

Healthy Heart

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From the desk of Honorary Editor:



We, at Care Institute of Medical Sciences (CIMS), are passionate to improve Human health by imparting a healing touch through quality care and latest technologies in world of health care. We have a vision of creating a virtually Amputation free world, and our mission is to provide the finest quality of life to the patients by salvaging their limbs and extending their lives. We are proud to

launch a Comprehensive Endovascular Department at CIMS Hospital with a team of endovascular specialists, surgeons, and interventional specialists, physio therapist, dietary department, diabetic foot care, first of it's kind in our part of the world in a single group of doctors.

Working together as a unified, patient centered team, our health care professionals specialize in minimally invasive endovascular surgery to repair peripheral vascular disease (PVD) a condition wherein the arteries that carry blood to the arm, legs, brain, kidneys, carotids or in fact any part of the body become narrowed or dilated, or even disturbances in veins including varicose veins, obstruction, fistulas etc., In this era, we are witnessing the upsurge of Heart Diseases, Diabetes and other concomitant clinical conditions by which the quality of life and abilities to function get compromised. Through CIMS Healthy Heart, we aim to make people aware of Peripheral Vascular Disease (PVD).

Due to various risk factors, PVD is highly prevalent the world over including India. As PVD affects various parts of human body it can cause stroke, pulmonary embolism, amputation, heart attack and death. This issue emphasizes various available treatment options for endovascular diseases.

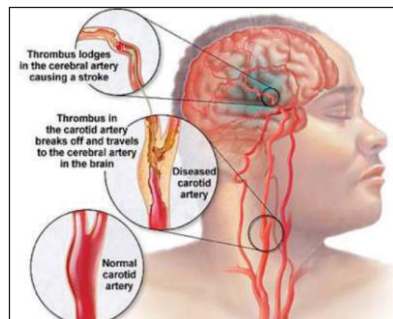
CIMS Interventional Vascular Team have the expertise and experience in diagnosing and treating common, complex and rare vascular diseases to diagnose and treat any vascular condition. Feel free to call any of us listed below for your vascular patients.

- Dr. Keyur Parikh

CIMS Care for the Circulatory System

PVD & YOUR BRAIN (CAROTID ARTERY DISEASE)

We have one carotid artery each on the either side of the neck, which supplies blood to the brain. Narrowing of carotid artery due to Fatty deposits – plaque



buildup (Atherosclerosis) is known as carotid artery disease.

Risk Factors for Carotid Artery Disease

- ◆ Family history of atherosclerosis (build-up of plaque in the peripheral, coronary or carotid arteries)
- ◆ Age (men have a higher risk before age 75, women have a higher risk after age 75)
- ◆ Smoking
- ◆ Hypertension
- ◆ Peripheral or coronary artery disease
- ◆ Atrial fibrillation
- ◆ Diabetes
- ◆ Inactive lifestyle
- ◆ High cholesterol, and especially high amounts of "Low Density Lipoprotein" (LDL)

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The atherosclerosis in the carotid artery causes stroke in either of the following ways.

1. Plaque buildup narrows the blood vessel so that the flow of blood to the brain is blocked.
2. The plaque or blood clots formed on the plaque embolize (break off) and travel to a smaller artery in the brain, resulting in a blockage of that artery.

In either case, artery becomes blocked and the brain does not receive enough blood. That causes ischemic stroke called TIA (Transient Ischemic Attack). TIA has similar symptoms to stroke, but it is temporary.



Stroke occurs in over 1 million people a year in India. About 300,000 - 500,000 patients die each year from stroke-related causes.

Symptoms of Stroke or TIA

During a stroke or TIA, the blood flow to the brain is interrupted. Symptoms of stroke and TIA are very similar and depend on the area of the brain affected, how long the symptoms last, and the amount of the injury.

Common signs and symptoms of a stroke or TIA may include:

- ◆ Sudden numbness or weakness of the face, arm or leg, especially on one side
- ◆ Sudden confusion or dizziness
- ◆ Sudden trouble in speaking or understanding
- ◆ Sudden trouble seeing in one or both eyes
- ◆ Sudden trouble in walking, loss of balance or coordination
- ◆ Sudden, severe headache with no known cause
- ◆ Sudden trouble in swallowing

If the symptoms go away within 24 hours or so, this may be due to a TIA. But be aware that TIAs are an extremely important stroke warning sign.

The blocked arteries found in people with Carotid Artery Disease can be an indication of blocked arteries in the heart and brain. Thus, Carotid Artery Disease greatly increases risk of heart attack, stroke and death.

Diagnosis of Carotid Artery Disease

CAD can be diagnosed by listening with a stethoscope to the artery in the neck. If the artery is narrowed, one can hear the blood rushing. This abnormal sound is called a bruit. Carotid artery disease can be diagnosed by using one of the following imaging techniques.

Carotid duplex ultrasound imaging

The stenosis can be easily detected with an ultrasound probe placed on the side of the neck near the carotid arteries. This method uses sound waves to create images of the artery and the blood flowing through it.

Carotid angiography

This is an X-ray picture of the carotid artery, which is obtained by putting a dye into the arteries (contrast agent) that shows up on X-ray. The dye is injected by a small tube (catheter) that is inserted through the groin into the carotid artery. This will give more detailed picture of the location and size of any narrowing in your arteries.

Computerised Tomography (CT scan)

Stroke is suspected, may be needed a CT scan of the head. The test produces a series of cross-sectional X-rays of the head and brain.

Magnetic Resonance Imaging (MRI)

This method takes images of the arteries using powerful, but harmless magnetic fields.

Treatment of Carotid Artery Disease

It is not possible to totally prevent the occurrence of carotid artery disease or alter the part family history plays in its development. However, the following changes to the lifestyle may reduce the risk of stroke.

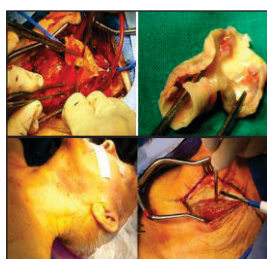
Lifestyle Modifications

Active steps, to stay healthy:

- ◆ Quit smoking / consuming tobacco products
- ◆ Control high blood pressure and diabetes
- ◆ Regular check-ups with doctor
- ◆ Maintain a diet of foods low in saturated fats and cholesterol
- ◆ Monitor and control of lipids levels (good vs. bad cholesterol levels)
- ◆ Achieve and maintain a desirable weight, including regular exercise
- ◆ Properly control other physical ailments, such as atrial fibrillation and heart disease.

Vascular surgery

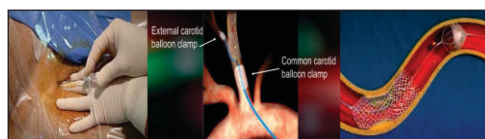
In the past, surgery was the only procedure available to treat severe carotid artery disease. When surgery is required, the surgeon removes the plaque that caused the carotid artery to narrow. This procedure is called carotid endarterectomy.



Stenting

Angioplasty may be recommended together with the placement of an intravascular stent in the artery. An intravascular stent is a fine wire mesh tube that is introduced into the artery. The stent is then gently expanded to open

the vessel, restore blood flow, and relieve symptoms. The stent will slowly become part of the artery. The lining of the artery will slowly grow over the stent, permanently incorporating it into the artery wall.



Stent implantation is performed in a hospital suite equipped with X-ray imaging (catheter laboratory) to enable to see where to place the stent in the artery.

The procedure uses a stent (small latticed metal tube) to open partially blocked arteries and to hold the plaque against the artery wall.

The stent is made from nickeltitanium, a metal that is bendable but springs back into its original shape after being bent. An embolic protection device is also used to help catch any pieces of plaque or other particles that may be released during the procedure. The stent is introduced into the narrowed blood vessel on a catheter, after an embolic protection device has been placed beyond the narrowed area of the artery. The stent is maneuvered on a catheter into the vessel, and is positioned across the narrowed area in the carotid artery. The stent is released and stays in place permanently, holding the artery open and improving blood flow. The stent also holds the plaque against the artery wall. This reduces the risk of plaque

breaking off, traveling into the brain, and causing a stroke. All of the devices, except the stent, are taken out of the body at the end of the procedure.

Following a stent procedure, many patients can go home the day after the procedure as it is a non invasive treatment like surgery that requires longer recovery.

CIMS Varicose Veins Programme

Varicose veins has long been the commonest and most neglected clinical entity with a huge disease burden affecting the quality of life of millions of Indian people. With recent advances in diagnostic work up and therapeutic modalities like RF ablation, we, at CIMS hospital have developed **CIMS Varicose Veins Program** and successfully treated huge number of patients. We would like to enlighten the doctors of not only Ahmedabad, but the whole of Gujarat about varicose veins and request you to support us in successfully treating the chronically suffering patients.

What are varicose veins?

Varicose veins are enlarged veins that are visible through the skin and may appear



as blue or purple twisted, knot-like cords. Varicose veins can occur anywhere in the body, but are more commonly found on the legs.

What are spider veins?

Spider veins, a milder type of varicose veins, are smaller than varicose veins and often look like a sunburst or "spider web." They are red or blue in color and are commonly found on the face and legs, just under the surface of the skin.

What causes varicose veins?

Obesity, genetic predisposition, prolonged standing, previous DVT, etc.

What are the symptoms of varicose veins?

Leg ache, itching, skin pigmentation, cosmetic blemish, edema, venous ulcers

Diagnosis : Detailed clinic examination followed by venous doppler scan

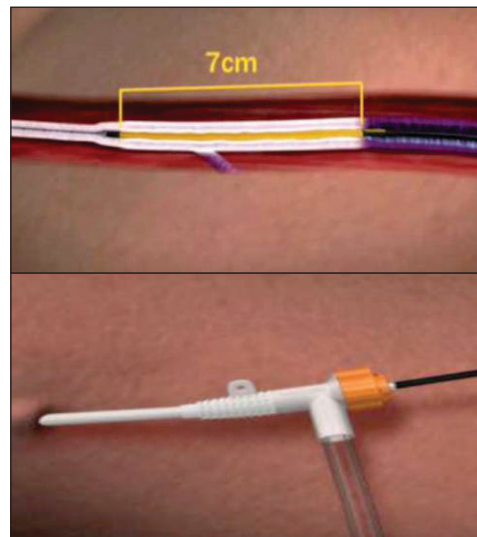
Treatment Options :

Non-surgical : Compression stockings and Microflavonoids

Surgical : Surgical stripping, foam sclerotherapy, radio frequency ablation, multiple hook phlebectomies

VNUS Closure ablation using RF

Ablation involves the insertion of a thin, flexible tube called a catheter inserted into a varicose vein. The tip of the catheter heats the walls of the varicose vein using radiofrequency energy (also known as Closure procedure) and destroys the vein tissue. Once destroyed, the vein is no longer able to carry blood and is absorbed by the body.



Sclerotherapy :

Sclerotherapy is the most common treatment for both spider and varicose veins. This procedure involves a saline or chemical solution that is injected into the varicose veins that causes them to harden so that they no longer fill with blood. Blood that would normally return to the heart through these veins returns to the

heart by way of other veins. The veins that received the injection will eventually shrivel and disappear. The scar tissue is absorbed by the body.

Ambulatory Phlebectomies :

This procedure involves passing hooks through small incisions, and may be done alone or together with vein stripping.

Below is a checklist to determine risk for PAD suddenly:

- Foot, calf, buttocks, hips or thigh discomfort when walking that goes away with rest
- Skin wounds or ulcers on feet or toes that are slow to heal (8-12 weeks)
- Diabetes
- Smoking
- High blood pressure
- Abnormal cholesterol
- Over the age of 50

The more checkboxes selected, the greater is the risk for PAD.

With proper treatment and lifestyle changes, the quality of life may be improved along with lowering the risk for heart attack, stroke, amputation or early death.

Courtesy

Dr. Keyur Parikh

MD (USA) FCSI (India) FACC, FESC, FSCAI
Interventional Angiologist
Interventional Cardiologist

Dr. Hemang Baxi

MD, DM (Cardiology)
Interventional Cardiologist

Dr. Srujal Shah

MS, MCh
Consultant Vascular & Endovascular Surgeon

RDN - Renal Denervation for the first time in India at CIMS Hospital, Ahmedabad

- Catheterization-based intervention to treat patients with refractory hypertension
- The mechanical destruction with high frequency ablation of renal sympathetic fibers, which can be easily accessed via the renal artery. But this procedure is only valid for patients suffering from primary hypertension.
- With this achievement, CIMS becomes the first hospital in India to implement such procedure on hypertension patients.



Standing: Dr. Deepak Desai, Dr. Anish Chandarana, Dr. Hemang Baxi, Dr. Keyur Parikh & Dr. Bhagyesh Shah
Sitting: Patient-1, Patient-2, Patient-3, Patient-4 (with permission)

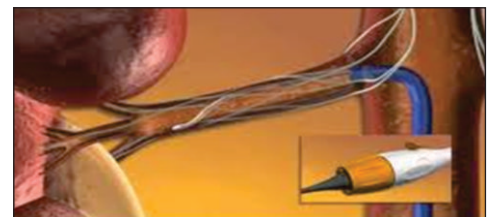
If you have eligible patient having Systolic Blood Pressure > 160 and who are already on 3 or more anti hypertensive medicines including one diuretic, Any one of our cardiologist will see the patient complimentary

This is the first instance in India, when a patient is treated with this minimally invasive therapy, under DCGI approval.

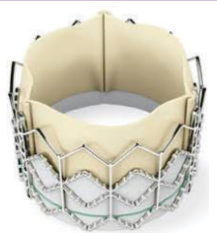
A Known Case of Uncontrolled Hypertension, Treated Successfully by Renal Denervation System (RDN)

Case Presentation (4 cases) : A 44 year old male patient is a known case of hypertension undergoing medical treatment since last 10 years. In spite of being on stable antihypertensive medication regimen of 4 drug classes, the patient's BP was uncontrolled, over 160/90. Other 3 cases were similar.

All causes of secondary (other) hypertension were ruled out & the patient was diagnosed as a case of primary severe hypertension. 3 other similar patient including two women were selected. They were offered to participate in Symplicity Renal Denervation and informed consent was given by the patient to undergo the procedure under supervised setting.



Diagnosis and Management : All were admitted on 22 Oct 2013 for planned RDN. Their pre-procedure BP measurement was over 160/90. mmHg. After routine investigations, the RDN procedure was performed under awake analgesia to all 4 patients. Access was obtained from right groin and both renal arteries was treated. The Symplicity Renal Denervation System was used which consists of a small steerable treatment catheter and an automatically-controlled treatment delivery generator using very safe radiofrequency waves. The treatment is minimally invasive; does not require open surgery and it typically takes 40–60 minutes. The procedure “calms” the nerves of kidney blood vessels and is performed under local anesthesia. There were no complications & all patients were, walking around on the very next day and ready to go home.



Aortic Valve Repair Workshop First time in Gujarat

Aortic Aneurysm Surgery Workshop

January 11-12, 2014

By world renowned faculty

Dr. Meong Gun Song (South Korea)
Dr. Vinayak Bapat (U.K.)
Dr. Anil Bhan (Medanta Hospital, India)

Patients who are suffering from Aortic Valve Disease, Aortic Aneurysm or any valve disorder

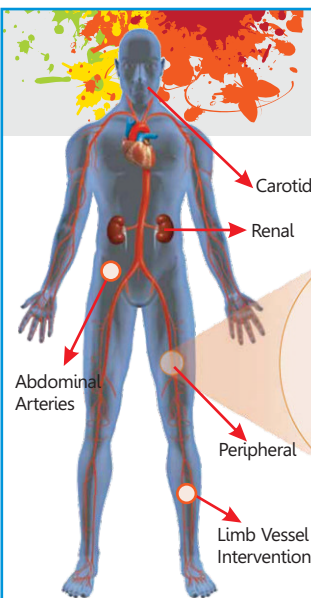
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Daily screening camp of the concerned patients is being held from
October 1, 2013 onwards at CIMS Hospital. Time : 2.00 pm - 6.00 pm

For appointment call :
+91-79-3010 1200
+91-79-3010 1008

You may call any of our CIMS Cardiac Surgeon listed above with prior appointments



Endovascular Peripheral Workshop by CIMS and Renowned International Team

CIMS Team has done over hundreds of Endovascular cases including a very large number of carotid interventions over the last few years.

January 9-10, 2014

Patients who are eligible :

- Carotid artery stenosis
- Renal artery stenosis
- Acute limb ischemia
- Critical limb ischemia
- Varicose Veins
- Dialysis access procedures
- Pulmonary embolism
- Thoracic outlet syndrome
- Uterine fibroids
- Vascular malformations
- Venous insufficiency and venous ulcers
- Claudication
- Aortoiliac occlusive disease
- Femoropopliteal disease
- Brachiocephalic arterial disease
- Venous thromboembolic disease
- Thoracic abdominal aortic aneurysms
- Mesenteric disease
- Catheter-based interventions for failing hemodialysis accesses
- Infrapopliteal peripheral arterial disease
- Intracranial arterial stenotic disease
- Vertebral arterial disease

Patients will be provided following FREE services:
1. Consultation 2. ABI 3. Doppler (Arterial or Varicose Veins - if indicated)

You may call any of our CIMS Cardiologists or Vascular Surgeons listed on the front page

Daily screening camp of the concerned patients is being held from October 1, 2013 onwards at CIMS Hospital. Time : 2.00 pm - 6.00 pm

Organized by



***Appointment is essential for screening. Call on +91-79-3010 1008/3010 1200**

CIMS Hospital : Nr. Shukan Mall, Off Science City Road, Sola, Ahmedabad-380060.

JIC 2014 Registration Form

Cheque or DD's to be made A/C payee and in the name of 'CIMS Hospital Pvt. Ltd.' Kindly mail the registration form along with the cheque/DD to our office. All Cash Payments are to be made at 'CIMS Hospital, Ahmedabad' only.

Module	Before 31-12-2013	Spot Registration (After 31-12-2013)
Full Conference (January 10-12, 2014 - including Special Tracks)	<input type="checkbox"/> ₹ 7000	<input type="checkbox"/> ₹ 9000
For IMA/AMA Members only	<input type="checkbox"/> ₹ 5000*	<input type="checkbox"/> ₹ 9000
Special Tracks (January 11-12, 2014)	<input type="checkbox"/> ₹ 3500	<input type="checkbox"/> ₹ 4000
For IMA/AMA Members only	<input type="checkbox"/> ₹ 1500*	<input type="checkbox"/> ₹ 4000
** Deposit for Hotel Accommodation (Separate cheque)	<input type="checkbox"/> ₹ 3500	<input type="checkbox"/> ₹ 3500
For students doing MD (Medicine) with proof	<input type="checkbox"/> ₹ 1000	<input type="checkbox"/> ₹ 3000
Spouse Hotel Registration (Non- refundable)	<input type="checkbox"/> ₹ 3500	<input type="checkbox"/> ₹ 3500
Foreign Delegates	<input type="checkbox"/> \$ 500	<input type="checkbox"/> \$ 600
Foreign Delegates (For AAPI Members only - Pay Pal or Spot)	<input type="checkbox"/> \$ 200	<input type="checkbox"/> \$ 200
In case of cancellation	<input type="checkbox"/> 50 %	<input type="checkbox"/> 100 %

** Hotel Accommodation is optional. If you have applied for accommodation, please send a separate deposit cheque of ₹ 3500 to cover the cost of your stay for two nights. Spouse hotel registration will be charged extra. Students also need to pay for Hotel Accommodation at the same rate.

***Discounted registration for IMA/AMA Members only till November 30, 2013**
Please submit your IMA/AMA Registration No. to avail this discount

Please note that it is mandatory to provide all the information. Please fill in all fields in CAPITAL LETTERS

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Annual Scientific Symposium

JIC 2014
Joint International Conference

January 10-12, 2014

in association with
American Association of
Physicians of Indian Origin (AAPI)



Venue Gujarat University Convention Centre ♦ The Grand Bhagwati ♦ CIMS Hospital, Ahmedabad

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