

KASHMIR HEALTH LINE

TOWARDS A HEALTHIER PARADISE

Vol 2 (2)

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ISSUE FOCUS

HISTORY OF MODERN HEALTHCARE IN KASHMIR 2

The Post-Independence Era

DIRECTORATE OF HEALTH SERVICES KASHMIR

Welcome



Mr Manoj Kumar Dwivedi B.Tech, IIT, Delhi IAS 1997 has served in J & K in various capacities like District Collector /District Development Commissioner, Director in Education, Rural Development & Employment Departments and CEO of Shri Mata Vaishnodevi Shrine Board J & K E- Governance Agency and J & K Renewable Energy Development Agency during 15 years of his stay here.

In November 2010, Mr Dwivedi was promoted to ranks of Secretary to the Government. Mr. Dwivedi with vast and intense administrative experience

of governance and public service delivery in Indian context has recently taken over as the Secretary to the Government Health and Family Welfare Department. He looks after Health, Family Welfare, Medical Education and National Rural Health Mission in Jammu and Kashmir.

Mr Dwivedi is life member of Indian Institute of Public Administration and is Executive Member of J&K Chapter of IIPA. He is keen facilitator of Good Governance and reforms in Public Policy and Public Administration.

Logical Meaning of Medical Logo



Courtesy: SM Kadri

COVER STORY

History of Modern Healthcare in Kashmir 2

The Post-Independence Era

In 1947 the State Medical Services comprised 2 hospitals and 87 dispensaries. All peripheral health institutions were taken over by the Directorate of Health Ser-

specialized Obstetrics & Gynaecology hospital named the Lal Ded Hospital. It has been the main maternity hospital of Kashmir since the Ob-

cal college was started at Hazuri Bagh on the banks of Jhelum river at the site of the present Lal Ded Hospital in 1959.

The Government Medical College Srinagar



Kashmir Nursing Home

vices Kashmir in the post-independence era. By 1964, there were 32 hospitals and 429 dispensaries.

Presently the Directorate of Health Services manages 12 District Hospitals, 43 Sub-District Hospitals, 345

Primary Health Centres, and 1249 sub-centres in rural districts of Kashmir. In Srinagar City, the Directorate runs the Jawahar Lal Nehru Memorial Hospital (JLNM), Gousia Hospital and Kashmir Nursing Home. Specialized institutions like Trauma Hospitals are also being developed along the national highway.

The Medical Education Department runs the Government Medical College and its Associated Hospitals in Srinagar city.

Government Leprosy Hospital

The former State Hospital building at Hazuri Bagh was converted into a 100 Bed

stetrics & Gynaecology services in SHMS Hospital were shut down in the 1970's.

A Government Hospital for Children was set up adjacent to the Lal Ded Hospital.



Government Leprosy Hospital

Government Psychiatric

Diseases Hospital prior to the 1960s, the State was granting loans to 40-50 medical students every year to study at other medical colleges in India. The first medi-

cal college was started at Hazuri Bagh on the banks of Jhelum river at the site of the present Lal Ded Hospital in 1959. The Government Medical College Srinagar

was later shifted to the present day location in Karan Nagar and was inaugurated by Bakshi Ghulam Mohammed, then Prime Minister of the State of Jammu and Kash-

mir, on 25th August 1961.

The State or SMHS Hospital in Karan Nagar became the flagship Associated Hospital of hospital of the Government Medical College Srinagar. The Mission Hospital

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Sher-i-Kashmir Institute of Medical Sciences (SKIMS)



Sheikh Mohammed Abdullah

The visionary founder of the Sher-i-Kashmir Institute of Medical Sciences (SKIMS)

in Drugjan was converted into the present day Government Chest Diseases Hospital. Government Psychiatric Diseases Hospital (Institute of Mental Health & Neurosciences Kashmir) was started at the site of the old asylum near the Srinagar Central Jail.



JLNM Hospital, Rainawari

In the 1980s Orthopaedic services were shifted from the SMHS Hospital to the new Bone & Joint Hospital in Barzulla and the Government Dental College in Srinagar was started in 1980.

The Sher-i-Kashmir Institute of Medical Science (SKIMS) was set up in 1982 by Sheikh Mohammed

Abdullah, then Chief Minister of J&K, as a tertiary health care institute focused on research, post - graduate medical education and advanced patient care.

The state government took over the private Jehlum Valley College of Medical Sciences in 1998 as the under-graduate medical college of SKIMS. It is now known as the SKIMS Medical College.

The erstwhile missionary CEZMS Hospital

at Rainawari has evolved into the Jawaharlal Nehru

Memorial Hospital under the management of the Directorate of Health Services. This multi-speciality institution is the flagship hospital of the Directorate and is being developed as a super-speciality apex hospital. All District Hospitals and smaller health institutions are being extensively upgraded. Prototype hospital designs conforming to international hospital-design guidelines have been developed by K-RICH, an in-house modernization team. Construction based on these prototype designs has already started in the district headquarters of Bandipora and Kargil and smaller hospitals across the region.

Institution in focus

State TB Demonstration Centre



State TB Demonstration cum Training Centre, Dalgate in the premises of Chest Disease Hospital

State TB Demonstration cum Training Centre is a State level training institute, providing training to medical and paramedical staff in addition to under graduates and post graduates of various medical colleges of the valley. This institute has so far trained thousands of doctors and paramedics under National TB Control Programme and since 2004 under Revised National TB Control Programme [RNTCP]. Besides trainings this centre is a nodal agency for monitoring and supervision of RNTCP of J&K State. In addition this institution hosts Intermediate Reference Laboratory [IRL] for Kashmir & Ladakh division of J&K State to undertake different activities of RNTCP which are as :-

1. Over all supervision and monitoring of External Quality Assurance [EQA] activities of the districts.
2. The IRL ensures the proficiency of staff in performing smear microscopy activities by providing technical

training to districts and sub-district laboratory technicians and senior TB Laboratory supervisors [STLS's]. This IRL undertakes onsite evaluation and panel testing of all the districts in Kashmir & Ladakh Division at-least once in a year.

3. Mycobacterium culture and DST.

Most peripheral laboratory under the RNTCP network is the DMC which serves a population of around 100000 [50000 in tribal and hilly areas]. At present there are 91 DMC's in Kashmir and Ladakh Division. Newer and rapid technologies are being introduced globally that would enhance the diagnostic capacity for multi-drug resistant TB [MDR-TB] and cut short the turnaround times from 4 months to 2 hours. RNTCP has initiated projects to validate and demonstrate large scale studies newer TB diagnostic technologies in collaboration with foundation for innovative new diag-

nostics [FIND] India

1. *Molecular line probe assay [LPA]*
2. *Automated liquid culture system for C&DST*
3. *Gene Xpert MTB /RF*

These newer technologies are on cards for IRL Srinagar as well.

Presently there is not a single accredited laboratory for Culture & Drug Sensitivity Testing of Mycobacterium TB in J&K State. Patients have to get C&DST done from private laboratories outside Kashmir which costs about Rs. 5000-10000 per test. Patients who are MDR suspects and registered with District TB Officers of various districts have to send samples to National TB Institute [NTI] Bangalore which is a tedious process as we need to transport samples in cold chain. In spite of all the precautions taken for transportation many samples are being lost [either by leakage or by contamination]. The Government of J&K in collaboration with Central TB Division were kind enough to establish state of art for Culture Drug Sensitivity Laboratory at STDC Srinagar which is fully equipped with all the modern technological tools necessary for undertaking conventional C&DST of mycobacterium for TB. [Solid LJ Media].

Achievements in 2011-12

- ✓ Line Probe Assay [LPA]
- ✓ Liquid Culture
- ✓ Xpert MTB/RIF
- ✓ LED Microscopy etc was completed on war footing as per the CTD approved plan.
- ✓ Provision for uninterrupted Power Supply [Generator & on-line UPS procured and installed].
- ◆ Pre-accreditation visit of Central TB Division [CTD]

CTD visited this centre on 20th Feb'2011 and on their advice C&DST for accredita-

tion was started so as to get this IRL accredited as early as possible.

◆ Future Plans

To make this State level Training Institution at par with other training institutions of the country, some more positive steps

need to be taken

1. Creation of hostel facility for 20-25 trainees.
2. Providing Audio- visual training aids in the form of
 - ★ LCD projectors

- ★ Laptops,
- ★ Projecting microscope
- ★ Teaching Head microscope with LCD projector for projection microscopy

Valued Employees



Dr Omar Akhtar

MS, DNB, MRCS, F.MAS

Dr Omar Akhtar is a dynamic and efficient young surgeon specialist who is rendering exemplary services at PHC, Dangiwach. He also has a key role in initiating proposal for DNB courses in major hospitals of Directorate of Health Services.

Syed Ashiq Hussain

Conducted 133 deliveries in 11 months at MAC Podshahi Block Sogam, Kupwara

Mumtaza

FMPHW

Conducted 26 deliveries at Huri SC, Dachi, Baramulla

NewsMakers

JLNM conducts first knee replacement surgery in valley

For the first time in Kashmir valley, total knee replacement surgery was performed at Jawahar Lal Nehru Memorial Hospital in June 2012. A team of doctors headed by Dr. Irshad Tabassum, Orthopaedic surgeon at JLMN hospital, conducted a total knee replacement surgery in a patient named Ghulam Mohammad Bhat of Alastang Bakura and replaced his left knee. The patient has been discharged from hospital and is keen to undergo the same surgery on his right knee also.



Second Twin delivery at Sub center Dawhtoo Block Sallar Anantnag

Sub Center Dawhtoo of Block Sallar District Anantnag is conducting normal Deliveries since June 2011. The sub center is located in dense forests of Pahalgam.

Notable Surgeries at District and Sub District level hospitals



Surgery 1:

Malignant metastatic clear cell carcinoma from renal cell carcinoma for which pt was operated some time back .

Institution : SDH , Bijbehara , District Anantnag

Team Members: Dr G N Lone , Dr Nasir A Malik, Shabir, Iqbal, Javid and Gulzar.



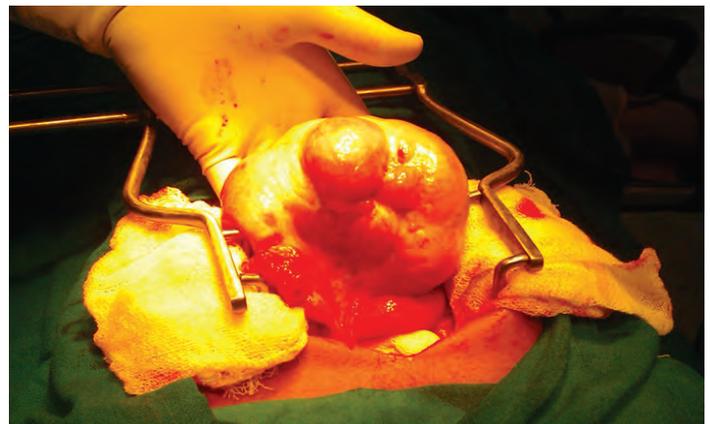
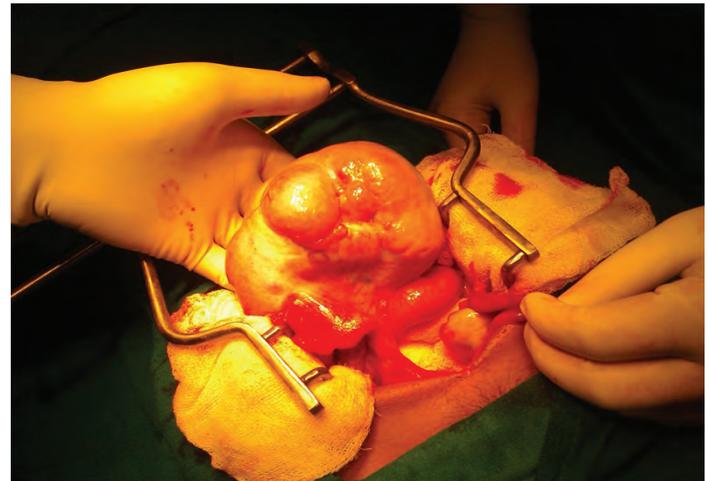
Surgery 2:

Ileocaecal mass (Biopsy Non Hogkin's Lymphoma) resected (Hemicolecotomy)



Surgery 3

18 cms long obstructed Appendix by a worm leading to Acute Appendicitis and Appendicular perforation



Surgery 4

TRAUMA HOSPITAL KANGAN. 19-06-2012.

Ovarian cancer in a 13 year old girl from Kargil.

Left Salpingo-oophorectomy with formal Staging Laparotomy including Retro-peritoneal lymph node biopsy.

Dr Gowhar Mufti, *Pediatric Surgeon.*

Dr Faheem Patloo, *Anaesthetist.*

Mr Farooq, Mr Gowhar, Mr Yaqoob, Mr Manzoor. *Theatre Staff.*

Events

“Voluntary Blood Donation- Camp” at Kashmir Nursing Home



Hon'ble Health Minister Mr. Sham Lal Sharma encouraging a Young donor

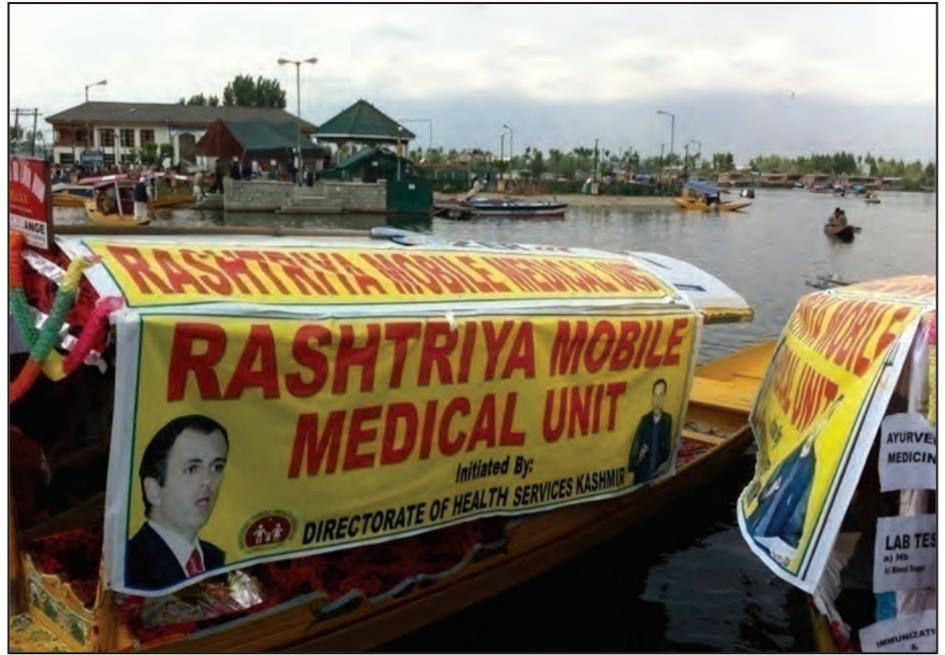
“Voluntary Blood Donation- Camp” conducted at Kashmir Nursing Home Gupkar Road, Srinagar on 7th May, 2012 jointly organized by Directorate of Health Services Kashmir and Department of Hematology and Transfusion Medicine Government Medical College Srinagar. Total units donated: 50 (fifty)



Group picture with Donors

Inauguration of Rashtriya Mobile Medical Unit Dal Lake , Srinagar

Rashtriya Mobile Medical Unit Dal Lake, was inaugurated by Hon'ble Minister for Health, Horticulture and Floriculture Mr. Sham Lal Sharma on May 17th , 2012



World Population Day



World Population Day was observed on 11th July, 2012 at Government Womens College , M A Road , Srinagar



Awareness Activities at District Level (Kupwara)



Dr. Rouf Gul, Certified BLS Trainer of DHSK, conducting BLS Awareness Camp at Govt. High School, Panthachowk on 18.04.2012



Stéphanie Patin, Editor in Chief of Epidemiological News. Coordinator - Clinical and Epidemiological Research Program, GCS ETOILE, France.

Red Cross: The Emblem of Service

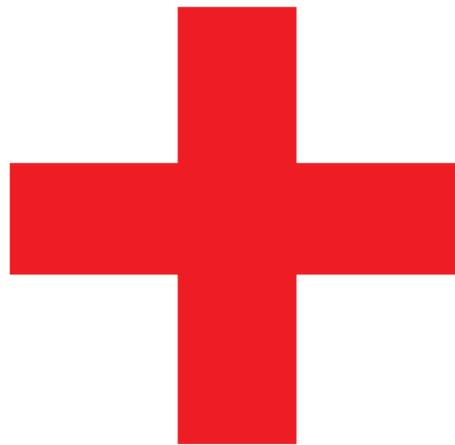
Arshad Khan, ICRC Kashmir

In August 1864, the Diplomatic Conference adopted the Red Cross as an emblem to protect Red Cross volunteers and the medical services of armed forces so that they could safely access all victims of war or other situations of violence. The emblem was aimed to stimulate a reflex of restraint and respect from the combatants in the battlefield. Since that time the Red Cross has been globally recognised as a symbol of neutral and impartial humanitarian service for the most vulnerable.

Usage of the Red Cross emblem is officially restricted to the Red Cross Movement and the Army Medical Services of any given country who are involved in humanitarian work mainly in times of armed conflict and natural disasters. However, unfortunately the Red Cross emblem is being widely used by ambulances, pharmacies, hospitals and even private cars apparently due to un-

awareness about its restricted status and sometimes even knowingly to unethically benefit from Red Cross credibility.

Following the universal adoption of the Geneva Conventions, the appropriate use of the Red Cross emblem is regulated both by international and national laws. In this



regard, the Indian parliament adopted the Geneva Convention Act of 1960. Chapter IV of the Act prohibits the misuse of the Red Cross emblem and makes it a punishable offence with a fine of up to Rs. 500.

The Red Cross State authorities have repeatedly approached all the relevant authorities to ensure that such misuse not permitted or practised. We take this opportunity to remind once again that there are separate symbols meant for doctors, hospitals, ambulances and pharmacists, which are recognised and respected throughout the world. These approved symbols are given below:

Therefore, we would request all concerned to use their own adopted symbol and help us to prevent the misuse of the Red Cross emblem.



HOSPITALS



PHARMACIES



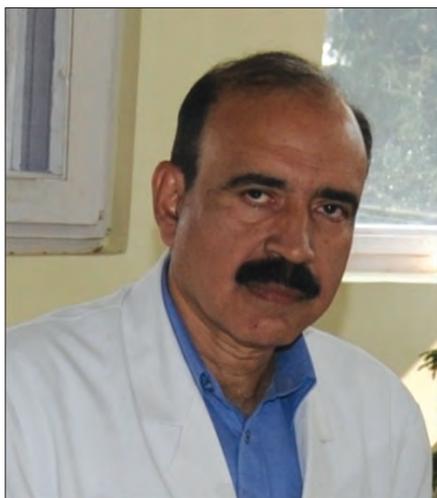
DOCTORS



AMBULANCE

Personality in Focus

Dr. Abdul Hamid Zargar



Dr. Abdul Hamid Zargar is the doyen of Endocrinologists in Kashmir.

Dr. Abdul Hamid Zargar has done MBBS and MD (Medicine) from Govt. Medical College Srinagar and DM (Endocrinology) from Postgraduate Institute of Medical Education and Research, Chandigarh.

Subsequently he joined the faculty of the Sher-i-Kashmir Institute of Medical Sciences and did pioneering work in the Department of Endocrinology serving as a role model and a mentor for innumerable post-graduates and residents. He has had the gratification of seeing his students excel in academics and research besides overseeing the development of his department into a modern and vibrant model department. He reached the pinnacle of his career as Director of Sher-i-Kashmir Institute of Medical Sciences.

Achievements

- ✓ Former Professor and Head Department of Endocrinology, Sheri-Kashmir Institute of Medical Sciences, Srinagar, Kashmir.
- ✓ Ex-Director, Sheri-Kashmir Institute of Medical Sciences, Srinagar, Kashmir.
- ✓ More than hundred and fifty original research publications in national/

international medical journals to his credit.

- ✓ Recipient of numerous awards
- ✓ Delivered numerous orations all over the country and abroad.
- ✓ He has been editor/associate editor/for many medical journals and is reviewer for many national and international journals
- ✓ Past-President, Endocrine Society of India
- ✓ Vice-President Diabetes India
- ✓ President, Rotary Club of Kashmir
- ✓ Editor-in-Chief, Indian J Endo & Metabolism

Main research areas include:

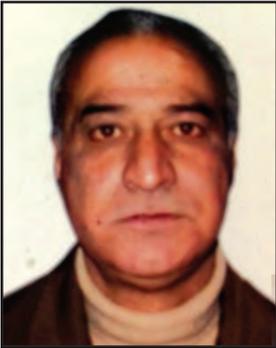
- 1) Iodine deficiency disorders
- 2) Epidemiology of diabetes and its complications
- 3) Reproductive endocrinology

I initially met Dr. Abdul Hamid Zargar at social gatherings. Despite the fact that he is a leading endocrinologist of the country, I have always found him to be most humble and gentle. I came away with the impression that Dr Zargar is a thorough professional, with a keen interest in academics and research as befits the Director of a premier research institute.

Dr Saleem ur Rehman

Director Health Services, Kashmir

Retirements



Dr B A Janwari
Deputy Director
Directorate of Health Services



Dr Mohammed Shafi
CMO Baramulla



Dr Rajinder Singh
Asstt Director
Directorate of Health Services



Dr Nazir Ahmed Qanungo
MS DH Baramulla



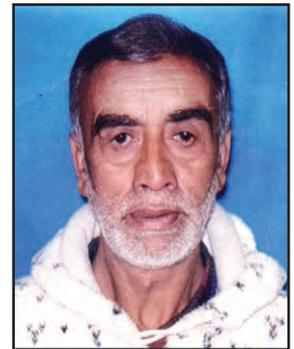
Dr G A Lone
MS SDH
Bijbehara



Dr Mohammad Iqbal
B-Grade Surgeon
Trauma Hospital Kangan



Mr Abdul Majid Thakur
MTO



Mr Nazir Ahmed
Class IV

Condolences



Dr. Rauf Ahmad Buchh
Medical Superintendent
District Hospital Pulwama
01.01.1956-09.07.2012

Dr. Rauf Ahmad Buchh completed M.B.B.S in 1982 from Govt .Medical College Patiala-Punjab followed by one-Years House Job in E.N.T at S.M.H.S Hospital, Srinagar, Kashmir. He started his career as Assistant Surgeon at PHC Pampore. In Feb.1990 he met with an unfortunate accident. However he continued with his duties in exemplary fashion as Medical Officer in Budgam and Pulwama Districts. As an administrator he worked as the BMO Chattargam where he served with diligence for nearly five years. Posted as Deputy CMO Pulwama in 2010, he rose to the post of Medical Superintendent, District Hospital, Pulwama. May his soul rest in Peace.



Mr. Mushtaq Ahmad Malik
Assistant Director Planning
CMO Office Kupwara
05.02.1961-28.7.2012

Mr. Mushtaq Ahmad Malik joined in 1983 as Junior Statistical Assistant in Planning & Development Department. He was presently working as Assistant Director Planning in the Office of Chief Medical Officer Kupwara since June 2009. Mr Malik expired in a tragic road accident on 28.7.2012. May God grant him eternal peace.

News Scan

SM Kadri

School Health Education for Life style Diseases

In a meeting of the advisory working group for the National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and Stroke (NPCDCS), Government is thinking of suggesting the HRD ministry of making school health education on lifestyle a must.

All school children from 5th class onwards would have lifestyle as a special subject in their curricula. Also, yoga will become compulsory in schools.

Healthy Health Tips

SM Kadri

Lifestyle choices in controlling blood pressure

- ★ Try lifestyle management for up to 6 months. It can alone control blood pressure if initial BP is <160/100 mmHg.
- ★ Lifestyle interventions have effects similar to single drug therapy.
- ★ Combinations of two (or more) lifestyle modifications can achieve even better results.
- ★ One should maintain normal body weight. One can achieve a reduction of 5–20 mmHg of BP for every 10 kg weight loss.
- ★ One should consume a diet rich in fruits, vegetables, and low fat dairy products with a reduced content of saturated and total fat. It can reduce a blood pressure of 8–14 mmHg.
- ★ One should reduce dietary sodium intake to no more than 100 mmol per day (2.4 g sodium or 6 g sodium chloride). It can alone reduce blood pressure by 2–8 mmHg.
- ★ One should engage in regular aerobic physical activity such as brisk walking (at least 30 min per day, most days of the



week). It can alone reduce blood pressure by 4–9 mmHg.

Vegetables and fruits lower chances of getting some cancers

SM Kadri

Vegetables and fruits help lower your chances of getting head, neck, breast, ovarian and pancreatic cancers. Even one additional serving of vegetables or fruits could help lower the risk of head and neck cancer. The more fruits and vegetables you can consume, the better. Those who eat six servings of fruits and vegetables per 1,000 calories have a 29% decreased risk relative to those who have 1.5 serv-



ings. In the study, after adjusting the data to account for smoking and alcohol use – known head and neck cancer risk factors – the researches found that those who consumed the most fruits and vegetables had the lowest risk for head and neck cancers. Vegetables appeared to offer more cancer prevention than fruits alone did. Adding just one serving of fruit or vegetables per each 1000 calories consumed daily resulted in a 6% reduction of risk.

In another study, broccoli and soy protein were found to protect against the more aggressive breast and ovarian cancers. When consumed together, digesting broccoli and soy forms a compound called di-indolylmethane (DIM). In lab experiments, the researchers found that DIM could affect the motility of breast and ovarian cancer cells, which could help keep cancers from spreading. Soy, acts like estrogen and is a nutritious, healthy food, and should be eaten in moderation.

Yet another study compared intake of flavonols to their risk of pancreatic cancer. Flavonols are protective compounds found in fruits and vegetables, such as onions, apples, berries, kale and broccoli. Those who had the highest consumption of flavonols reduced their risk of pancreatic cancer by 23%. The benefit was even greater for people who smoked. Smokers with high levels of flavonols reduced their risk of pancreatic cancer by 59%.

Activity under NCD (NPCDCS and NPHCE)

CCU strengthened with following equipments:

S.No	Equipment
1.	ICU Ventilator
2.	Compressor
3.	Humidifier
4.	Defibrillator

Kupwara:

- CCU constructed
- Geriatric ward constructed
- Physiotherapy being provided to patients.
- Nurses were trained at SKIMS in different wards for running the Geriatric ward, CCU and Cancer ward.
- Training of paramedics in NPHCE done in two batches.
- A pain and palliative care clinic being run on Mondays by Dr M.Yusuf Tak , a pain management specialist.

Kargil

- CCU constructed
- Geriatric ward constructed
- Training of paramedics in NPHCE done in two batches.

Services	Leh	Kargil	Kupwara
Number of Elderly attended OPD	1178	67	2,495
Number of Inpatients	183	nil	nil

NPCDCS

- Cancer screening done at Block Sogam and at District Hospital Handwara for gastric cancer, oral cancer and breast cancer (among females).
- Of the 95 people screened 6 biopsies



- were taken and 5 were positive for gastric cancer.
- Patients given referral slips for referral to district hospital and then to SKIMS.
- Dedicated OPD services for patients suffering from NCD in all three districts.
- Physiotherapy services started at District Hospital Handwara (District Kupwara) and at Kargil.
- A separate sample collection centre for NCD patients has been made available in the OPD.
- ECG machine available in OPD for patients.

Sno	Name Of Institute	No Of Screened Persons	Of Biopsy Taken	Result
1	DH Handwara	55	2	Malignant
2	SDH Sogam	40	4	1 Normal 2 malignancies

- Patients found positive on biopsy were referred to Regional Cancer Centre SKIMS for further treatment.

Cancer Screening at Handwara:



Breaking News

Breakthrough Medical Device to be tested in Kashmir

A Mini Lab for testing health parameters in the field

According to Director of Health Services Kashmir, Dr Saleem ur Rehman, as part of its 'Technology for Health' program, his directorate is chalking out a pilot project for field testing of the Swasthya Slate in two rural districts of Kashmir as a joint venture with the 'Affordable Technology' division of the Public Health Foundation of India (PHFI).

The low-cost device developed by Dr. Kanav Kahol, a US-returned Indian biomedical engineer, can enable on-the-spot-testing of various essential health parameters like ECG, heart rate, blood pressure and blood sugar. The cost-effective tool will help auxiliary nurse midwives (ANMs) and Accredited Social Health Activists (ASHAs) working in far-flung villages with on-the-spot-diagnosis.



Dr. Kanav Kahol, has trained under Nobel laureate Dr Lee Hartwell at the University of Arizona's Biodesign Institute. Dr. Kanav Kahol, the head of the 'Affordable Technology' division, and the inventor of the Swasthya Slate, is already acting as consultant to the K-

RICH committee of the Directorate of Health Services Kashmir (DHSK) for setting up the Kashmir SimLab (KSL) at the Regional Institute of Health and Family Welfare (RIHFW) at Dhobiwan near Tangmarg. This is planned as a state-of-the-art Patient Simulation Laboratory which will be the first of its kind in the government sector in India.

The K-RICH committee also plans to test the Swasthya Slate in the ALS/BLS ambulances of the JKATS Emergency Medical Services being rolled out soon. Dr. Bakshi Jehangir, Member-Secretary of K-RICH, said that besides the multiple testing parameters and low cost, the customized on-the-spot recommendation system being developed for online guidance of ambulance staff by physicians via mobile phone/video-conferencing was an exciting capability of the



Swasthya Slate.

In the first phase, the GPS-enabled emergency ambulances of the JKATS EMS project will cover the entire national highway and two major districts of Jammu & Kashmir state. In subsequent phases it will be extended across the entire state of J&K.



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