BRINGING BACK SMILES
AND A LOT MORE
How ECMO Technique saved the lives of two kids

REVERSE AGEING
Fight Ageing with Weekend Facelift
Dear Readers,

It is truly heartening to see that every month we are getting more articles and stories than we can possibly print in each edition. Our editorial team is working efficiently to get the best pieces to reach you.

The cover story this month is indeed very emotional and heartwarming. As you go through it, you will be acquainted with two adorable children who are today smiling and enjoying like any other child. Making use of the ECMO Technology and the expertise of our Paediatric team, we are happy to have played a substantial role in their lives after they were presented with serious lung infection. It is cases like these that give us satisfaction and encouragement to achieve greater heights.

Last month, continuing our international outreach program, we had signed MOUs with Jakaya Kikwete Cardiac Institute (JKCI), Dar Es Salaam, Tanzania and Republican Scientific Centre of Neurosurgery – Uzbekistan. We have also become the first Indian hospital to perform cardiac surgery and procedure at the Jakaya Kikwete Cardiac Institute (JKCI), Tanzania.

This will be the first issue where we are featuring a guest article by Dr. Pradeep P. Bhosale, Director, Arthritis and Joint Replacement Surgery from Nanavati Super Speciality Hospital, a member of our Radiant Life Care family. I know this is just the beginning and we can look forward to many such articles.

As always, we would be happy to receive your valued inputs and suggestions. You can write to the editorial team at editorial@blkhospital.com and continue to support us.

Wishing you all great health.

FROM
THE ED’S DESK

Naresh Kapoor
Executive Director
BLK Super Speciality Hospital
Weekend Facelift is an attractive alternative to surgical correction of ageing facial skin. The procedure rejuvenates the face for a fraction of the cost of surgery, with far less risk and recovery time. In fact, this is done as a day care procedure and does not even require hospitalisation.

**PROCEDURE**

What separates Weekend Facelift from Traditional Full Facelift is that incisions are kept to an absolute minimum. Many times there are no cuts involved in this procedure. Basically, there are two techniques used in Weekend Facelift which are:

- An endoscopic Weekend Facelift that uses three or more tiny incisions and a small camera, which the surgeon uses to find his or her way around the area under treatment. The surgeon is then able to reshape muscles and trim away excess skin with the help of a monitor.
- Non-endoscopic procedure is done with the help of barbed sutures which are strategically placed under the skin to give a subtle lift.

Many variants based on these two techniques exist. But it is best to consult your doctor who can decide which technique or combination of techniques will work best for you.

**RISKS**

The most common risks of Weekend Facelift are:

- Bruising
- Swelling
- Infection
- Allergies to the anaesthesia
- Excessive bleeding
- Clotted blood at the incision site
- Tumours in the abdomen and preventing growth of microscopic cells which are left behind.

Hyperthermic Intraperitoneal Chemotherapy (HIPEC) is instilled via a machine which circulates Chemotherapy solution in the peritoneal cavity at 42 Celsius for 60-90 minutes.

**THE PROCEDURE**

She underwent TAH + BSO + Pelvic and Para-aortic Lymphadenectomy + Peritonectomy + Supraaortic Omentectomy + extended right Hemicolectomy to achieve a CCO score followed by Hyperthermic Intraperitoneal Casplatin (HiPEC) for 90 minutes.

**THE RESULT**

She made steady post-operative progress, was discharged after two weeks and is now completing her remaining three Chemotherapy cycles. This procedure has considerably improved her chances of survival.
BRINGING BACK SMILES AND A LOT MORE

BLK Super Speciality Hospital recently treated children with severe Heart and Lungs disorder

THE CASE

A 15 month old boy and a 3 year old girl survived a critical condition of severe Heart and Lungs disorder. Baby Joy, the boy, was diagnosed with acute blood infection and congestion in his Heart while the girl named Naina had severe flu. This was made possible with the successful application and use of a life saving technique called ECMO or Extracorporeal Membrane Oxygenation. The unique ECMO technique mimics the artificial Lungs and pumps oxygenated blood to the Heart, thereby taking over the functions of the Lungs and Heart.

THE PROCEDURE

At the time of admission baby Joy was found with Septicemia and acute Respiratory Distress Syndrome or ARDS. He also had poor Heart function. In the case of Naina, she was going through acute breathing problems due to severe flu. Joy’s condition was critical, as his BP had plummeted to a scary low of 35 on maximum medication and ventilatory support at the outlying hospital. Since Joy’s pupils were incoherent, it indicated some disorder in the brain as well. Given the precarious condition in both the cases, the kids were transported by BLK’s team in a very critical state. An urgent call on the use of ECMO was taken, which is an extreme form of life support for such patients.

THE RESULT

After their successful treatment using ECMO, Joy and Naina started to recover soon afterwards. Joy’s Heart function recovered by 40% within 48 hours and Lung function started to show improvement after about a week. Naina also reported remarkable signs of improvement. ECMO was removed from both the kids after 10 days along with the ventilator. After careful observation, they were discharged, turning the worries of their parents into smiles.

The team of doctors at BLK were upbeat after the success they achieved in these two cases. While ECMO technology is present at many centers, its successful application has been an issue. Although, the use of ECMO in patients with Heart ailments was prevalent, its successful usage in life threatening medical conditions like that of Joy and Naina – Septicemia and ARDS – was rare.
Resurgence of Radical Perineal Prostatectomy
Cost Effective, Minimally Invasive Radical Prostatectomy by Perineal Approach

Incidence of Prostate Cancer is on the rise in the Indian sub-continent. According to the National Cancer Registry, 'Prostate' is the second leading site of Cancer among males in large Indian cities like Delhi, Kolkata, Pune and Thiruvananthapuram; third leading site of Cancer in cities like Bangalore and Mumbai and is among the top ten leading sites of Cancer in the rest of the population-based Cancer registries. There has also been a shift in the stage of diagnosis and now more and more patients are being diagnosed in the early curable stage.

Radical Prostatectomy is the current gold standard treatment for management of localised Prostate Cancer. It was traditionally performed by the Open Retropubic method RRP (Radical Retropubic Prostatectomy) and later by Laparoscopy. Now Robotic Assisted Laparoscopic Radical Prostatectomy is emerging as new standard of treatment for Prostate Cancer.

There is a resurgence of Radical Perineal Prostatectomy as a Minimally Invasive Surgery for Prostate Cancer. It has all the advantages of Robotic Surgery with equal surgical outcomes and the advantage of a Minimal Incision. The cost of Radical Perineal Prostatectomy (RPP) is one-fifth the cost of Robotic Surgery with no requirement of special equipment.

The functional outcome of RPP vs Robotic is essentially the same, though the latter claims to have better potency but substantial data is lacking. RPP was found to be the most cost effective with an easy learning curve when compared to RRP. We have operated three cases by Radical Perineal Prostatectomy wherein the operating time was three hours. During the operation no blood transfusion was required in any patient and the average hospital stay was for 4 days. We found negative margins in all cases and the patients attained continence within three months.

Hence, we can confidently conclude that Radical Perineal Prostatectomy is a safe, effective, minimally invasive and economical procedure with promising result and an equally better alternative to Radical Robotic Prostatectomy.

Bedridden youth walks again after Bilateral Total Hip Replacement

Ankylosing Spondylitis (similar group like Rheumatoid Arthritis) is a common condition in Asia. It affects mainly young males leading to complete closure of mobility of Spine and Hips. Hips are usually fused in deformed position of both the legs.

THE CASE
A 22-year old man had been suffering from ‘Ankylosing Spondylitis’ for the past 10 years and became bedridden in the last two years. He studied till high school but could not pursue further education due to his medical condition. Both his hips were fixed in 60 degree bent position with bony fusion having V movement.

THE PROCEDURE
The patient had approached Dr. Bhosale in Nanavati Super Speciality Hospital, Mumbai. On examination, it was found, his bones were soft and soft tissues around hips contracted in deformed position. Hence, there was a risk of injuring bones, blood vessels and nerves during surgery. When the hip is mobile, the surgery is easier. In this case, the bone had to be cut first because the anatomy was not very clear. Dr. Pradeep Bhosale performed the Bilateral Total Hip Replacement in a single stage with release of all tight structures.

THE RESULT
The patient’s hips have now become straight and mobile without any deformity. After nearly a decade, he has started walking straight with full weight bearing. Both the patient and his father were elated and expressed their gratitude to the doctor.

Advantages of Radical Perineal Prostatectomy:
- Easy access to Prostate – located close to skin
- Less discomfort
- Less operative time
- Rapid post-operative recovery
- Better visualisation of urethral dissection and anastomosis resulting in better urinary continence
- Less blood loss
- Beneficial for patients with previous abdominal / pelvic surgeries
BLK Super Speciality Hospital has signed a special pact with Republican Scientific Centre of Neurosurgery of Uzbekistan and Jakaya Kikwete Cardiac Institute (JKCI), Dar Es Salaam, Tanzania with an aim to develop educational, scientific and medical cooperation in various spheres. We have also become the first Indian hospital to perform cardiac surgery and procedure at the Jakaya Kikwete Cardiac Institute (JKCI), Tanzania.

We are indeed happy to enter into these partnerships. We shall promote exchange of professors for educational and scientific research programs, besides organising development of joint international projects and conducting research on areas of common interest.

Mr. Naresh Kapoor, Executive Director, BLK Super Speciality Hospital

Dr. Aditya Pradhan
Sr. Consultant, Urology, Andrology and Renal Transplant, BLK Centre for Renal Sciences and Kidney Transplant, BLK Super Speciality Hospital

The best known treatment for Renal Cancer is Radical Nephrectomy, although it can also be effectively treated by resecting the tumour while preserving the normal portion of the kidney. This gives equally good Oncological outcome without increasing the risk of chronic kidney damage. BLK Uro-Oncology Centre has utilised this concept of Partial Nephrectomy in many of its Kidney Tumour patients. We have given the benefit of Laparoscopy in this complex surgical procedure to most of our patients so that they have less pain in post-operative period and are able to resume their normal duties early.

A detailed compilation of 20 cases on Renal Tumours managed with Partial Nephrectomy were presented in the National Conference of Urology Society of India, USICON 2016. The findings of this study will possibly enhance surgical treatment and clinical outcome of patients with Renal Cancer.

Benefits of the surgery:
- Preservation of normally functioning Kidney portion
- Complete removal of Tumour

Most cases have been done Laparoscopically with preservation of good Kidney function in the operative Kidney. So far, there has been no Tumour recurrence, attesting to the fact that Partial Nephrectomy was able to save the Kidney and achieve the desired Oncological outcome.

MoU signed by Prof. Gayrat Kariev, Director, Republican Scientific Centre of Neurosurgery of Uzbekistan and Mr. Naresh Kapoor, Executive Director, BLK Super Speciality Hospital, New Delhi.

"BLK expands its Horizon Uzbekistan and Tanzania"

"Paradigm Shift in the Management of Renal Cancer"

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"BLK in NEWS"