

CONNECTIONS

BULLETIN OF THE GOVERNMENT MEDICAL COLLEGE CHANDIGARH OLD STUDENTS ASSOCIATION (GMCCOSA)

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From the Editors desk

Is GMCH poised for the next leap? This question has been haunting me for quite some time now. What are the students really up to? Are we actually moving in the correct direction and getting set for the next big thing? There are two things which prompt these thoughts. First, the latest rating of top 20 medical colleges, and second, a recent experience where I got the opportunity to interact with undergraduates from other premier medical colleges of the country.

GMCH did not make it to the honor roll. My premise is that a college is not merely a collection of *sarkari* buildings and fossilized scholars slaving in the library preparing the latest exam. The soul of a college, and for that matter even a nation, is its student community. A passive student community signifies a moribund college. If one skims through the list of the top 20 colleges, one realizes that they all have undergrads who go beyond the confines of Harrison/ Bailey and delve deep into the terrain of research. AIIMS students bag the coveted Indian Institute of Science sponsored KVPY scholarship every year, while at home, only one student has received this award till date. Students of colleges with unpretentious reputation in *mofussil* towns have bagged more ICMR studentships in a year than we have got in over a decade. This despite the fact we have capable students and all the requisite paraphernalia.



Second, at an interactive session in Pune, I had an opportunity of interacting with peers from across the country who have done research. There, I realized that a college acquires a reputation only by the dint of the activities of the students. Some colleges are more famous for the dope in the college hostel while others (like ours) for their wildly famous college fests and social causes (such as Euphoria and Koshish). After meeting the students of these colleges (they had done some top-class research, one fellow in new final year has a publication in British Medical Journal and another has formed an entire hypothesis on diabetes) I felt that they too had similar opportunities and hardships that we have.

My point is that research at the level of undergraduate level is feasible; we need to give it a shot. Let me list some advantages we have at GMCH. First and foremost, we have a very supportive and motivated faculty which is itself engaged in research. They have received training at premier institutions and have great experience in conducting research. Moreover, thanks to the blissfully low teacher-student ratio, our interaction is very extensive (I remember, at an 'interactive session' as a fresher, my senior told me, much to my terror, that *faculty ko teri saanson ki aahat ka bhi pata hota hai*).

Second, Chandigarh is not a shanty town. We have here, in addition to GMCH, institutions of the ilk of PGIMER, Panjab Univ., NIPER, IMTECH, CSIO, CFSL, CRI (at nearby Kasauli) and others that undertake research and can guide us.

Third, there are a number of departments where the JR's/SR's are left with little time to devote to research and would be glad to get a helping hand. Fourth, our alumni-student relation is strong and they are always ready to give a helping hand (I speak from experience).

None of the above observations is new. My perception is that the reason for our lame-duck record of undergraduate research stems from a lack of knowledge or perhaps phobia/ hesitation of approaching the high priests of medical sciences (as my super-senior once described!). These arguments are at best effete and at worst, junk. If we are to rise and shine, then the initiative must come from us. In the interaction I have

had, not even one faculty member has ever scoffed at undergraduate research. Rather the encouragement has been tremendous.

At GMCCOSA, we recognize the importance of research, especially during the very impressionable medical student years. As physicians, we are also scientists, even during our everyday clinical practice. Hence, it is essential that we know how to ask questions and use proper techniques to reach an answer. To stimulate this process of scientific inquiry, we are pleased to announce the KOSHISH RESEARCH AWARD and GN RESEARCH AWARD for GMCH medical students and junior residents. More details about these awards are presented in this issue and application materials are now available on the GMCCOSA website. This may not be enough, but is certainly another beginning.

*Divyanshoo Rai Kohli
(‘03 batch)*

GMCCOSA Is 3-years Old!

GMCCOSA has completed its 3rd anniversary. Despite our serendipitous birth, we continue to grow and prosper. Keeping our commitment of ‘...fostering a mutually beneficial and enduring relationship between the institution and its alumni...’, we have initiated a number of endeavors, including KOSHISH, to connect the alumni with our alma mater. The number of visits to our website (more than 30,000 hits over 3 years) is a clear testimony to our and your success. This is further exemplified by the map (below) which depicts visit data since September 2006 and shows that we are indeed connecting GMCites all over the globe, not just one country. Do continue sending us your comments and suggestions (gmc cosa@yahoo.com) – they are the motivation and encouragement for us to keep going and improve. And remember our motto - stay connected and keep in touch!

ClustrMaps for <http://gmc cosa.org>



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4616 visits since 26 Sep 2006, total visits 4616 since 26 Sep 2006, updated daily

! distance in which individuals are clustered
Total number of visits depicted above = 4615

Dot sizes:

● = 1000 + ● = 100 - 999 ● = 10 - 99 ◆ = 1 - 9

VISIT US AT WWW.GMCCOSA.ORG

Nostalgia...

With Prof VK Kak

One of our editors, Hemender Singh ('91), recently caught up with our second Director Principal, Prof VK Kak...



I met Prof Kak on my recent visit to India. The rendezvous, which was planned for half hour, extended into two hours as we refreshed our memories of the GMC years. Prof Kak was just the way he always has been - sharp, witty and precisely focused on the issues we discussed. It

was enlightening to hear his views about GMC's yesteryears, experience as a teacher, surgeon, leader and principal, his obstacles and the way he dealt with them. Prof Kak is now enjoying his time off from administrative responsibilities and is spending time doing what he enjoys most - being a grandfather. Following are excerpts from my discussion with him.

♣ **Hemender Singh (HS):** *What made you decide to come to GMC after being in PGI and teaching for so many years?*

Prof VK Kak (VKK): I had spent 26 years in PGI before opting for GMC. During that time we worked very hard not only to make PGI Neurosurgery a center of national repute, but gain international acclaim as well. If you feel that you have done enough for a cause, it is often better to take on another, and different, challenge. Since Chandigarh did not have an undergraduate medical college, I took the challenge.

♣ **HS:** *How was your GMC experience different from the PGI experience?*

VKK: PGI is solely a postgraduate institution for specialties and super-specialties. In addition to providing professional care, you also have to be a good teacher and trainer as well as excel in research activities. GMC was in its formative stage where the emphasis was not only to oversee the construction and equipping of the new institution, but also to

ensure human resource development and state of the art training of the initial batches of young students. The final aim was to get recognition for the college on schedule so that not a single day of the students was wasted.

♣ **HS:** *You were head of GMC during its roughest years. How was your experience? What help did you have and what deterred you the most?*

VKK: I happened to be in position to see GMC successfully through its most demanding period. When I took over the task in August 1995, there were three primary objectives - to recruit suitably qualified faculty (as per MCI norms) in time, to get the final examinations on schedule, and to get the MCI to inspect the college and the examinations towards granting recognition by January 1996. Faculty was recruited on deputation or contract and most of the senior teachers were from PGI whom I could persuade utilizing my long contacts. The Vice-Chancellor of Punjab University did not bat an eyelid while allowing our request to delink our final exams from those of CMC and DMC Ludhiana. Getting all the students to take the final exams was proving tough, but I could finally prevail over four 'dissenting' parents to let their children appear. The MCI inspection reports of the college and the exams were very favorable but for reasons best known to them, the MCI was dithering in granting recognition. It goes to the credit of our judiciary which rose to the occasion. I had a unique experience of participating in the 'birth' of a medical college.

It will be difficult to try to enumerate all the persons who helped me in this task. First and foremost the administration was very favorably inclined towards development of this college and extended all possible help in granting various sanctions - including the Governors, the Advisors and the administrative secretaries of Chandigarh Administration. The best combination undoubtedly was Gen Chhibber, Jagdish Sagar, Anuradha Gupta and Navreet Kang. Directors of PGI and Vice-Chancellors of PU rendered all possible help, as also my faculty colleagues at PGI.

Persons who put their own interests before those of the institution earned my dislike. They either mended their ways or else were shunted out. A number of times the 'FD' (finance department) tried to put a spanner in the wheels, but the

administration helped us out in this regard. None of these, however, deterred me.

♣ **HS:** *You were known to us as a very 'approachable principal' and someone who cooled many tempers and egos in the administration to get things running for GMC. What do you think about this? What kept you going?*

VKK: An individual occupying the top position in any institution must start with a clean slate, forgetting all personal and previous likes and dislikes. I was offered 'security' on taking over as Secretary and D-P, but I politely refused citing that the day I needed security from my students I would rather leave the institution. The rest is history. Administration is the summation of collective wisdom and hence anyone could meet me anytime at any place, including my residence for the student community. No decisions were ever taken in the heat of the moment, but only after giving a considered thought. My commitment to my students, and the city of Chandigarh, kept me going.

♣ **HS:** *How has your rapport been with the faculty of GMC and students of GMC and how has it changed since you left GMC?*

VKK: I had a very good rapport with the faculty and students of GMC during what could easily be described as the best period of my life. I had to take certain tough and unpleasant decisions in some matters affecting the faculty and the students, but they were reached after careful consideration of facts and in the overall interest of the college. My relations with the faculty, the students, other staff and our graduates have not changed. Anyone can, and still does, approach me without an appointment.

♣ **HS:** *In what direction do you see GMC moving in the next decade, and later?*

VKK: Although post-graduation has been started in several departments, certain key departments are missing from this list. I hope GMC rectifies this anomaly as soon as possible. The faculty is not uniform in their commitment to research activities – this needs a strong push in the right direction. I hope to see GMC rise to take its place amongst the top medical colleges of the country.

♣ **HS:** *Is there one thing you would have done differently for GMC while you were principal?*

VKK: GMC could have been developed as a 'deemed university', but it is very difficult to have this status at the onset. This status gives autonomy for the institution, resulting in avoidance of very long delays in construction, purchases, framing of rules, recruitment and several other matters – on which the 'babudom' thrives.

♣ **HS:** *How do you find our GMCCOSA site and the CONNECTIONS newsletter?*

VKK: The website is good, but slightly slow for navigation. This can be easily improved. CONNECTIONS is a very good way to connect not only old colleagues but the old and the new as well. It might be a great advantage to have this web address available on the GMC website. GMCCOSA should not only aim to meet overseas, but have regular meetings in Chandigarh also. I wish the endeavor all success.

♣ **HS:** *Are you enjoying your time off now?*

VKK: A professional never retires, but yes, I am enjoying my time after shrugging off the shackles of government jobs. I spend my time doing some professional work – OPD and surgeries for three days each, no emergencies and no night calls. Afternoons are spent in my long standing passion of playing bridge. I read, write, learn from the net and last but not the least, enjoy the company of my grandchildren.



GMCH is gearing up for EUPHORIA 2007, the annual sports, cultural and literary extravaganza, in February. It is being organized by the 2003 batch. Visit their website www.euphoria2007.com for more details.

As always, GMCCOSA will be making a token contribution for EUPHORIA. Interested alumni can mail their checks to Navneet Majhail, 3480 Golfview Drive, Apt 1203, Eagan, MN 55123 (USA) or send their contributions through PayPal® at nmajhail@yahoo.com.

KOSHISH Research Award

As KOSHISH continues to grow and evolve, we are happy to announce that we have collected Rs. 1.2 lakhs over the past two years. About Rs. 50,000 has been sent to the Koshish team which has been used to help several poor patients. Gratifying as this has been, perhaps the most encouraging and exciting aspect has been the nurturing of a cadre of extremely motivated and compassionate young individuals. Through their foresight and ability to think 'outside the box', they have been able to increase awareness and access to Koshish and further our scope in other ways (such as getting discounts from pharmacies, drug reps and laboratories).

The next step that we have envisioned is the 'Koshish Research Award', to be provided as a research grant of upto Rs 10,000 (through Koshish funds) to medical students or JR's. We would expect a 2-4 page submission outlining the research project with aims and objectives, basic study design and data that will be collected and how they plan to utilize the money. This will be reviewed by a panel of alumni and a score assigned to each submission, whence the candidate will be selected. Scoring will emphasize on the novelty and innovation of research question and the feasibility of the proposed project. There will be an expectation that each student will adopt a mentor (from GMCH faculty) and that each project will be accepted for publication in a peer-reviewed journal. While we would prefer projects that deal with primary health/ community health care issues (maternal and child health care, childhood malnutrition, STD and HIV related surveys, simple community based interventions), all types of applications are encouraged. We hope to get at least one project underway by February. Any queries can be submitted to gmccosa@yahoo.com or posted on the GMCCOSA message board (www.gmccosa.org). The editors and alumni will be available at all times to support the research efforts.

Research is an area to which we are not traditionally exposed to during our medical training. However, this is becoming an increasingly important facet of medical education with far-reaching benefits. It provides an opportunity to ask and investigate

critical questions. We learn how to design and conduct studies, enhance our knowledge and contribute to science. Along the way, some budding doctors might realize a niche or an interest in academic medicine hitherto unrecognized which might be pursued further. And last but not the least, research always looks good on your resume and helps in getting residency positions/jobs in the future.

So as the New Year arrives, let us resolve to keep the impetus moving forward with Koshish. There is nothing more satisfying than the ability to help people and patients marginalized in society, unwitting victims of poverty and scarce medical resources. We have at our disposal a great tool to make a difference in their lives – our commitment.

Young Clinical Investigator Award

Young Clinical Investigator Award will fund pilot studies exploring new and innovative ideas which can hopefully be pursued later with larger scale clinical trials. One to three awards of upto Rs 20,000 each will be funded over a period of one year. All clinical specialties and any type of clinical project are eligible provided it involves patient oriented research.

Details about this award are available on the GMCCOSA website. Briefly, projects have to be investigator initiated pilot studies with medical students or post-graduate junior residents as principal or main investigators. A supervising mentor will also have to be identified. Review criteria include novelty of the proposed idea, feasibility of conducting the pilot study and the potential for a subsequent clinical trial. Approval by the GMCH Ethics Review Board will be required before remittance of award money. Protocol development and statistical support will be provided, if necessary.

The last date for submitting applications is May 31st. Contact us at gmccosa@yahoo.com with any questions.

Visit www.gmccosa.org for more information about these awards

KOSHISH Successes

More than 1 lakh rupees have been raised for Koshish since its inception in September 2005. Undeniably, the money we collect keep the wheels of Koshish moving, but this venture would not have been a success without the enduring efforts of its grassroot workers - the medical students, interns and residents of GMCH. Below are some of the many stories that Koshish has to tell.

✍ A ten month old boy with congenital hydrocephalus needed a shunt. Despite a guarded prognosis, his case was taken up by Dr Gauri Joshi from Neurosurgery. Koshish was called into action with Dr Pushpinder (Senior Resident) and Dr Vidushi ('01 batch) in charge of the child's care. Koshish provided part of the funds (Rs 4,800) required for his treatment and surgery with Dr Pushpinder paying the rest. The boy has since recovered completely and his father, a Pundit from a Mandir in Mohali, will be conducting a Havan for Koshish and the hospital. We thank Dr Pushpinder and Dr Vidushi for their efforts and for going beyond the call of duty in taking care of this child.

✍ Three destitute and abandoned patients (including two women) with schizophrenia were admitted to our Psychiatry ward with exacerbation of their psychosis. Koshish has been closely involved with helping out such patients and we spent (a nominal amount) of Rs 600 on their care and treatment. One of them stayed in the inpatient unit for 14 days, fully recovered and is now staying in a group home. Her care has been taken over by a private social work organization. The other two recovered uneventfully as well and were taken back by their families. We thank Dr Methali (Senior Resident in Psychiatry) and Dr's Rohit and Romika (Junior Residents in Psychiatry) for their help in taking care of these patients. Prof BS Chavan, Head, Department of Psychiatry has also lauded and recognized our efforts and we thank him for his continued support.

*Krishan Sawhney
'03 batch*

Farewell

Prof K Sri Nageswari, Head, Department of Physiology, retired in October 2006. She was among the initial faculty of our college and was an integral part of its progress & development. We all have great memories with her and will miss her presence.



Album

Sandeep Kochar ('93 batch) and his wife Preety ('94 batch) (left) with Sumesh Arora ('93 batch) and his wife Pooja (right) in Central Park, New York, November 2006. Sandeep is an Infectious Disease fellow at the State University of New York while Preety is a Cardiology fellow at the Beth Israel Medical Center, both in New York, USA. Sumesh is a Registrar in Intensive Care at the West Mead Hospital, New South Wales, Australia.



Stork Line

Inder Raj and Navneet Majhail ('91) were blessed with a boy, Kavneer, on December 13th 2006. They also have a five year old daughter, Gurnoor.



Rupinder ('92) and Rishi Kad ('92) were blessed with a baby boy, Karan, on September 7th 2006.



Mini Kamboj ('93) and Sandeep Gill were blessed with a boy, Kabir, on October 28th 2006.



Kudos

...to Navneet Majhail ('91), he was invited to moderate a session on 'Transplant regimen toxicities' at the American Society of Hematology annual meeting, Orlando, Florida (USA), December 2006.

...to Navneet Dhillon ('92), for being selected as a Medical Oncology fellow at the University of California, San Francisco, California (USA) starting July 2007; she is currently a fellow in Phase I Clinical Trials at the MD Anderson Cancer Center, Houston, Texas.

...to Navneet Dhillon ('92), her project 'Cutaneous T-cell lymphoma: Responses in phase-I trial of combination therapy with liposomal doxorubicin, bortezomib and gemcitabine' was selected for presentation at the American Society of Hematology annual meeting, Florida (USA), December 2006.

...to Sandeepan Bhatia ('92), he was selected for and is currently pursuing a Masters in Public Health course at the John Hopkins Bloomberg School of Public Health, Baltimore, Maryland (USA); he has worked with the World Health Organization prior to joining his present appointment.

...to Ashish Gulati ('93), for being selected for and beginning as Clinical Research Fellow in Orthopedics at the University of Oxford, Oxford (UK).

...to Datinder Deo ('93), he was selected as the Chief Fellow in Nephrology, University of Louisville, Louisville, Kentucky (USA).

...to Punkaj Gupta ('94), for being selected for and beginning a fellowship in Pediatric Critical Care at the Massachusetts General Hospital, Harvard Medical School, Boston, Massachusetts (USA).

...to Reena Swami ('95) for being selected for and beginning as Specialist Registrar in Medical Microbiology at the Northern General Hospital, Sheffield, Yorkshire (UK).

...to Yogesh Sharma ('95), he has accepted a residency position in Internal Medicine at the

Kingsbrook Jewish Medical Center, Brooklyn, New York (USA) starting January 2007.

...to Dinkar Kulshreshtha ('97), his project 'Clinical profile of 1164 patients with motor-neuron disease and their survival pattern (1958-2005): Experience from NIMHANS' was selected for oral presentation at the 14th Annual Conference of Indian Academy of Neurology, Bangalore,

October 2006; he is currently pursuing DM in neurology at the National Institute of Mental Health and Neurosciences, Bangalore.

...to 2001 batch, for finishing their internship, we wish them success and luck.

...to 2002 batch, for starting their internship; good luck to them as well.

GMC Chronicles

Foundation Stone Laying Ceremony Of GMCH

The foundation stone for GMCH, Sector 32, was laid by then Prime Minister of India, Shri Chandra Shekhar on January 20th 1991.



***Editors:** Please send us photographs of your re-unions, parties, meetings, weddings, etc (anything) to gmccosa@yahoo.com.*

Editors: Navneet Majhail ('91), Minneapolis, Minnesota, USA; Hemender Singh ('91), Marshfield, Wisconsin, USA; Sandeep Kochar ('93), New York, New York, USA; Divyanshoo Rai Kohli ('03), Chandigarh, India.
Contact Us: gmccosa@yahoo.com

Young Clinical Investigator Award

About the Award

The Young Clinical Investigator Award is intended to fund innovative small pilot clinical studies (any clinical discipline/specialty) with the potential to be followed up with a larger scale clinical trial.

Description of the Award

The Young Clinical Investigator Award will provide each awardee with a maximum of upto Rs 20,000 in support over one year. One to three awardees will be selected from among the eligible applications. Any application failing to meet the requirements of the program will be judged ineligible. Awards will be scored by a panel of reviewers, with points given for novelty of the research question, feasibility of the project and potential for follow up as a larger scale clinical trial. Clinical projects related to any clinical discipline are eligible. Basic science or laboratory based projects will not be funded unless they directly apply to and involve patient participation. Approval by the Ethics Review Board of GMCH will be required before disbursement of award money. It will be expected that a publication in a peer-reviewed medical journal will result from the proposed study. Basic protocol development and statistical support will be provided, if necessary.

Eligibility requirements

- The applicant (principal or main investigator) must be a medical student or post-graduate junior resident.
- The project must be conducted in GMCH, Chandigarh.
- The applicant should identify a mentor who will supervise the project.

Application materials

Application should be submitted electronically as a Word Document file (using 12 point font) to gmccosa@yahoo.com. Submit the following (applications beyond the specified page limit will be rejected):

- Cover sheet
- Curriculum vitae of the applicant (2 page limit)
- Curriculum vitae of the mentor (2 page limit)
- Outline of the proposed study (4 page limit, use headings of Objective, Background, Methods, Analysis plan (if possible) and References)
- Budget detailing how research funds will be spent (2 page limit)

What will be funded?

There is no restriction to what will be funded as long as it is reasonably justified.

Application Deadline

Applications must be received on or before **May 31st** at gmccosa@yahoo.com. Only electronic (email) applications will be accepted.

KOSHISH Research Award

About the award

The 'Koshish Research Award' is meant to encourage medical students/post-graduate junior residents at GMCH-32 to engage in research with an emphasis on community and preventive medicine. However, all type of research projects will be encouraged. One or two research awards will be given with funding of Rs. 5,000-10,000 for each project. The funds will be provided directly from Koshish contributions.

Description of the Award

The award focuses on research in primary and community health with emphasis on maternal and child health including simple, cost-effective interventions such as basic laboratory tests and providing medications and vaccinations. However, all types of applications are encouraged. A suggested list of topics is provided to help applicants. This list is by no means all-inclusive and novel and innovative subjects are encouraged. Research sites could include GMCH-32 and colonies and slums visited as part of SPM rotations. It is very feasible that studies could be conducted at the Janata Colony as part of our collaboration with DIR-I ('Developing Indigenous Resources-India', a non-governmental health-care organization). Awardees will also be expected to identify a faculty mentor at GMCH-32 and obtain approval of the Ethics Review Committee at GMCH-32 before funds are provided. In instances where the study is conducted in partnership with DIR-I, the head of DIR-I might substitute as a mentor instead of GMCH-32 faculty. The expectation will be that the study results will be eventually submitted to a peer-reviewed journal for publication. If required, we will try to provide bio-statistical and protocol development. We strongly urge you to send any queries to us at gmciosa@yahoo.com.

Application materials

Application should be submitted electronically as a Word Document file (using 12 point font) to gmciosa@yahoo.com. Submit the following (applications beyond the specified page limit will be rejected):

- Cover sheet
- Curriculum vitae of the applicant (2 page limit)
- Curriculum vitae of the mentor (2 page limit). However this can be provided at a later stage. At the time of initial submission, the candidate should just have an idea of who will be a potential mentor.
- Outline of the proposed study (4 page limit, use headings of Objective, Background, Methods, Analysis plan (if possible) and References)
- Budget detailing how research funds will be spent (2 page limit).

What will be funded?

There is no restriction to what will be funded as long as it is reasonably justified.

Application Deadline

Applications must be received on or before **Feb 15th** at gmciosa@yahoo.com. Only electronic (email) applications will be accepted. If feasible, research projects with DIR-I can be initiated in February 2006 when one of the alumni editors will be working with DIR-I and can facilitate initiating the project.

Suggested topics

1. Childhood Malnutrition.
2. Effects of maternal education on child health.
3. Surveys on Sexually Transmitted diseases/ reproductive choices/ HIV awareness.
4. Childhood vaccinations.
5. Pediatric and Adult HIV
6. Childhood obesity