



neiadvl NEWSLETTER

Official mouthpiece of N.E. States Branch of IADVL

WORDS FROM THE EDITOR



As I begin summing up the activities of The NEIADVL in the last 5 months and the articles contributed by some of our members for the newsletter, I am filled with a sense of pride for being a part of a family with so many creative and versatile people, whose incessant and tireless efforts are not only helping the society but also helping each one of us grow into better professionals. The workshops, CMEs and the Vitiligo awareness programmes conducted across the region stand as a testimony to my statement. It reminds me of the famous author, G.B. Shaw, who once wrote, "I want to be thoroughly used up when I die, for the harder I work, the more I live. I rejoice in life for its own sake." I express my heartfelt gratitude towards everyone whose collective efforts have worked towards the betterment of our organization and profession, and it includes the ones who have contributed their precious articles to make the newsletter a readable one.

As an editor, collecting articles for the newsletter has been a challenging task for me. However, writing or not writing is a personal choice. Professional and family responsibilities often leave us very little time to devote to writing. But I believe that writing out our thoughts, and publishing any article, whether scientific or fiction, always gives us a sense of contentment.

The previous issue of the newsletter (my first as an editor), was lucky to be released amidst nature, in Dibru Saikhowa national park. This time again, luck has favoured me, as this issue is going to be released in CUTICON Shillong, the Scotland of the East, cradled in the beautiful mountains and the lush green valleys. I wish the conference a grand success. I also hope you enjoy the newsletter, and have a good read!



Dr. Nazneen Jahan
Editor, Newsletter, NEIADVL

President's Message



It gives me great pleasure to know that CUTICON NE States 2017 is being organized at Shillong on 27th and 28th October 2017, and another issue of the "NEIADVL NEWSLETTER" is being released.

I hope the occasion will be very successful, and the members of IADVL NE States Branch will enjoy the conference, and the Newsletter.

I wish the success of the Newsletter as well as CUTICON 2017.



Dr. Pañkaj Adhicari
President, IADVL NE State Branch

Secretary's Message



It is a matter of great pleasure to present before you yet another edition of the NEIADVL Newsletter, the coveted mouthpiece of the North East States Branch of IADVL at the CUTICON NEIADVL 2017, Guwahati.

The newsletter has served as a coveted platform for the exchange of views & knowledge amongst the members of the NEIADVL and I am sure it will be another masterpiece at the hands of its Editor, Dr. Nazneen Jahan who has not left a single stone unturned in giving it the honour it deserves.

Wishing all success to the Newsletter as well as the CUTICON NEIADVL 2017.

With Warm Regards



Dr. Anaf Jyoti Bordoloi
Secretary, NEIADVL

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Message from the organizing secretary, CUTICON NE States 2017



This is a proud moment for me that the Shillong Chapter of NEIADVL is organizing the 28th Annual conference of North East States branch of Indian Association of Dermatologists, Venereologists and Leprologists (IADVL) CUTICON NE States 2017 at NEIGRIHMS, Shillong on 27th and 28th October, 2017. I welcome you all to this prestigious event of NEIADVL.

There will be two full day conference including a Dermoscopyworkshop in CUTICON NE States 2017. The theme of the conference "addressing the common skin diseases in a comprehensive way" is to address the core of clinical Dermatology which tends to become a no-frills subject. All our facilities are highly experienced in their field and of high repute. There will be many panel discussions in the conference. I am happy to share that Assam Council of Medical Registration has given 4 CME credit hour points for the conference.

All our members have worked very hard to give you a memorable event. I am deeply thankful to the organizing committee. I am also thankful to the Director of NEIGRIHMS and all my senior members of NEIADVL who have been helping me whenever I need.

I hope you will enjoy the scientific deliberations of the conference as well as our hospitality.

Dr. Binod Kumar Thakur
Organizing Secretary
CUTICON NE STATES 2017

Activity Report NEIADVL (June '16 – Oct '17)

Membership drive : The total strength of the branch till date stands at 144 members of which 118 are life members & 26 are provisional life members. 10 members have newly joined the branch during this period of which 8 are LMs and 212 PLMs. Out of 26 PLMs 15 are pursuing their PG courses. 4 PLMs were converted to LMs. 2 LMs have shifted from another branch namely Manipur to the NEIADVL. The number of PLMs pending conversion to LMs is 11.

The state wise distribution of life members are as follows –

Assam – 90, Arunachal Pradesh - 3, Meghalaya – 11, Mizoram – 5, Nagaland – 5, Tripura – 3, Sikkim - 1

The percentage of member sign-up (LM+PLM) in the IADVL website is 93% (134). The no. of registered e-voters (LM) is 109 (92.37%).

Academic Activities :

MIDCUTICON NEIADVL 2017: The MIDCUTICON 2017 was held on the 3rd of June, 2017 at the Royal Princess House Boat, Dibru Saikhowa National Park, Tinsukia. It was the first occasion that a NEIADVL event was being organised on a moving houseboat in the waters of the river Brahmaputra. The organising committee had Dr. U.K.Paul as the Organizing President, Dr. Ronjon Bhattacharya as the Organising secretary & Dr. Anupam Agarwal as the Scientific Secretary.

The event started with a half an hour inaugural function graced by a welcome address by Dr. U.K.Paul. This was followed by the Presidential speech from Dr. Pankaj Adhicatori, President, NEIADVL. The founder members of the NEIADVL namely Dr. Jogesh Das, Dr. M.M.Huda & Dr. K.N.Barua did the honours of lighting the ceremonial lamp. This was followed by the release of the NEIADVL newsletter by the President, NEIADVL. The function was completed by a vote of thanks by the Organizing Secretary, Dr. Ronjon Bhattacharya.

The General Body Meeting followed thereafter & was presided by the President, NEIADVL. Amongst the important decisions taken were the formation of a new finance committee to look into the audit report of the NEIADVL account, selection of Kaziranga as the venue for next year's Dermazone East with Dr. Krishna Talukdar as the Organising Secretary & selection of future office bearers of NEIADVL alongwith venues for MIDCUTICON & CUTICON on the basis of applications from prospective participants. The GBM concluded with a vote of thanks from the President, NEIADVL.

The Scientific sessions started with a presentation on "Cicatrical Alopecia" by Dr. Binod Kr. Thakur focussing on the various causes, their diagnosis & treatment options. It was followed by a panel discussion on "Endocrinological Acne" moderated by Dr. Sherina Nasreen Lashkar with Prof. Jyoti Nath, Dr. Shyamanta Barua & Dr. Anal Jyoti Bordoloi as the panellists. The discussions focussed on the clinical aspects of acne not responding to conventional modalities of treatment which have got an underlying hormonal aberration & which require a hormone based therapy to control it. Along with that it also dealt on the treatment modalities available & the fact that the comorbidities related to this class of acne required a multispeciality approach.

The entire event concluded with a vote of thanks from the Secretary, NEIADVL.

Dermatosurgery Workshop: The Departments of Dermatology & Plastic Surgery, Assam Medical College, Dibrugarh in collaboration with the Dibrugarh Chapter of NEIADVL & the SIG-Dermatosurgery organised a daylong Dermatosurgery Workshop at the OT complex of the Plastic Surgery Deptt. on the 4th of June, 2017. The event had Dr. Somesh Gupta, Additional Professor, AIIMS, New Delhi; Dr.T.Salim, Consultant Dermatologists, Calicut, Kerala & Dr. Manas Ranjan Puhan, Bhubaneswar, Odisha as the faculty members. Dr. Shyamanta Barua was the Organising Chairperson & Dr. Kumud Agarwal was the Organising Secretary.

The workshop was preceded by a CME on the evening of the 3rd of June, 2017 where Dr. Somesh Gupta & Dr. T. Salim gave an overview of the basics of Dermatosurgery as well as various dermatosurgical procedures along with video demonstration.

The Workshop started in the morning of the 4th of June at 9.00AM & was

attended by about 40 delegates from different parts of the state. Dr.T.Salim started the proceedings with a Non-cultured melanocyte transfer to a case of stable vitiligo. Dr. Somesh Gupta took up a case of acne scar & demonstrated subcision followed by subcutaneous electrosurgical correction of the scars. He also demonstrated scar excision along with the suturing techniques. Dr. Manas Ranjan Puhan demonstrated various nail procedures like nail avulsion, plastic tube insertion of ingrowing nails & nail biopsy. A case of trypsinised graft placement was demonstrated by Dr. T. Salim. Besides these a number of other procedures were also taken up for demonstration. The procedures

were focused live in the adjacent seminar room from where the delegates were able to interact directly to the experts. There was active participation from the delegates who had a number of queries & which were aptly answered by the experts.

The workshop concluded at about 2.00pm with a vote of thanks from the Organising Chairperson, Dr. Shyamanta Barua.

Paediatric Dermatology CME: The Department of Dermatology, Gauhati Medical College & Hospital in association with the NEIADVL organised a daylong CME on Paediatric Dermatology on the 9th of September, 2017 at the O&G Hall of the Institute. The CME was organised under the auspices of SIG Paediatric Dermatology, IADVL & was the third of its kind in a series of such CMEs.

Dr. Tanumay Raychoudhury from the TATA Medical Centre, Kolkata; Dr. Ankan Gupta, Assistant Professor, CMC Vellore; Dr. Rahul Mahajan, Assistant Professor, PGI Chandigarh & Dr. B. Kalyan Chakravarthy, Neonatologist, St. John's Medical College, Bangalore were the invited faculties from the SIG. There were other speakers representing the NEIADVL as well. The programme started with a session on "Paediatric Infections" which had three topics namely "Paediatric Tinea" by Dr. Vinod Kr. Thakur, Assistant Professor, Deptt. of Dermatology, NEIGRIHMS, Shillong; " Leprosy in Children" by Dr. Arup Paul, Silchar Medical College & "HIV in paediatric age group" by Dr. Nasir Rahman, Consultant Dermatologist, Guwahati. This was followed by a short opening ceremony featuring the lighting of the ceremonial lamp by senior dermatologist Prof. K.N.Barua followed by a welcome address by the President, NEIADVL, Dr. Pankaj Adhicatori. The second session of the day "The Child with Rash" featured three lectures namely " Fever with Rash: A Paediatricians View" by Dr. Gayatri Bezbaruah, Professor & HOD, Deptt. of Paediatrics, GMCH; " Atopic Dermatitis: Key points in Pathogenesis & Management" by Dr. Tanumay Raychoudhury and "Diaper Dermatitis" by Dr. Seujee Das, Registrar, Deptt. of Dermatology, GMCH. The third session was a panel discussion on "Childhood Psoriasis" moderated by Dr. Indrani Dey, Consultant Dermatologist, Guwahati. The panelists consisted of Dr. Padmaja Saikia, Professor & HOD, Deptt. of Dermatology, Barpeta Medical College; Dr. Sherina Lashkar, Registrar, Deptt. of Dermatology, GMCH; Dr. Tanumay Raychoudhury & Dr. Rahul Mahajan.

In keeping with the MCI guidelines there was a 15min talk on "Teaching Ethics" by Dr. Deepak Kr. Sarma, Prof. of Surgery, Dibrugarh Medical College.

The next session consisted of three lectures "Paediatric Vasculitis" by Dr. Rahul Mahajan, "Primary Immunodeficiency" by Dr. Ankan Gupta & "Approach to Vesicobullous disorders in neonates" by Dr. B.Kalyan Chakravarthy.

The post lunch period started with a Post Graduate Quiz conducted by Dr. Tanumay Raychoudhury. Gauhati Medical College represented by DR. Atul Bothra & Dr. Anshu Maheshwari were the winners of the quiz.

A panel discussion on "Childhood SLE" moderated by Dr. Bornali Raybaruah had Dr. Pankaj Adhicatori, Dr. Chayanika Kalita, Dr. Ankan Gupta & Dr. B.Kalyan Chakravarthy as the panelists. The last session was also a panel discussion on "Common Skin Problems" like Papular Urticaria, Molluscum Contagiosum, Pityriasis Rosea & Alopecia Areala moderated by Dr. Jahnvi Gogoi which

UPCOMING EVENTS

An academic feast specially for the post graduates, the **PGCON EAST** to be held in 29th and 30th December 2017 at Gauhati Medical College, Guwahati

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Adding Colour to your life

Dr. Urmila Baruah
Professor, Dept of Dermatology
Gauhati Medical college & Hospital,
Guwahati Assam

Have you ever thought about that white wall in your living room and how it soothes and has a calming effect over you when you return home from a hectic day's work? Color the way we feel. It can affect our moods in either a positive or negative manner. Do you feel uncomfortable wearing certain colors or being in a room that is saturated in a particular color? Are there other colors that make you feel comfortable? The colors that we wear and surround ourselves with reflect our inner state being. The pink, blue and yellow colours around you in your home can have more than profound effects in your life and on you rather than your surroundings colorful.

Colours for health, energy and mood

We are surrounded by colours all the time, but how often do we use them to improve our health, alter our emotional state, change our mood, or boost our morale?

Many of us find that a good standard of health and well-being is becoming more and more difficult to achieve. We all take more medicines than ever before and many of us need outside help to give ourselves energy, calm us down, help us to cope. But we can improve



our health and well being by being aware of colour, getting to know what it can do for us, and using it skilfully, we can bring our energy back into balance and improve our health and well-being every day of our life. There are many different colours that we see on a day to day basis, some colours elicit happiness and warmth, whereas others many evoke sadness and depression, calmness, anger, passion, pureness, or just about everything in-between.

You may not think about it, but colours really do affect how we act and feel. Colours influence our mood, emotions, sense of uneasiness, sense of well being, sexual ability, and view of perception.

Colours can actually tell a lot about a person. When you ask a person what his favour colour is, that colour can actually determine temperament and basic traits.

How Can Colour Heal

Because colours affect our emotions and can predetermine traits, they can be used to help heal and balance the body and mind. Colours evoke feeling naturally, so color therapy is base on the natural reactions to colours. Each person will react to the same colour differently, so colour therapy isn't an exact treatment course, but it has been proven effective.

Colour therapy, or chromotherapy, is a holistic technique believed to balance the body through the use of color and light.

Colours Can

- Heal and comfort.
- Unlock your creativity.
- Change your mood.
- Release energy blockages.
- Alleviate physical, mental and emotional conditions.

How Colour Effects Us?

Physical colour in the environment effects our moods, relationships, and well being.

Colours Evoke Feelings

Red - love, passion, sexuality, anger, aggression,

independence, masculinity.

Orange - luck, charm, stimulation, success.

Yellow - knowledge, life, vitality, communication.

Green - fertility, growth, harmony, healing.

Blue - peace, tranquility, calmness, loyalty, honor, patience, femininity.

Indigo - stability, devotion, cooling.

Purple - spirituality, dignity, compassion.

White - purification, protection, inspiration, truth seeking.

Pink - love, innocence, sweetness.

Turquoise - originality, insight, alterations.

Brown - protection of household, pets and family, solidify relationships, conversation.

Grey - negative, erasing something, cancel something.

Black - break free from bad habit, mystery, deep meditation.

Gold - authority, investment.

Silver - female energy, birth, healing hormonal imbalance.

Copper - love, passion, positive relationship, career promotion, business, negotiation.

The next time you are in a fast food restaurant take a look at the walls. Are the colours bright and powerful? Red? Yellow? Orange? Those colors have been selected to make you feel happy but they have also been proven to stimulate the nervous system and increase your appetite. More importantly, they may also contribute to your feeling uncomfortable if you stay too long. Color therapy is based on the fact that our psychological functions respond to specific colors. How does this happen? Within the brain are pineal glands, which control the daily rhythms of life. When light enters through the eyes (or the skin) it travels neurological pathways to these pineal glands. Different colors give off different wavelength frequencies and these different frequencies have different effects on physical and psychological functions.

Heal With Colours :

Red - Symbolic of fire, anger, and passion; stimulates the root chakra at the base of the spine. It is a very strong color that stimulates blood flow to the extremities. It can be useful in illnesses such as low blood pressure, rheumatism, paralysis, anemia, and advanced tuberculosis.

Orange - Symbolic of pride and prosperity. It is an energizing colour that stimulates the nerves and blood pressure, supply. The colour orange can stimulate creativity, relieve excess sexual expression, stimulate the lungs, aid in digestion and respiration, relieve muscle cramps, and increases thyroid activity.

Yellow - Symbolic of happiness; stimulates the solar plexus. Yellow is a stimulating colour that is beneficial for the brain, stomach, intestines, spleen, and liver. It can help treat diabetes, indigestion, constipation, syphilis, impotence, eye infections. The colour yellow can act as a laxative and diuretic, strengthen nerves, soothe nerve pain, increase skin health, and heal scarred tissue.

Green - Symbolic of harmony and nature; stimulates the heart charka. Green is a mild sedative that can be useful for nervous conditions, hay fever, ulcers, influenza and the common cold, malaria, sexual disorders, cancer and inflammatory conditions, strengthens the eyes and eye sight, treats emotional imbalances, purifies the body from germs and bacteria, heals the kidneys, strengthens the immune system.

Blue - Symbolic of peace and melancholy. Blue is a calming colour. It can be useful to alleviate pain, reduce bleeding, heal burns, treat asthma, colic, high blood pressure, skin conditions, and respiratory disorders. It aids inflammation, stops bleeding, relieves fever, aids stress relief, relieves itching, and calms aggression and hysteria.

Purple/Violet - Symbolic of relaxation and religion. Purple is a stimulant that combines red and blue traits. It can be useful for advanced constipation, cataracts, migraines, skin disorders, it can treat emotional disturbances.

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White - Symbolic of purity. White is the true colour of healing. The colour is to be directed into the place that needs healing and treatment in order to help heal the area. White is commonly used as spiritual healing.

Turquoise - Turquoise is a mixed colour of white, green, and yellow, which is a healing mixture. The colour can increase intuition and sensitivity, act as an antiseptic, relieve stress, aid in skin health, and help tone the organ system.

Green - Soothing, relaxing mentally as well as physically, helps those suffering from depression, anxiety, nervousness. (Want to feel totally relaxed? At the end of a long day take a long bath in the tub in your bathroom the room with the light green walls.)

Violet - Suppresses appetite, provides a peaceful environment, good for migraines. (The scent of lavender also alleviates migraines- and lavender is violet.)

Pink - Used in diettherapy as an appetite suppressant, relaxes muscles, tension, soothing. (As part of a weight control program at Johns Hopkins Medical University in Baltimore, patients are given a colour square called "bubble gum pink." Which has been shown to suppress appetite and stress related snacking, also has reduced the violent tendencies of prisoners as well as a yellow legal pad).

Yellow - Energizes, relieves depression, improves memory, stimulates appetite. (Since yellow helps improve memory, try studying by writing your notes on a yellow legal pad).

Orange - Energizes, stimulates appetite and digestive system. (Want to feel energized? Wear orange).

Relieve Anxiety Through Colour Breathing

1. Sit upright or lie down in a quiet and comfortable location.
2. Imagine your body being bathed in blue light from the top of your head to the bottoms of your feet for four minutes.
3. Imagine green light entering through your navel and spreading out through your body. Take just one minute with the color green.
4. Inhale the colour of your choice, and imagine it spreading through your body.

5. Exhale and imagine the complementary colour leaving your body. Complementary colours are found opposite one another on a colour wheel. For instance, complementary colour for blue is orange, and the complementary colour for green is red.

6. Take two minutes to mentally engulf your entire body in white light. Once you're done, stretch your body, slowly, "waking up" from your colour meditation. This is a quick and free way to relieve anxiety just about any where event at your office.

Feeling At Home

At home, colour response is most beneficial in reducing stress and increasing family harmony. Individual tastes of all family members should always be taken into consideration when choosing a colour scheme for a room; however, if an emotional quality is missing in our lives, we can evoke that quality by bringing in the respective colour. Once you understand the principles of colour response, you will

be able to use them to enrich your life.

How to use Colour Therapy to Relieve Stress

1. Surround yourself with pink. It's the colour of calm tranquility. Add small splashes of pink around the home to create an atmosphere of calm. You can use pink in the bathroom, bedroom or other areas. Wear a pink sweater or other accessories to balance your energies and promote inner peace.
2. Add Yellow to your life if you've feeling down. Yellow is an excellent colour to lift your spirit and relieve depression.
3. Choose blue for a calm environment and a good night's sleep. Blue is a very relaxing colour. It promotes tranquility and healing. If you're suffering from insomnia, put yourself to sleep by adding plenty of blue to your bedroom decor, Choose bedding in shades of blue and wear blue pajamas. Blue is also a good colour to wear when speaking in public since it promotes good

communication.

4. Add a touch of green to your environment and wardrobe, Green is a very soothing colour. It promotes harmony and relieves anxiety. Spruce up your home with green accessories including houseplants. If you're feeling drained wear something green and invigorating.
5. Put some violet in your life. Violet is the color of wisdom, peace and strength. Wear it for inner peace. Use it in your home to promote a peaceful environment.
6. Choose classic white for a clean look and feel. White is cleansing and purifying. When used in the home decor white gives a clean, fresh look and rally opens up a room. Make white a staple in your wardrobe. Wearing white helps to cleanse the mind and purify the spirit. One of the great things about using white in the home or wardrobe is that it goes with everything. Be sure to keep your white clothing and decor clean

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Treasurer's Report N. E. states branch, IADVL (from May, 2017 to October, 2017)

TOTAL COLLECTION	AMOUNTS	TOTAL EXPENDITURE	AMOUNTS
Provisional Life Membership fees as received from Central Committee	9,000.00	Travelling expenses of faculty members for Dermatosurgery workshop	75,414.00
Surplus money from CUTICON, 2016, Guwahati	6,00,000.00	To Avishek Media (for newsletter printing)	49,000.00
Amount received from Torrent for Dermatosurgery Workshop, Dibrugarh	1,96,000.00	For food and other expenses incurred in the Workshop	1,35,634.00
Interest credit	38,317.00	Travelling expenses of Dr. P. Adhikari and Dr. A. Bordoloi for CCMeet	23,930.00
		For Opening of New Bank Account	12,000.00
		Expenditure for Skin Camp	7,000.00
TOTAL INCOME	8,43,317.00	Total expenditure	3,02,978.00

Surplus amount = Total Income - Total Expenditure Rs. 8,43,317.00 - Rs.3,02,978.00 = Rs. 5,40,339.00

In our General Savings A/ C till April, 2017 there was Rs.16,24,061.00

Now the amount in the same A/C is Rs.16,24,061.00 + Rs. 5,40,339.00 = Rs.21,64,400.00

Fixed deposits	1.	Rs. 15,500/-	(Matured in July 2014)
	2.	Rs.1,30,000/-	(Matured in Sept. 2014)
	3.	Rs.1,08,605/-	(Matured in July 2014)
	4.	Rs. 58,703/-	(Matured in June 2014)
	5.	Rs. 45,158 /-	(Matured in August 2015)

Total Rs.3,57,966/-

Amount of money in the name of association

Rs.3,57,966.00 + Rs. 21,64,400.00 = Rs.25,22,366.00

Dr. Chayanika Kalita
Treasurer,
N.E.States Branch, IADVL

The Doctor and the Patient- a relation going berserk

Dr. Nazneen Jahan

The country, these days is gripped by a new epidemic – an epidemic of violence against the doctors and the medical staff.

There was a time, when doctors were bestowed upon a divine status, when people blindly trusted them with the lives of their loved ones. But the current scenario seems alarming! With rising incidences everyday, this epidemic is standing as a Goliath, squashing the already fragile doctor patient relationship.

Current scenario globally

Innumerable incidents of violence against doctors, happening in different corners of the country have come to light within a short span of time, making us skeptical of our so called "noble" profession, and wary of our patients!!

We doctors are already surrounded by a partial hatred, ingrained in the minds of people against our fraternity. The exaggeration by the media always adds fuel to this. Moreover, a frustration at the futility of the system surrounding us, seems to often gnaw at our souls.

Inquisitiveness made me flip through the pages of newspaper articles, online articles, journals etc which have made me unearth the fact that it is not only the doctors of my country that are suffering. Surveys and statistical reports reveal that it has invaded the medical corridors across the globe. WHO states that between 8% and 38% of health workers suffer physical violence at some point in their careers. Many more are threatened or exposed to verbal aggression. The American Bureau of Labour Statistics shows 70% of all non-fatal workplace assaults in the US occur in healthcare settings. A recent survey conducted among the hospital staff in Turkey shows that 74.4% of the doctors and nurses were exposed to some sort of violence, which includes both verbal and physical violence. The cases were under-reported by the hospital administration and the victims; the most common reason of under reporting being the too lengthy judicial proceedings.

This has left me wondering if intellectual beings fail to communicate with the emotionally wrecked patient. Or are we too casual or even careless in our communication?



A quick gaze at the newspaper articles brought into light the fact that the incidences of violence are more common in the Asian countries like India, Nepal, China, and Pakistan. Now it is left for us to ponder..WHY?

This reminds me of a Face book post that was flooding my newsfeed recently, which reads, "If you think it is okay to assault a nurse, doctor or ambulance officer, we'll give you up to 14 years to think again".

This law has been enforced in new Queensland (Australian province).

But sadly, we do not have such vigilant legal system here in India yet. Some of our judges have even opined that if we are scared, we better remain within the same confines of our homes, away from patients! So, we are again left to

build our own castle of safety. But how?

If we look around, in majority of the cases, it is not medical negligence but lack of proper communication that takes a toll on our profession. Proper communication and tactful dealing with patients now seems to be our greatest security.

The neglected spark- Miscommunication

A few days back, one of my cousins came to me with a prescription from a renown physician, just to ensure that the medicines he was taking were on the right track. I could not suppress the urge to enquire why he did not trust his doctor. He explained to me that after waiting for hours in the long queue, the doctor barely spent a few minutes explaining to him about his disease. He could not open up about his predicament, since the doctor was too busy to listen to his detailed description and cut him short. He quickly scribbled on the prescription, handing him a list of tongue twister drugs with no counselling. This gave him the impression that the doctor did not pay any heed to his symptoms. I knew, his disease was trivial and those medicines would take care of it, but the patient did not know it. He was not sure if he should even follow that prescription. After assurance, he did start the drugs prescribed and regained his disrupted trust on that particular doctor.

Thus, we lose trust. And a person who feels neglected and cheated will lash out far more easily than someone who thinks that we have tried our best.

Building the communication

Words have tremendous healing power, because words can motivate a person to take his drugs regularly. Words can channelize a person towards the lifestyle modifications required for many ailments. Effective communication is therefore the heart and art of medicine.

A review article on doctor-patient communication published in the Ochsner Journal, highlights a few potential pitfalls created by improper communication by the doctor—

1. non-disclosure of information regarding the disease
2. Avoidance behaviour, i.e. avoiding discussion of the emotional and social impact of the patient's problems created by the disease. Inability to discuss them created distress among the patients.

The article suggests ways of skillful communication like attentive active listening, developing empathy and use of open ended questions. Minimizing the distractions and interruptions during the consultation e.g. a constantly ringing mobile phone, have also been suggested in the study.

The non verbal communication

The non verbal cues that a doctor sends also seem to be very important. Another article published in the British Journal of General Practice emphasizes on the non verbal behaviour during consultations and considers it as significant as the verbal message we send across. Patients do not necessarily believe a reassuring verbal comment if accompanied by a contradictory facial expressions and vocal hesitancy.

In an observational study from Poland, it was seen that the doctor's tone of voice and degree of eye contact were particularly associated with patients picking up signs that their doctors seemed uninterested in them.

The placebo effect

We are all aware of the placebo effect. Although science is yet to unveil the complete mechanism of the effect, we have enough evidence gathered through various clinical trials that a placebo does provide symptomatic relief. There is no evidence that a placebo can shrink a tumour or heal a broken bone, but when it comes to ailments with subjective complaints like pain, it can show tremendous response. The expectation that a pill will provide cure activates reward pathways in the brain, in turn stimulating the release of endorphins (the happy hormones), which are chemically similar to opiates like morphine. They bind to opioid receptors and cause pain relief.

Thus the faith in the drugs prescribed, can help release some endorphins, which will add up to the symptomatic well being. Therefore, building trust might not only save us from the wrath of a dissatisfied patient but also subjectively increase the efficacy of the prescribed medicines!!

A lesson from the half baked but successful doctors

I have some friends who practise homeopathy. They also claim to treat various skin ailments. Recently a few patients were referred to me by them, and one of them had extensive Tinea incognito. She said she was on homeopathy medicines for last 6 months but it didn't give her any respite. I diagnosed the condition, and quickly handed over my prescription, with my usual list of do's and don'ts. But to my surprise, she went back to my friend, the homeopathy doctor, for a second opinion. Only after her reassurance, she shifted to my allopathic medicines. The patient later came to me for a follow up and started trusting me and my "pathy" only when she saw her skin lesions resolving. Unlike the homeopathy doctor, who could win trust and respect, though her medicines were not working! It leaves me speechless when I see that none of her patients out rightly blame her or lash out on her. I wondered what the miracle was, until one day, by sheer luck, I happened to see her consulting a few patients. I then understood what real empathy meant. The conversation went on for long minutes, quivering between the disease and the personal problems the patient was facing because of the disease. She appeared to have a solution up her sleeve for each one. When solving seemed too precarious, she would come up with real empathy. Her words stood at the right place every time, like a magic wand, and patients went out hopeful and relieved. In fact I believe her words were providing the placebo effect!

If we conduct a survey on the assault of doctors, the hardworking doctors with real degrees will outnumber the fake ones and quacks, as victims. Although multiple factors come to play, but the patient counselling and communication can also be counted as an important factor.

A heavily loaded opd, strenuously long duty hours... all of these act as deterrents in our dealings with patients. Maybe, we as doctors can take a little more time in talking, and reassuring patients in the old fashioned way, to restore the patient physician relationship into one of mutual trust and respect amidst

all the disintegration of societal exchanges that are witnessed by the patient. However, "to err is human". And as Shakespeare said, "frail creatures are we all, to be the best is to have the least faults"...In congruity with the words of Shakespeare, we can make a sincere attempt at minimizing our flaws of simple communication.



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Activity Report NEIADVL

had Dr. Kanak Ch. Talukdar, Dr. Jagjeet Sethi & Dr. Gautam Mazumdar as the panellists.

The CME was attended by about 90 delegates consisting of both Dermatologists & Paediatricians from different parts of the state as well as the other North Eastern states.

Other CMEs:

10th June 2017: Role of Bepotastine in Dermatology by Dr. Angshuman Bhattacharjee, Silchar

4th August 2017: Changing epidemiology & difficult to treat Cutaneous Fungal Infections by Dr. Arup Paul, Silchar.

14th October 2017: Female pattern hair loss and advancement in hair therapy by Dr. Atul Bothra, Guwahati

Observation of World Vitiligo Day:

Dibrugarh Chapter : The Dibrugarh Chapter observed the World Vitiligo on the 24th & 25th of June, 2017. A CME was organised in the evening of 24th June with Dr. Kumud Agarwal as the speaker highlighting on the various treatment modalities available & the current scenario of vitiligo.

On the morning of 25th June the chapter carried out a rally from the campus of the Assam Medical College, Dibrugarh in order to bring about public awareness towards the condition. Besides information leaflets were also distributed in different parts of the city highlighting the myths & realities associated with vitiligo.

Guwahati Chapter : The Guwahati City Chapter observed the World Vitiligo day on the 24th of June, 2017. A public awareness programme was observed in the morning at the OPD of the Deptt. of Dermatology, Gauhati Medical College where the faculties highlighted the myths & realities regarding vitiligo. The activities were publicised in various electronic & print media.


In the evening a CME was organised where Dr. Debashree Saha, Registrar, Deptt. of Dermatology, GMCH deliberated on "Newer Concepts in Vitiligo".

Senior Dermatologist Dr Jogesh Das wrote an article on Vitiligo & World Vitiligo Day which was published in an Assamese daily.

Barak Chapter : The Barak chapter observed the World Vitiligo Day on the 27th of June, 2017 at the Deptt. of Dermatology, Silchar Medical College. Public awareness programmes were carried in different parts of the region.

Other Places: The World Vitiligo day was observed in other parts of the region as well. Barpeta Medical College, Barpeta, Assam observed it on the 24th of June by holding a public awareness programme at the OPD of the Deptt. of Dermatology.

Similarly, BRAMS Medical College, Agartala, Tripura observed it on the 26th of June at the OPD of the Deptt. of Dermatology.


Dr. Anal Jyoti Bordoloi
Secretary, NEIADVL

A life Remembered**Late Dr. Asish Dey**9-9-1972
to
10-9-2017Where ever there
was a beautiful soul,
there is a trail of memories

He was not only a well known dermatologist and faculty of Silchar Medical College, but also possessed the talent to compose thought provoking pieces of writing. Endowed with a strong will power, and a zeal to work, he was indeed a blessing to our organization. His untimely demise has left a void that can never be filled.

A few important days for dermatologists

Contributed by- Dr. Arup Pal
Silchar Medical College
and Hospital, Silchar

In IADVL calendar few important dermatological diseases are observed on particular days of the year. This is generally done to raise the awareness of the disease among the general population, remove the stigmata and enhance community participation. Generally on these days, dermatologists use different platforms like public lectures, usage of social media, distribution of leaflets etc to educate the masses. Each year a particular theme is given for observation of these days.

A few important days which are observed:

1. Leprosy Day- This day is observed on 30th January every year (or its nearest Sunday) to commemorate the death anniversary of Mahatma Gandhi. Ghandhiji realized the social importance of leprosy and tried his best to remove the stigmata associated with leprosy. Leprosy is associated with stigmata mainly because of deformity caused by disease.

2. Vitiligo day- 25th June every year is observed as world vitiligo day. Vitiligo is characterized by depigmented macules and due to this pigmentary change, its social implication is immense. People are taught regarding the non contagious nature of the disease on this day. The idea of a World Vitiligo Day was first nursed by Steve Haragadon, the founder of the Vitiligo Friends network, and then developed and finalized by OgoMaduewesi, a Nigerian vitiligo patient who is the founder and Executive Director of the Vitiligo Support and Awareness Foundation (VITSAF). The first World Vitiligo Day (also defined as "Vitiligo Awareness Day" or "Vitiligo Purple Fun day", from the color chosen as Vitiligo Awareness Color, was observed on June 25, 2011. The choice of June 25 as World Vitiligo Day is a memorial to musical artist Michael Jackson, who suffered from vitiligo from 1986 until his death.

3. Psoriasis Day – Psoriasis is a chronic inflammatory disorder of keratinisation characterized by relapse and remission, which adversely affects the quality of life of the affected person. Every year on 29th October, psoriasis day is observed to educate public regarding the nature of the disease and emphasis is given to provide psychological support to the patient. In 2004, several psoriasis patient associations got together, created a Steering Committee and made World Psoriasis Day a reality. Their dedication and enthusiasm ensured that the first World Psoriasis Day was a resounding success. It is presented by IFPA (International federation of Psoriasis Associations), which sets the annual theme for the day and creates campaign material. Today, World Psoriasis Day is observed in over 50 countries worldwide.

4. World AIDS day- Probably the stigmata and fear associated with HIV is highest. At present its a social problem. Every year 1st December is observed as World AIDS day. It has been celebrated since 1988. World AIDS Day was first conceived in August 1987 by James W. Bunn and Thomas Netter, two public information officers for the Global Programme on AIDS at the World Health Organization in Geneva, Switzerland. Bunn, a former television broadcast journalist from San Francisco, had recommended the date of 1 December believing that it would maximize coverage of World AIDS Day by western news media, sufficiently long following the US elections but before the Christmas holidays.

Public awareness is raised by delivering lectures, through distribution of leaflets, using social media and other awareness campaigns.

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Adding Colour to your life

because white that looks dull or dingy will only affect your emotions in the same way.

Chromotherapy, or colour therapy, uses visual colours to help heal the mind, body, and soul. The colour help to create a balance in the body to heal emotional disturbances and physical ailments. Different colours are used to balance and heal the body. So start now to use the colours around you, and see how your health, energy and mood improve. Colours can change your life!



Babul Doctor and Kawai Fish

Dr. Jogesh Das



I am sure everyone must have heard about quacks. A quack is a "fraudulent or ignorant pretender to medical skill" or "a person who pretends, professionally or publicly, to have skill, knowledge, or qualifications he or she does not possess".

No one knew his actual name, but Babul was one such "doctor" who practiced in one remote village. No one also knew about his qualifications or the institute he passed from, yet the villagers knew him as "Babul doctor". However, the story of Babul doctor is as mysterious as he is. Unable to pass his matriculation in several attempts, he hibernated for several years. One day, suddenly, Babul resurfaced hanging a stethoscope around his neck and claimed that he had passed a medical course and now, he was an eligible practitioner. The critics, nevertheless, had other versions of his qualification. They said that during his hibernated years, he worked with a doctor in Uttar Pradesh. Initially, he worked as a helper who used to clean the bottles and the instruments used by the doctor in his pharmacy. Later Babul helped him in dispensing the medicines also. Rumours were also strong that that one night he fled from the pharmacy with all the money the doctor had in his chamber. The stethoscope around his neck was the part of the same loot.

Babul doctor used to treat all type of diseases- from blood pressure to skin diseases to fever. Although he had a so called chamber, he was more interested in home visits. He had an old bicycle which was fitted with a box where he kept some medicines, syringes and one bottle of Benedict's solution. Critics also say that he learnt the technique of urine examination when he used to help the doctor in UP. Whenever he examined a patient, his routine investigation was urine examination, for which he used to charged Rs.20 as extra. He used to push injection in every case but never left the empty vial of the medicine. Rather he collected all those empty vials and destroyed it himself.

Whenever Babul paid a home visit, he never came back only with the consulting fees. Along with his professional charge, he always collected vegetables etc from the patient's house.

Once, a villager by the name Haren, had severe stomach pain and his elder brother Naren called Babul doctor for a home visit. After his routine check-up, Babul was offered tea and biscuits. After finishing his tea, Babul doctor collected his professional fees and yelled at Naren saying, "You people are selfish. I came to know that you have collected lots of fish from your pond. But never remember to share anything with me." Hearing this, Naren ran towards the kitchen and came back with a bag of fish. Seeing this, Babul was excited and asked Naren, "What kind of fish?". Naren replied "Kawai fish, doctor babu". With a smile on his face Babul asked "How many?" Naren replied "I have packed eight." Babul doctor got agitated and shouted at Naren saying, "I think you have planned to have a family feud in my house" Perplexed, Naren asked politely "What is the matter, doctor babu?" Babul doctor explained, "You know I have three children. Both husband and wife make us five in total. If you want us to enjoy our food with the children either you give me five fishes so that each of us can have one each or ten to make two each. You can either take away three or can add another two to make it ten. How can you give me eight which might lead to a fight between us?" Hearing this, Naren hurried back to his kitchen and got two more fishes and put it in the doctor's bag. This time again the so called doctor shouted, "I do not know why should I remind you everything all the time". Naren again politely asked "Again what happened doctor babu?" This time with a mysterious look, the doctor smiling slyly, said, "You have given me the fish, but at this odd hour where from will I collect vegetables to cook the same. I have seen lots of bottle gourd in your garden. Why can't you give me one so that I can have a nice lunch." Naren ran back to his garden and brought for him a fresh bottle gourd. Seeing this, the doctor was pleased. He packed everything and he peddled towards his home - with a contented smile.

Scientific publications by NEIADVL members (from June 2017 to October 2017):

1. White grain Eumycetoma due to *Aspergillus flavus* in Infancy: A rare case report from Assam... by Dr. Debeeka Hazarika, Dr. Ajanta Sharma, Dr. Lakshyaari Baishya, Dr. Madhab Kalita, from Gauhati medical College, Guwahati in the Journal of Pure and Applied Microbiology 11(2):969S:973 June 2017.
2. Prevalence of Metabolic Syndrome in newly diagnosed Psoriasis Patients: A case controlled study from a tertiary care hospital. by Dr. Debeeka Hazarika, Dr. Pavan Raj from Gauhati Medical College Guwahati, in the International Journal of Health Sciences and Research, vol7, issue 10, October 2017.

Glimpses from Pediatric Dermatology CME



Moments from IADVL Dermatosurgery workshop in Dibrugarh held in June 2017



neadvl NEWSLETTER

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World Vitiligo celebration from across the region





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