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FROM THE CHAIRMAN'S DESK

I am extremely pleased to note that SUT is relaunching its 'News Letter'.

I commend the strides being made by SUT in providing excellent care for our guests.

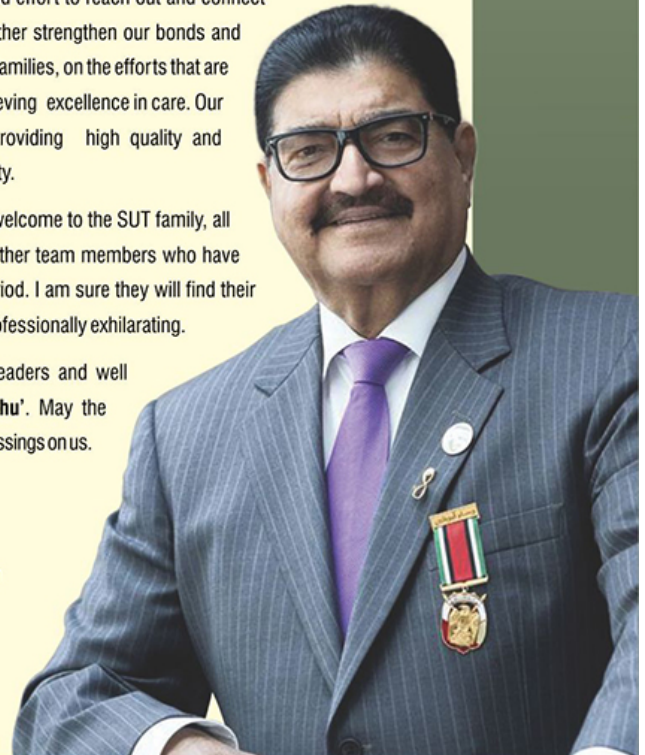
The introduction of Tele- medicine facility ,Home care services and other new services have been timely initiatives that helped alleviate the problems faced by our patients especially during the peak of the pandemic scare. I wish to place on record our sincere appreciation of the bold and selfless service rendered by our doctors, nurses and other healthcare workers in combating the pandemic and continuing to provide seamless care during those extremely difficult days. I am sure the experience gained during the past year will stand us in good stead in further streamlining our processes and improving the outcomes.

I am sanguine that this renewed effort to reach out and connect with our well wishers will further strengthen our bonds and educate our patients, and their families, on the efforts that are made by the SUT family in achieving excellence in care. Our goals remain consistent in providing high quality and affordable care to the community.

I also take this opportunity to welcome to the SUT family, all the consultants , nurses and other team members who have joined us in the intervening period. I am sure they will find their stay with us memorable and professionally exhilarating.

Here's wishing you all- our readers and well wishers, ' A Very Happy Vishu'. May the Almighty shower his choicest Blessings on us.

Dr. B.R Shetty
(Recipient Padmashree)
Chairman, SUT Hospital, Pattom





CAO's MESSAGE

We are Pleased to come out with the SUT News Letter after a gap of almost three years. This Newsletter aims to keep us connected with our friends and well-wishers.

We have recently launched our 'SUT Health & Wellness' series on the Youtube and have already launched 42 episodes with the aim of creating awareness on health and wellness, the primary aim being to help prevent diseases

I am sanguine that our well-wishers will appreciate this effort to reach out to you and our effort will be to remain connected with you all, always .

Here SUT Pattom wishing you all a very happy Vishu.

Col. Rajeev Mannali
Chief Administrative Officer,
SUT Hospital, Pattom

EDITORIAL NOTE

Dear Friends and Well-wishers,

We are delighted to announce the relaunch of our newsletter – 'SUT Times'. We feel that we need to share our ups and downs with our patients and their kin.

The pandemic scare started looming large over the horizon by mid-March of 2020. We at SUT kept ourselves ahead of the curve and were able to take all actions to protect our patients, bystanders and Health Care Workers (HCW). All our HCWs were fully insured against Covid till February 2021. All our staff members are now vaccinated and thus further protected. Our Covid vaccination centre is functioning seven days a week, vaccinating all those who approach us for the same. We have so far vaccinated over 2500 people in all and have received good reviews on the facility that we provide.

We have come up with a number of new initiatives and innovations to be able to provide better service delivery and meet the challenges of the day. We introduced Tele/Video medicine facility in April 2020 and have completed over 2500 consultations through this platform alone. We also launched our SUT Home Care to provide full support to those who could not visit the hospital due to pandemic scare. The services provided through our home care has been highly acclaimed by all who have received the services of our team. We have also introduced a scheme wherein those desirous of availing EMI facilities for payment of hospital bills can opt for the same, if

eligible, through our website.

We have put Artificial Intelligence to good use and have two robots "Sri Uthara" and "Sri Chithira" helping us manage our patients at the triage and also in the Covid ward. The robots were the brain child of our IT team and were assembled here in our hospital with our limited resources in this field.

We have changed the roof tiles of our heritage building which was a challenge, but the effort has been worthwhile with better looks and added safety and protection.

We have also added a 'Breast reconstructive clinic', a 'Diabetic foot care clinic' and a 'Sleep-lab' to our range of services. We have also revamped our Trauma care to be more inclusive with a multidisciplinary approach. The Webinar that we conducted on 'Trauma care' in association with Times of India on 23rd January 2021 had over thousand participants and was widely acclaimed.

We have commenced PG programmes accredited by National Board with four residents joining us on the DNB programme for Obstetrics and Gynecology. We have also been accredited to commence our DNB programme in General surgery commencing this academic year.

We wish you all 'A Happy Vishu and a Prosperous New Year'.

Here SUT Pattom wishing you all a very happy Vishu.

Editorial Board



Reconstructive options after **BREAST CANCER SURGERY**

Dr. AMRITA B RAO

Consultant, Plastic and Micro vascular Surgery

Breast cancer has become the most common cancer seen in young women in the state. The cause of this increase is multifactorial.

We have had great advances in the treatment of this disease. Cure can be expected for a large proportion of patients.

One important factor that is ignored and the women are not generally aware of, are the reconstructive options after Breast Cancer Surgery. Most women, even the urban Elite are unaware that after removal of Cancer, the breast can be beautifully reconstructed. Many women especially those with active professional Careers have significant body image loss and psychological trauma after Breast Cancer Surgery. These can be avoided with good reconstructive surgery available today.

Options for reconstruction are:

1. Using Skin and Fat from the abdominal wall.

Most Indian women have excess skin at fat over the abdominal wall especially after pregnancy. This can be detached from the abdomen and Re attached to the chest wall, after the removal of breast, so as to give back the beautiful shape of breast. Another advantage is that the women will get a nice flat abdomen after this surgery.

2. Skin muscle and fat from the back

In women who do not have adequate extra fat in the abdomen or for those who are undergoing partial breast excision for cancer, we can use skin and muscle of the back for recreating the breast shape. This scar is not visible outside and can be hidden under the bra strap or saree blouse.

3. Artificial implant Based

In very thin women who do not have excess skin and fat anywhere in the body or who do not want any additional scars on the body we can insert and implant under the muscle of the chest for creating the shape of the breast

Decision of Ideal reconstruction is only after discussion with patient and the onco surgeon. It is the oncosurgeon who decides what is best for the cancer treatment. The reconstructive surgeon, after discussing with the patient, regarding various reconstructive options, selects the best customised treatment for

that particular patient.

Breast reconstruction following cancer Surgery has no Side Effects or negative impacts on cancer. All reconstructive surgeries are done after discussion and planning with the oncosurgeon regarding the surgical procedures and also further treatment for cancer, if required.

Breast reconstruction can be primary i.e., done along with Cancer Surgery or secondary as a second procedure after the complete treatment of cancer. Primary is best for the patient since it will be single surgery and anaesthesia. No stress of losing a breast and no emotional trauma as patient wakes up with body that is same as before surgery.

Such breast reconstruction is not cosmetic surgery but like knee replacement surgery it is breast replacement surgery where diseased breast is replaced. In western countries this is covered by insurance. In India to some insurance companies provide cover for such reconstructive surgery

Psychological benefits of reconstruction of breast after Cancer Surgery for women undergoing treatment of cancer cannot be overemphasized as more and more women become aware of these procedures the popularity is sure to increase.



Dr. Mrinal Sivadasan
Consultant Neonatologist

BREAST FEEDING

Like every year, World Alliance for Breastfeeding Action (WABA) is organizing World Breastfeeding Week (WBW) from 1st to 7th August 2019. This year's theme is – Empower parents, Enable Breastfeeding. We all should know that, babies should be breastfed as soon as possible after birth preferably in the delivery room. Infants should be exclusively breastfed till 6 completed months and they should not be fed with anything else. Don't give baby sweetened water, gripe water, honey, animal or powdered milk before 6 months. Avoid use of bottles or pacifiers because they are likely to make baby frequently sick. It is safe for the baby to be close to the mother and sleep with the mother unless the mother is on sedatives. Breast feed during day and at night at least eight times, whenever baby shows hunger cues.

LIFE GIVING MILK IS A SUPER POWER

Exclusive breast fed babies have reduced risk of diarrhea, pneumonia, ear infection, death in first year of life. Breastmilk is complete food for baby, which is easily digested and well absorbed. It protects against infection, produces better brain growth and promotes emotional bond with mother. For the mother it helps in involution of uterus, delays pregnancy, lowers risk of breast and ovarian cancer, decreases mother's work load. Thus it saves money, promotes family planning, decreases need for hospitalization, and contributes to child survival. Exclusively breast fed baby is more likely to earn more in their future life. Breastfeeding can be continued beyond 2 years. In India, children used to be breastfed till they are 5 years old. Longer they are breastfed, brighter they become.

RELAX AND GLOW, LET THE OXYTOCIN FLOW

Now let us understand the dynamics that occurs in the body which enhances and hinders breastfeeding. There is a reflex called the Prolactin reflex for milk secretion; which is enhanced by sucking, expression of milk, emptying of breast and frequent night time feeds (4 to 5 times each night). It is hindered by incorrect position, incorrect attachment, painful breast, prelacteal feeds and formula feeds. Another reflex called Oxytocin reflex is responsible for milk ejection during feeding. This is enhanced by thinking lovingly of baby, sound and sight of baby and when the mother is relaxed. This reflex is inhibited by worry, stress, pain and doubt.

WHAT IS PRESENT IN THIS ELIXIR OF LIFE?

The composition of breast milk varies to suit the needs of the baby. On the first day, breast milk is thick and yellowish (known as colostrum), contain more antibodies, high protein content and white blood cells. Colostrum should never be discarded, it is like the first immunisation to the baby. Transitional milk is the milk secreted during the following two weeks. The immunoglobulin and protein content decreases

while the fat and sugar content increases. Mature milk follows transitional milk. It is thinner and watery but contains all the nutrients essential for optimal growth of the baby. Breast milk of a mother who delivers prematurely contains higher quantities of proteins, sodium, iron, immunoglobulins that are needed by her preterm baby. Fore milk is the milk secreted at the start of a

feed and it quenches the thirst of the baby because it is watery. It is also rich in proteins, sugar, vitamins, minerals and water. Hind milk, that comes later towards the end of a feed, satisfies the baby's hunger because it is richer in fat content. The baby should therefore be allowed to empty one breast to get both fore milk and hind milk. The other breast should be offered after emptying the first if the baby continues to be hungry.

ATTACHMENT THE KEY TO SUCCESS

Poor attachment of infant's mouth to breast can lead to crack nipples and subsequent problems like breast engorgement, mastitis and breast abscess. Good attachment involves wide opened baby's mouth, outward turned lower lip, baby's chin touching mother's breast and majority of areola inside baby's mouth. A good attachment can be achieved as shown in the figure. The lower lip is touched at the lower junction between areola and breast skin. Then the nipple is held near the baby's nose so that baby can initiate latching and the nipple is touched on baby's upper lip so that rooting reflex is activated. The baby then opens its mouth wide open, the areola is inside the mouth and the tip of nipple is at the junction of hard and soft palate.



OUR FIRST KEY HOLE SURGERY FOR AORTIC STENOSIS PERFORMED SUT HOSPITAL PATTOM

Aortic Stenosis is one of the serious valve disorders which is caused by the narrowing of aortic valve opening resulting in restricted blood flow from heart to different parts of the body. A patient from Kadakkal (Kollam) aged 63 was admitted in the hospital due to severe Aortic Stenosis. At the time of admission he was not able to move even a single step on his own. Usual treatment for this condition is replacement of valve by an open heart surgery. Anaesthesia and Valve Replacement was impossible for this patient because of his advanced condition of liver disease. At the same time heart disease was an obstacle for the follow up treatment of liver disease. A team of doctors led by Interventional Cardiologist

Dr. G.K. PRAVEEN of SUT HOSPITAL made a decision to perform the rare surgical procedure by performing Kerala's First Key Hole Surgery for Valve Replacement 'TAVR' (Transcatheter Aortic valve Replacement). TAVR is done by making a 1cm length incision in Saphenous vein (longest vein in the body, running along the length of the lower limb). Following the successful surgery, the patient was on a two day observation and was subsequently discharged. The surgery was led by senior Interventional Cardiologist **Dr. PRAVEEN GK**, Cardiologists **Dr. ANUPKUMAR** and **Dr. RAJALEKSHMI**. Anaesthesiologist **Dr. ASHA**, **Dr. POOJA** and GASTROLOGIST **Dr. JANNET INDHU RASLAM** were also in the team



NEW LOOK OF OUR HERITAGE
BLOCK AFTER THE ROOF TILE CHANGE



പരീക്ഷാക്കാലം ഭക്ഷണം ശ്രദ്ധിക്കണം...



Preethi R. Nair
Chief Clinical Nutritionist

പരീക്ഷാക്കാലം എത്തുകയാണ്. പരീക്ഷയിൽ നന്നായി ശോഭിക്കാൻ നന്നായി പഠിക്കുന്നതിനൊപ്പം നല്ല ഭക്ഷണവും കഴിക്കേണ്ടതുണ്ട്. നല്ല ഭക്ഷണശീലങ്ങൾ സ്വായത്തമാക്കുകവഴി കൂട്ടികളുടെ ബുദ്ധിക്ക് ഉണർവ് ലഭിക്കുന്നു. അമിതഭക്ഷണം, തെറ്റായ ഭക്ഷണം, ഫാസ്റ്റ്ഫുഡുകളുടെ അമിതമായ ഉപയോഗം എന്നിവയെല്ലാം ആരോഗ്യത്തേയും പഠന നിലവാരത്തേയും ഒരു പോലെ ബാധിക്കും.

പ്രഭാതഭക്ഷണം ഒഴിവാക്കരുത്

ആരോഗ്യദായകമായ ഒരു പ്രഭാതഭക്ഷണം തന്നെ തിരഞ്ഞെടുക്കണം. കൂട്ടിക്ക് വേണ്ട ഊർജ്ജത്തിന്റേയും പോഷകങ്ങളുടെയും മൂന്നിൽ ഒന്ന് പ്രഭാതഭക്ഷണത്തിൽ നിന്നായിരിക്കണം. ആവിയൽ വേവിച്ചുകൊണ്ടിരിക്കുന്ന ഭക്ഷണങ്ങളാണ് ദഹനത്തിന് നല്ലത്. പ്രഭാതഭക്ഷണത്തിൽ ഒരു ഗ്ലാസ്സ് പാൽ, ഒരു മുട്ട എന്നിവകൂടി ഉൾപ്പെടുത്തുന്നത് വളരെ നല്ലത്.

ഇടനേര ആഹാരമായി ലഘുഭക്ഷണം നൽകാം

പോഷകസമ്പുഷ്ടമായ ലഘുഭക്ഷണങ്ങൾ കൂട്ടിക്ക് കൊടുക്കുന്നത് വഴി ആവശ്യമായ പോഷകങ്ങൾ ലഭിക്കുന്നതിനും ഉണർവും ഏകാഗ്രതയും നൽകുന്നതിനും സഹായിക്കും. പഴവർഗ്ഗങ്ങൾ, ജ്യൂസ്, അപ്പിരിപ്പ്, സാലഡുകൾ, സൂപ്പ്, എന്നിവ നൽകാം.

ഉച്ചഭക്ഷണം ഒരു ദിവസം വേണ്ട ഊർജ്ജത്തിന്റേയും പ്രോട്ടീന്റേയും മൂന്നിൽ ഒന്ന് ഉച്ചഭക്ഷണത്തിൽ നിന്നും ലഭിച്ചിരിക്കണം. പ്രോട്ടീൻ ഭക്ഷണങ്ങളായ മത്സ്യം, പനീർ, തൈർ, പയർ വർഗ്ഗങ്ങൾ, എന്നിവ രക്തത്തിലെ റെറ്റോസിന്റെ (അമിനോ ആസിഡ്) അളവിനെ വർദ്ധിപ്പിച്ച് കൂട്ടികളുടെ തലച്ചോറിന്റെ പ്രവർത്തനം വർദ്ധിപ്പിക്കുന്നു. ഇലക്കറികളും മറ്റു പച്ചക്കറികളും ഉൾപ്പെടുത്തുന്നത് സൂക്ഷ്മപോഷകങ്ങളുടെ കുറവുതികത്താൻ സഹായിക്കും.

ഹോട്ടൽ ഭക്ഷണങ്ങൾ ഒഴിവാക്കുക

പരീക്ഷാക്കാലം താഴ്ന്ന രോഗപ്രതിരോധശേഷിയുടെ കാലയളവാണ്. അതിനാൽ കൂട്ടികൾക്ക് അണുബാധ വരാനുള്ള സാധ്യത കൂടുതലാണ്. മാത്രമല്ല ഹോട്ടൽ ഭക്ഷണത്തിൽ ചേർക്കുന്ന (രുചി, മണം, നിറം) ഘടകങ്ങൾ കൂട്ടിക്ക് പഠിക്കാനുള്ള ഉണർവും ഉന്മേഷവും കുറയ്ക്കുന്നു.

ജലാംശം നിലനിർത്തുക

ശരീരത്തിൽ ജലാംശം നഷ്ടപ്പെട്ടാൽ മനസ്സും ശരീരവും അസ്വസ്ഥമാകും. പഠനത്തിൽ ശ്രദ്ധ കേന്ദ്രീകരിക്കുവാനുള്ള ബുദ്ധിമുട്ടാകും. ജ്യൂസ്, മോരിൻവെള്ളം, മല്ലിവെള്ളം എന്നിവ നൽകാം. പരീക്ഷാക്കാലത്ത് കാപ്പി, ചായ, കോള പാനീയങ്ങൾ എന്നിവ ആഅമിതമായി കൂടിക്കുന്നത് കൂട്ടികളുടെ ജൈവ ഘടികാരത്തിന്റെ പ്രവർത്തനം താരാമാറാക്കും. ഒരു ദിവസത്തിന്റെ വെള്ളത്തിന്റെ അളവ് 2 മുതൽ 2.5 ലിറ്റർ ആയിരിക്കണം. കൃത്യമായ ഇടവേളകളിൽ വെള്ളം കുടിക്കുന്നത് വഴി കൂട്ടികൾക്ക് ക്ഷീണം വരാതെ നോക്കാം.

ഓർമ്മകൂട്ടുന്ന ആഹാരങ്ങൾ

ജീവകം ബി, സി, സിങ്ക് അടങ്ങിയ ഭക്ഷണം തലച്ചോറിന്റെ പ്രവർത്തനത്തെ ശക്തിപ്പെടുത്തുന്നു. മത്സ്യത്തിൽ കാണുന്ന ഒമേഗാ 3 ഫാറ്റി ആസിഡുകൾ തലച്ചോറിന്റെ പ്രവർത്തനവും ഓർമ്മശക്തിയും മെച്ചപ്പെടുത്തും. മുട്ടയുടെ മഞ്ഞക്കരുവിലുള്ള കോളിൻ എന്ന ജീവകം തലച്ചോറിനുള്ളിൽ ആഴത്തിലുള്ള മെമ്മറിസെല്ലുകൾ ഉറപ്പുനൽകുന്നതിന് സഹായിക്കുന്നു. സിങ്ക് ധാരാളം അടങ്ങിയ അടിപരിപ്പുകൾ തലച്ചോറിലെ സെറിബ്രത്തിന്റെ പ്രവർത്തനത്തിന് ശക്തി പകരും. നാരങ്ങ വർഗ്ഗത്തിൽപ്പെട്ട പഴവർഗ്ഗങ്ങൾ, ക്യാരറ്റ്, മത്തങ്ങ, എന്നിവ ശരീരത്തിന്റെ രോഗപ്രതിരോധശേഷി ഉയർത്തി കൂട്ടികളെ അണുബാധയിൽ നിന്നും സംരക്ഷിക്കുന്നു. നല്ല ദഹനം ലഭിക്കു

ന്നതിന് പ്രോബയോട്ടിക്കായ തൈർ, മോർ എന്നിവ ഭക്ഷണത്തിൽ ഉൾപ്പെടുത്തണം.

വ്യായാമം ശീലമാക്കുക

ഇടവേളകളിൽ ലഘുവായി വ്യായാമം ചെയ്യുക. ഇത് കൂട്ടികൾ കൂടുതൽ ഉൻമേഷഭരിതരാകാൻ സഹായിക്കും. 9 മണിക്ക് ശേഷവും 5 മണിക്ക് മുൻപും വെയിലത്ത് ഇറങ്ങുന്നത് ഒഴിവാക്കണം.

ഉറക്കം അനിവാര്യം

ഉറക്കം ബ്രെയിൻ കോശങ്ങൾക്ക് വിശ്രമം നൽകുകയും അതുവഴി ശക്തിയും ഉണർവും നൽകുന്നു. കൂട്ടികൾ ശരാശരി 6 മുതൽ 8 മണിക്കൂർ വരെ ഉറങ്ങാൻ ശ്രദ്ധിക്കുക.



EVENTS



SUT HOME CARE_INAUGURATION



WORLD HEART DAY_WALKATHON



BREASTFEEDING WEEK_INAUGURATION



DOCTORS DAY_INAUGURATION



AWRCON KERALA_INAUGURATION



WORLD KIDNEY DAY_INAUGURATION



INAUGURATION OF FNEP SC 2019 & Farewell of NEP SC



ANTIBIOTIC AWARENESS WEEK_INAUGURATION



NEW ULTRA SOUND MACHINE_INAUGURATION



INTERNATIONAL NURSES DAY_INAUGURATION



BLS TRAINING PROGRAMME FOR DIALYSIS TECHNICIANS



ROBOT_INAUGURATION (SREE UTHARA)



CHAIRMAN'S VISIT



NEW LIFT_INAUGURATION



STAFF RETIREMENT



SUT PATTOM
Super Specialty Hospital

YOUR **HEALTH** OUR **PRIORITY**

OUR DEPARTMENTS

- 24 X7 EMERGENCY CARE
- CRITICAL CARE
- NEUROLOGY & NEURO SURGERY
- CARDIOLOGY & CARDIAC SURGERY
- ORTHOPAEDICS
- PULMONOLOGY
- MINIMALLY INVASIVE SKULL BASE SURGERY
- GASTROENTEROLOGY (MEDICAL & SURGICAL)
- NEPHROLOGY WITH FACILITY FOR KIDNEY TRANSPLANT
- UROLOGY
- VASCULAR SURGERY
- GENERAL SURGERY
- INTERNAL MEDICINE
- GYNAECOLOGY & OBSTETRICS
- NEONATOLOGY
- PAEDIATRICS
- PLASTIC SURGERY
- MANAGEMENT OF INFECTIOUS DISEASES
- ENT
- ANAESTHESIOLOGY
- BREAST CLINIC
- OPHTHALMOLOGY
- MULTI-SPECIALITY DENTAL CLINIC
- POST COVID CLINIC
- PREVENTIVE HEALTH CHECKUPS
- ONCOLOGY
- ALLERGY CLINIC
- EPILEPSY CLINIC
- PHYSIOTHERAPY & REHABILITATION
- PODIATRIC & DIABETIC FOOT CLINIC



HOME CARE: 9745964777

TELE-MEDICINE: 96450 01472 / 99615 89007

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