	Terms	: Eight Module of each 1½ days Practical Training Critical care unit
Product of	: Final exam : Project and VIVA	Eligibility	: IMA Life Membership with ICU Medical care faculty
Eligibility	: IMA Life Members	FELLOWSHIP	CERTIFICATE IN ECHO
FELLOWSHIP	CERTIFICATE IN PRACTICAL -	CARDIOGRAPHY	
CARDIOLOGY (	(3 <sup>rd</sup> Batch)	Course Co-ordina	tor: PROF. Dr. CHENNIAPPAN
CourseCo-ordin	ator : Prof. Dr. CHENNIAPPAN	Course Center	: Trichy
Fee	:30,000/-	Fee	:40,000/-
Duration	: One Year	FELLOWSHIP CE	RTIFICATE IN NEPHROLOGY
Terms	:8 contact class (each one day)	Course Co-ordina	tor: PROF. Dr. N. MOHANDASS
	5 days hands of training in ICU	Center	: Tanjore
	Online examinations Final Exam	Fee	:30,000/~
Eligibility	: IMA Life Members only	Duration	:One year
FELLOWSHIP C	ERTIFICATE IN TOXICOLOGY ador : Dr. N. GANAPATHY	FELLOWSHI CER GYNAECOLOGY	TIFICATE IN REPRODUCTIVE
Centre Course fee	Erode :40.000/-	Course Co-Ordina Course Fee	tor : Dr. Rajam Authilingam : 30,000/-

#### Duration : One year Terms : Hands on training Online exam Final Examination **ICU Maining** Eligibility

Duration : One year Terms : 10 modules 5 days USG training Eligibility : IMA Life Membership

: IMA Life Membership

For course on sub specialty payment is infavor of "IMA CGP" and payable to IMA TNSB Secretariat

#### Hony, FCGP Award

Poortors with 20 years of clinical practice can apply Fees 6000/- inclusive of IMA CGP Life Members Colorful Convocation Ceremony on 30.10.2011 at Chennal Apply immediately. Application form available in www.lmacgoindi

#### For Details Contact :

Dr. J. A. Javalal Hony. Secretary. IMA TNSB (M) 9443160026

Dr. S. Arul Rhai Chief Patron IMA CGP (M) 999458001

Dr. T. N. Ravisankar Hony, Secretary, IMA CGP

(M) 94440 47724

Website : www.imacqpindia.com

#### **GUJARAT STATE BRANCH**

Dr. K. C. Gadhavi Director; CGP, I.M.A.G.S.B. (M) 99983 70353

Dr. Lalit Nayak Secretary CGP. I.M.A.G.S.B. (M) 94276 09203

Dr. Vasant Patel Hony. Jt. Secretary, CGP, I.M.A.G.S.B. (M) 94280 18840

NOVEMBER-2013 / MONTHLY NEWS

# IMA Guest Houses in different parts of the State - for IMA Members

State	Address of Guest House	Conact Person & Contact Datails	Tariff
A.P. Bhimavaram	IMA Building, Motupallivari Street, Bhimavaram	M-09885284231 Fax : 08816-234231	Rs. 100/-, 150/- per day Single A/C - 400/-
A.P. Hyderabad	IMA Building, Near Esamia Bazar, Hyderabad (AP)	Tele.:(040) 24656378 hydcityima@yahoo.co.uk Fax:(040) 24738197	Double A/C-600/- (12 room) Double A/C-500/- (8 rooms)
Assam Barpeta Road	Tourist Lauge Bareta Road, Dist. Bareta, Assam-781315	Dr. Kankan Goswami, M-9435025239	Rs. 400/- per room (5 rooms)
Assam Tezpur	IMA Guest House, 1st Floor, IMA House, Tezpur-784001 Tinsukia, Chinarapatti,	Dr. H.K. Borah M-9435081697	4 AC Rooms @ Rs. 750/- per room
Assam Tinsukia	SBI Main Branch, Tinsukia- 786125	Dr. Phanindra Saikia M-09435134550	Rs. 250/- per room (2 rooms)
Bihar Patna	IMA Bldg, Dr. A.K.Nsinha Path S-E of Gandhi Maidan Patna-4	Tele.: 0612-2321542 info@imabihar.org Fax : 0612-2321542	Double bedded 100/-
Bihar Samastipur	IMA Bhawan, Opp. KHE Inter College Kashipur, Samastipur-848101	Mr. Rakesh Roshan M-09431245533 Tele.:06274-224094	Rs. 250/- per person, 2 bedded (4 Rooms)
Chandigarh	IMA House, Sector - 35 chandigarh	Tele.: 0172-2602595 singh_zora@yahoo.co.in Fax: 0172-2602595	A/C room Rs. 600/-, Cooler Rs. 350/-, Non A/C Rs.350/-
Chhatishgarh Durg	IMA Building, IMA Chowk, Opp Dhamdhanaka, Overbirdge, Durg	M-09424107891 Tele.: 0788-2320291 Fax : 0788-2326767 23370009.8819.868,0473,	4 <sup>th</sup> floor 350/- Per Bed+LT.
Delhi IMA HQ.	IMA House, Indraprastha Marg New Delhi - 110002	0492,8424, imabuiding@gmail.com Fax : (011-23379470, 23378680)	5 <sup>™</sup> Floor 500/- Per Bed + Lt + Breakfast & bed Tea
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### I.M.A.G.S.B. NEWS BULLETIN

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# IMA Guest Houses in different parts of the State - for IMA Members

State	Address of Guest House	Conact Person & Contact Datails	Tariff
Gujarat Ahmedabad	3rd Floor, AMA House Opp, H.K.College, Ashram Road, Ahmedabad-9	Tele.:079-26587370 imagsb@youtele.com Fax:079-26587370	AC Double bed Rs. 800/- Single bed Rs. 500/- Dormitory Rs. 300/-
Karnataka State HQ	IMA House Alur Ventakta Rao Road, Bangalore-560018, Karnataka	Hony. Secretary Tele. : 080-26800409; 26703255 Fax : 080-26703255 M. : 9008828303 E-mail : imaksb@bsnl.in	Single Bed : 250/- Double : 400/- A/C Delux : 700/- Suite : 800/- Extra bed : 150/- No
Karnataka Tumkur	IMA House, Town Hall Circle, Tumkur : 572102	Tele. : 0816-2251966 M. : 9844190463	Single Bed : 200/- Double Bed : 300/- No
Karnataka Shimoga	IMA House, Mc. Gann Hospital Compound, Shimoga.	Tele. : 08182-224622 M. : 9448421951 E-mail : doc_vishwanath@hotmail.com	Single Bed Double Bed No
Karnataka Chitradurga	IMA House, Opp. Dist. Hospital, Chitradurga-577501	Tele. : 08194-228485 M. : 9972328698	Single Bed : 50/- Double Bed : 100/- No
Karnataka Arsikere	IMA House, Behind Sai Natha Temple, J.C. Hospital Compound, Arsikere-573103	M. : 9448997377 E-mail : hareeshkv@yahoo.com chancheku@gmail.com	Single Bed : 100/- No
Kerala Thiruva'puram	IMA State Headquarters, Anayara. Thiruvananthpuram-695029	Tele.:0471-2741144 imaksb@yahoo.co.in Fax:(0471)2741155 Dr. Radhamony M.,	Ac, Rs. 600/-, Non AC Rs. 400/-Dormitory - 100/ Yes
Kerala Kottarakara	IMA House, Bubby Kottarakara Road P.O. Kotarakaro, Dist. Kollam	Hony.Secretary M-9447801337 Tele.: 0474-2454066 drradhymony@yahoo.co.in Fax : 0474 - 2454066	Rs. 400/- Per Day

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# IMA Guest Houses in different parts of the State - for IMA Members

State	Address of Guest House	Conact Person & Contact Datails	Tariff
MP Gwalior	Gwalior	M. : 9827062860 E-mail ∶ima_gwalior@yahoo.in	One double bedded Rs. 500/- per day
MP Indore	I.M.A Bhawan. Dr. S.K. Mukharji IMA Parisar M.O.G. Lines, Indore-452002	Tele.:0731 - 2787988 imacon2008@gmail.com Fax:0731-2787988	Rs. 350/- Day
MP Jabalpur	IMA House, Medical Road Wright Town, Jabalpur - 482002	Tele.:0761-2404940,4005715 imajabalpur@yahoo.co.in Fax : 0761-4005715	Rs. 100/-
MP Ratlam	Subhedara IMA House Rajendra Nagar, Ratlam	Tele. : 07412-231737 pkghate@yahoo.com Tele.:(022) 23543255,	Rs. 150/-
Maharastra Mumbai	IMA House, IMA Chowk, 16 Keshav rao Khadye Marg Haji Ali, Mumbai-400034	ima_mumbail@rediffmail.com, ma_mumbai@mtnl.net.in Fax : (022) 23545510	Rs. 500/-
Maharastra Mumbai West	IMA Building, J.R.Mhtre Marg JVPD Scheme Bhehind chandan cinema Juhu, Mumbai - 400049	Tele.:022-26206517,26254368 imamumbaiwest@yahoo.com Fax : 022-26254368	Rs. 1200/- + 10.30%
Maharastra Nagpur	IMA House North Ambbazari Road Nagpur-440010, IMA Berhampur	Tele.: (0712) 2550777,2522421 imacon2007@gmail.com Fax : 0712-2550777	AC Rs. 340/-
Orissa Berhampur	M.K.C.G Medical College Campus Berhampur - 760004	Tele.: (0680) 2200227 kkp1000@hotmail.com	Rs. 300/-
Orissa Cuttack	IMA House Medical Road Ranihat cuttack-753007	Tele.:(0671) 2121125 imaorissa@imaorissa.com Fax : (0671) 2413060	Rs. 350/-

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# IMA Guest Houses in different parts of the State - for IMA Members

State	Address of Guest House	Conact Person & Contact Datails	Tariff
Rajasthan Ajmer	Infront of Jhawahar Lal Nehru Hospital, Ajmer MBS Hospital Campus,	M-9414300220	Rs. 400/- for 24 hours (2 Rooms) Rs. 600/- for 24 hours
Rajasthan Jaipur	Balsissh (22), Godham Circle, Sardar Patel Marg, Jaipur	M - 094142-40898	
Rajasthan Kota	Nayapura Kota	M - 09414179558 Sindur Gardens,	(2 rooms) Pallar (AC Single Bedded) -
Tamil Nadu State HQ Chennai	423 Kilpauk Garden Road Kilpauk, Chennai-10	Tele.: (044-26443055)	Rs. 200/-
Tamilnadu Chennai	TN State PPLS Building House No. 11 & 12, Sankara Heritate Apts., Super Tank, Chelpetr, Chennai-600031, TN	Tele. : 2215457; 2212720; 2215467 (f) Dr. T. Sadagopan M. : 09843034878 E-mail : schemestnsb.vellore@gmail.com	Double bedded A/C. Rs. 700/- Single occpancy of double bedded A/c. : Rs. 600/- No
Tamilnadu Salem	12, Saradha College Road, New Five Road, Salem-636004	Tele. : 2248033 M. : 9443263342	Three double bedded room : Rs. 250/- No
U.P. Banaras	IMA Bulding Chetganj Varanasi - 221001	Mr. Babbloo M -09415336602 Tele.:0542-2403194, 2419797 Fax : 0542-2403194	Rs. 350-/- AC Rs. 300/- Non Ac
U.P. Bareilly	IMABhawan, 110, Civil Lines Bareilly	Mr. Karan, M-09410498049 Tel:0581-2511716 raveesh.ely@gmail.com	Rs. 1000/-perday+10.3 Tax, No. of rooms 4 NO
U.P. Lucknow	IMA Bhawan River Bank colony Lucknow	M-9.41541e+009 Tele.:0522 2626440 Fax: 0522-2626440	AC - Rs. 500/- 2 Dormatory Rs. 200/-
West Bengal State Office	11/3 Dr. Biresh Guha Street Kolkata-17	Tele.: 033-22810758 imabengalstate@yahoo.co.in Fax : 033-22810758	One AC Dormatary for 6
West Bengal JIMA Building	53, Creek Row, Kolkata - 700014	Tele.: 033-22378092, 22366437 J-ima@vsnl.net	Single deluxe - 600/- Double deluxe - 1000/- Double A/C - 800/- Triple bed - 1200/- Dormitory non a/c - 200/-

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# UTILITY PAGES

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EMERGENC	Y
Emergency - Medical,	
police, Fire	
Police	
Fire	101
Ambulance	
POLICE	
Police Control Room	25630100
Police Commissioner	25633636
P.R.O. To Commissioner	25633333
Navrangpura	26563711
Saherkotda	22111632

#### **POLICE STATIONS**

Amraiwadi	22770280
Khadia	22142828
Bapunagar	22700585
Danilimda	25320153
Dariapur	22160906
Ellisbridge	26578202
Ghatlodia	27489127
Gomtipur	22941921
Haveli	25392647
Kagdapith	25454446
Kalupur	22167530
Karanj	25507580
Madhavpura	25632100
Maninagar	25460089
Meghaninagar	22681555
Naranpura	
Naroda	22821480
Navrangpura	26440698
Odhav	
Rakhial	22743609
Sabarmati	27517887
Saherkotda	22927072
Sardarnagar	22864345
Satellite	26860333
Shahibaug	22868025
Shahpur	25600545
Sola Police Station	27664590
Vatva	

PAGES	
Vatva G1DC	25830004
Vejalpur	
Women's Police Station	
FIRE STATIO	
Gomtipur	22776996
Jamalpur	
Jashodanagar	
Manianagar	
Naroda	22200715
Odhav	
Panchkuva	
Sabarmati	
Chief Fire Officer HQ	
TELEPHONE SER	
General Inquiry	
Morning Alarm	116 + Time
Fault Repair	
Exchange	2 Code + 2198
BSNL Customer	
Service Centre	
(Land Line)	1500
BSNL Customer	
Service Centre	
(Mobile)	.9426024365
BSNL Phonogram /	1505
(India/International)	1585
BSNL Trunk Booking BSNL Trunk Booking	1580
International	1596
BSNL - Railwaypura	
Air Tel - Ashram Road	
All Tel-Asiliani Rodu	
Hutch Ltd	.9090904021
Navrangpura	0825008250
Idea Cellular Ltd.	.9023090230
- Stadium	9824012345
Reliance	.902-0125-5
Infocomm Ltd	30337777
Tata Teleservices	
Ltd - Ellisbridge	92270001 21
AMBULANCE SER	
Ambulance - Danapith	

#### I.M.A.G.S.B. NEWS BULLETIN

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Ambulance -	l N
AMC Danapith22148468	Ea
Emergency	N
Medical Council of Ahmedabad	Z
[EMS] - Ellisbridge1056	
Mission Life India	
-Drive In	A
Mission Life	C
India - 24 Hrs	
Navdeep Emergency	E
Service	N
Income Tax - Day	Se
- Night	(5
Sadvichar Parivar	Ŝt
Civil Hospital22680450	St
EYE BANKS / HOSPITALS	Ze
Asopalav Eye Hospital	יד
-Shahibaug22865537	
CH.Nagri Eye Bank	В
-Ellis bridge26466724	-е
C.S.Samaria Red Cross	C
Int.Eye Bank	- P
Thaltej1053 & 27450633	Di
Hargovandas Prabhudas	-9
Sadvicriar ParivarEye Hospital	G
-Naroda22811476	-k
Lions Karnavati	Ιн
Shantaben Vishnubhai	-N
Patel Eye Hospital	l Ir
-Ognaj952717244052	- F
M and J Inst. of Ophthalmology	l In
Eye Bank-Civil	-е
Hospital	Ja
CIVIC SERVICE CENTRE	-N
East Zone	Ja
Lal Darwaja32091243	-Е
Law Garden	м
Maninagar	-P
North Zone	Pr
West Zone	B
AMC CONTROL ROOM (FOR	Pr
COMPLAINTS)	- N
Main25353858/25353717	Ra
West Zone	C.
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(97)

North Zone22801182
East Zone22970422-24
New West
Zone Bodakdev
Central Zone25353717
TELEVISION
Aaj Tak -Panchvati
CNBC -S G Road
Doordarshan -Thaltej
ETV Gujarati -Bodakdev26871210
NDTV -C G Road
Set India Ltd
(Sony TV)
Stadium
Star News - S G Road
Zee News - Satellite26922717
TV 926810999
PRINT
Business Standard Itd
-Ellisbridge26577772
Chitralekha Group
-Parimal Garden
Divya Bhaskar
-S G Highway
Gujarat Samachar
-Khanpur
Hindustan Times
-Navrangpura26560037
India Today
-Panchvati26569156/26560393
Indian Express
-Bodakdev
Jaihind Press
-Navrangpura26587053
Jansatta
-Bodakdev26873995
Mumbai Samachar
-Panchvati
Press Information
Bureau -Bhadra25507217
Press Trust of India Ltd.
-Navrangpura
Rajasthan Patrika
C.G. Road
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Sambhav-Bodakdev26873914				
The Sandesh Ltd.				
-Bodakdev40004000				
The Times of India Fadia				
Chambers26553300/26582527				
The Times of India				
- Sakar 126554455				
The Times of India				
- Vejalpur26761495				
Young Leader				
-Khanpur25502999				
RADIO				
All India Radio				
- Income Tax27542672				
My FM-S G Highway26927943				
Radio City				
- S G Highway66119911				
Radio Mirchi - Vejalpur66001100				
Radio One67010013				
MIEDICAL COLLEGE				
BJ.Medical College				
- Asarwa22680074				
College of Nursing				
-Asarwa22681406				
Suresh Brahmkumar				
Bhatt College				
of Physiotherapy26583435				
Smt. N.H.L. Municipal Medical College				
Ellisbridge26576275				
Institute of Kidney				
Diseases and Research Centre				
Asarwa22685601				
U N Mehta Institute of Cardiology				
and Research Centre				
-Asarwa22682395				

### **TELEPHONE NUMBERS**

**U** 

	P.P.S2658 8929
	N.S.S.S2658 5430
G.S.B2658 7370	PHY.ASSO2657 4763
S.S.S	A.O.G.S2658 6426

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### **ENTERTAINMENT HALLS** Dinesh Hall - Ashram Road......26582123 Thakorbhai Desai Hall Town hall - Ellisbridge......26582092 AIRLINES Airport Authority of India ......22867261 Air India Domestic City Office Ashram Road ......26585633/44 Laldarwaja .....25503061/2/3 Airport......22869233/44 Airport Cargo ......22869236 International Airport......22867237/5211/9238 Cargo ......22862976/29292100/03 Jet Airways Ashram Road......27543304 to 10 Airport......22866540/240 Cargo ......22861407/8533 TeleCheck-in ......22866540/240 Jet Lite/Sahara ......1800223020 ...../22858003 **TOURIST INFORMATION CENTRE** Goa Tourism ......0832-2438750 Himachal Tourism ......27544800 Rajasthan Tourism ......26565187 Uttaranchal Tourism......26564245

NOVEMBER-2013 / MONTHLY NEWS

I.M.A.G.S.B. NEWS BULLETIN NOVEMBER-2013 / MONTHLY NEWS **TOLL FREE NUMBER**  $\mathbf{R}$ HCL -Airlines 1800 180 8080 IBM -Indian Airlines -1800 180 1407 1800 443 333 1800 22 5522 Jet Airways -Lexmark -1800 22 4477 Spice Jet -1800 180 3333 Marshal's Point -1800 33 4488 Air India -1800 22 7722 Microsoft -1800 111 100 Kingfisher -1800 180 0101 Microsoft Virus Update - 1901 333 334 Seagate -1800 180 1104 Banks Symantec -1800 44 5533 TVS Electronics -ABN AMRO -1800 11 2224 1800 444 566 WeP Peripherals -Canara Bank -1800 44 6000 1800 44 6446 Citibank -1800 44 2265 Wipro -1800 333 312 Corporation Bank -1800 443 555 Xerox -1800 180 1225 Development Credit Bank -Zenith -1800 222 004 1800 22 5769 Indian Railway General Enquiry 139 HDFC Bank -1800 227 227 Indian Railway Central Enquiry 139 ICICI Bank -1800 333 499 Indian Railway Reservation 139 ICICI Bank NRI -1800 22 4848 Indian Railway Railway Reservation IDBI Bank -1800 11 6999 Enquiry 1345,1335,1330 Indian Bank -1800 425 1400 Indian Railway Centralised Railway ING Vysya -1800 44 9900 1330/1/2/3/4/ 5/6/7/8/9 Enquiry Kotak Mahindra Bank - 1800 22 6022 Lord Krishna Bank -1800 11 2300 **Couriers/Packers & Movers** Punjab National Bank -1800 122 222 ABT Courier -1800 44 8585 State Bank of India -1800 44 1955 AFL Wizz -1800 22 9696 Syndicate Bank -1800 44 6655 Agarwal Packers & Movers -**Automobiles** 1800 11 4321 Mahindra Scorpio -1800 22 6006 Associated Packers P Ltd -Maruti -1800 111 515 1800 21 4560 Tata Motors -1800 22 5552 DHL -1800 111 345 Windshield Experts -1800 11 3636 FedEx -1800 22 6161 Goel Packers & Movers - 1800 11 3456 **Computers/IT** UPS -1800 22 7171 Adrenalin -1800 444 445 AMD -1800 425 6664 **Home Appliances** Apple Computers -1800 444 683 Aiwa/Sony -1800 11 1188 1800 333 366 Canon -Anchor Switches -1800 22 7979 Cisco Systems -1800 221 777 Blue Star -1800 22 2200 Compag - HP -1800 444 999 Bose Audio -1800 11 2673 Data One Broadband - 1800 424 1800 Bru Coffee Vending Machines -1800 444 026 Dell -Epson -1800 44 0011 1800 44 7171 eSvs -3970 0011 Daikin Air Conditioners - 1800 444 222 Genesis Tally Academy - 1800 444 888

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	<b>IAN MEDICAL ASSOCIATION</b> GUJARAT STATE BRANCH loor, AMA House, Opp. H. K. Collge, Ashram Road, Ahmedabad-380009. Fax /	
	ne : 079-2658 7370 E-mail : imagsb@youtele.com	
BIO-DATA FORM DIRECTORY OF I.M.A. GUJARAT STATE BRANCH MEMBE		
	LMGUJ :	
	IMA HQ No.	
Name of	the Member :	
-		
Address	(Resi.)	
	e No	
Address	(Clinic/Hospital)	
Telephor		
	_	
Email :	Fax :	