

Connections-2010

Bulletin of the Government Medical College Chandigarh Old Students Association (GMCCOSA)

Travel with a motive: A better India

I have been away from home for almost a decade now. Within that short span of time, I have witnessed a remarkable and furious pace of change; an India vibrating with restless energy, an India blossoming with a spirit of social entrepreneurship and innovation. A whiff of change everywhere you look. I desperately want to be a part of these exciting times, to somehow contribute to this progressive movement. But how, I wondered? Staying abroad and returning for a couple of weeks every year for vacation does not give one much of a foothold nor a grasp of the situation. The answer was obvious: social networking on the Internet. I turned to the micro-blogging site 'Twitter'. In the search box, I typed 'India'. Among the first few accounts that I came across, one was linked to the following website: <http://www.thebetterindia.com>. At first I was just curious, later intrigued and finally about a month ago, I decided to pack my bags and pay a visit to the site's creator, Dhimant Parekh, in Bengaluru.

First stop – Bengaluru.

The Better India (<http://www.thebetterindia.com>) is a website that aims to highlight all the good that is happening in India. These are real stories of people defying the odds to make a change in society where it is needed the most. Such endeavors are typically lost in the morass of negative news gleefully highlighted and regurgitated by the mass media. Even if we are briefly touched by a moving story, we are quickly overwhelmed by the status quo and things revert to 'normal'. But at 'The Better India', there is one heartwarming story after another, on page after page, and the glimmer of hope need not ever be extinguished. So for example, the 'Super 30' initiative chronicles the story of Anand Kumar from Patna. A gifted mathematician, he overcame poverty and poor health to establish a successful coaching institute. Not one to forget his humble beginnings, he started the 'Super 30' club in 2003 to prepare a handpicked group of thirty indigent students every year for the IIT JEE. He paid for *all* their expenses. Astoundingly, for the years 2008 and 2009, all thirty students made it to the IIT! Another interesting initiative is 'The Daily Dump', an organization that promotes composting as an environmentally sensitive way to waste management and advocates every individual to be more responsible disposers of the waste they produce. And you can not help but admire and be awed by the story of two young doctors, Dr. Regi and Dr. Lalitha, who in 1993 gave up their promising careers in the city and moved to the forsaken tribal village of Sittilingi in Tamil Nadu. Today, the fruit of their endeavors, the Tribal Health Initiative (www.tribalhealth.org) is flourishing with a significant impact on the health of the tribal population with an emphasis on maternal and child health.

It was very refreshing to meet Dhimant and Anuradha Parekh, the soft-spoken and unassuming couple who are the brainchild behind 'The Better India'. A computer engineer by profession, Dhimant told to me that in addition to drawing notice to our unsung heroes and their deeds, his effort was also to arouse us all into collective action and to provide a platform where like-minded individuals and organizations could meet, share information, collaborate and work towards a better India. Dhimant and his wife are assisted in maintaining the website by a small group of individuals, including a few journalism students who assist in researching and writing the articles. So far, 'The Better India' has a monthly readership of about thirty thousand unique visitors (and growing), almost all due to word-of-mouth spread. I came back from this meeting totally invigorated and optimistic. Before I left, I asked Dhimant if he could recommend some other initiatives where I might find it worthwhile to invest my energy and money. He mentioned 'Rang De', a Chennai-based organization that is doing some good work in the field of microfinance.

Next stop: Chennai.

Rang De (www.rangde.org) – bringing color to people's lives

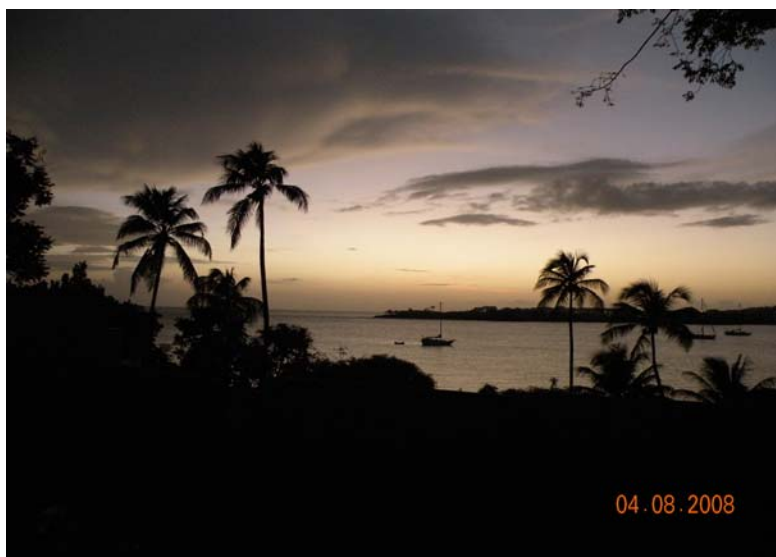
Why not? I had some very close friends in Chennai, and besides, it was a mere 5-hour pleasant train journey by the ever efficient and crisp Shatabadi express. If meeting Dhimant had been a wake-up call, then my encounter with Ramakrishna and Smita, founders of 'Rang De', felt like a kick in the behind. Giving up stable and lucrative careers in the UK (something that I fantasize about but know am incapable of), this young couple literally moved overnight to India to start a microfinance-based organization called 'Rang De'. For those of you who are unaware about the concept of microfinance, it is basically the provision of small, collateral-free loans at manageable interest rates to poor or low-income individuals who would otherwise not qualify for traditional loans from banks, or are at the mercy of unscrupulous moneylenders who charge exorbitant rates of interest. These loans are aimed at reducing poverty by encouraging entrepreneurship, ownership and pride in running sustainable small businesses such as sewing, small scale farming, livestock rearing, handicrafts etc. Interestingly, the majority of microfinance-based loans have been to given women who have historically had a close to hundred percent repayment rate. 'Rang De' partners with finance lenders in the field, who are chosen, after

do diligence on them. One can visit the 'Rang De' website (www.rangde.org) and view the profile of the borrower and amount of money needed (typically loans of up to Rs. 5000; however you may contribute a sum as low as Rs. 100). It is important to understand that when you give money via 'Rang De', you are not engaging in charity but rather being an investor – you will get your principal sum back along with a small interest. Typically the loans have an 8.5% interest rate (5% to the field-based organization, 2% return to investor, 1% to 'Rang De' for operational costs and a 0.5% contingency fund). It was interesting to learn that about 96% of investors are currently from India. Also noteworthy is the fact that the interest rates charged by 'Rang De' are much lower than most of the microfinance institutions. A quick perusal of the website (as of April 20, 2010) shows that 'Rang De' has so far received investments worth Rs. 1,46,97,300; loans worth Rs. 76,80,424.30 have been repaid. The number of borrowers impacted is 2828 and there has been a 97% repayment rate so far. Smita also mentioned that 'Rang De' has started a pilot program for student loans and will be soon starting a project involving larger loans for artisan groups.

So what can you do? Visit the above sites and get acquainted with them. *Most importantly, spread the word.* If you want to refer or even write an article for 'The Better India' about something interesting you may have come across, Dhimant will be more than happy to listen to you. If you want to be an investor in 'Rang De', by all means do so. I am not selling you on that; you should only do it if that feeling comes from within. If you want to initiate a city chapter of 'Rang De' where you are based, Smita and Ram will be happy to assist you. So, be inspired, inspire others, and let's all work towards a better India.

Sandeep Kochar `93 batch

Grenada: A possible gateway to greener pastures!



Our experience at Grenada was one which was the turning point in our lives and also the one that taught us the most about life in general and professionalism in particular. The ideal time to come to St George's is in the month of January or August immediately after you have finished your internship. We thought we would share our experience with you, and let you decide a possibility that you can explore once you are done with the medical school.

For the starters, we were sure that we would pursue the USMLE by the time we completed our internship in Dec 2007, but were not decided on whether to do a PG in India first. We do advise you to at least appear in one of the USMLE steps during internship, something which we did not do. We finished our USMLE Step 1 in May 2008, did one month of observership in July and then came to St George's University in August of 2008. The major part of our job in

Grenada is to teach pathology to medical students and taking Step-1 before coming here helped us refresh our basics so we could teach and also made our transition into a new place less stressful.

Managing the financial burden of the USMLE becomes easier since you are earning reasonably well and the university also pays for your airfare from your hometown when you start the job. Before you arrive in Grenada, you can find apartments through the university website in advance but even if you cannot, the university provides one free week of accommodation at the University Club, which easily beats the best resorts on the island (this just brought with it the nostalgia of those first 7 days in Grenada that we spent having breakfast with some amazing views of the ocean hidden behind palm trees followed by a dip in the beach side swimming pool.

But that is where the luxury ends! For the 1st few months one adjusts to a new culture and place. You are also a professional for the first time. And especially if you have been pampered at home, you will find it a challenge to do your own laundry or stacking washed clothes, shopping for grocery etc. We should mention here that grocery shopping initially seemed like a burden, but once we had settled into a work and study schedule, this did provide a needed break by allowing a sojourn to the mall.

I will not mince the words - the first 6 months will be the toughest period of your stay. The key though is not to waste your time, finish departmental work during office hours and do not let it affect your evenings. In the evening make sure you have an early dinner and be off to the library/reading room to study till late at night. However, you will have maintain some flexibility in your schedule.

Each teaching semester at St George's is of about 4-5 months duration; the fall semester ends in early December and the spring semester ends in June. One gets about 4-6 weeks between the end of one semester and beginning of the other, a time which could best be used for traveling for your USMLE exams and interviews. We scheduled our Step 2 CK at the end of first term, took a mid-term leave for a couple days for Step 2 CS and did the Step 3 in the next break in June of 2009.

I may have scared you by now, but I should definitely mention that study and work is not all that the island offers to you. It has some of the best views, some of the best sea food and an opportunity to take some breathtaking cruises in the blue Caribbean Sea. For us the best moments were a trip to the "Lavera Beach", located on a secluded tip of the island, and best known as a "preserved" home to Leather Back Turtles. Each of these majestic animals weighs up to 500 kg. They are endangered species and to see and touch them in their breeding ground made us feel like being on a Discovery Channel Safari to the wild. We also got the opportunity to interact with marine biologists, who had huddled together to preserve the turtles eggs. Scuba diving off the coast is worth exploring, although it is still pending on my things-to-do-before-leaving-Grenada list.

Food might be an issue to someone who is fussy and does not know how to cook. There are some Indian vendors who sell cooked Indian food, but it's only worth as a last resort if you have been pushed against the wall. Cooking, once in a while, was fun as it provided a break from the mundane routine, although more often than not, self cooked food did not appeal to the taste buds. If you love 'kukkad', this place would be a paradise. Barbecue chicken became our staple diet and it tasted extra-good when done on a grill by the beachside. If you savor international cuisines, Grenada does offer culinary gourmets to you. The "Aquarium", the "Calabash" and the "Laluna" were some of our favorite restaurants. The sheer delight of having a candle lit table with fire lit open spaces and the reflection of the sky in the open sea left little to ask for. A bottle of bourbon or chardonnay would only add to the mood. Not that every weekend was a party, but every so often a good meal after a hectic week of working and studying, was worth a party.

To take you away from dreams, the reality is that you have to make every opportunity count as your ultimate career goal is to move on and not settle in Grenada. In the end, it boils down to how meticulously you plan your day for all the activities and how persistent you can be in achieving your goal. Our experiences in Grenada have made us more mature and ready to take up challenges as we deal with professional life and make decisions that we can call our own. Interacting with people of different cultures and with professors in a professional environment gave us the confidence and finesse in communicating during our USMLE interviews. St George's provides you the right platform and its hidden strengths go way beyond the obvious. If used properly, planned meticulously and with a bigger plan in mind, you experience in St George's University would enrich your personality. These two years we spent in the Caribbean's were definitely well savored.

Abhimanyu Saini, Ashima Sahni, 2k2 batch

Kudos...

Navneet Singh ('92 batch, photograph) was awarded the Translational Research Unit Visit Fellowship by the European Society of Medical Oncology for the year 2010. This was held at the University Medical Center, Groningen, Netherlands in March-April this year. In addition, he has received the Fellowship of the American College of Physicians. Navneet Singh is currently an Assistant Professor of Pulmonary Medicine at PGIMER, Chandigarh.

Punkaj Gupta ('94 batch) has joined as an Assistant Professor and Pediatric Cardiac Intensivist at the Department of Padiatric Cardiology at Arkansas Children's Hospital (University of Arkansas Medical Sciences). He has received fellowship training in Pediatric Critical Care from the Massachusetts General Hospital in Boston followed by a fellowship in Pediatric Cardiac Critical Care from Stanford University.

Sumit Vasudev ('98 batch) has joined DM in Cardiac Anesthesiology at All India Institute of Medical Sciences, New Delhi.

Nishant Puri ('98 batch) has been selected as Chief Resident for his program at Loma Linda University.



In conversation with Prof. Atul Sachdev

Message for the current students:

We are well placed since we get the best students from the North region. I want to convey that we don't advocate for any student; scoring in the exam is a sole discretion of the external examiner. If anything for a suggestion, I would like to stress on the importance of clinical skills. In the light of PG entrance exams the students go for theoretical knowledge, but it's the clinical skills that pay in the long run. With that though, I must also mention that recently an external examiner from AIIMS commended on our students' performance in the practical exam.

Message for the alumni:

I would like to wish good luck to all. GMCCOSA is doing a good job. You guys should arrange for reunions say around the last week of December. This will encourage social gathering.



Thanks for agreeing to do this interview, Sir. Please tell us about your earlier professional years:

I completed my D.M. Gastroenterology from P.G.I. in 93. I then interviewed and got selected as a lecturer at GMCH soon thereafter. Initially I was a bit hesitant about coming here but since I did not get an extension at PGI, I came to GMCH. In the interim, I did prepare for USMLE, but soon gave up the idea due to personal reasons. The initial time was tough, since in contrast to hectic schedule at PGI, I did not have much to do for the first 4 weeks; mainly since there was no OPD or office so to speak of. Later, a couple of rooms were allotted for internal medicine at polyclinic in Sector-22. The teaching was done in a small auditorium inside the polyclinic. We then, for two days in a week, were provided with a few beds for practice and teaching purposes at the General Hospital, Sector 16. The working environment, however, at both these places was not cordial or intellectually stimulating. Later, as we are well aware, getting the MCI recognition was a big pain. The earlier years were tough, but thanks to the mentorship of Prof. Chopra, and support of my fellow colleagues and students, we as a department have made an excellent progress.

You mentioned about the progress GMCH has made till now. There has been a concern that the pace of progress has slowed down over the recent years. Do you feel the same?

That is the natural history of any endeavor. For us, the initial years demand a great amount of in terms of infrastructure, arranging teaching faculty etc. In fact, we all started our departments from a scratch. But now when we have reached a level where we rank in top 20 medical colleges of the country the climb would be steep; but with our caliber, I can foresee an excellent future.

What differences do you see in the work atmosphere between PGI and GMCH?

There is an excellent work atmosphere in PGI. We need to adopt their work culture. The coordination between residents, consultants and other staff is highly professional. The academic and research carried out there, is highly disciplined and needs to be inculcated here.

What are your views on medical students devoting time to research?

There are very few genuine research studies that are being carried out in the medical colleges in India. This is probably from the lack of inclination towards research, and little spare time due to a high patient volume. I do favor students partaking in research; the ICMR studentships provide financial support and chance to write papers. Furthermore, it also gives the students a choice to decide between research and clinical-practice based career.

How much do you approve of the efforts to make GMCH a deemed university?

There are both advantages and disadvantages. We will definitely reduce the delays occurring in various projects if the authority is shifted from the Chandigarh Administration to the college level. This will also allow for increasing the number of jobs and recruitments. But there are worries regarding lesser grants from the government and lesser employee benefits.

Why do you think that starting a PG course in Internal Medicine at GMC is still a challenge?

I am desperately trying to start a post graduate course in my department. The major hurdles to our approval by the MCI are a lower than required number of faculty members and lower than required work experience among the current faculty. We have advertised for the vacant positions and are trying to make up to 14 faculty members in the department. Once that is achieved, we would hope to start with the PG courses. We also aim to start offering DM course since the demand for specialized care has certainly increased in today's time.

What are your fields of interest in gastroenterology?

I give more stress on therapeutic endoscopies. We do 3000 endoscopies and 600 ERCPs every year and that equals the number at the best centers in the country. Most exciting for me is to realize that despite primarily being an undergraduate college, we have become a referral centre for various procedures and this has drawn post-DM fellows to join us.

What difference do you see between the students of the initial batches and the current batches?

I don't see much difference. Individuals always differ even within a batch.

We've seen you playing excellent volleys and serving aces at the tennis court. What are your other personal interests that keep you energized?

I was a university runner-up in the lawn tennis tournament and was the captain of my college cricket team. I had been a squash player. I like reading a lot. Now days I play golf on weekends with an honest 12, 14 handicap (laughs). MBBS is the most difficult course, as stated by Guinness Book of World Records, so my advice to all is to have one's own hobbies. No one can spend the whole day reading medical text!

Anuj Sharma, '2k7 batch

Residency Updates

Indian PG:

Anita Rani ('03): Ob & Gynecology, PGIMER Chandigarh
 Bhawna ('03): Anesthesia, DMCH Ludhiana
 Ekawali ('03): Radiology, IGMC Shimla
 Kusum lata ('03): Ob & Gynecology, PGIMER, Chandigarh
 Nidhi Sharma ('03): Ob & Gynecology, GMCH, Chandigarh
 Nishant Saini ('03): Immuno-hematology & Blood Transfusion, GMCH, Chandigarh
 Nitika Goel ('03): Anesthesia, GMCH, Chandigarh
 Nitin Ahuja ('03): Anesthesia, GMCH, Chandigarh
 Priyanka Gupta ('03): Ob & Gynecology, PGIMER, Chandigarh
 Rahul Sharan ('03): Medical officer, Indian Armed Forces
 Reuben Kynta ('03): General Surgery, Topiwala National Medical College, Mumbai
 Ridhi Gulati ('03): Anesthesia, GMCH, Chandigarh
 Robin Gupta ('03): Pulmonary Medicine, GMCH, Chandigarh
 Ruby Jain ('03): Microbiology, GMCH, Chandigarh
 Sachin Garg ('03): Immuno-hematology & Blood transfusion, GMCH, Chandigarh
 Sonam Karan ('03): Ophthalmology, Army Command hospital, Kolkata
 Sukhtej Sahni ('03): Psychiatry, GMCH, Chandigarh

Swati Mehta ('03): Anesthesia, GMCH Chandigarh

Kaveri Gupta ('04): Ob & Gynecology, GMCH Chandigarh

USMLE:

Ashisk Khanna ('98): Anesthesia, Cleveland Clinic, Cleveland, Ohio
 Manish Thakur ('98): Internal Medicine, Wayne state university
 Anup K Singh, ('99): Unity Hospital, Rochester, NY
 Gurbakhshish Singh, ('99): New York
 Guneet Sarai, ('00)
 Sachin Gupta, ('2K1): Washington DC
 Aashima Sahni, ('2K2): John H Stroger Hospital of Cook County, Chicago
 Abhimanyu Saini, ('2K2): John H Stroger Hospital of Cook County, Chicago
 Manpreet Bhandal, ('2K2): University of Texas Medical Branch, Texas
 Prajit Arora, ('2K2): University of New Mexico, Albuquerque
 Sahil Chopra, ('2K2): Kern Medical Centre, CA
 Tejpreet Singh, ('2K2): Albany, NY
 Supreet Sethi, ('2K3): University of Arkansas, Little Rock, AR

Lest We Forget



This is to the batch of 2004:

*Should old acquaintance be forgot,
and never brought to mind ?
Should old acquaintance be forgot,
and old lang syne ?*

*For auld lang syne, my dear,
for auld lang syne,
we'll take a cup of kindness yet,
for auld lang syne.*

*And there's a hand my trusty friend!
And give us a hand o' thine!
And we'll take a right good-will draught,
for auld lang syne.
(Robert Burns)*

"Mera selection ho gaya medical college mein!" 50 of us entered GMCH, Chandigarh shouting this on a hot summer day in the July of 2004; our joy, aspirations and hopes touching the sky. Little did we know that we had a roller coaster ride in store for us.

The first year spent at the Prayas building was memorable for more than one than the loads of trials and tribulations along with. It will be remembered for the 'school like' discipline being imposed by the pre-clinical departments; standing in a queue to mark the attendance in the D hall to never ending sub-stages, stages and tutorials. It was also where the 50 strangers began the metamorphosis of being individuals to define the batch of 2004. I cannot forget my introduction to the cadavers in the D-hall; it dawned upon me then what I had let myself into. The 'interactive sessions' with seniors, the first plexus (invariably most of us had our faces painted with or without consent!); the first planned mass bunk, the overnight dance parties and the first euphoric experience at the "Euphoria" 2005 – the first year just flew by and suddenly exams were upon us.

Having made it through the exams, the second professional – the proverbial 'Honeymoon period' of MBBS began, as if we were not honeymooning in the first prof. It was a time for full on masti, total 'vellapanti' for almost about a year! I remember it for organisation of the innumerable dance parties, fresher's, annual day function and sports meet, the 'official' trip to AIIMS for pulse and the 'unofficial' one to Shimla for Stimulus. Those bus rides are just etched in our memories. We also had our share of mischief - locking the lecture theatre door and escaping through the rear windows to avoid a microbiology tutorial and inventing a fictitious person's birthday to get an 'official bunk'. And not just that, back to back movie marathons with friends – man that was a different time altogether!

The third year dawned with the anti-reservation movement beckoning us to get involved, like never before, with numerous marches, hunger strikes and shouting slogans till the throats start to hurt. It was also when we successfully organised Plexus 2006. But this was also the time we became serious about studies and debated career options while still keeping occupied, towards the end of the year with, the preparations for Euphoria'08.

The final year was a tough cookie not just academically, but personally too. It started with the unfortunate demise of one of our batch mate and the unfortunate events that followed lead to the cancellation of Euphoria 2008. It was a warming change though to see my previously 'fun-loving' classmates arguing in favour of having more tests and seminars! Final exams were thoroughly draining, but for several of us a planned trip to Bombay and Goa after the exams, got us going.

And now that I sit, reminiscing myself of those first experiences, unforgettable memories, and bonds of life lasting friendships, I miss hanging out in the canteen, night outs and late night movies with friends, planned and unplanned trips to Manali, Dharamshala and Rajasthan, discussions on anything and everything, and celebrating each day and each festival.

Medical college was a time for leg pulling – I recall where one of us would act drunk and show up at a friend's place – or someone would change cell phone SIM card and would invite unsuspecting guys for dates with 'girls'! It was a time for 'blunders' – just to name a few - tapping on a table when asked to demonstrate percussion even when being provided with a live subject, labeling the Sturms' Conoid without even drawing the figure (labels being received by SMS of course during the exam), presenting a respiratory case as a psychiatry case in medicine final! Cupid too played its role with several proposals, make-ups and eventual break-ups.

Five long years ago, we entered medical college as bubbly teenagers, as medical students, as the Batch of 2004 and now we graduate as adults, as the Class of 2009, as confident doctors who will foray into the real world and begin the arduous task of trying to alleviate the suffering.

Bon voyage, my friends, for the rest of your journey...and do give me a shout from wherever it takes you!

Aakash Agarwal, '2k4 batch

Tied in Marital Bliss



Neeraj Kaur ('99) got married in April, 2010

Basant Garg ('99) tied the knot in March, 2010

Rajani Rangray ('2K) will tie the knot in 2010

Guneet Sarai ('2K) got married in 2010

Abhinav Gupta ('2K) took the marital vows in 2010

Shweta Gupta ('2K1) tied the knot in 2010

Abhimanyu Saini ('2K2) and Ashima Sahni ('2K2), pictured, will tie the knot in May, 2010

Tejpreet Singh Lamba ('2K2), pictured, got married in 2010

Candid Camera

Mini Re-union of 1992 batch

Left to Right: Navneet Singh, Shaloo Gupta, Tania Lamba, Pooja Rao, Vikas Goyal, Anil Aggarwal and Ashutosh Sharma



2K7 batch trip to Nainital and Jim Corbett Park

From camping on the untouched sandy shores to taming the mighty Ganga with rafting, from spending a memorable time in the picturesque location of NAINITAL to what can be called the ULTIMATE SAFARI in the jungles of JIM CORBETT, and lastly from those endless seep and bluff games to spending nights cracking deadly PJs...the best class trip ever!!! (Photos courtesy Anuj Sharma)



Mini Re-union of 2003 batch

Picture courtesy of Harshabad Singh (~2K3) during his recent trip to India; he currently is a research fellow at Mass General Hospital, Harvard University, Boston.

Nostalgia, 1998 Batch

Photographs courtesy Manish Thakur

