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



GUJARAT MEDICAL JOURNAL
INDIAN MEDICAL ASSOCIATION, GUJARAT STATE BRANCH

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Issue-11



All India Medical Conference IMA NATCON 2025

27th & 28th December 2025

HOSTED BY: IMA Gujarat State Branch & Ahmedabad Medical Association



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Saturday & Sunday

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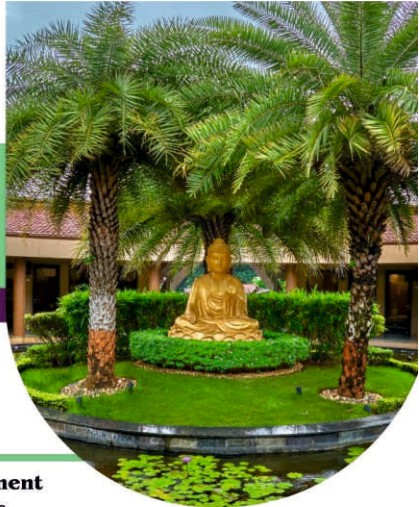
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- Spacious & Well-Designed for hospital setup
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The 3rd Edition of
Transforming Healthcare Operations

SAVE THE DATE

 **6th & 7th December 2025 | Saturday & Sunday**

ABOUT THE CONFERENCE

It focuses on a holistic approach to hospital management, with a spotlight on key areas such as clinical care, operational excellence, supply chain management, and the integration of digital solutions in healthcare.

The conference will explore how these aspects can be seamlessly integrated to enhance overall hospital efficiency and patient care.

It will bring together healthcare leaders, including Heads and CEOs from renowned organisations, providing a platform for insightful discussions and impactful networking.

WHO SHOULD ATTEND?

- Healthcare Professionals
- Hospital Administrators
- Clinical, Quality & Nursing Leaders
- Operations Leaders
- Supply Chain Professionals
- Marketing Professionals
- Clinicians & Care Experts
- Students (Pursuing Relevant Fields)



EMINENT SPEAKERS



Mr Rajarajan S
Group Chief Operating Officer
Alluri Sitarama Raju Academy
of Medical Sciences,
Eluru, Andhra Pradesh



**Dr Ilankumaran
Kaliamoorthy**
Chief Executive Officer
Apollo Hospitals,
Chennai Region, Tamil Nadu



Dr Shahbaz Singh
Director
Amandeep Healthcare Pvt. Ltd.,
Amritsar, Punjab



Prof Devi Vijay
Professor
Indian Institute of
Management,
Kolkata, West Bengal



Prof Sarang Deo
Professor
Indian School of Business,
Hyderabad, Telangana



Mr Shailesh Guntu
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Chief Operating Officer
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Research Centre,
Mumbai, Maharashtra



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Chief Operating Officer
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for Medical Research and
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Mr Neeraj Lal
Regional Director
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Prof Vishal Gupta
Professor
Indian Institute of
Management, Ahmedabad,
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Hip Fracture treatment



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- Fast-track process for Adjustment of Status (Form I-485), Work EAD (Form I-765), and Advance Parole (Form I-131) for US-based applicants

Project:

- “Serenity Springs Senior Living at TMC” – Assisted Living Facility & Memory Care Project (Healthcare), Texas Medical Center, Houston (**World’s Largest Medical Center**)

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- 100% Money-back guarantee
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A. SHRIDHAR
BUILDING THOUGHTFULLY

THE *Man Who Sees* BEFORE THE CITY DOES

How Ajay Shridhar,
once a healer of sight, came to shape the way
Ahmedabad experiences home, community, and belonging.

How Dr. Ajay Shridhar, trained as an eye surgeon, shaped by compassion, and seasoned by 35 years in real estate came to redefine how Ahmedabad experiences *home, community, and belonging.*

In a city where ambition is often measured in height, scale, or glass, Dr. Ajay Shridhar works differently. His story begins not in construction sites or corporate boardrooms, but in a quiet clinic shaped through rigorous medical education and years of training as an ophthalmic surgeon examining the most delicate of human thresholds: vision.

As an eye surgeon, he learned how to read people without asking. How to be precise without being cold. How to show up for someone's wellbeing every single day.

So when he stepped into real estate 35 years ago, the shift felt less like reinvention and more like expansion. He didn't stop caring. He simply built *more places to care.*

Today, Dr. Ajay stands as the guiding voice of the A. Shridhar Group, a name that has earned its respect not through spectacle, but through integrity of intent.

The philosophy is clear:

“*Building Thoughtfully
with a
Personal Touch*”

The Intuition That Developers Talk About Quietly

In Ahmedabad's development circles, there's an understanding:
When Ajay visits land, he doesn't see what is.
He sees what will grow.

The natural flow of neighbourhoods.
The cultural rhythm of families.
The future of commute lines and social life.
How value matures when architecture is respectful, not aggressive.

It's a gift.
A kind of geographic emotional intelligence.
Developers chase trends.

Ajay senses timing.





A Portfolio That Reflects Life, Not Just Layouts



Value Residential

- Kaveri Soham Vivanta
- Rameshwar City

Commercial Landmarks

- Athens
- A Square
- Absolute
- Wynn





Luxury Weekend Homes & Plotted Communities

- Kalrav Seasons
- Kalrav Treasure
- Kalrav Nest
- Kalrav Farms
- Kalrav Trails
- Kalrav Alpines

Elite Residential

- Anantara Alora
- Anantara Alpines
- Anantara Imperial
- Anantara Abode



Across all categories, the language remains consistent: *comfort without theatrics, elegance without excess.*

Where Legacy Extends Beyond Real Estate

The doctor in him never left.

Which is why bricks and concrete were never the end of the story.

- A. Shridhar Community Health Center (Thaltej)
- Trimurti Hospital (Bavia)

These institutions don't sit on annual CSR reports; they function daily, quietly, with dignity — serving communities that often go unseen by the city's progress narrative.

And then there are the *Oxygen Park* initiatives: not ornamental gardens, but real breathing ecosystems within urban density.

To him, development must heal, not exhaust.

The Signature of a Builder Who Understands People

Ajay's leadership is not loud.

He doesn't believe in spectacle or slogans. He believes in spaces that feel familiar on the very first day *and still meaningful ten years later.*

In a landscape driven by speed, scale, and visibility, He chooses care, time, and belonging.

He began his life helping people see more clearly. Now, with 35 years of shaping Ahmedabad's habitats and communities, *he helps them live more truly.*

And in the story of this city, that may be the most lasting vision of all.





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Plasticsurgery

Liposuction (power assisted, usg assisted, vibration, laser assisted, manual) | Tummy Tuck | Rhinoplasty (nose reshaping) | Dimple Creation | Blepharoplasty | Breast Implant | Breast Reduction | Gynecomastia (male breast) | Vaginoplasty | Earlobe Lift | Varicose Veins | Mini Tummy Tuck | Face Lifting

Anti Aging

Anti Wrinkle Injection - Botox | Dermal Fillers | Mesotherapy Chemical Peeling | Skin Polishing | No Needle Mesotherapy | Derma Roller PRP for Facial Rejuvenation | Thread Veins over Face and Body | Cellulite Treatment | Fat Reduction Non Surgical (HIFU, radio frequency, led, cryolipolysis) | Thread Lift



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- Tenosynovitis of Tibialis Posterior / FHL / Other Tendons
- Tarsal Tunnel Syndrome
- Sever's Disease
- Adult Acquired Flat Feet
- Acute / Chronic Ankle Sprains
- Nonunion of Small Bone Fractures
- Burning Feet Syndrome

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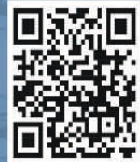
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College of Pediatrics, Australia



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Fellow in Neonatal Medicine
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GUJARAT MEDICAL JOURNAL

INDIAN MEDICAL ASSOCIATION, GUJARAT STATE BRANCH

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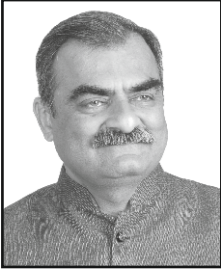
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**STATE PRESIDENT & HON. STATE SECRETARY'S MESSAGE**

As the Centenary NATCON approaches, there's a lively energy across Gujarat. You can feel it in the way our teams meet late into the evening, in the quick updates shared between hospitals, and in the excitement of every member who wants this event to shine. Step by step, what once felt like a distant plan is now shaping into a meaningful and memorable celebration.

This year's NATCON has been designed with care. The scientific sessions offer practical learning for doctors across specialties, along with thoughtful topics dedicated to women. Our MSN and JDN members will experience creative, energetic sessions that match their enthusiasm and curiosity. We are also proud to welcome international experts, whose global perspectives will add depth and inspiration to our discussions.

This gathering is useful for everyone—whether a first-year medical student or a senior stalwart. Students will find ideas and direction for the careers they are building, young doctors will gain skills and confidence, mid-career clinicians will discover updates that refine practice, and senior experts will find a space to share their wisdom and stay connected to a changing medical world. In one place, across three days, every level of our profession grows together.



The **unity of Gujarat** has been the heart of this journey. Doctors from every district have come together like one family, determined to present the strength and warmth of our state. This year also brings two proud moments, the installation of **Dr. Anilkumar Nayak** as National President and **Dr. Anil Patel** as President of IMA Gujarat.

Behind the scenes, our teams are working tirelessly—checking arrangements, coordinating logistics, and ensuring comfort for every guest. Their dedication is already showing results. For the first time, an exceptionally large number of doctors from across India are coming to Ahmedabad to learn, share, and collaborate.

This year, the journey of NATCON stretches far beyond India. Doctors from the USA and several other countries are packing their bags to join us in Ahmedabad. Many of them first heard about the 100th celebration through colleagues, research groups, or academic networks—and their curiosity quickly turned into excitement. They are coming not just to attend sessions, but to share their knowledge, explore research ideas, and build collaborations that can grow into joint publications and long-term academic partnerships. Some are even visiting Gujarat's leading hospitals and institutes to explore training programs, exchange opportunities, and possibilities in medical tourism. Their presence adds a global flavor to our celebration, turning this NATCON into a meeting place where local expertise and international experience come together to shape the future of healthcare.

This year, Gujarat will welcome several internationally respected medical stalwarts who are travelling specially to be



part of the centenary celebration. Their presence will bring global wisdom to our scientific discussions and inspire doctors at every stage of their careers. For many, it will be their first time experiencing the spirit, hospitality, and medical strength of Gujarat—and they are eager to be part of this historic gathering.

Throughout this journey, one thing has stood out above everything else—the unwavering support of our seniors, colleagues, and the entire organizing team. Our seniors have been our compass, sharing their wisdom at the right moments and guiding us whenever the road felt uncertain. Colleagues from every branch stepped forward without hesitation, bringing ideas, solving problems, and lifting the team’s spirit whenever the workload grew heavy. And our volunteer teams—doctors, students, coordinators—have shown a level of commitment that speaks volumes about their love for the IMA family. Early mornings, late nights, endless calls, and countless meetings... they embraced it all with a smile and a sense of purpose. This 100th celebration is not just an event—it is the result of hundreds of people standing together, helping one another, and believing in what we can achieve as a united team. For this, We are deeply grateful to each and every one of them.

To all supporters, volunteers, partners, and well-wishers—thank you. Your support makes this centenary celebration truly special. We look forward to welcoming you to Ahmedabad for this memorable gathering.

Dr. Mehul J. Shah

President, G.S.B., I.M.A.

Dr. Gargi M. Patel

Hon. State Secy., G.S.B., I.M.A.



All India Medical Conference IMA NATCON 2025



HOSTED BY

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27th

28th

December 2025

Saturday & Sunday



Club 07,

The Forum - Celebration & Convention

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Ahmedabad, Gujarat 380058



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DR. MEHUL SHAH | DR. TUSHAR PATEL | DR. URVESH SHAH

AMA HOUSE, OPP. H.K. ARTS COLLEGE, ASHRAM ROAD, AHMEDABAD - 380 009.



Phone: +91 99099 04571 | Email: imanatcon100@gmail.com | Web: www.ahmedabadmedicalassociation.com



All India Medical Conference IMA NATCON 2025

27th & 28th December 2025

HOSTED BY: IMA Gujarat State Branch & Ahmedabad Medical Association



Please Fill in BLOCK LETTERS

Name : Speciality :

Membership LM / AM No. / Non Member SMC/NMC Reg. No. :

Branch : State :

Mailing Address :

City : Pin Code : State :

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Member CWC / CC : Branch : State :

Name of the accompanying person (s) :

DELEGATE FEES (Inclusive of G.S.T. 18%)

Category		01/11/2025 ONWARDS
Reception Committee		₹ 29,500
Delegate IMA Member	Individual	₹ 11,800
	Couple	₹ 21,240
Corporate		₹ 29,500
Foreign Delegates		\$ 350
IMA, MSN		₹ 8,260
IMA, JDN		₹ 10,620
Accompanying Person* (Non IMA Member)		₹ 11,210
Pre Conference - GIMACON (26-12-25)** 1.00 pm onwards		₹ 2,950
Pre Conference Seminar Dt. 26-12-25, Time : 8 am to 1 pm, ₹ 500/-		
Pre Conference Workshop Time : 8 am to 1 pm, FREE		

*Children above 10 years of age should be registered as accompanying persons.

**Only registered conference delegate can register for pre Conference Date 26-12-2025 Friday

A/C Name : IMA NATCON 2025
Bank : HDFC BANK
Branch : ISKON AMBLI ROAD
A/c No. : 99910010010025
IFSC Code : HDFC0008702

IMA NATCON-2025 : GST NO. 24AAATT1716A2Z4

For Registration visit : <https://imanatcon100.com>

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All India Medical Conference **IMA NATCON 2025**

Presents
Pre-conference SEMINAR

In collaboration with
Gujarat National Law University

26th December 2025, Friday | Time: 8:30am to 1:30pm

Venue: GNLU, PDPU Rd, Koba, Gandhinagar

Practice with Prudence: Legal Perspectives in Clinical Medicine


TOPICS COVERED:

- Workplace Safety and Legal Protection for Healthcare Providers
- Emergency Situations and Medico legal Duties : What every Doctor must know.
- Legal Duties of Doctors in MLC : Responsibilities, and Realities for registration of case.
- Medical Negligence : Insights from Bar and Bench
- End of Life Care, DNR and Advance Directives



About GNLU

Gujarat National Law University (GNLU) is the statutory university established by the Govt. of Gujarat under the Gujarat National Law University Act, 2003 . The University is recognized by the Bar Council of India (BCI) and the University Grants Commission (UGC) (2f & 12B) . The University is also a member of the Association of Indian Universities (AIU) , United Nations Academic Impact (UNAI) , International Association of Law Schools (IALS) , Asian Law Institute (ASLI) and Shastri Indo-Canadian Institute .

For Registration click here 



**National Forensic
Sciences University**

Knowledge | Wisdom | Fulfilment

An Institution of National Importance
(Ministry of Home Affairs, Government of India)

All India Medical Conference **IMA NATCON 2025**

Presents
Pre-conference SEMINAR

In collaboration with
National Forensic Sciences University

26th December 2025, Friday | Time: 8:30am to 1:30pm
Venue: NFSU, Police Bhavan Rd, Sector 9, Gandhinagar

THE TRIPLE INTERFACE: TOXICOLOGY, DNA AND CYBER FOR MEDICAL PRACTITIONERS

TOPICS COVERED:

- Cyber Awareness in the era of AI
- Best practices of sampling in poisoning cases
- Medico-Legal Challenges
- Tools and techniques for clinical toxicology
- DNA forensics in medical practices
- Showcasing of various Centers of Excellence at NFSU



About NFSU:

National Forensic Sciences University (NFSU), an Institution of National Importance established by an Act of Parliament in 2020, is headquartered in Sector-9, Gandhinagar, Gujarat. It is the world's first and only university dedicated exclusively to forensic and allied sciences. NFSU promotes excellence in forensic science, applied behavioral sciences, law, criminology, digital forensics, cyber security, and other related disciplines through academic programs, research, training, and capacity building.

Currently, NFSU operates twelve campuses across India and one international campus in Uganda. It offers undergraduate, postgraduate, and doctoral programs through its specialized schools, including the Schools of Forensic Science, Cyber Security & Digital Forensics, Medico-Legal Studies, Behavioral Sciences, Law, Pharmacy, Police Science, Engineering & Technology, Management, and others.

Centre for Emergency Toxicology (CET) at NFSU is a visionary initiative of the Hon'ble Vice Chancellor. It focuses on drug and poison detection for clinical toxicology, offering expert consultation, timely diagnosis, treatment advice, and research services to hospitals, clinicians, and other stakeholders to ensure public health and safety.

For Registration click here 



INDIAN
INSTITUTE
of PUBLIC
HEALTH
GANDHINAGAR

ESTABLISHED BY GOVT. OF GUJARAT AND PHFI

All India Medical Conference **IMA NATCON 2025**

Presents
Pre-conference SEMINAR

In collaboration with
Indian Institute of Public Health Gandhinagar

26th December 2025, Friday | Time: 8:30am to 1:30pm
Venue: IIPHG, opp. New Air Force Station HQ, Gandhinagar.

Advancing Healthcare Practice through Digital, Analytical, and Quality Competencies

TOPICS COVERED:

- Digitalisation & professional networking.
- E-platforms for decision making.
- Soft skills for data analysis & publication.
- Quality Management for Healthcare Professionals.



About IIPH Gandhinagar

Indian Institute of Public Health Gandhinagar (IIPHG) is India's first Public Health University. The Indian Institute of Public Health Gandhinagar (IIPHG) is working towards building a healthier India. IIPHG is an example of visionary leadership of Honourable Shri Narendra Modi (then Honourable Chief Minister of Gujarat), who laid the foundation stone and provided support for establishing the institute in 2008. Government of Gujarat and Public Health Foundation of India (PHFI) entered an MoU in 2007 to establish IIPHG. Under the MoU, Government of Gujarat allocated land and agreed to share a part of the project cost.

For Registration click here 



icmr
INDIAN COUNCIL OF
MEDICAL RESEARCH

NIOH
NATIONAL INSTITUTE OF
OCCUPATIONAL HEALTH

All India Medical Conference **IMA NATCON 2025**

Presents
Pre-conference SEMINAR

In collaboration with
ICMR-National Institute of Occupational Health

26th December 2025, Friday | Time: 8:30am to 1:30pm

Venue: Conference Room, ICMR-NIOH, Meghaninagar, Ahmedabad

Healthy Workforce for Viksit Bharat

TOPICS COVERED:

- Introduction to Occupational Health: Clinical Recognition, Prevention, and Management
- Case Studies from the Field: Stories from ICMR-NIOH
- Opportunities and Career Pathways in Occupational Health: Research and Industry
- Laboratory Exposure Visit to ICMR-NIOH
- Interactive Panel / Open House with Experts at ICMR-NIOH



About ICMR–National Institute of Occupational Health

The NIOH is the premier institute, under the aegis of the Indian Council of Medical Research (ICMR) under the Department of Health Research, Ministry of Health and Family Welfare, Govt. of India.

The need for research in Occupational Health in the country was first appreciated by Indian Research Fund Association (IRFA), the forerunner of the Indian Council of Medical Research (ICMR). IRFA set up an Industrial Health Advisory Committee (IHAC) under the chairmanship of Col. Bozman in 1945. As per the recommendations of this Committee, in 1947, an Industrial Health Research Unit was created at the All India Institute of Hygiene and Public Health, Calcutta. In 1956, the IHAC recommended to the Government of India that priority should be given for the establishment of an Institute of Occupational Health Research during the Second Five Year Plan.

For Registration click here 



All India Medical Conference IMA NATCON 2025

Presents

Pre-conference SEMINAR

In collaboration with

i-Hub A Gujarat Government Enterprise
Startup & Innovation - From Idea to Impact

TOPICS COVERED:

- i-Hub's Role in Enabling and Supporting Startup Growth
- Overview of the Innovation & Startup Ecosystem in Healthcare sector
- A Comprehensive landscape on Startup Lifecycle Stages
- Medical to Entrepreneurial Mindset: Starting Up as a Doctor

Date : 26th December 2025 **Time** : 9 AM to 4 PM

Venue : i-Hub Gujarat, KCG Campus, Navrangpura, Ahmedabad

www.ihubgujarat.in

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Ahmedabad Medical Association

27th 28th
December 2025
Saturday & Sunday



Pre-conference workshops

Date: 26-12-2025 | Time: 8.30 am to 1.30 pm



KD Hospital
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Gastroenterology



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EPILEPSY AND VIDEO EEG WORKSHOP

Date: 26-12-2025 | Time: 09.00 am to 02.00 pm

Topic Name	Speaker Name
Registration & Breakfast	
Video EEG Basics And Interesting Case Demonstration	Dr. Rutul Shah And Dr. Abhishek Gohel
Epilepsy Surgery – Through The Surgeon's Eye	Dr. Gopal Shah
Hands On Workshop - Drug Resistant Cases, Video EEG And Neuroimaging	All Faculty

Coordinators: Dr Sunil Patel: 98792 25294
Dr Manoj Kodwani: 78787 57501

Venue : KD Institutes of Allied Health Sciences, 5th Floor, KD Sail,
KD Hospital, Ahmedabad



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PULMONOLOGY & CRITICAL CARE WORKSHOP

Date: 26-12-2025 | Time: 09.00 am to 2.00 pm

Topic Name	Speaker Name
Registration and breakfast	
Chest X-Ray Interpretation	Dr Mukesh Patel, Dr Tirth Patel
Basic Bronchoscopy When? & How?	Dr Mukesh Patel, Dr Sanket Patel
ABC of ABG And Their Indications	Dr Tejas Parikh, Dr Amit Patel
Role of Allergy Diagnostc In Asthma	Dr Raj Bhagat
Pulmonary Function Test (form Basic To Interpretion)	Dr Pradip Dabhi
Hands On Session	
PFT Machine Demo, Basic Bronchoscopy	
Chest X-ray Interpretation, ABG	
Allergy Skin Prick Test	

Coordinators: Dr Sunil Patel: 98792 25294 | Dr Manoj Kodwani: 78787 57501

Venue: Auditorium 7th Floor, KD Hospital Vaishnodevi Circle, SG Highway, Ahmedabad



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SIMULATION & HANDS ON TRAINING

Date: 26-12-2025 | Time: 02.00 am to 04.30 pm

Who Can Join? **MSN**

Topic Name	Speaker Name
Basic Life Support (Adult)	Mr. Balram Kathaliya
Basic Airway Management	Mr. Balram Kathaliya
Basic Suturing Skills	Mr. Balram Kathaliya

Learning **Outcomes**

By the end of the workshop, participants will be able to:

1. Perform high-quality adult BLS, including use of AED.
2. Demonstrate basic airway opening manoeuvres and bag-mask ventilation.
3. Perform basic suturing techniques with aseptic precautions.
4. Integrate emergency readiness into clinical practice.

Coordinators: Dr Sunil Patel: 98792 25294 | Dr Manoj Kodwani: 78787 57501

**Venue : KD Institutes of Allied Health Sciences, 5th Floor, KD Sail,
KD Hospital, Ahmedabad**



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GASTRO SCIENCES WORKSHOP

Date: 26-12-2025 | Time: 09.00am to 02.00pm

Topic Name	Speaker Name
Registration, Breakfast & Welcome	
An approach to a patient with chronic diarrhoea	Dr Tejas Modi
Management of Gallstone and its complications	Dr Mayank Gurjar
An approach to a patient with Jaundice	Dr Hardik Kotecha
An Approach to a patient with acute abdomen	Dr Dhaivat Vaishnav
An Approach to a patient with gas, bloat and dysphagia	Dr Ajay Choksey
Recent Advancement in GI endoscopy	Dr Nilay Mehta
Robotic GI Surgery	Dr Bhavin Patel

Coordinators: Dr Nirali Patel : +91 94268 64496
 Dr Yogesh Jadav: +91 98245 62863

Venue : Zydus Hospital Rd, Sola, Ahmedabad, Gujarat 380059



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IMA NATCON 2025
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CARDIOLOGY WORKSHOP

Date: 26-12-2025 | Time: 09.00 am to 4.30 pm

Topic Name	Speaker Name
Resistant Hypertension: Latest Update	Dr Vipul Kapoor
Less is more: The Future of Cardiac Surgery	Dr Amit Chandan
Ghee, Oil, Cheese, Butter and Cholesterol...	
what should we know and why?	Dr Milan Chag
ECG in Emergency Room	Dr Hiren Kevadiya
SGLT2i: Multifaceted agent for Cardiometabolic diseases	Dr Hemang Baxi
Know Basics of Coronary Artery Bypass Grafting (CABG)	Dr Dhaval Naik
Audience Discussion (Q & A)	
CABG in acute MI - When to do?	Dr Nikunj Vyas
Acute Chest Pain & ACS: Case based Approach	Dr Tejas V Patel
Types of Oral Anticoagulants	Dr Ajay Naik
Interesting Case Scenarios in Cardiac Surgery	Dr Dhiren Shah
Cholesterol, Dyslipidemia, Statin: Myths and Realities	Dr Anish Chandarana
Heart Failure - Recognition and Treatment	Dr Urmil Shah
Audience Discussion (Q & A)	
ECG Workshop: How to read ECG - Basics to Benchmark	Dr Hiren Kevadiya

Coordinators: Dr Oman Prajapati : +91 95379 84678 | Dr Jinen Pandya : +91 92658 93521

Venue : Science City Rd, Panchamrut Bunglows II, Sola, Ahmedabad.



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CANCER WORKSHOP

Date: 26-12-2025 | Time: 09.00am to 2.00pm

Topic Name	Speaker Name
Bursting myths about head & neck cancer and it's treatment	Dr Daxesh Patel
Saving More than Lives - Radiotherapy's Role in Saving Organs	Dr Samir Batham
Interpretation of Coagulation parameters	Dr Abhishek Dudhatra
Recommendation of vaccination in elderly patients	Dr Dhara Shah

Coordinators: Dr Manish Ninama: +91 98252 13374
Dr Hetal Pandya: +91 94288 13460

Venue : HCG Aastha Cancer Centre, opp. Bhagawat Vidhyapith, Sola, Ahmedabad,



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IMA NATCON 2025
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SAL
 HOSPITAL
 Healthcare with Human Touch

CRITICAL CARE WORKSHOP

DIDECTIC LECTURES AND TABLES

Date: 26-12-2025 | Time: 09.00 am to 2.00 pm

Topic Name	Speaker Name
Your heart matters the most	Dr. Priyank Bhatt
Neuro care - Brain needs attention...spine too	Dr. Ekta Artawani
Sepsis - Your approach makes a difference	Dr. Harshal Thaker
Look in to the heart: 2D Echocardiography	Dr. Mukesh Laddha
Saves the breaths: Airway management	Dr. Anci
Yes, That's the point: Point of care ultrasound	Dr. Hiren Khatri

Coordinators: Dr Rashi Jain : +91 94262 83317
 Dr Punamchand Parmar : +91 96010 78050

Venue : Kesar Sal Hospital, Opposite Science City, Ahmedabad



**GNLU CENTRE FOR HEALTHCARE ETHICS, LAW AND
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in collaboration with
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Program Highlights

Duration:

1 year (January–December 2026)

Total Seats:

60

Mode:

Blended (Online + Offline)

Classes:

Every Saturday (02:00-05:00 PM) and Sunday (10:00 AM-01:00 PM)

- o **Offline Classes:** Last weekend (Saturday and Sunday) of every month at GNLU's state-of-the-art campus in Gandhinagar from 9:00am to 5:00pm.
- o **Online Classes:** All other weekends (Saturday and Sunday) for flexible learning

Attendance:

Minimum 70% attendance required; mandatory 6 days of offline sessions (Any 3 weekends in one year).

Teaching Methods

- o Interactive lectures and real-world case studies
- o Flipped classroom and collaborative learning
- o Problem-solving and audio-visual discussions

Key Dates

- **Date of Advertisement:** November 10, 2025
- **Application Opens:** November 10, 2025
- **Application Deadline:** December 15, 2025
- **Entrance Test (if needed):** December 20, 2025
- **Selection Intimation:** December 25, 2025
- **Admission Completion:** January 10, 2026
- **Orientation & Classes Begin:** January 10, 2026



GUJARAT MEDICAL COUNCIL

O.W.No.GMC/NOTICE/SEPT-2025/44856/25

Dated : 17-09-2025

PUBLIC NOTICE

It is hereby notified for the information of all concerned:

That for FMG (Foreign Medical Graduates), the degree awarded by foreign universities such as "MD (Physician)", "MD (Doctor of Medicine)", and the registration/license granted by NMC, MCI, or GMC under equivalent titles like "MD (Physician)" or "MD (Doctor of Medicine)" **is considered equivalent to MBBS in accordance with Regulation 2(f)** of the Screening Test Regulations, 2002.

However, it has been observed that some FMGs, despite this equivalence, are misrepresenting their qualifications/registration as being on par with "MD" and thereby misleading the general public.

All FMGs registered with the Gujarat Medical Council are **directed to practice only as "M.B.B.S." doctors** (as recognized for equivalence in India). They **must mention only "M.B.B.S." as their qualification** in every professional context. This requirement is mandatory for signboards, prescriptions, visiting cards, letterheads, advertisements, and all other forms of public or professional representation. **Any projection of foreign titles such as "MD (Physician)" or "MD (Doctor of Medicine)" in India shall be treated as misrepresentation.**

All FMGs are hereby cautioned that **such misrepresentation amounts to professional and ethical misconduct.** As per Section 30(2) of the NMC Act, 2019, any violation of the above shall invite disciplinary action by the Council, after giving an opportunity of hearing to the concerned medical practitioner, which may include:

- **Suspension of MBBS registration for a period which may extend to six (06) months, or**
- **Imposition of monetary penalty which may extend to ₹1,00,000/- (Rupees One Lakh only), or**
- **Both, depending upon the severity of the misconduct.**

All stakeholders, including hospitals, institutions, and the general public, are advised to take note of the above.

P. Patel.

Registrar,
Gujarat Medical Council,
Ahmedabad.



GUJARAT MEDICAL COUNCIL

O.W.No.GMC/NOTICE/SEPT-2025/44857/25

Dated: 17-09-2025

PUBLIC NOTICE

It is hereby brought to the notice of all concerned that under **Section 34 (1) of the National Medical Commission Act, 2019 (No.30 of 2019) published in the official extra ordinary Gazette of Government of India in PART II - Section 1 on Thursday 8th August, 2019 by Ministry of Law and Justice (Legislative Department),**

(1) No person other than a person who is enrolled in the **Gujarat Medical Council State Register** or the **National Medical Commission's National Register**, as the case may be shall:

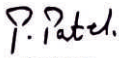
- (a) be allowed to practice medicine as a qualified medical practitioner in the state of Gujarat;
- (b) hold office as a physician or surgeon, or any other office, by whatever name called, which is meant to be held by a physician or surgeon in the state of Gujarat;
- (c) be entitled to sign or authenticate a medical or fitness certificate or any other certificate required by any law to be signed or authenticated by a duly qualified medical practitioner in the state of Gujarat;
- (d) be entitled to give evidence at any inquest or in any court of law as an expert under section 45 of the Indian Evidence Act, 1872 on any matter relating to medicine in the state of Gujarat;

(2) Any person who contravenes any of the provisions of this section without **registration of the Gujarat Medical Council** shall be **punished with:**

- **Imprisonment for a term which may extend to one year, or**
- **with fine which may extend to five lakh rupees, or**
- **with both.**

Therefore, all persons are hereby **mandated to ensure registration with the Gujarat Medical Council** before engaging in any medical practice in the State of Gujarat.

Strict compliance with the above is required.


Registrar,
Gujarat Medical Council,
Ahmedabad.



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Kindly contact

Mr. Arpitkumar Mahida on
M.9033040728

Mail:- hr@tribhuvandasfoundation.org



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77th

26th December 2025, Friday

GIMA CON

Annual Conference of IMA, Gujarat
Hosted by: Ahmedabad Medical Association

Time: 12.00 to 07:00 pm onwards

Venue: Forum, Club 07

Time	Topic
12-02pm	Registration & lunch
02-04pm	Scientific sessions
04-05pm	Prestigious Oration
05-07pm	Award & installation ceremony of New team of IMA, Gujarat
7pm onwards	Banquet dinner with live music



Dr Anil Patel

President elect, IMA Gujarat 2025-26



CONFERENCE SECRETARIAT

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PLATINUM PATRON



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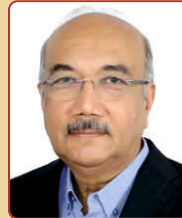
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Dr. Kirti M. Patel
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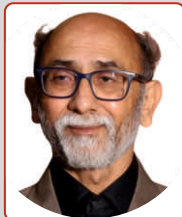
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254 kgs

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Assessment and Decision

A comprehensive evaluation was carried out to assess his overall health, nutritional status, and readiness for surgery. After detailed counseling, the decision was made to proceed with a Roux en-Y gastric bypass as the most effective option for long-term weight control and improved quality of life.

Surgical Management

The patient underwent a laparoscopic Roux-en-Y gastric bypass in 2007. The procedure involved creating a small gastric pouch and rerouting a portion of the small intestine to limit food intake and absorption. Following this initial surgery, the patient experienced significant weight loss, reaching 130 kg within two years, a reduction of 124 kg.

However, over time, despite significant progress, the patient experienced some weight regain and plateaus in his weight loss.



130 kgs

In response to this, a second surgery was performed as a revision to the initial gastric bypass. This second surgery, specially designed by Dr. Mahendra Narwaria for this unique case, further refined the gastric bypass procedure to maximize weight loss and address the patient's specific needs. This revision surgery was a crucial turning point in his weight management journey.

Outcome and Follow-Up

The results of the second surgery were remarkable. Over the course of the following years, the patient's weight steadily decreased from 130 kg to 84 kg,



achieving a total weight loss of 170 kg and normalizing his BMI. Along with his weight loss, his body composition analysis (BCA) showed dramatic improvement, and he remained free of major postoperative complications. His physical fitness, confidence, and overall quality of life significantly improved, marking an extraordinary transformation.

Now, 18 years after his initial surgery, the patient continues to maintain a healthy weight of 84 kg.



84 kgs

Conclusion

This case is a powerful example of how a combination of expert surgical intervention, patient commitment, and continuous care can result in extraordinary outcomes. The success of this young patient underscores the importance of individualized treatment plans, the critical role of revision surgery in complex cases, and the hospital's dedication to providing clinical excellence in bariatric surgery and long-term weight management



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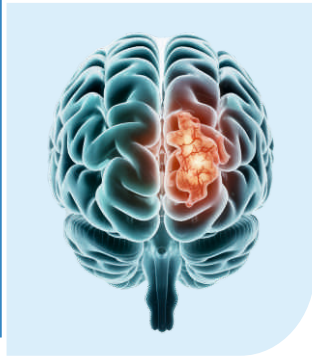
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- **NEUROLOGY** • **TOTAL SPINE CARE**

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- Paediatric Brain Surgeries • Brain Cancer Surgery

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Spinal Stenosis -- "INTERLAMINAR ENDOSCOPY UNDER LA"

Symptoms :

- Back or neck pain
- Leg or arm pain
- Difficulty in standing and walking
- Tingling, numbness, heaviness
- Weakness in legs or hands



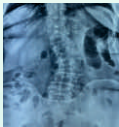
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Pre operation



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Post op AP



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- Spinal cord stimulation > 70
- OLLIF > 100
- Cervical endoscopy decompression > 500

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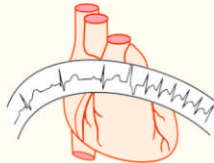


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**Case-Based General Medicine Quiz – Set 1****MEDI QUIZ - COMPETITION - QUIZ-10**

- Q-1. A 55-year-old male presents with sudden severe chest pain radiating to the back. Bp shows > 20 mmHg difference between arms. Most likely diagnosis ?**
- A) STEMI
 - B) Aortic dissection
 - C) Acute pericarditis
 - D) Pulmonary embolism
- Q-2. Best initial investigation in suspected pulmonary embolism (stable patient)?**
- A) CT Pulmonary Angiography
 - B) ECG
 - C) D-dimer
 - D) V/Q scan
- Q-3. Hyperkalemia ECG change seen earliest:**
- A) ST depression
 - B) Tall peaked T waves
 - C) Prolonged QT
 - D) U waves

Medi quiz-9 answer

Case 1 : (A) Immediate thrombolysis if within window period

Explanation: If patient presents within 4.5 hours and no contraindications, IV alteplase (tPA) is indicated. Aggressive BP lowering is avoided unless >220/120 mmHg

Case 2 : (B) Hyperosmolar hyperglycemic state

Explanation: Marked hyperglycemia and hyperosmolarity without ketosis or acidosis are diagnostic of HHS — common in type 2 diabetes.

Case 3 : (B) ACE inhibitor and beta-blocker

Explanation: In systolic heart failure, mortality reduction is achieved with ACE inhibitors/ARBs and evidence-based beta-blockers (carvedilol, bisoprolol, metoprolol succinate).



COLLEGE OF GENERAL PRACTITIONER IMA-GSB

MEDI QUIZ - COMPETITION QUIZ - 9

List of participants with correct answers

No.	Name	City
1.	Dr. Kirti B Thakkar	Ahmedabad
2.	Dr. Mayur B Shah	Ahmedabad
3.	Dr. Vipul Shah	Ahmedabad
4.	Dr. Pradip Joshi	Bhavnagar
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13.	Dr. Rajoo Lohana	Rajkot
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15.	Dr. Kishti Thakkar	Vadnagar
16.	Dr. Kanti Patel	Valsad
17.	Dr. A. K. Gajjar	Viramgam
18.	Dr. Dilip Patel	Viramgam

- Send your answers to whatsapp No +91 76985 54566 or before 12-12-2025
- Kindly mention your Name, Degree and City / Branch Name
- Don't keep disappearing messages on while sending reply
- Every month quiz will be published in GSB bulletin
- First three winners will be published in next bulletin
- Write only the option numbers as in A or B or C or D or E (Example : 1 - B, 2 - A, 3 - C. Please dont write the full answers.
- Maximum correct answers during whole year will be felicitated

QUIZ MASTERS :

Dr. Urman Dhruv

Senior consultant physician

Dr. Mahadev Desai

Senior consultant physician

Dr. Vipul Shah

Infectious disease specialists

COORDINATOR :

Dr. Kalpita Dave

Ahmedabad

Dr. Dhananjaysinh Gohil

Ahmedabad



76nd REPORT : 2024-2025

Dear Members

It is my great pleasure, pride and privilege to present the Annual Report of our association for the year 2024-2025.

Main activity of our association is continuing medical education. We try to give latest scientific information to doctors to refresh and update the scientific knowledge and treat their patients with newer drugs & modality in modern medicine.

We enroll more life members and other projects sponsored by Government from time to time. We pay due attention to implement National health programmes proposed by Govt. of India in wider interest of our citizens at large.

We have started Post Graduate Diploma in Medico Legal and Ethics in association with Gujarat National Law University in which about 60 Doctors of IMA GSB has enrolled in Third batch and First & Second batch has already successful completed their course last year.

IMA GSB has organized Workshop with QCI which was hosted by Ahmedabad Medical Association (AMA) on 22-12-2024 & IMA Bhavnagar Branch organized on 16-2-2025.

IMA GSB has organized OSHO Meditation Workshop which was hosted by IMA Mehsana Branch, Health EXPO jointly with Surat Medical Association & South Gujarat Chamber of Commerce at Surat, KD Marathon with K.D. Hospital, at Ahmedabad, All Gujarat Badminton Tournament at Ahmedabad, Instrumental Musical Program "IMA DOC Studio", "IMA Doc Lense", All Gujarat Skit Competition with AMA at Ahmedabad.

IMA GSB CGP has started a monthly 2 CME & about 2 online CME has been organised till date with remained speakers.

IMA GSB has started the Hospital Protection Scheme & Online platform / App of GSB.

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MEMBERSHIP

Year	Life Member Enrolled	Total No. of L.M.	Total Membership
2024-2025	2897	36493	39390

Total : 114 Branch

* * * * *

DR. P. R. TRIVEDI ORATION

Dr. Neena H. Bhalodia (^{* * * * *}Ahmedabad) has been selected for the oration to deliver during GIMACON-2025 on "Hearing loss in Healthcare system: Gaps and Solutions".

Late Padmashree Dr. V. C. Patel Scientific Lecture (Individual)

Dr. Samir Dani (Ahmedabad) has been selected for the oration to deliver during GIMACON-2025.



GUJARAT STATE BRANCH ELECTION FOR THE YEAR 2024-2025

The following members have been declared elected as President & Seven Vice Presidents of our State Branch for the year 2025-2026.

- | | | |
|---------------------------|-------------------------|------------|
| 1. PRESIDENT | Dr. Anil D. Patel | Mehsana |
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* * * * *

100TH ALL INDIA MEDICAL CONFERENCE

100th All India Medical Conference IMA-NATCON-2025 and 86th Annual Meeting of Central Council of IMA will be held on 27th & 28th December, 2025 at Ahmedabad, Gujarat.

* * * * *

76ND GUJARAT STATE ANNUAL MEDICAL CONFERENCE

The 76th Gujarat State Annual Medical Conference was hosted by IMA Rajkot Branch.

The entire event was blessed with valuable present & wonderful speech of the Chief Guest of program distinguished guest Dr. Anil J. Nayak, National president (Elect) IMA HQs.

The Scientific programme, the pre-conference and Medi-Quiz were both informative and entertaining. The entertainment programme & gala dinner banquet was full of enjoyment & enthusiasm with the bollywood singer.



COLLEGE OF GENERAL PRACTITIONER IMA-GSB

(Reported by Dr. Jashwantsinh P. Darbar; Director,
Dr. Vasant B. Patel; Hon. Secretary and Dr. Kamlesh R. Naik, Hon. Joint Secretary)

This year we have conducted following webinar. All are well attended .

Webinar 11 : Date 24th November 2024

Topic : An approach to A Case of Anaemia

Speaker : Dr. Mahadevbhai Desai
Senior consultant physician

Webinar 12 : Date : 26th December 2024

Topic : Jaundice : Overview and Treatment by Dr. Subhash Nandwani, consultant Gastroenterologist, Surat & Dr. Keyur Bhatt, Gastrointestinal, Hepato Pancreatic Biliary Surgeon, Surat

World Tuberculosis Day 2025

Topic 1 : Role of IMA in TB Elimination by Dr. Tushar Patel

Topic 2 : NTEP programmatic update by Dr. Y. K. Jani

Topic 3 : Clinical presentation and newer diagnosis of pulmonary TB by Dr. Pradeep Dabhi

Two Physical CME were conducted

(1) CME on 16-2-2025 with Morabi Branch

Topic : "Laparoscopic Fundoplication & Manometry, PH Impedance"

Speaker : Dr. Jayant Jhala.

Topic : "Role of Robotics In Gastrointestinal Disease"

Speaker : Dr. Avadh Patel.

attended by Dr. Mehul J. Shah, Dr. Kamlesh B. Saini and Dr. Ashish Bhojak.

(2) CME on 08-06-25 Sunday by Ahmedabad branch

Debate-1 Dapaglifozine vs Empaglifozine Dr. Maulik Kinariwala and Dr. Vipul Chavda

Debate-2 Linagliptine vs Sitagliptine by Dr. Padamnabh and Dr. Dhruvi Hasnani

Topic - 3 : Semiglutide - diabetes and obesity- should we use it or not by Dr. Sanjeev Pathak

Topic - 4 : AMR - family physician's perspective by Dr. Urvesh Shah

Topic - 5 : Medicolegal subject by Dr. Kruti Deliwala

Panel discussion- Dr. Kirti Sanghavi



Medi Quiz

Medi Quiz

From November 24 we have started Medi Quiz in our monthly bulletin. we are getting good responses from members. Name of Those doctors with correct answers are published in next bulletin. We will felicitate three doctors who have participated in maximum quiz with correct answers on upcoming Natcon 2025.

Name of doctors who have participated in maximum Medi Quiz with correct answers

- | | | |
|---|--------------------|-----------|
| 1 | Dr. Kanti N. Patel | Valsad |
| 2 | Dr. Kishti Thakkar | Vadnagar |
| 3 | Dr. Vipul N. Shah | Ahmedabad |

Dr. Jashwantsinh P. Darbar
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Dr. Kamlesh R. Naik
Hon. Jt. Secretary

Dr. Vasant Patel
Hon. Secretary

* * * * *

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

(Reported by Dr. Navnit K. Patel; Chairman, Dr. Dhiren R. Mehta; Hon. Secretary, Dr. Mehul Shelat; Vice Chairman, Dr. Uday Patel; Treasurer)

We are privileged to present this report of the Health Scheme, IMA GSB. As you are aware that the basic motto of our scheme is to assist financially to the member at the occasion of his / her and spouse illness for prescribed disease group.

Actual Members upto 31-3-2025	4566
Beneficiary Members from 1-4-2024 to 31-3-2025	151
Amount given as benefit to beneficiary members from 1-4-2024 to 31-3-2025	2,83,09,346/-

* * * * *

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GUJARAT MEDICAL JOURNAL

(Report: by Dr. Monaben P. Desai; Hon. Editor,
Dr. Harshad C. Patel; Hon. Joint Editor, Dr. Kirit C. Gadhavi; Hon. Secretary)

Greetings to all the members of GSB IMA from our team of Gujarat Medical Journal. As you all know our Journal is no more an Index Journal since few years. We are trying to Index it again but there are few major changes to be made to make it Indexed. We take out Two issues of our Journal in a year. Why is it important to have a Journal published?

First let us understand the difference between Journal and Bulletin. Bulletin will print whatever activities being done by different branches of GSB IMA while Journal will publish scientific matter. It is very rightly said - YOU BECOME UNEDUCATED THE MOMENT YOU STOP LEARNING- so our process of learning is a never ending one, especially for Medical Fraternity. We are trying to publish unusual cases encountered by different specialists during their practice, which would be of interest to all of us. It does not matter which branch you have specialised in -it is always advantageous to know about every other branch also. You may be able to guide people better.

So, we invite such cases and articles for our Journal which are unusual and special. We request all of you that you must be encountering such cases in your practice -do send it to us and we will print it. Let us make our Journal a Scientific Hub of interesting Cases and Articles. Mean while we are trying to make our Journal INDEXED.

We have made our Journal a E-journal now- those who want a physical copy kindly inform the office of GSB IMA.

We thank our team and GSB IMA President for their full-hearted support.
Thanks,

Dr. Monaben P. Desai **Dr. Kirit C. Gadhavi** **Dr. Harshad C. Patel**
(Hon. Editor) (Hon. Secretary) (Hon. Jt. Editor)



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HOW I DO – DVT –Specific Sites- PART – 17

(All the articles published in past are available at www.shyamhemonclinic.com/blog/)



Dr. Chirag A. Shah
M.D. Oncology/Hematology (USA)
Diplomate of American Board of
Oncology and Hematology,
CBC/Apollo Hospital, Ahmedabad.
98243 12144; 98988 68503

Question: In last part, we covered additional important points related to DVT/PEI. Duration of anticoagulation for DVT with a transient risk factor, is 3 months only. And they do not require testing for hereditary etiology. 2. Those without a transient risk factor, need much longer anticoagulation. With some new data to show role for even lower dose anticoagulation for extended periods. At the least, aspirin, for prolonged periods, if anticoagulation is not feasible. No test, including D DIMER is useful in deciding when to stop or reduce dose. 3. For significant pulmonary embolism, same principles apply for duration of anticoagulation. Except for incidentally detected subsegmental emboli, who do not need anticoagulation, unless they are high risk for DVT e.g. active cancer. 4. Goal INR for all indications is between 2-3. We also discussed reversal of warfarin for those with bleeding and for those with high INR but no bleeding. We discussed reversal of DOAC also, with specific antidote as first choice. If not available, PCC. Dialysis for dabigatran. 5. For OBESE patients, standard DOAC dosing can be used up to 120 kg weight. 6. When to treat DVT as outpatient from day one. 7. Stick to one DOAC as far as possible, so that whole team is familiar with right dosing and administration details.

Are there any other important points related to DVT/PE that we need to highlight?

Answer: Yes this is a very wide topic. But let us briefly review Thrombosis of Specific Sites. Since most common DVT site is leg, most articles, guidelines are about leg DVT. But other sites need different evaluation and planning.

1. **Distal leg (Calf) DVT** Risk of pulmonary embolism is extremely low with distal dvt. e. beyond popliteal vein. All the risk that we have been talking about, is related to Proximal DVT. Hence, these can be observed, without any anticoagulation, with serial monitoring by venous doppler, once a week. If they do not progress within two weeks, risk of extension to proximal dvt then is very low. As these thromboses resolve in about 30 percent of cases spontaneously, some advocate serial monitoring.

However, since about 70% do progress to proximal dvt, some advocate anticoagulation, as for proximal dvt. In practice, we look at **risk benefit ratio**, like in most medical settings. If bleeding risk is high, and/or no other risk factors for dvt, monitoring is preferred. Also provided patient is reliable for monitoring. If bleeding risk is low, or strong risk factors for dvt, like active cancer, start anticoagulation. Duration is same as for proximal dvt.

Incidentally detected, small dvt or with minimal symptoms, and no risk factors, are the ones that can be avoided anticoagulation by serial monitoring. That is the goal, to avoid treatment for those with low risk.

2. **Upper Extremity (arm) DVT** this is another controversial area. When I was in fellowship, most considered this low risk for pulmonary embolism, and hence were not anticoagulated or only for a short time. For those who have dvt associated with a central line or PICC line, removal of catheter and a short anticoagulation is perhaps still ok. When need for a central line/PICC is critical, and replacement is not easy, we keep line and anticoagulate.

However for others without such obvious local factor, now they are considered **same as leg proximal dvt**, and treated accordingly with standard dose and duration of anticoagulation.

3. **Cerebral Venous Sinus Thrombosis CVT** This is not as common as leg dvt, but certainly not rare. A potentially serious site. However, if patient is diagnosed in time, **most people have excellent neurological recovery**, generally complete. With standard anticoagulation as for leg dvt. e. LMWH in acute phase, followed by DOAC or Warfarin after initial few days. **Interestingly, duration of anticoagulation** required is short here i.e. 3 to 6 months, or some give 12 months. And relapse is rare. Evaluation includes standard risk factors for dvt. But mostly no obvious risk factors exist, such as immobilization, surgery, cancer, hereditary etiology. We find very high **homocysteine** levels in India as one associated factor more frequently however. Possibly due to low vitamin B12 levels. Also, **our most common patients are young adults**. Frequently with erratic eating habits. In western studies, homocysteine levels are about 15-30 when they say high, and is considered a very weak risk factor for dvt in general. But mine and other Indian colleagues experience is that in India, we see very high levels **upwards of 100-150**. This may be important and true association.

4. **Mesenteric Vein Thrombosis** This site is more likely to lead to serious morbidity or mortality compared with cerebral venous sinus thrombosis. Common complication is **small intestine gangrene**, requiring removal of a large portion, leading to significant morbidity, depending on length removed. Of course, many can be treated with anticoagulation alone, if no gangrene, diagnosed and treated in time. This site has more frequent association with **Myeloproliferative Neoplasm for some reason**. Hence, even with normal CBC, we test for these especially JAK 2 mutation. Patients may present with dvt, up to two years before they develop full signs of MPN. Other risk factors for dvt of course are to be looked at as usual. If they survive first event, second event is potentially fatal or very morbid. Hence **lifelong anticoagulation** is advisable. Even if no risk factor is found.

Some patients are **diagnosed with chronic thrombosis**. Their management is not clear. In most cases we observe, unless there is a significant risk factor for recurrence. Then we anticoagulate long term. November 8th 2025 **Dr Chirag A. Shah**; M.D. Oncology/Hematology (USA), 9998084001. Diplomate American Board of Oncology and Hematology. Ahmedabad. drchiragashah@gmail.com www.shyamhemonclinic.com



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Dr. Shreya Prashant Butala

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Consultant Gastroenterologist & Hepatologist

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Contact - 7433811521, 9511597889

Email: menghanihemant@gmail.com

The Kidney Tumor in children - Wilms Tumor

- Specific type of kidney cancer seen exclusively in children.
- Also called as nephroblastoma
- Almost commonly effects children between ages of 3 to 5 years.
- As a Pediatric Oncologist Wilms tumor is one of the most common cancer I see.
- **How to diagnose**

To diagnose Wilms tumor, a doctor needs to do:

- **A detailed medical exam.**
- **Blood and urine tests.**
- **Imaging tests like ultrasound, CT scans**

The stage of the cancer helps with deciding treatment.

Symptoms

Wilms tumor mostly occurs in just one kidney. But it can sometimes be in both kidneys at the same time.

Symptoms seen in children with Wilms tumor include:

- A mass in the stomach area that can be felt.
- Swelling in the stomach area.
- Pain in the stomach area.
- Fever.
- Blood in the urine.
- Low red blood cell level, also known as anemia.
- High blood pressure.

Survival rates

Most children with this disease can be cured. Overall cure rates in the western world are more than 90%.

Challenges in our country

In our country the outcomes and survival is much less than developed countries due to late presentation, larger size at presentation, higher stage and more bulky disease at presentation and poor and inconsistent access to treatment.

Treatment

Treatment for Wilms tumor usually involves surgery and chemotherapy. It sometimes includes radiation therapy.

Surgery

Treatment for Wilms tumor may begin with surgery to remove all or part of a kidney. Surgery also confirms the diagnosis. The tissue removed during surgery is sent to a lab to learn whether it's cancerous and what type of cancer is in the tumor.

Surgery for Wilms tumor may include one of the following:

- **Removing part of the kidney.**
- **Removing the kidney and surrounding tissue.**

Chemotherapy

Almost all patients with Wilms Tumor need treatment with chemotherapy. The protocol and duration of treatment depends on the stage of disease, histology and degree of resection. Children tolerate the chemotherapy very well.

If given before surgery, chemotherapy can shrink tumors and make them easier to remove. After surgery, it can kill cancer cells that are left in the body.

Radiation therapy

Higher stage Wilms tumor need radiotherapy to the primary site (abdomen) and to the site of metastasis.



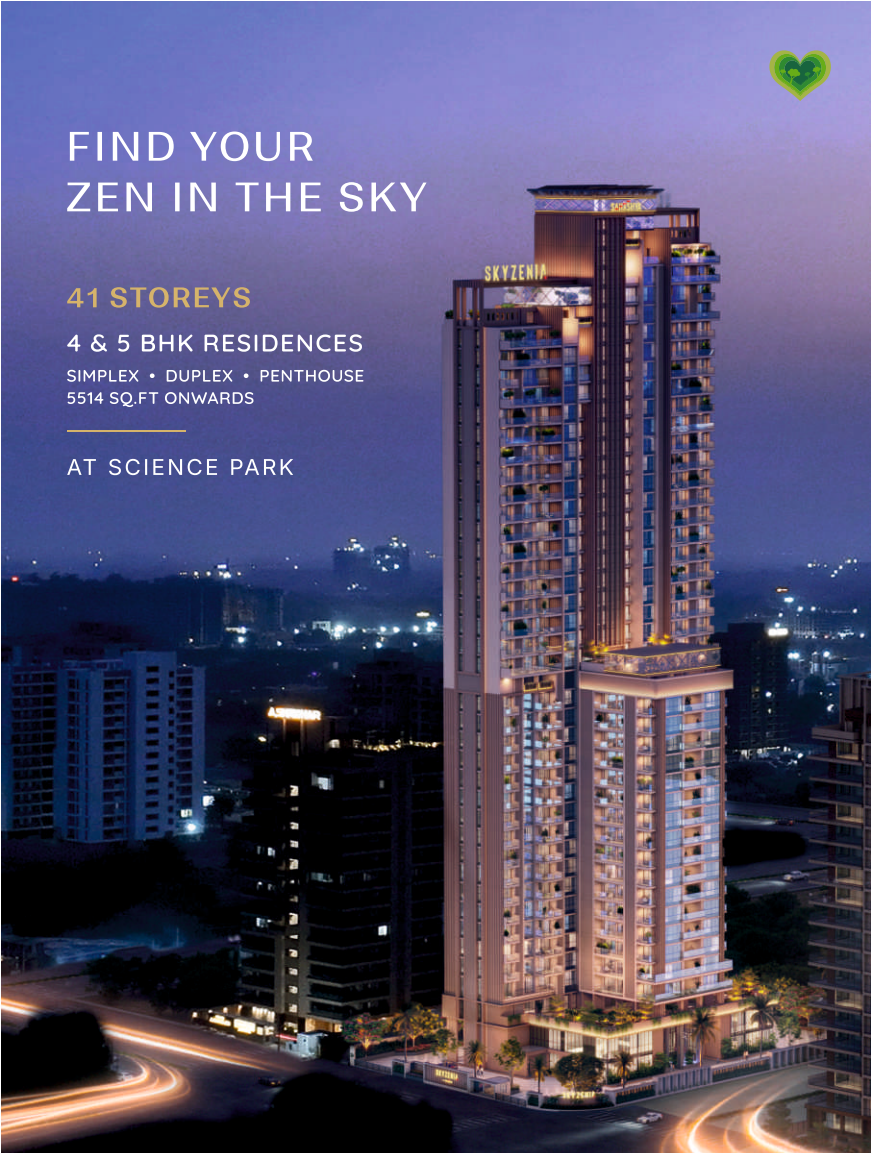
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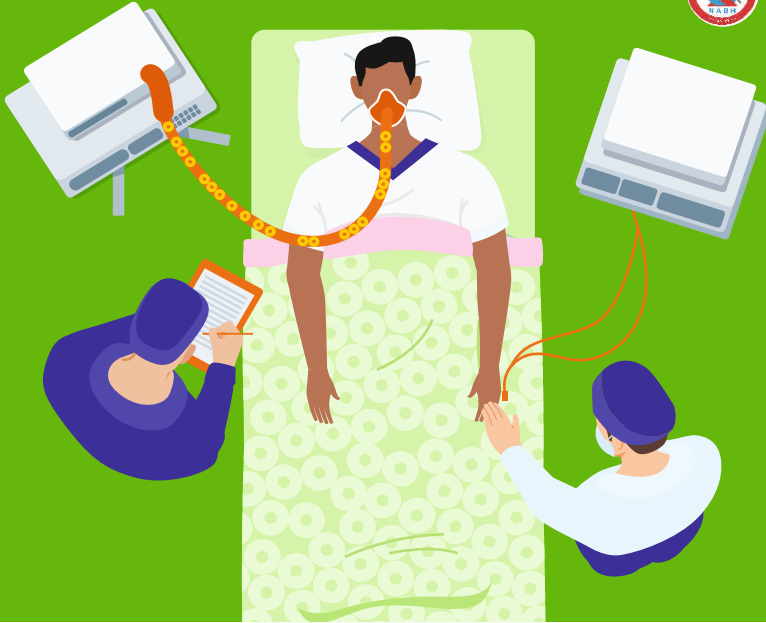
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