



ASI Kerala Chapter NEWS LETTER

May 2014

For private circulation only



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FOCUS

Hi all,

It gives me immense pleasure to pen down these lines from the editor's desk of the ASI news letter. This happens to be the ninth edition of the news letter as well as the first under my editorship. I would like to thank Dr Padmakumar, the former editor for having set high standards for the news letter. I would also like to place on record my sincere thanks to all ASI members for having given me this opportunity.

2014, I believe, is going to be a year to reckon with in the history of National ASI as well as ASI Kerala Chapter. It's a moment of great pride for all members of the ASI Kerala Chapter, that its illustrious member Dr Santhosh John Abraham has been elected as the ASI President (Elect). Dr Santhosh would be taking over as the President of the ASI in December 2014. It's for the first time that a member from Kerala is being elevated to the highest post in the ASI.

After a long tumultuous period, the storm within the ASI seems to have settled for the good and under the able leadership of Dr Santhosh John Abraham and his team we are likely to see some quality changes in the ASI.

In all sense, it would mark a new beginning for the ASI. After having gone through some of the most difficult and troubled times, a group of sincere and dedicated

ASI members have fought back to see to it that serenity is restored within the organization. Under the guidance of Dr Santhosh and his team the Association would scale new heights and emerge victorious.

Dr Santhosh began his medical career at the Government Medical College Trivandrum. He did his MS from MCH Trivandrum and then went abroad to complete his fellowship in UK. After gaining a triple FRCS, he returned to Kerala and joined The Regional Cancer Centre, Trivandrum. Later he moved on to Lourdes Hospital Cochin and has thence continued there to evolve as one of the most respected surgeons of the state.

A surgeon par excellence, his administrative and oratorical skills are known to one and all. A diplomatic leader who excels in crisis, Dr Santhosh has seen the association through several troubled times. We believe that all these skills will come in handy when leading the organization in the future.

We wish him all the very best...

Once again thanking you

From the editor's desk.....

Madhu Muralee



Dr Santhosh John Abraham

AWARDS

RAGHAVACHARI ORATION



DR P G MOHANDAS

Prof. of Surgery, Calicut Medical College
Past Chairman ASI, Kerala Chapter

MOHANDAS MEMORIAL ORATION



DR MURALI VETTATH

Cardiothoracic Surgeon, MIMS, Calicut

SUSRUTHA AWARD



DR P RAJAN

Former professor, Calicut Medical College
Consultant Surgeon, BMH, Calicut

IMAGES FROM THE PAST

ASI PERIPHERAL MEET, KOVALAM



ASI TRIP, EUROPE



FORTHCOMING EVENTS

ABSICON 2014		<ul style="list-style-type: none"> • 3rd National Conference of the Association of Breast Surgeons of India • Date: 13th - 15th June 2014 • Venue: Resort I.T.C. Fortune, Panchwati, Kolkata
SELSICON 2014		<ul style="list-style-type: none"> • Society of Endoscopic & Laparoscopic Surgeons of India • Date: 18th - 21st September 2014 • Venue: Bhubaneswar
NATCON-IASO 2014		<ul style="list-style-type: none"> • Date: 18th - 21st September 2014 • Venue: Leela Palace, Chennai • For details: www.natconias2014.org • Contact: natconiaso2014@gmail.com
ACRSICON 2014		<ul style="list-style-type: none"> • 37th National Congress of The Association of Colon and Rectal Surgeons of India • Date: 26th - 28th September 2015 • Venue: Sanjay Gandhi Post Graduate Institute of Medical Sciences, Lucknow-226014, India • For details: www.acrsicon2014.org
IASGCON 2014		<ul style="list-style-type: none"> • Indian Association Of Surgical Gastroenterology • Date: 2nd October - 5th October 2014 • Venue: Gujarat University Center, Ahmedabad • Organizing Secretary: Dr. Sanjiv Haribhakti
IAESCON 2014		<ul style="list-style-type: none"> • 15th Annual Conference of Indian Association of Endocrine Surgeons • Date: 10th - 12th October 2014 • Venue: Isola Dicoco, Poovar • For details: www.iaescon2014.com
ASICON 2014		<ul style="list-style-type: none"> • The 74th annual conference of the association of surgeons of India • Date: 26th - 30th December 2014 • Venue: Hyderabad International Convention Center Hitex, Hitech City, Hyderabad • For details: www.asicon2014.com



Kappad Beach, Kozhikode

CALICUT CALLING

KASICON 2014

A warm Welcome from the Kingdom of Zamorins. The 37th annual conference of ASI Kerala Chapter, KASICON 2014, is being organised jointly by the Dept. of General Surgery, Govt. Medical College Kozhikode & The Calicut Surgical Club on the 9th, 10th and 11th of May 2014. The Programme is open for all leading faculties, junior consultants and post graduate students in the field of General Surgery. Hope you all enjoy the "KOZHIKODDAN HOSPITALITY".

JOURNAL WATCH

(Some Recent Interesting Surgical RCT's)

Final trial report of sentinel-node biopsy versus nodal observation in melanoma - MSLT GROUP

(N Engl J Med, February 13, 2014)

- > 2001 patients with node negative primary cutaneous melanomas were randomly assigned to undergo nodal observation, and delayed lymphadenectomy for nodal relapse (observation group), or sentinel-node biopsy, with immediate lymphadenectomy for nodal metastases detected on SLNB (biopsy group).
- > 10-year disease-free survival rates were significantly improved in the SLNB group, as compared with the observation group, among patients with intermediate-thickness melanomas and those with thick melanomas.
- > **Conclusions:** SLNB based staging of intermediate-thickness or thick primary melanomas provides important prognostic information and identifies patients with nodal metastases who may benefit from immediate complete lymphadenectomy. SLNB based management prolongs disease-free survival for all patients and prolongs distant disease-free survival and melanoma-specific survival for patients with nodal metastases from intermediate-thickness melanomas.

STAMPEDE TRIAL

(N Engl J Med, March 31, 2014)

- > 150 obese patients with uncontrolled type 2 diabetes were randomised to receive either intensive medical therapy alone or intensive medical therapy plus Roux-en-Y gastric bypass or sleeve gastrectomy.
- > **Results:** At 3 years, better glycemic control (glycated hemoglobin level of 6.0% or less) was seen in 38% of those in the gastric-bypass group and 24% of those in the sleeve-gastrectomy group, whereas it was seen only in 5% of the patients in the medical-therapy group.
- > **Conclusions:** Intensive medical therapy plus bariatric surgery resulted in glycemic control in significantly more patients than did medical therapy alone. Analyses of body weight, use of glucose-lowering medications, and quality of life, also showed favorable results at in the surgical groups, as compared with the group receiving medical therapy alone.

Radical prostatectomy or watchful waiting in early prostate cancer

(N Engl J Med, March 6, 2014)

- > In this RCT, 695 men with early prostate cancer were randomly assigned to watchful waiting or radical prostatectomy.
- > This study showed that there was an absolute difference of 11.0 percentage points in favour of surgery.
- > The benefit of surgery was largest in men younger than 65 years of age and in those with intermediate-risk prostate cancer. Radical prostatectomy was associated with a reduced risk of metastases as well.

AN INTERESTING TRIAL

RANDOMIZED CLINICAL TRIAL ON THE EFFECT OF COFFEE ON POSTOPERATIVE ILEUS FOLLOWING ELECTIVE COLECTOMY

- > Postoperative ileus is a common problem after abdominal surgery.
- > Coffee intake would decrease postoperative ileus after colectomy.
- > Patients with malignant or benign disease undergoing elective open or laparoscopic colectomy were assigned randomly to receive either coffee or water after the procedure (100 ml three times daily).
 - > The primary endpoint was time to first bowel movement; secondary endpoints were time to first flatus, time to tolerance of solid food, length of hospital stay and perioperative morbidity.
 - > The time to first bowel movement was significantly shorter in the coffee arm than in the water arm.
 - > The time to tolerance of solid food and time to first flatus showed a similar trend
 - > **Conclusion:** Coffee consumption after colectomy was safe and was associated with a reduced time to first bowel action.

