



AMASI Newsletter



(Association of Minimal Access Surgeons of India)

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From the President's Desk

Greetings from AMASI

The association of Minimal Access Surgeons of India has started the current year with the new team of office bearers.

Immediate past president Dr. Jugindra Sorokhaibam, Secretary Dr. Abhimanyu Basu and their team have led the association in the last term in a very organised way and kept high quality academic programme going on without any interruption even during the pandemic period. We are really grateful to the outgoing office bearers.



We witnessed the Annual conference of the association AMASICON back in full swing in Guwahati, Assam in November 2022. We congratulate Dr. Manoj Choudhary, Dr. Rocket Brahma and team for their hard work to bring out a very successful conference. The association thank Dr. Kalpesh Jani for bringing out the AMASI newsletters in a very impressive way during last term. AMASI is indebted to College of Minimal Access Surgery for the support for various educational programmes under the guidance of Secretary Dr. Tamonas Chaudhuri

This year the association has activated five zones under AMASI (North, South, East, West and Central). Now we have Central as well as Zonal Executive Committee members. We are hoping to extend AMASI activities both inside and outside the country.

A day with Master in Surgery done by Founder President Dr. C Palanivelu, Online CME Programme, Skill courses and various other academic activities are already going on. The training centre at Chennai is also coming out with more programmes. AMASI is also keen on social service projects. The flagship program with Free Laparoscopic Surgical Camp has already taken place at Hemalkasa recently under leadership of Dr. Dilip S Gode

Lot more academic events are planned in the current year. AMASI plans to associate on a bigger way with our friends in neighbouring countries and also with other international associations.

Request all to be a part of AMASI, be a part of academic programmes, membership drive and also various other upcoming activities. Let us together take AMASI to greater heights for enabling AMASI to maximise the benefits of Minimal Access Surgery

Dr. C J Varghese
President, AMASI

From the Secretary's desk



Dear Esteemed Members of AMASI,

Greetings from AMASI Headquarters!!

I am extremely delighted to know that our 2023 first edition of our Newsletter of AMASI is being published by our enthusiastic team.

Dear Colleagues, After two years of being confined to our houses like most societies, AMASI is back to its vibrant best as before.

The way AMASI handled the academics during the last two years was remarkable so first I salute all the office bearers of that difficult time who overworked to create new avenues and styles like online programs to maintain our academic standard. Our Guwahati AMASICON 2022 was highly successful with nearly 1100 delegates coming to the premier NE city to attend the conference which was evident for the hard work done by the previous committee.

In 2023 alone AMASI with the effort to continue its high standard of academics has started the online CMEs on every first Thursday of the month and also is continuing the skill courses, workshops, rural programs in various parts of the country. Master of Surgery program, a part of public education initiative, is also being held in various parts of the country and is being liked by many. AMASI training center MAAST in Chennai is also growing pace with some advanced programs already held and many planned in the near future. Physical skill courses have already been held in Chennai and Jodhpur with the juggernaut now moving to Agra, after which we have courses in Raipur and for the first time in Srinagar, J&K followed by Mumbai. Our surgeons are being invited to nearby countries for taking part in their society meetings both online and offline. Our safe Lap Chole program will have the next meeting in Delhi on 23rd April. In a space of three months this year AMASI has nearly 400 new life members.

This year AMASI also plans to start their travelling fellowships and during upcoming AMASICON 2023 in Raipur to start cadaveric courses. It will be a pleasure to warmly welcome all of you to this scientific extravaganza from 2-5th November 2023.

I again congratulate all involved with this newsletter and also thank ASI President who has consented to formally inaugurate this edition of the newsletter in Agra.

Long Live AMASI.

Deborshi Sharma
Hony Secretary, AMASI

AMASICON 2023 – Invitation

AMASICON 2023

18th INTERNATIONAL CONFERENCE

Greetings to all On behalf of organising committee of AMASICON 2023.

We welcome you all for the international conference on 2nd, 3rd, 4th, and 5th November at Raipur, The Capital of Chhattisgarh (C.G).

This 4 days conference will incorporate live surgery workshops and scientific feast on current topics and technology in the field of Minimal Access Surgery in phased manner by eminent speakers from all over India and abroad.

In addition, debates, video presentations and preconference hands on training on different subjects will also be there. This will be the platform to share our skills and chart a journey forward to reach new heights. We are trying a productive and pleasant experience to all participants at this special conference.

We shall try our level best to serve an exciting academic feast and make the conference conducive for all.

Along with academic activities, we are also working hard for the entertainment of accompanying family members as well. We have organised various sightseeing tour options available in and nearby Raipur and a lot of entertainment programs in conference as well.

To organise a conference of this high magnitude together is challenging for us for which We would like to thank our entire organising team and Central body of AMASI for their time to time guidance and help.

We once again invite you all for AMASICON 2023 on 2nd, 3rd, 4th and 5th November to be held at Raipur Chhattisgarh the Bowl of Rice.

Thank you very much to all of you.

Dr. Devendra Nayak
organising secretary

Dr. Subhash Agrawal
Organising chairman

18th INTERNATIONAL CONFERENCE OF THE ASSOCIATION OF MINIMAL ACCESS SURGEONS OF INDIA

AMASICON 2023

Program Overview

2nd November (2pm onwards) : In 6 Halls

Laparoscopic / Robotic surgery courses.

- 1.Upper GI
- 2.Hernia including AWR
- 3.Lower GI
- 4.Bariatric
- 5.OT Technician & Staff nurse.
- 6.Hospital Administration / How to run a hospital?

Cadaveric workshop (Separate registration will be required)

3rd November : In 4 Halls

1. 8AM-9AM : Breakfast master video sessions sessions
2. 9AM-3PM : Live Operative workshop
3. 3PM-7PM : Didactic lectures including Orations, debates, symposiums.
4. 7PM : Onwards Functions
5. 8:30PM : Convocation Dinner

4th November : In 4 Halls

1. 8AM-9AM : Breakfast master video sessions sessions
2. 9AM-3PM : Live Operative workshop
3. 3PM-7PM : Didactic lectures including Orations, debates, symposiums.
4. 7PM : Onwards Functions
5. 8:30PM : Banquet Dinner

5th November : In 4 Halls

1. 8AM-9AM : AMASI GBM
2. 9AM-3PM : Live Operative workshop

VISIT
WWW.AMASICON2023
FOR MORE DETAILS

Registration Fees

| S.No. | Category | Early Bird from 01.02.2023 to 30.04.2023 |
|-------|---|--|
| 1 | AMASI Members & FMAS Delegates | Rs.8000 + 1440 (GST) = Rs. 9440 |
| 2 | Non-AMASI Member | Rs.9000 + 1620 (GST) = Rs. 10620 |
| 3 | Gynaecologist | Rs.5000 + 900 (GST) = Rs. 5900 |
| 4 | SAARC Delegate | Rs. 9000 + 1620 (GST) = Rs. 10620 |
| 5 | Foreign Delegates (Outside SAARC Countries) | USD 200 |
| 6 | Foreign Fellows ** | USD 100 |
| 7 | PGs, Fellow in NBE, Mch students * | Rs.6000 + 1080 (GST) = Rs. 7080 |
| 8 | Accompanying Person | Rs.8000 + 1440 (GST) = Rs. 9440 |
| 9 | Staff Nurse / OT Technician (One Day) | Rs.1180 Including GST |

Pioneers in Surgery



Dr. Hari Shankar Asopa is very popular surgeon of Agra. He is well known not only in Uttar Pradesh but all over the country for his expertise in the field of surgery and also as a humanitarian doctor. He is extremely sympathetic to poor and downtrodden people of this region and serves a large number of poor patients by free treatment.

Born in July, 1932, he graduated from S.N. Medical College, Agra with brilliant career & stood 1st in Agra University with several medal including the chancellors medal & did his MS, Surgery (Agra), FRCS(England), FRCS (Edinburgh) all in 1964. He was the faculty of Medical Colleges, Agra & Jhansi as Professor & Head of Surgery at MLB Medical College, Jhansi and later Professor Emeritus at S. N. Medical College, Agra. He continued his teaching interest by training Post MS doctors and starting three years Post Graduate course of DNB in Surgery & Family Medicine accredited by National Board of Examinations of Governments of India at his centre.

RESEARCH & INNOVATIONS

He attained great heights in actual practice of surgery and has invented several surgical procedures. Three operative procedures published by Dr. Asopa in 1969, 1984 & 1990 for hypospadias deserves special mention since they completely changed the outcome of repair of this condition. Hypospadias is one of the commonest birth defects and is estimated to occur once in every 300 male births. In India alone about 40000 boys are born with this defect every year causing great misery to the patients. These operations are done by surgeons, Plastic Surgeon, Paediatric surgeons, Urologist & Paediatric Urologists all over the World and are the subject of scores of Journal articles and lectures in conferences by authorities. Hence these operations appear in international Text & Reference books & are popularity known in ASOPA – I, ASOPA – II and ASOPA – 90.

Another operation invented by Dr. Asopa in mid-90's for stricture urethra (Urology 58:657-659 2001) is followed universally, and has made urethral stricture surgery very easy and safe. This technique also appears frequently in reference books and international journals. Yet another surgical technique invented & published in 2002 (The American Journal of Surgery 183(2002) 138-141) for pancreato-jejunostomy after Whipples procedure had excellent results in his hands and is considered a very safe way of doing this anastomosis.



Pioneers in Surgery

Dr. Asopa had been invited to give talks on his operations in international and lectures and films of his intricate operations are shown by other workers in the international conferences. Dr. Asopa has demonstrated these operations in workshops in over 50 institutions and pre conference workshops in India & abroad, where hundreds of surgeons, Plastic Surgeons, Paediatric Surgeons and Urologists interact on close circuit television.



Awards and Honours

In recognition of his contributions Dr. Asopa has been awarded many prizes & memberships, including **Col. Pandalai Oration** (1991) the most prestigious award of the Association of Surgeons of India. He received “**Dr. B.C. Roy National Award**” as Eminent Medical Teacher in 1991. He was again awarded “**Dr. B.C. Roy National Award**” as Eminent Medical Man for the year 1996. This award is given once a year to a medical man out of all medical faculty & disciplines. He has been honoured with **Hunterian Professorship** by the Royal College of Surgeons of England in 1996. He received **Col. Sangam Lal Oration** and **Gen Amir Chand Oration** both by National Academy of Medical Sciences of India & also **Asian Society of Paediatric Urology Oration** – 2000, (For outstanding contribution to Paeditric Urology).



Prof. Asopa is member of several National and International bodies and served as National President of Association of Surgeons of India – 1996. He was invited to be the Founder President of International Society of Hypospadias and Intersex Disorders of which he is now Honorary President. This society awards “**Asopa Lecture**” to eminent international authorities in its Biennial Conferences.

Dr. Asopa is also known for his gentle behaviour, sympathetic attitude to the weaker sections of society and has been honoured by various societies and organizations.

Pioneers in Surgery



Golden words AND lessons for life by Dr H S Asopa

- Progress is a hallmark of youth. As you stop progressing, you start aging.
- Never chase money, rather work sincerely.... Financial rewards will come on the way

Kishore Panjwani
Past President, IAPS

Pioneers in Surgery

MY FATHER MY HERO

My father is not just my hero but an inspiration for everyone around. Besides being a great father, a good husband and a noble human being, he is kind & generous and ready to help anyone who approaches with a genuine concern. He never grudges any help he offers and is time conscious, punctual and perfectionist. He is always polite and believes in the power of words. He will always make sure that his words do not hurt anyone. He is honest, and is also courageous to be that way.



Another quality of my father that he is very hard working. He is appreciated for his surgical skills, hard work and dedication. He is a great academician, researcher & innovator. He has mentored hundreds of surgeons in the art of surgery. He always teaches the value of understanding tissue physiology & mechanics and its role in reconstructive surgery. He is a strong believer of delicate handling and judicious dissection of tissues to minimize vascular disruption, and would suggest precise alignment of tissue planes in any surgical technique. He would often say

“Respect the Tissue, The Tissue Respects You”.

I will always love my dad for the guidance, comfort, and encouragement I got from him. You are the most awesome dad ever. More than dad, you have been my teacher, coach mentor and hero.

Jyoti Asopa

Dr HS Asopa, a surgical innovator

Prof. H.S. Asopa, world renowned & finest surgeon is my Guru, my mentor, my Guide. It is my proud privilege to be associated with him for more than 3 decades. His teachings did not stop at approach to the disease and precise surgical skills but extended way beyond in developing strong relationship with the patients with honesty and sympathetic attitude.

He always encourages his staff and residents towards learning and developing newer surgical techniques. His innovations include single stage hypospadias surgery, management of short and long stricture urethra and management of pancreatic stump after whipples resection to name a few.



His golden words are **“Always be sympathetic to patient and honest to yourself”**

G.G. Singhal

Emerging Technique / Technology in MIS



Dr. Sumanta Dey
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eTEP approach for Ventral & Incisional Hernia:

There is a paradigm shift in the field of minimally invasive repair of Ventral Hernia (VH) & Incisional Hernia (IH) in last decade. The shift is mainly directed to extraperitoneal mesh repair from intraperitoneal (onlay) mesh repair. The extended view Total Extra Peritoneal (eTEP) repair which was initially done by Dr. Jorge Daes[1] for groin Hernia, later the same technique was used by Dr. Belyanski for VH & IH. The first multicentre study of VH & IH repair by eTEP technique was published by Belyanski et al in 2017[2]. This technique has shown to reduce post-operative pain & avoidance of intraperitoneal mesh related complications compared to IPOM plus repair. The initial increased operating time & post-operative complications reduced with attaining learning curve. The recent meta-analysis by Aliseda et al[3] on eTEP VH/IH showed no difference in post operative complication rate compared to IPOM plus. There are also other advantages like shorter hospital stay, less cost of surgery in eTEP repair. Even in patient with large VH/IH along with loss of domain, eTEP approach considered to be a great option to combine posterior component separation. Considering the Worldwide adoption of this technique with favourable outcome, more & more supervised training programmes are required to make this technique as a standard of care for VH & IH.

1. Daes J. The enhanced view-totally extraperitoneal technique for repair of inguinal hernia. *Surg Endosc.* 2012 Apr;26(4):1187-9. doi: 10.1007/s00464-011-1993-6. Epub 2011 Oct 25. PMID: 22038166.
2. Belyansky I, Daes J, Radu VG, Balasubramanian R, Reza Zahiri H, Weltz AS, Sibia US, Park A, Novitsky Y. A novel approach using the enhanced-view totally extraperitoneal (eTEP) technique for laparoscopic retromuscular hernia repair. *Surg Endosc.* 2018 Mar;32(3):1525-1532. doi: 10.1007/s00464-017-5840-2. Epub 2017 Sep 15. PMID: 28916960.
3. Aliseda D, Sanchez-Justicia C, Zozaya G, Lujan J, Almeida A, Blanco N, Martí-Cruchaga P, Rotellar F. Short-term outcomes of minimally invasive retromuscular ventral hernia repair using an enhanced view totally extraperitoneal (eTEP) approach: systematic review and meta-analysis. *Hernia.* 2022 Dec;26(6):1511-1520. doi: 10.1007/s10029-021-02557-8. Epub 2022 Jan 19. PMID: 35044545; PMCID: PMC9684241.

Emerging Technique / Technology in MIS

Laparoscopic Trans Abdominal Retrorectus Mesh repair: (TARM).

Laparoscopic Trans-Abdominal Retro-rectus Mesh (TARM) repair was first described by Dr. Masurkar A. in 2019 [1]. This novel technique is popularized as a cost effective alternative to IPOM plus repair with less post-operative pain, faster recovery & favorable outcome. Three or 6-port techniques were used following ergonomics of Laparoscopic surgery depending upon hernia characteristics. Normal polypropylene mesh was placed in retro-recti plane avoiding costly intra-peritoneal mesh placement. No/minimal suture fixation of mesh made this technique more cost effective & less painful.

Jani et al. [2] described a similar technique in same year & named it Retro Rectal Onlay Mesh (RROM) technique. The indications of TARM & RROM are same & both showed good short-term outcome. In 2021, Rege et al. [3] in his comparative study mentioned about the ease of technicality of TARM compared to eTEP approach. However, there was no difference in post-operative complication rate between the two with satisfactory outcome in both.

The other big advantage of TARM is the feasibility of adding concomitant TAR (Transversus Abdominis Release) for larger VH/IH with loss of domain. Although, the short-term results are very encouraging, the long-term results of this technique are still awaited for TARM to become widely accepted.

- Masurkar, A.A. Laparoscopic Trans-Abdominal Retromuscular (TARM) Repair for Ventral Hernia: A Novel, Low-Cost Technique for Sublay and Posterior Component Separation. *World J Surg* 44, 1081–1085 (2020). <https://doi.org/10.1007/s00268-019-05298-z>
- Jani K, Contractor S. Retrorectal onlay mesh repair using polypropylene mesh: Cost-effective approach for laparoscopic treatment of ventral abdominal wall hernias. *J Min Access Surg.* 0;0(0) DOI 10.4103/0972-9941.270147.
- Rege SA, Churiwala JJ, A Kaderi AS, Kshirsagar KF, Dalvi AN. Comparison of efficacy and safety of the enhanced-view totally extraperitoneal (eTEP) and transabdominal (TARM) minimal access techniques for retromuscular placement of prosthesis in the treatment of irreducible midline ventral hernia. *J Minim Access Surg.* 2021;17(4):519-524. doi:10.4103/jmas.JMAS_145_20

Journal Review



Dr. Priyank Chelawat
MS, DNB, FNB(MAS)
Consultant Laparoscopic Surgeon and Endoscopist
Chelawat Hospital, Mandsaur (MP)

Adolescent inguinal hernia repair: a review of the literature and recommendations for selective management.

T. E. Lobe, F. M. Bianco.

Hernia 2022; 26: 831-837

Adolescent Inguinal hernia repair – things you need to know!

Would you place a polypropylene mesh in a 16 year old patient?

I recently came across an interesting discussion about individual practices in the management of adolescent hernias. I learnt from the discussion that members of the WhatsApp group differed in their opinions and practices largely based on their experiences. This got me doing a literature review wherein I came across this interesting article recently published in Hernia (Journal) in January 2022.

Sharing some excerpts from the paper.

Q Define adolescent.

Adolescents are defined (according to WHO) as ages 10-19 years.

Q Difference in community practice and those of pediatric surgeons.

In a study poll 65% adult surgeons chose adult repairs (mesh or muscle repair) and 86% pediatric surgeons chose High ligation.

Q Did the community practice difference in General and pediatric surgeons show any discordance in results?

A survey of adolescents treated by both general surgeons and pediatric surgeons showed no difference in results. An individualized approach for each adolescent is recommended.

Q How effective is only high ligation in adolescents?

High ligation of the sac in adolescents is effective and has an acceptable risk of recurrence (0-6.3%) while avoiding any additional morbidity that may come from the mesh. Patients with cardiac and GI co morbidities have a higher risk of recurrence.

Journal Review

Q How can we reduce risk of recurrence in high ligation?

Adding sac disruption and/or suturing of the muscular arch may further decrease the risk of recurrence.

Q How do we give an individualized approach to any adolescent? or which adolescent is to be treated as a pediatric case and which adolescent to be treated as an adult?

The exact age when a hernia in adolescence assumes the characteristics of an adult and deserves an adult type repair has been subject of controversy. The emergence of DIRECT hernias during adolescence may signify a transition in pediatric floor physiology to adult physiology and may provide insight for surgeons to consider muscle or mesh repair.

Q Does the choice of mesh to be placed make any difference?

Low weight meshes might have a slight short-term benefit such as reduced post op pain, shorter convalescence but are not associated with better long-term results like recurrence and chronic pain.

Q What difference would placing a mesh in adolescent patients make?

More complications are associated with mesh repairs than for high ligation repairs of inguinal hernias in adolescents.

Q Please suggest clear cut guidelines. What to do when and how to get best results?

Algorithm- evaluation of hernia based on internal ring diameter as measured intracorporeally with a length of suture.

*Diameter of int ring - 4-15mm - complete sac disconnection

*Diameter 15-25mm- purse string suture is added

*Diameter >2.5cm or recurrent hernia - interrupted muscular arch repair with sac disconnection to be done or mesh repair

*Direct and femoral hernias in adolescents should have a mesh repair

*Preferred mesh repair is TEP/TAPP

*Non fixation of mesh is preferred.

A HAPPIER HORIZON



Dr Sumedha Rege
MBBS, DORL(Mumbai), ADCW(Symbiosis, Pune)

“The real voyage of discovery consists not in seeking new landscapes, but in having new eyes”

.....Marcel Proust

Adventure and travel serve to awaken. Understanding different cultures, life styles, languages, landscapes and food not just broaden horizons, but give fresh perspective to jaded and mundane everyday sights. Perhaps the greatest take-away of travel is that the world is vaster than imagined and most of us are mere specks floating along on the winds of chance and change, soaking up different experiences and emotions: excitement, tranquility, patriotic fervor and rage, which strangely combine to give rise to contentment.

Just when I thought that life had settled into its humdrum and even keel, fate, that capricious mistress, shepherded me to a land so enchanting that it could have been something out of a dream. A land of inspiration, of beauty, once torn apart by war but now glowing with a hard-won peace. A land far to the east, India's very own salute to the rising sun, Arunachal Pradesh.

It had not been without a lot of trepidation that I set out eastwards on this trail, literally trailing the spouse, having left a rather disgruntled offspring behind in the care of a venerable parent, both fending for each other on the West Coast.

The mere thought of having to undertake an entire day's journey back were anything to go wrong on the home front had already left me with a slightly hollow feeling in the pit of my stomach. I needed much more than a wheel and a prayer, or so I thought. Little did I know that I would be encountering both soon enough, lots of wheels enclosing prayers, the fabled prayer wheels of the Buddhists, and so much more besides.

A HAPPIER HORIZON

While driving through the lush green foothills of the eastern Himalayas in the tea garden state of Assam carried a soothing charm of its own, it was the tantalizing glimpses of snow-capped peaks far on the horizon which were truly awe inspiring. That we were to scale those lofty heights in as little as three days and try to discover the stories that these silent sentinels had to offer, left not just the head, but also the mind slightly dizzy.



Unlike Oliver Goldsmith's famous play, there was no stooping but floating down the impossibly blue Kameng river, serenaded by bird song and rocked by eddies and swirls to conquer the windswept mountainsides which dared us to summit them. It was a convoy of sturdy vehicles, expertly steered by even more sturdy helmsmen that began the ascent,

brows knitted and teeth gritted, in concentration. The drive became one of the most enduring images of the whole journey: the endless road, flanked by impossibly tall craggy summits, covered in forests in varied shades of green, some dappled, others dull and yet others full of vibrancy. Images whirled past outside the windows, lit by a sun which seemed to have forgotten the advent of winter. The sky was deep turquoise, fading to a mild cornflower in the distance, shades of blue which I did not believe existed in nature, until I saw them for myself in this part of the world.

As the way wound deeper into the state and scaled the heights, I decided to stop furiously clicking pictures and capture what I could in my mind's eye instead, to be perused mentally at leisure, like a favorite sepia tinted album, glowing with the gentle patina of wistful memory. For every view was a picture post card to city dwellers, like most of us. Picturesque little hamlets dotted the Dirang valley, flanking crystal-clear rivers forded by rope- and-wood foot-bridges.

Guest houses boasted orchards laden with kiwis, persimmons, pomegranates and sweet lime. Women wrapped in shawls calmly went about, diligently constructing roads, with rosy cheeked toddlers strapped to their backs. Yaks could not even be bothered to lift their heads to look at us, used as they were to gawking touristy crowds. Tall stalactites of icicles clung to rocky outcroppings like giant, upside down, gleaming swords and sabers. Monasteries reared their tall slanted roofs, trimmed in gold paint and teeming with prayer wheels

A HAPPIER HORIZON

inscribed with 'Om Mani Padme Hum', an enormous statue of the Buddha holding sway inside. Thanks to friendly monks, we were able to discern quite a few of the meanings of the icons, statuary and history within. A quaint museum attached to the Tawang monastery offered insights into the life and times of the old Buddhist dynasties which once ruled this part of the world.

Once called NEFA (North-East Frontier Agency), Arunachal Pradesh does such a wonderful job of hiding its war-ravaged face under its pristine natural beauty and sweet-natured people, that were it not for the constant convoys of army trucks, defense stations, battalions and war memorials galore, it would have been almost impossible to recognize it as the same place stained with the blood of more than two thousand martyrs of the Indo-China war of 1962. Abandoned stone bunkers dotted the hills, gory ghosts of the past, mute witnesses to a war fought against horrendous odds, thanks to the short-sight and misplaced confidence on so called 'moral high-ground' of the powers that were in Delhi back then. The heart wept and blood boiled for those brave soldiers of ours who sacrificed everything at their disposal (and trust me it was pitifully little in terms of the equipment provided), including their lives, so that an entire generation of Indians could grow-up in peace. The sound of their eternal silence reverberated from the walls carved with the names of the fallen in the Tawang war memorial arousing that much more patriotism in our voices when we proclaimed "Bharat Mata ki Jai" at the end of the unforgettable light and sound show, which was completely worth the wait in the bitter night winds.



That the dark hour of defeat had passed giving rise to the dawn was evidenced soon after, when we visited the Bumla Pass. If the rapid work of the Border Roads Organization and morale of the Indian troops who guarded this part of the Indo-China border was anything to go by, it was clear that lessons had been learnt from a dark chapter of our history. It was even

in the confident way a lone interpreter was replying to a Chinese soldier who was in the middle of a voluble tirade regarding some construction over the border. New India flexed its muscles in the deep baritone of the brave heart who told us that the Chinese were friends as long as they stayed on their side of the border, but should they repeat the folly of crossing over 'to the other side', they would be summarily dispatched to another unearthly realm permanently.

A HAPPIER HORIZON

The calmness of such beautiful lakes like Sungester Lake, Sela Lake (at the enchanting Sela Pass with its backdrop of yet another haunting war story) and the Pang Tseng Tso Lake drove home the truth that long after we were conscribed to distant memory, this land would still remain blessed as it deserves to be. That vast fields of icicles and massive snowscapes would still melt into rills and springs which would keep gurgling their songs as they tripped over smooth stones to find eternity. That this region is home to more than a hundred tribes, each with their own costumes, traditions and language was delightfully depicted by the Monpas, who danced their traditional dances for us to the beat of folk music, just as it had been played for aeons.

It was only on returning and seeing the sun set over the Western hills that the true legacy of Arunachal Pradesh unfurled gradually, like a flower awakening with the light. It was felt in the company of the wonderful people I travelled with, in Shiva Gurung and his comrades, who drove us safely over treacherous terrain and gave us impromptu local history and Nepali folk music lessons, in all the home stay hosts who fed us simple but wholesome fare flavored not just with fiery chillies, fragrant rice, savory yak cheese and robust wild mushrooms, but also with their affection, in bowls of steaming, spicy thukpas and momos, in the glow of wood fires lit to ward off the cold, in the night sky awash with a million stars, the mighty Jang waterfall cascading down in a roar of misty sound and in the silhouette of the soldiers on sentry duty unblinking eyes on the far horizon, so that we slept in peace.

Perhaps a lot has changed since Rajendra Krishan wrote the famous song 'Jahan daal daal par sone ki chidiya karti hai basera', but he must have had this land in mind when he chose to write:

'Jahan Suraj sabse pehle aakar daale apna phera

Wo Bharat desh hai mera!'

To my everlasting good fortune, I visited this happier horizon.

Pictures: Kind courtesy of Dr. S.Soppimath

Thoughts to Ponder upon

ARE WE REALLY TAKING CARE OF OURSELVES?

Dr. AMAR VENNAPUSA
MS,DNB,FNB,FMAS,MRCSEd
Chief Consultant Bariatric & Metabolic Surgeon

Today's world revolves around money. For the amount of struggle we faced to reach this stage, we need decent money for a comfortable living with own house, own cars (if not luxury cars) and own lands (as financial assets). But in the quest of earning money, somewhere down the line we stopped taking care of ourselves. Do you know, the average life span of doctors is less than the national average and the majority of doctors are unhappy with their professional and personal lives? If you have genetic tendency, unhealthy lifestyle (unhealthy diet, lack of physical exercise, irregular food timings, increased stress and inadequate sleep) can lead to lifestyle diseases including obesity, diabetes, hypertension, hyperlipidemia, osteoarthritis, fatty liver disease and obstructive sleep apnea. Unhealthy lifestyle can trigger hormones controlling energy balance and reset the fat value to a higher level leading to obesity, alter insulin levels and insulin resistance leading to diabetes. We tell our patients to take care of their health by following healthy lifestyle. But how many of us are following healthy lifestyle including healthy diet, regular physical exercise, regular food timings, lack of stress and adequate sleep, to safeguard ourselves from lifestyle diseases?

You have to take care of your body, that is the only place you live in.

Diet - Refined carbohydrates and refined fats are tasty but dangerous. Rice, wheat, Indian breakfast including idly, vada, upma, dosa, & poori, Indian snacks including samosa & bajji, pizzas, burgers, chocolates, biscuits, ice creams, cakes, sweets, deep fried foods, energy drinks and soft drinks are unhealthy. If all these are unhealthy, then what is there to eat? See beyond, you will find several healthy foods. We should eat to live, not live to eat. If you have tendency to gain weight, even small quantity of unhealthy foods can trigger weight gain. I performed bariatric surgery on my father in 2014. I have genetic tendency to gain weight and get diabetes. I don't take any of the above mentioned food items. I don't get tempted by seeing above foods, I get frightened. Can we have a cheat day? You can cheat yourself rarely, but not daily. Stop eating unhealthy foods. Eat at regular intervals. Don't eat at odd times. Avoid alcohol too. No amount of alcohol is safe. Alcohol gives kick but it kicks out your health too.

Thoughts to Ponder upon

Exercise - Aerobic exercises such as walking, jogging, Zumba, and playing sports increase endurance. But you need strengthening exercises to build muscle mass. If you workout daily and have enough muscle mass, your basal metabolic rate will be high and you will burn calories even at rest. Can't you workout in the morning? Then workout anytime during the day or even night before going to bed. Can't you workout at a stretch for one or two hours daily? Then workout for ten minutes each time, three to six times daily. Can't you get enough time to workout? Use cross trainer or exercise using dumbbells while watching television. Keep a set of dumbbells in your clinic or operation theatre lounge and workout whenever you find time. Some physical activity is better than nothing.

Follow a workout routine - **One example:**

Include one major muscle group and one minor muscle group daily. **Monday & Thursday** - Chest and Triceps, **Tuesday and Friday** - Back and Biceps, **Wednesday & Saturday** - Legs and Shoulders, **Monday to Saturday** - Abdomen and Sides on alternate days and **Sunday** - Rest.

Second example: **Monday** - Chest, **Tuesday** - Back, **Wednesday** - Triceps, **Thursday** - Biceps, **Friday** - Shoulders, **Saturday** - Legs, **Monday to Saturday** - Abdomen and Sides on alternate days, and **Sunday** - Rest. Muscles take 48 to 72 hours to recover after workout. Abdominal muscles recover faster. Don't do extreme workouts. We don't need to participate in competitions to win medals. Change the routine once in a month or when your body gets used to the routine.



Stress - We face daily with the stress of dealing with other's lives, earning money and competition. You can't perform all the surgeries in the world by yourself. Surgeries were performed before we were born, are performed now and will be performed even after we die. All the patients counselled by you, won't get operated by you. Compared to the size of earth, our size is negligible. The size of earth, and for that matter size of sun is negligible compared to the vast universe. And our lifespan is nothing compared to the infinite time. For our tiny size and finite lifespan, this much stress is unnecessary.

Thoughts to Ponder upon

Take anything - money, age, fitness, skills, intelligence, power etc., we are not the first, and we are not the last. We are somewhere in the middle. So, stop comparing yourself with your colleagues and friends. Fix your work timings. Go on a vacation. Play sports. Meet friends. Have get togethers. Do yoga or meditate for relaxation if you like.

Sleep - Stress, increased work hours and odd work hours affect quality and duration of your sleep. Lack of stress, healthy diet and exercise improve your sleep quality. One should have at least 7 hours of quality sleep daily.

If you are not healthy, even worse, if you are not alive to enjoy, what is the point in earning. You earn for your children, your children for your grandchildren and your grandchildren for your great grandchildren, then who will enjoy the benefits? You provide financial security to your children and provide them good education so that they can take care of themselves and their children. You don't need to create assets for all the coming generations. You also should enjoy, what you have earned. So, balance your work and your life. Enjoy life while you can. And to enjoy life, be healthy and fit.

A piece of Art, from an Artist (Surgeon)

Dr Kshipra D Tiwari
MBBS,MS,DNB,FNB(MAS)
Director, Chief Surgeon – GI, Lap & Bariatric Surgery
Pegasus Hospital, Delhi Road, Saharanpur, UP

BLISS

The streak of grey across the blazing ball of red,
the beam of red across the somber blue.
For the world, what may be simply beautiful,
to me, it is the silent bliss of solitude.

And seconds back what was the river and the Sun,
is now the dusky mist behind the grey.
The silver lining at the border of the clouds,
tells of the hope that nature wishes to convey.
The chirping birds off to their final destiny,
the sights that are like dreams to the eyes.

The gentle breeze with its caress o'er your cheeks,
the river's sounds that seem to simply mesmerize.
The ferry boats at the river's distant end,
being swayed across with all the rivers might.
And Venus peeping from the gap between the clouds,
proclaims aloud the silent coming of the night.

The dreamy night, the purest white, the moonlight,
carrying to a world, all chaste and true.
For the world, what maybe simply beautiful,
to me, it is the silent bliss of solitude.

AMASICON 2022 REPORT

Prof (Dr) Manoj Kr Choudhury
Organizing Chairman
AMASICON 2022

I, on behalf of the Organizing Committee of AMASICON 2022, offer you my heartfelt thanks for reposing faith in us to organize this prestigious conference. We are indebted to Prof C Palanivelu and the Executive Committee led by Dr S Jugindra for their support and guidance. We appreciate the support from Nemcare Super Speciality Hospital (Guwahati), ILS Hospital (Kolkata) and GEM Hospital (Coimbatore) to organize the live workshop successfully.

We are grateful to the operating faculties and those who contributed in the academics of the conference. We thank Kiranshree Grand for offering the beautiful venue for organizing the conference. We also appreciate the support of Audio Visual, Event Team and the Sponsors.

I am grateful to my Organizing Team for their sincerity, dedication and whole hearted support to make the conference a grand success. We all appreciate the contribution of Mr. Prabhu for the success of the conference and I take responsibility for any lapses during the conference.

Young scholar award was won by:

Dr Kanchan Sachanandani of Tata Memorial, Mumbai

Best Video award was won by :

Dr Vishal Vasant Sangade, KEM Hospital, Mumbai

Best Poster Award was won by :

Dr Devashree Sane, KEM Hospital, Mumbai

Best Poster Award was won by :

Dr Santosh Madagond, SMS Medical College and Hospital, Jaipur

Convocation ceremony was held on 18th November at 7pm. Dr C Palanivelu was the Chief Guest. The FMAS certificates were awarded to the successful candidates. Dr Sunil Kumar Sharma, President of Nepal Surgical Society and Dr Ebadul Karim President Bangladesh surgical society were awarded honorary FMAS. The Convocation was followed by cultural programs to showcase the North East culture.

AMASICON 2022 REPORT

Inaugural function was held at 7pm on 19th November 2022. Dr G Siddesh, President of ASI was the Chief Guest and Dr Sunil Kumar Sharma President Nepal Surgical society was the Guest of Honor. The meeting was conducted by the master of ceremony Nilakshi Baruah in presence of Dr C Palanivelu, Founder President, Dr S Jugindra President of AMASI, and other dignitaries of AMASI and Organizing Committee. A souvenir was released by Dr G Siddesh. All the dignitaries' dais was felicitated by the Organizing Committee.

Inaugural ceremony was followed by attractive cultural program and banquet. Complimentary local sightseeing programs were also conducted.

The Live demonstration on basic and advanced laparoscopic and robotic surgeries were transmitted from Nemcare Super Speciality Hospital, Guwahati; ILS Hospital, Kolkata; and GEM Hospitals Coimbatore in all three days from 9am to 3pm. Conference was concluded at 5pm on 20th November 2022 with a warm valedictory function.



RURAL SURGERY CAMP

Dr. Dilip Gode,
Convener & Chair Prof,
Tribal Health and research MUHS

Report of Advance Laparoscopic Surgery Camp organised by Association of Minimal
Access Surgeons of India (AMASI) &

Datta Meghe Institute of Higher Education & Research (Deemed to be University)

Association of Minimal Access Surgeons of India (AMASI) had organised its flagship outreach program "Advanced Laparoscopic Surgery Camp" in collaboration with Datta Meghe Institute of Higher Education & Research (Deemed to be University), Wardha at Lok Biradari Prakalp, Hemalkasa, Bhamaragh on 18 & 19 Feb 2023 under the guidance of Dr. Dilip Gode, Past President AMASI & Chair Prof, Tribal Health & Research MUHS Nashik. This was the 7th year that the camp was organised. In 2021 & 22 the laparoscopic surgery camp was not organised due to Covid pandemic.

This outreach activity was started in 2015 as the efforts of AMASI towards making Laparoscopic surgery affordable and accessible to people in remote tribal villages. Previously Dr Palanivelu and most of the past presidents participated in this camp. The camp is organised at Lok Biradari Prakalp run by Dr Prakash Amte, Padmashree awardee, & recipient of Magsaysay award. He is helped by his wife Dr Mandakini Amte, his son Dr Digant Amte & daughter-in-law Dr Anagha Amte. Team of doctors, staff nurses & paramedical personnel along with equipment had to undertake a 7-hour journey to reach Hemalkasa. It is located in a forest & infested with Naxalites. The village is cut off from the world in rainy season & has no facilities to reach a district hospital.



RURAL SURGERY CAMP

About 50 patients were examined after reaching Hemalkasa by 8 pm, all necessary investigations were done & anaesthesia team did PAC & 37 patients were selected to undergo surgery. Meanwhile OT support team prepared OT & sterilization of equipment was done. 4 OT were designated for next day's surgery. High end Laparoscopic equipment was provided by Olympus, Stryker, Maxer including Harmonic by Jonson & Jonson.

Next day surgeries started by 8 am & continued upto 8 pm completing all the listed operations.

Dr C J Varghese President of AMASI, Dr Deborshi Sharma Hon Secretary of AMASI & Dr Sameer Rege President of West Zone participated as operating surgeons along with Dr Dilip Gode. The operative procedures were smoothly conducted without any complication.

Formal inauguration was done with traditional lamp lighting ceremony at the hands of Dr Prakash Amte, Dr Mrs Mandakini Amte & Dr C J Varghese. Dr Prakash Amte urged junior doctors to work with honesty, empathy & communicate with patients so that medical profession remains noble & dignified in his brief address.

The certificates of appreciation were also distributed by Dr Prakash Amte.



Team of Surgeon:

Dr. Dilip Gode, Convener & chair Prof, Tribal Health & Research MUHS, Nagpur

Dr. C. J. Varghese, President AMASI

Dr. Deborshi Sharma, Seceretary, AMASI

Dr. Samir Rege, KEM, West Zone President, AMASI

Gynaecologist:

Dr. Mrs Surinder Gode, Gynaecologist, SMHRC, Nagpur

Team of Anaesthetist:

Dr. Vivek Chakole, HOD, Anaesthesia,

Dr. Archana Munishwar, Anaesthetist....., Nagpur

Dr. Vaishali Chaudhari, Anaesthetist....., Nagpur

Patients were discharged on 2nd & 3rd postoperative day.

Dr. Dilip Gode,
Convener & Chair Prof,
Tribal Health & research MUHS



AMASI Online CME



AMASI ONLINE CME SERIE

Topic
Technical evolution of Hernia
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AMASI Central Zone

CONVENOR
SAMER REDDY
President (and Chair) AMASI

Association of Minimal Access Surgeons of India

FOUNDER PRESIDENT: C.P. Singh, IAS
PRESIDENT: Vinayak C.J.
SECRETARY: Debashis B. Ghosh
TREASURER: Rajesh M.P. Das

Trustees: D. Raja of AMSI, P. Sankaranarayanan, S. Srinivasan, P. Srinivasan, S. Srinivasan, D. Raja of AMSI



AMASI ONLINE CME SERIE

Topic
Uncommon laparoscopic
procedures: experience in
an Israeli tertiary centre

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RANDEEP SINGH
President - Central Zone AMASI

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AMASI Rural Program at Nootan Medical College





Public Education program by AMASI at Nagpur



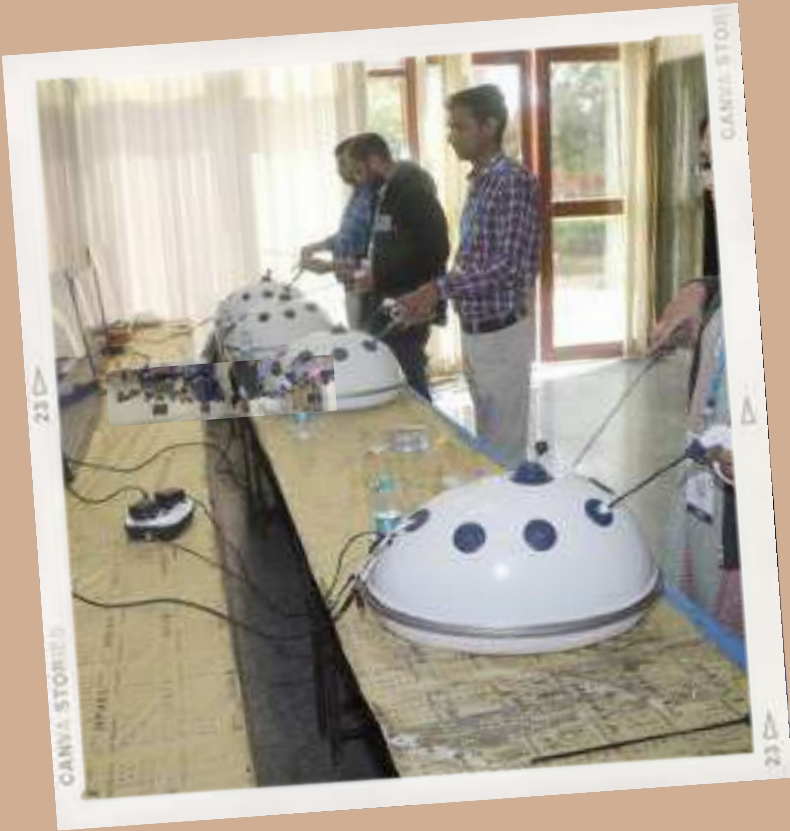


Public Education program by AMASI at Calicut



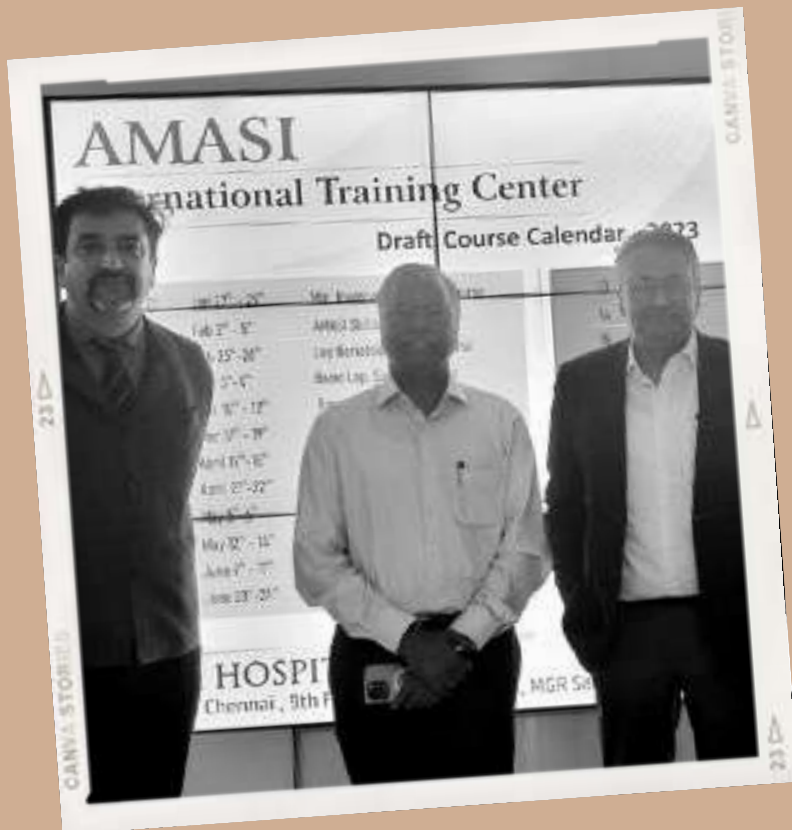


87th Skill Course-Jodhpur





89th Skill Course-Chennai



Arunachal Trip





AMASI ONLINE CME SERIES

Topic
ROBOTICS, ARTIFICIAL INTELLIGENCE AND AUTONOMOUS ACTIONS IN MINIMALLY INVASIVE SURGERY

05 APRIL 2023
8:00PM
LIVE AT 7PM

REGISTRATION: FREE

Registration

CONDUCTED BY

South Zone AMASI

SUPPORTED BY



SPEAKER
ANDREW A. GUMBS
Professor, Head of Clinical Robotics, University of Western Australia



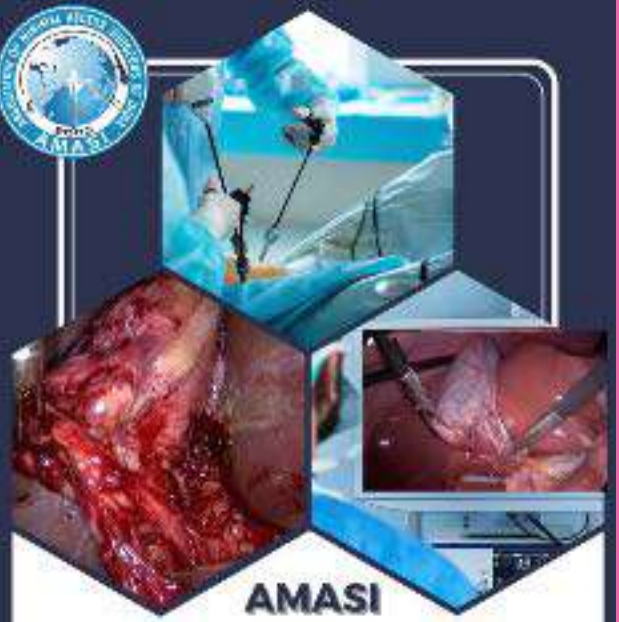
MODERATOR
BIJU POTTAKKAT
Professor, Head of Gastroenterology & Hepatology, IASMS



CONVENER
JAGDISHWAR GOUD
Prof. Dr. IASMS, IASMS

Association of Minimal Access Surgeons of India.

- | | | | |
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AMASI SAFE LAP CHOLE PROJECT

MAULANA AZAD MEDICAL COLLEGE
NEW DELHI

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@MR2023

SUNDAY, 23RD APRIL 2023



9th EDITION MIS CARNIVAL LAPAROSURG 2023

LEARNING
NO
LIMIT'S
NO



JULY 6-8 | 2023
Coastal Trade fair Complex, Coimbatore



AMASICON 2023 18th INTERNATIONAL CONFERENCE

THE ASSOCIATION OF MINIMAL ACCESS SURGEONS OF INDIA
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Welcome to Raipur
THE CAPITAL OF CHHATTISGARH



SAVE
DATES

NOVEMBER 2023
2nd 3rd 4th 5th



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CONFERENCE DE L'ASSOCIATION
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UPCOMING
Skill Courses

April *Register early*

Friday 6 90th AMASI Skill Course-
SBIMS, Raipur

May

Thursday 4 91st AMASI Skill Course-
SKIMS, Srinagar

Thursday 11 92nd AMASI Skill Course-
KEM, Mumbai

September

Thursday 22 93rd AMASI Skill Course-
RIMS, Ranchi.

CONTACT US For More details visit www.amasi.org +91 8056536384
amasl.india@gmail.com



AMASI

Association of Minimal Access Surgeons of India

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