

JAN 2018 VOL. 1

# THE GREY MATTER

QUARTERLY NEWSLETTER FOR M.I.M.E.R.

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by Abhishek Choudhary, II/III MBBS

## WHEN BREATH BECOMES AIR

A book review by Avanti Patwardhan,  
II/I MBBS

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*What makes life worth living in the face of death?*

*What do you do when your future, no longer a ladder toward your goals in life, flattens out into a perpetual present?"*

*-Dr. Paul Kalanithi, Neurosurgeon*

*Have you ever been to a beach and stood*

*at the shore?*

Have you ever tried to look beyond the water only to find more water no matter how far you look? Have you ever felt the waves come crashing to your feet?

Wriggled your toes deep into the sand determined not to be swept away by the next wave only to slip and fall when the tide actually hits? I have. It's in moments like these that I can't help but wonder what my purpose in this world is. Growing up in Kingman, Arizona, a desert town he describes known primarily to the outside world as "a place to get gas en route to somewhere else", he aspired to be a writer someday.

As an English literature student in college, he was plagued by the question 'given that all organisms must perish one way or another, what makes them strive towards survival, trying to find meaning in life?' An avid reader, he buried himself in books and poems about life and death. After graduating college as an English literature major, he went to medical school where after years and years of hard work, he finally became a neurosurgical resident. As a doctor, Paul Kalanithi was dedicated, compassionate and benevolent. Despite his back-breaking work load and grueling schedule he realized that technical excellence wasn't enough. When a patient has a grim prognosis, doctors often fail to realize that while they can see the possible futures wrought with breathing machines and round the clock care, their families see the past, accumulation of memories and undying love. He understood that his job wasn't just to treat, but to guide the patient or family to understand the illness.

And while he was familiar with the pain and anguish his patients faced, he believed he never quite felt it. Until it was his turn. As he was inching closer and closer toward his dream, in his final year of residency he was diagnosed with stage IV lung cancer.

*"I began to realize that coming face to face with my mortality, in a sense, had changed nothing and everything."*

Just like that, the tables had turned. The future he had envisioned for himself and his wife evaporated. He went from being the deliverer of grave news to the receiver. He was a patient. His life (and death) were plunged into uncertainty, something he was neither prepared nor willing to face. But then he remembered that death is an eventuality no one can escape. To embrace one's impermanence and to aim nevertheless for the stars is what life is all about. He used his newly found insight as a patient to be a more empathetic doctor as now he was actually able to put himself in his patients' shoes and feel their agony as well with their families' distress. We all crave greatness. We wish that our contribution to society be tangible, substantial, material.

After all, that's what makes our lives worthwhile isn't it? After reading 'When Breath Becomes Air', I realized that a purposeful life is one that is spent trying relentlessly to find purpose. It's a journey. Along the way you're bound to make an impact. No matter how small you may think it is, it is significant. A meaningful life is one spent with family and friends, because to your loved ones, you mean the world. This truly heartbreaking yet inspiring story based on the great life of an exceptional doctor showed me that someone who is frail need not be weak. It showed me that one can face death with dignity, making their passing just as meaningful as their life.

*"Life has no meaning. Each of us has meaning and we bring it to life. It is a waste to be asking a question when you are the answer".*

-Joseph Campbell

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## ACCEPTANCE

Are you looking for happiness?

I know you'll say yes

Look closely, I'd say

at the labourer who works all day

for the master who barely pays

Notice the girl who greets you with a smile  
who has to work hard and walk miles  
to support her parents, poor and senile

Or the boy who waits tables at the cafe  
So his little sister could go to school one day

Put yourself in the shoes of the boy  
who never even had his own toy  
Because he had to work at that age  
so his family could make decent wage

Look closely,  
at the selflessness and benevolence  
and you'll see,  
the key to happiness is acceptance."

-R.P, II BPTH

# TAAZAA KHABAR



## WHERE THERE IS A PILL, THERE IS A WAY (OCT, 2017)

The new diabetes wonder pill shows significant improvement in the health of patients. Study leader, Melanie Davies, a professor of diabetes medicine at the University of Leicester said, "The results demonstrate Semaglutide's ability to have an impact on lowering blood glucose and support weight loss when taken orally."

## UTERUS FINALLY MADE ITS WAY IN! (MAY, 2017)

First ever Uterus transplant surgery in India was conducted successfully by a team of 12 doctors at Pune's Galaxy Care Laparoscopy Institute.

by Uma Chandurkar, II/I MBBS



A cartoon by Niranjan Thorve, II/III MBBS

# M.I.M.E.R.'S MUSE

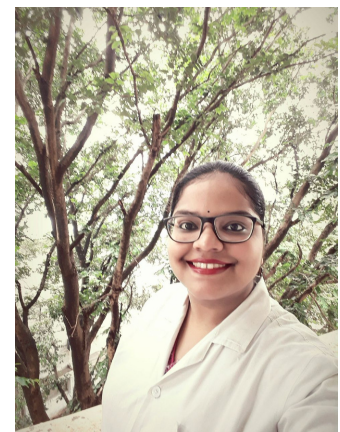
Our desperation to know your inspiration



Varun Dake, 1st year, MBBS

We all must've attended a 'Magic Show' as kids where the magician conjures up rabbits out of thin air. And poof! They're gone in the blink of an eye. To be honest, working as a Physiotherapist reminds me of that childhood memory. That's because, we take away all the pain and agony of patients in the blink of an eye. Just like a magician. To see a patient smile, is the most humbling experiences of all. We're extremely fortunate to be a part of this profession where we heal, we save and we 'add life to years'. I'd love to work with the geriatric population, particularly the ones afflicted with osteoarthritis.

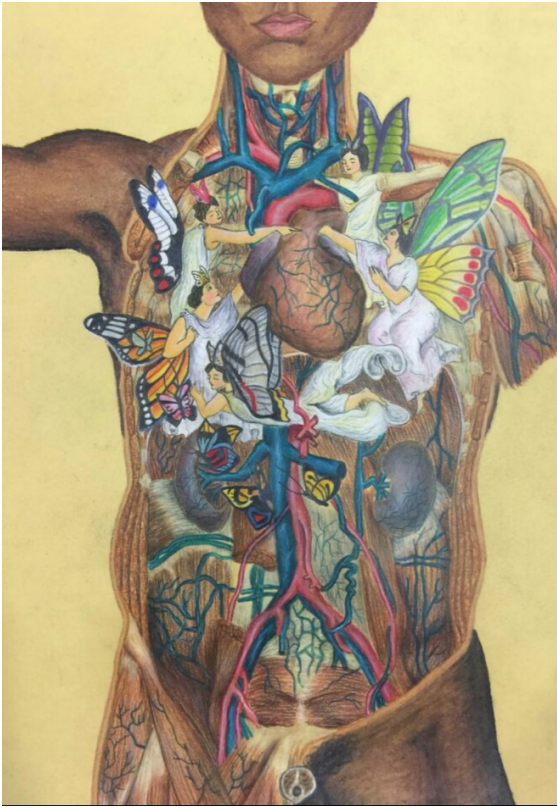
Most children are afraid of going to the doctor. As a child, I wasn't. I was very fascinated by the way medical professionals went about their day. Visiting my paediatrician is what piqued my interest in medicine. When I got serious about possibly taking it up as a career, I was extremely drawn to specializing in cardio-thoracic surgery. Now that I'm actually in medical school, my horizons have widened and I look forward to exploring and learning a lot more than I thought possible.



Anupama Bhagwat, IV year, BPT

I hope that I'd be able to relieve the agony of all the patients... like an 'Agony Aunt' but for your joints!

# Pigment



'Harmony' by Dnyanada Lolage, II/I MBBS



by Abhishek Choudhary, II/III MBBS



by Siddhi Rangari, II/I MBBS



by Sourabh Sutrave, II/I MBBS



'The Afternoon Shadows' by Aanavi Bhatia, III year, BPTH

# Aged Solitude

A story by Anamika Prashant, II/I MBBS

She watched the silent gravel of her driveway and sighed. Another few months and it would be summer. Summer in which her children would come home from Mumbai and Delhi and the house would be filled with laughter. She would finally be busy cooking large amounts of food and delicacies. The huge house would become alive again. She loved those days. Although on days like these, she felt lonelier than ever. Just when her vision became blurry, she heard the voices of two boys arguing.

The boys weren't hers. But she treated them as her own. She paid for their education, provided them clothing and gave them meals because she somehow, always managed to make more food than needed for one.

She smiled hearing her maid scold them and the sons' give smart replies back. She hollered from her house that they were disturbing her peace even though she loved to hear them banter and they were aware of it too.

All three of them walked up the slope towards her house, explaining the situation at the same time. She reminded that it was evening time. It was a ritual for all of her tenants to come to her house and watch all the evening serials together. Her living room would become a mini theater then, with comments and food being passed around. Its evening like these when she almost forgets that she lives in solitude.

When the time's up, they go back to the houses she's built for them and she closes the door behind the last person to stand around and talk. She bolts all the doors, double checks them and walks slowly to her room.

Every single time, she pauses in front of her husband's door, who was paralyzed for ten years before he succumbed to death and every single time, she switches on the tiny light without which she is unable to sleep.

In her room, she crosses another day off the calendar. Another day closer to when her children will come home.

~\*~

They'd taken us to visit the blood bank. To maintain the sterility of the room, we were asked to keep the bags outside. When the tour was over and we got our bags back, the first thing I did was check my phone. Two missed calls from dad. It felt wrong. So wrong.

I called him back with trembling fingers. One ring and two heartbeats I heard three words.

"She passed away."

Silence from both ends. A moment passed before sobs wrecked my body.

I was surrounded by buildings full of medical staff, white coats and stethoscopes. Wearing one myself, but miles away nothing saved my grandmother. I don't know how I did it.

Waking up the next day, washing my puffy face because all I did was cry the night before. I put on my white coat and sprayed some deodorant to mask my stench.

When all I wanted was to rip off the coat from my back because the honor of this coat couldn't save my grandmother.

You should take a break, my friends advised. I declined. With no family to comfort me, I felt lonely and sick and realized exactly what my grandmother must have felt for years now.

Acute pulmonary embolism, they said. Three consecutive myocardial infarctions, they said. Old age, my friends comforted me. I know all about acute pulmonary embolism, its symptoms, pathogenesis and its diagnosis. That's when I realized one thing, no amount of medical education will prepare you for the loss of a loved one.

The platinum chain around my neck will remind me of her and so will every small thing. So let me abandon my medical education while I say this, come back.

We promise to make your house alive again. We all miss you so much. Please come back.

# DIALOGUE

An Interview with a teacher



*"Sir reads a lot" "He is full of life"*

*"Extremely knowledgeable"*

*"He often shares experiences from his college days"*

These were the things we had heard about our beloved HOD of the Obstetrics and Gynaecology department, Dr Paititpaban Panigrahi. After spending an hour talking to him, we now know these things to be true.

Q-Where did you get your medical schooling from?

A-I did my UG from VSS institute of Medical Sciences and Research, Burla, Sambhalpur, Orissa. DGO from CSS Medical College, Calcutta  
MD from JIPMER, Doctor's heaven and MNAMS- CMC, Vellore known as Mecca of Medicine.

Q-Where did you get the best learning experience?

A-Undoubtedly, at JIPMER. My experience at JIPMER will stay with me forever. In fact, I remember once being made to stand in front of the undergraduates by my professor, while he said to them, "If you want to learn surgery, observe Patit, so that you know what not to do".

Q-What made you choose medicine?

A-I come from a medical background. My father was a gynaecologist. I have five brothers. Three of them are doctors. I knew since the very beginning

that this was something I'd have to do. Otherwise, I would have taken up mathematics.

Q-Do you have a special case that you have encountered in all these years?

A-The year was 1978. I was in JIPMER doing my MD. I was working under Dr Prabhavati, my exceptionally brilliant teacher. She could solve cases over the phone but this particular case was different. The women admitted had PPH ( post-partum haemorrhage) and the conventional methods that were used at the time would've proved of no use to her. I suggested to Dr Prabhavati that we perform an Internal Iliac ligation surgery. Madam had never performed the surgery before. She asked me, "Can you perform the surgery?" I told her that I could and she made me recite all the steps that would take place in the surgery. There was immense risk in the procedure. 1978! Can you imagine? This was the time when there was no Ultrasonogram. Prostaglandins hadn't been discovered yet. There was no laparoscopy procedure!

Ma'am asked me, "What happens if you do perform the surgery?"

I said, "There is a 50% chance that the patient will survive."

"And what happens if we don't perform the surgery?", she asked.

"The patient dies."

The decision was made. The surgery would have to be performed. The anaesthesiologist told us that we'd have 10 minutes to do the surgery. Madam looked at me. "How much time?", she asked.

One minute to open, one minute for the right Internal Iliac, two minutes for the left Internal Iliac because of the sigmoid colon, one minute to close the patient and one minute extra just in case, I told her.

Ma'am told the anaesthesiologist that we'd perform the surgery in 6 minutes and that he'd have 4 extra minutes. The surgery began and ma'am was so excited. We never needed that one extra minute. She was extremely proud that day and I remember how happy she was. This is the moment every professor lives for. To see their students do better each day. To see them become excellent.

Q-Do you think you have achieved the goals you had set for yourself?

A-My goal in life was to become a professor and I achieved that goal a long time ago. Whatever I achieved after that was purely out of my love for the subject. Earning money was never my objective in life. A lot of people don't choose gynaecology because it involves teaching but it is a wonderful experience.

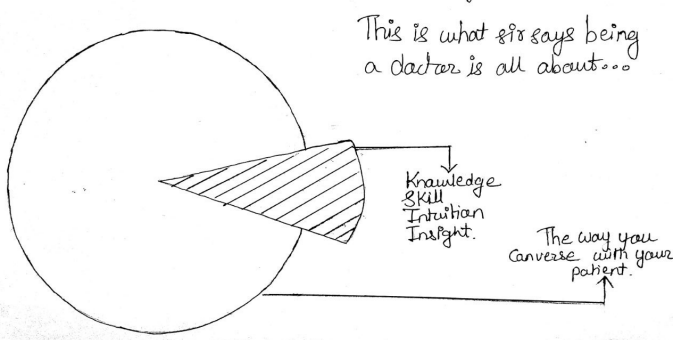
Q-A lot of people say, "Don't go for OBGYN. The doctors work all the time. They don't have a life." What would you say to them?

A-Obstetrics itself is life!

Q-What would you say to your students and the current generation?

A-"Don't bother about what the system, society, the nature has given to you but, bother what you can give to them." Medicine can be learnt only from the masters and that learning doesn't end with your course. Learning should be eternal. Last but not the least, there is no substitute to hard work!

The Dr. P P P P chart - Dr. Paritpaban Parigrahi P P Chart!



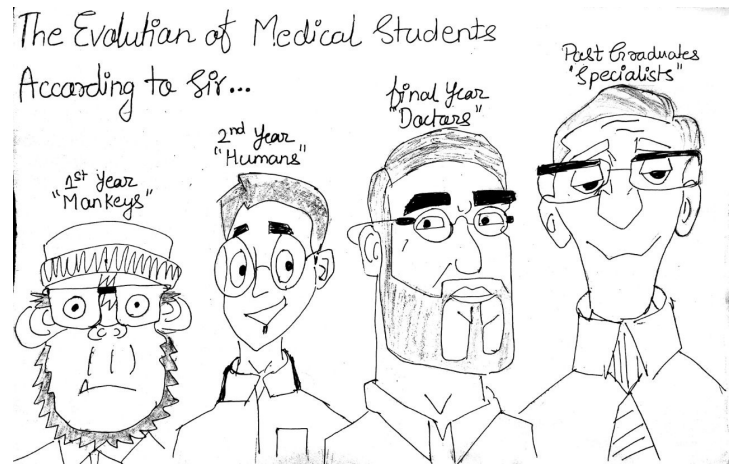
Q-Do you still remember all your students, Sir?

A-I have a method of knowing if I've ever taught a student. I ask them what structures pass through Foramen Magnum. The answer I expect is, trachea and oesophagus pass through Foramen Magnum.

Q-Any other passions besides Medicine?

A-My passion is Drama. Even today I love acting, comedy and singing. Unfortunately, getting into MD was a time when I had to slowly give that passion up. *That baby did not grow in me.* I am also passionate about many other things such as Literature, Philosophy,

Most importantly, teaching, I could talk to a class of students all day! I personally love teaching undergraduates. They know little, because of which they find everything magical. I love watching the wonder in their eyes.



# WE KNOW YOU'VE BEE-N BUSY



1) Sahiba Maniar, II/I MBBS

-Best Speaker in Debate at BJ medical college at RESPIRARE

-Silver medal at Grant Medical College for panel discussion at AUXESIS



Picture- Sahiba Maniar

2) Kshitija Surve, II/I MBBS

1st prize in Marathi speech competition on Indira Gandhi held at Vadagaon, Nov 2017



Picture- Shubhali Salunkhe and Rahul Bagul

3) Rahul Bagul and Shubhali Salunkhe, III/I MBBS  
Second prize at AFMC Eye Donation Fortnight  
Intercollegiate quiz held at AFMC, Pune

4) Riya Barar, II/I MBBS  
Finalist in the Debate at Respirare, the medical  
conference held at BJ Medical College , Aug 2017

5) Shehroz Nagdawala II/I MBBS  
Represented M.I.M.E.R. Medical College  
ambassador at the medical conference held at BJ  
Medical College, "Respirare 2017" and ranked 3rd  
among ambassadors all over India

6) Tanushree N, Ritika M, Miit M, Manali D, Kinjal  
A, II/III MBBS won a competition at the Oral and  
Poster presentation workshop at B.J. Medical  
College, Aug 2017

# M.I.M.E.R. HAS BEEN BUSY TOO

It gives us great joy to announce that MCI  
has recently awarded recognition of the  
following Post Graduate seats-

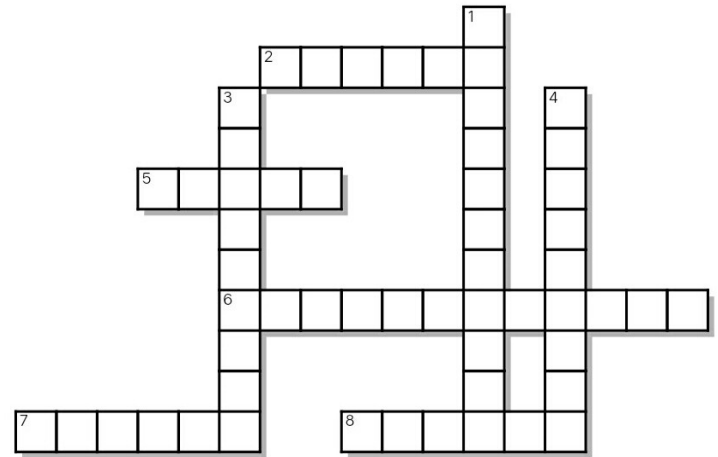
MS Gen Surgery	:4
MS Orthopedics	:2
MD Skin	:2
MS Ophthalmology	:2

and the following MUHS fellowship seats-

Minimal access Surgery	:2
Head,Neck,Face Oncosurgery	:2
Regional anesthesia	:2
High risk obstetrics	:2
Neonatology	:2

# cortex

## THE CROSSWORD



### DOWN

- 1.Compression of mediastinal structures  
by any tumor gives rise to a group of  
symptoms known as \_\_\_ syndrome.
- 3.Sensory speech area in the cortex  
is known as \_\_\_ area.
- 4.Site of maximum tenderness in  
appendicitis is known as \_\_\_ point.

### ACROSS

- 2.Incudomalleolar joint is a \_\_\_ type  
of synovial joint.
- 5.Fracture of second,third,fourth and  
fifth metatarsal bones is common in soldiers  
and is known as \_\_\_ fracture.
- 6.Carotid artery is palpated against  
this bony structure,\_\_\_ tubercle.
- 7.In a histologic section of this organ,  
you will see Hassall's corpuscles.
- 8.Circle of \_\_\_ is the polygon of major arteries  
supplying the cerebrum.



# My first flipped viva

by Girish Borkar, IV year, MBBS

After a year of rigorous hard work, burning the midnight oil, going through piles of books and facing a series of exams, it takes weeks, even months to digest the fact that you finally made it into a Medical College. That you've actually accomplished the first step leading to the rest of your life.

Just as you gradually begin to slip out of this dream-like trance and the excitement settles down, a few months have already passed, and another anxiety gets hold of you, your very first MBBS practical exam.

The day of my first MBBS practical exam is still clearly etched in my mind.

Day: Monday; Reporting Time: 9 a.m; Venue: Anatomy lecture hall.

All of us gathered well in advance for our first and the most feared viva. The batch was divided into a number of groups and different professors were overseeing different sections. I was the 3rd one in my group. I restlessly waited outside the hall, wishing that I could glance at my book one last time. However, all I could manage to do was to stare at the blue sky overhead, which prompted me to make a quick, silent prayer to God.

And then arrived the moment. My heart skipped a beat as my roll number was called out. I went inside. I tried to put on my best smile as I greeted the professor 'Good Morning', trying to pose as a sincere student. I mentally lauded my act but soon got a reality check when he didn't smile back. "Your name?", he asked and on my reply, "Okay, sit", he said. Thus began my first practical exam.

It was the Radiology section. A radiograph was put up on the screen. Sir threw a glance at me and asked me to begin. I was very familiar with radiographs and so all I needed to do was to open my mouth and spill my knowledge and I did just that. To begin with, I felt lucky that it was a knee joint radiograph.

A good start, I thought to myself. I began, "Sir, it's a femur, this is patella and this is tibia and...".

He immediately shot back, "And what?".

I knew it was supposed to be the fibula alongside the tibia but God knew why it didn't show up on the radiograph! I stood there. Numb. Searching for it.

'Where is it? Is it absent? Or removed?', I tried to rack my brain. Sir continued to stare at me, expecting an answer. Beads of sweat trickled down my forehead, my heart raced and I felt a rush of adrenaline in my bloodstream. Gasping for air, I mumbled, "FIBULA".

"Where?", he asked.

I was in a fix. "Sir it should be here but it's not there", I said pointing next to the tibia. "Are you sure?", Sir questioned, shifting his eyes from me to the radiograph. I caught a glimpse of a look of surprise on his face when he couldn't locate it either.

Yes, It wasn't where it was supposed to be. For a few seconds, he examined it carefully and then removed it. I heaved a sigh of relief as I thought some simple radiograph might have been replaced by a final year orthopedics one.

However, He sheepishly grinned at me and flipped it upside down and put it back onto the screen and looked at me with what could pass off as a generous smile on his part, and said, "Continue".

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## TAAZAA KHABAR 2.0



by Gautami Kashyap, II/I MBBS

A United States citizen's life did come close to becoming a wish granting factory. When in September, 2016 FDA approved the first closed loop system, the medtronic's minimed 670G system (sounds complicated, right?) intended to automatically monitor blood sugar and adjust basal insulin doses in people with type I diabetes.

# A SURVEY

by Mruja Bhatt, II/I MBBS

Key for the survey-

**YES** **NO**

Sion, Mumbai: 1st year resident beaten up by patient's relatives after the patient passed away following which 4000 doctors of Maharashtra Association of Resident Doctors (MARD) went on a strike asking the state government to ramp up the security to shelter them. Impact: 40 hospitals in Mumbai. 60% resident doctors across the state on strike. Severe crunch of immediate treatment. Many surgeries cancelled.

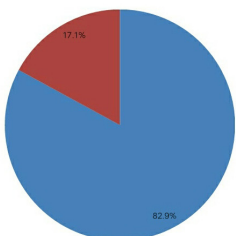
Response: BMC and Director General of Police promised to provide 400 armed police by weekend which will increase to 700 by April 2017. Rule of two relatives per patient to be implemented. Alarm system in hospitals.

Similar incidents have been reported in: Mumbai, Dhule, Delhi, Karnataka, Lucknow and many more places.

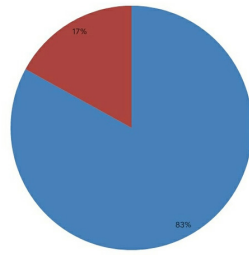
Survey conducted on 100 people from various walks of life which included doctors, students, teachers, etc.

The result of each question of the survey is as follows:

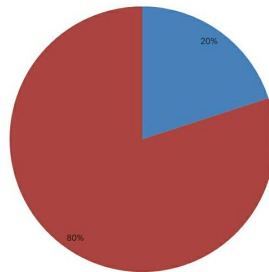
1. I think, doctors need to be more sensitive to emotional needs of the patients and their families in the event of a relative passing away.



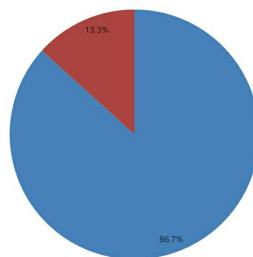
2. I think doctor's strike was the need of the hour.



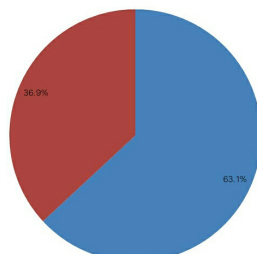
3. I think there was negligence from the doctor's side.



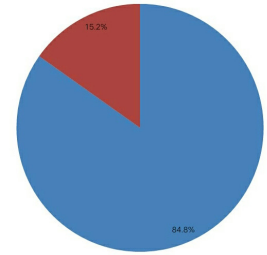
4. Do you think advanced security should be provided to the doctors at public hospitals?



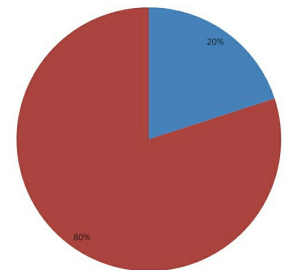
5. I think the entire situation could have been handled in a better way, if the doctors weren't on strike.



8. Do you think hospitals in India are well equipped to deal with emergency cases?



9. Do you think a strike is the ultimate solution to tackle the problem faced by doctors?



The number of incidents of assaults on doctors have increased over the past few years. A doctor suffered an orbital fracture and temporary vision loss. An injury that could have caused permanent vision loss! The demand no longer remains of asking for respect in exchange for hard work and selflessness. The demand is of a basic human right that everyone is entitled to- security. A right that everybody deserves.

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## UMA WRITES

by Uma Chandurkar,  
II/I MBBS

Staring at his lifeless  
body,  
She was somehow  
completely calm.  
First day in the  
dissection hall,  
She mourned for fear.

# A NOTE FROM YOUR EDITORS



From left to right: Riya Barar and Damini Narkhede

After the first year of MBBS, which was filled with excitement, stress, joy, madness and lots of books most of us give up on our extra curricular activities looking at the vast syllabus that awaits us. However, we were determined to keep the adrenaline flowing through everyone's veins. We kept thinking about how MIMER did not have a running students' newspaper yet. So we decided to combine our love for Art and Medicine and start this paper called 'The Grey Matter'. We wanted to create a platform, by the students and for the students, to be able to express their creativity. A platform to share their journey as they go on to become brilliant physiotherapists and doctors. We hope that no matter how small, these stories and articles create an impact on the young minds of our college. We were very passionate about this project and were determined for it to come alive despite facing several setbacks. The word 'overwhelmed' doesn't quite capture our emotions after seeing the response we received from our batchmates ( Thank you Insurgents!) and all other students. We would also like to mention and extend our gratitude to all our mentors who have helped us in bringing this paper to you.

Firstly, we would like to thank Dr. Suchitra Nagare ma'am, the leading lady of our college, who approved our idea in the blink of an eye. We had first pitched our idea to Dr. Nikhil Phadke Sir, who encouraged us to pursue it. A person who cannot be thanked enough is Dr. Sandesh Gawade Sir, who's guidance has played a crucial role in getting this paper from our heads into our hands. Last but not the least we would like to thank Dr. Sushma Sharma ma'am, Dr.(Col) Thind Sir and Dr Panigrahi sir for always encouraging us to pursue a project that was beyond our academic development.

We hope that in the years to come The Grey Matter grows larger and gives opportunities to many students. We hope that you keep writing to us because we love reading your articles and stories.

Until next time, Keep writing!

**[ STRENGTH AND SECURITY WHEN IT'S NEEDED MOST ]**

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## ANSWERS TO THE CORTEX

1. Mediastinal
2. Saddle
3. Wernicke's
4. McBurney's
5. March
6. Chassaignac's
7. Thymus
8. Willis

You need them.  
Ever realised?



**Pilot Paper Shredders**  
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**Counting Machines**

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Send in your submissions for the next issue to [thegreymatter.mimer@gmail.com](mailto:thegreymatter.mimer@gmail.com)

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