



# AICC RCOG SOUTH ZONE

## News Letter

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Member Representative  
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**Dr Georgy Joy Erailil**  
Member Representative

**Dr Prasanth P**  
Member Representative

**Dr Shameema KV**  
Member Representative

### From the Chairperson's Desk - Dr Uma Ram

#### Dear Friends

There is a festive mood in the air for the past two months and I hope everyone has had a wonderful Navarathi and Deepavali. There have also been a lot of activities in these months and it was very good to see many of you during these programs.

September began with the Annual AICC RCOG conference in Kolkatta, which was diligently planned and beautifully delivered. Many of our fellows and members were there as a part of the program. Of course one of the highlights of the conference was the dance that our zone put up the inauguration. It was an wonderful experience where 14 of us across 7 cities came together having practiced with online video sessions.

The conference was immediately followed by the Sims Black lecture series. Professor Zarcko Alferivic came to Hyderabad and Chennai and two sessions in each city. One was a CME program for practitioners in Hyderabad and another a PG teaching session in Chennai. Besides this, he did a session on research and clinical trials in both cities. I do hope this provides a base for us to come together academically to do research.

The STRAPP program is going on very well in many cities and towns thanks to the motivated trainers. The feedback has been excellent.

We look forward to hosting the Part 3 exam in the first week of November and the annual conference in Banglore on the 16/17 November on a very important topics in periconceptional and perinatal health. Hoping to see many of you there at Bangalore.

The College would have moved to its new premises in a couple of weeks and by the next news letter, the new President and Vice presidents would have taken over office.

I thank each one of you for the support and effort towards the AICC RCOG SZ activities and look forward to continued involvement in the future initiatives

## AICC RCOG Annual Conference at Kolkatta September-2019 : The SZ Force



**Dancing With The Stars :**  
Our Beautiful South Zone Divas



**Fellowship Cermony :**  
Congratulations to all the new Fellows

## Marching on with the Perineal Repair Workshops



**Ongole**



**Chennai**



**MOU Exchange with J&J Ethicon**



**Kochi**



## AGE OR MENOPAUSE: THAT IS THE QUESTION

India is aging fast. The life expectancy of women in India is now 70 years compared to men for whom it is 67 years. We as gynecologists will be looking after more elderly women in the coming years.

Menopause is a prominent event in a woman's life and both she and her family tend to attribute various changes that she undergoes at this stage to the menopause. In fact, women undergo several changes after their mid forties and it is difficult to distinguish how much of this is due to aging per se and how much due to estrogen deprivation. An attempt has been made by several researchers to understand the differences in the hope that this will give insights into preventive strategies for chronic diseases.

**Body Composition :** There are pronounced changes in body composition. Abdominal fat, visceral fat and subcutaneous fat increase after the menopause. The midlife weight gain has been found to be due to aging and not due to menopause. Increase in weight and abdominal circumference are linked to sedentary behavior, irrespective of age and menopause. Regular exercise counteracts both age related and menopause related decline in resting energy expenditure. Menopausal hormone therapy reduces central adiposity. The prevalence of Metabolic syndrome also increases with menopause and this is beyond the effects of aging alone.

**Cardiovascular Disease :** Cardio-metabolic health changes dramatically. Earlier age at menopause or bilateral oophorectomy at an early age increase the cardiovascular disease risk. Premenopausal women develop Coronary Heart Disease about 10 years after men. However, this protection seems to be lost after the menopause. Also, menopausal symptoms such as vasomotor symptoms and sleep disorders are linked to cardio-vascular disease risk irrespective of reproductive or chronological aging. Women who have severe and frequent hot flushes are known to be at increased risk of cardiovascular disease.

**Sleep :** Insomnia is an increasing problem as women age. Falling asleep, staying asleep and getting restful sleep are all affected. There are several sleep disrupting causes such as vasomotor symptoms, obesity, sleep apnoea, nocturia, urinary incontinence and gastro-esophageal reflux disease which occur in this age group. All these and any other chronic ailments need to be addressed. Sleep hygiene must be maintained. It is important not to watch too much television, work on the computer or look at the screen of the mobile phone for too long before attempting to sleep. Reducing excess alcohol consumption or caffeinated drinks and getting into bed at a regular time, preferably before 11 pm are also helpful strategies.

**Cognition :** Impairment in cognition and dementia increases with age. Diabetes, obesity, hypertension and smoking increase the risk of dementia, so these issues need to be addressed. Almost 40% of women report memory problem at the time of the menopausal transition, but this seems to plateau off and women can be reassured that usually this is transient and it does not keep deteriorating with time after menopause.

**Depression :** Women have twice the rates of depression as men. There is an ongoing debate on whether this increases due to aging or the menopausal transition. It has been found that depression is between two to five times more common at the climacteric.

Midlife brings with it a lot of emotional turmoil. When the woman is younger, she is busy caring for her husband and young children and juggling it with her career. She may have denied herself the luxury of dwelling on her desires or hobbies in the first half of her life.

At this stage, she is often looking after aging parents. Caring for the elderly can be stressful. She may have to cope with losing a parent or a loved one. Her work role may be ending. So retirement blues are added to all this emotional upheaval. Menopause may increase vulnerability to a recurrence in women with previous history.

**Implications :** Although there is still not much clarity on how much is the impact of age and how much is due to reproductive axis aging, what is clear is that strategies to prevent chronic diseases in later life have to be started early. Regular health check-ups to detect problems early are important. Lifestyle modification has become clichéd. Be that as it may, it is one of the most important aspects of management. Diet and exercise to optimize weight, decrease abdominal obesity, prevent sarcopenia and improve bone health must be stressed.

Exercise incorporating strength training provides not only the physical benefits of improving strength, stamina, balance and co-ordination, but there are several mental health benefits too. Learning dance steps improves cognitive skills, muscle memory and concentration. Learning choreography increases white matter. Social interaction is important as also learning a new skill.

Pharmacological interventions to keep Diabetes, Hypertension and all other chronic diseases under control are equally important.

Menopausal hormone therapy should be offered to women with vasomotor symptoms and those at high risk of Osteoporosis, as long as they do not have contra-indications. Local estrogen therapy is appropriate for women with urogenital symptoms.

### References

1. Report of the Technical Group of Population Projections 2006
2. SRS Bulletin 2019 of Census of India
3. Menopause Versus Chronological Aging: their roles in women's health. Menopause 2018;25(8):849-854

### About the Author

**Dr Jyothi Unni**, FRCOG, Director, Dept of Obs and Gyn, Jehangir hospital, Pune.  
President of Indian Menopause Society in 2013.  
Currently Indian Representative in Asia Pacific Menopause Federation  
Immediate Past Chair AICC RCOG East Zone

### QUIZ 1

Give a concise likely diagnosis & propose an appropriate plan of action

**Clinical Details:**

Aged 23, 10 weeks gestation, routine pregnancy screening

**Haematology Results:**

CAM Hb Electrophoresis	A+A	
HbA2 Quantitation	2.6 %	(reference range 1.3-3.5)
Hb Interpretation	Alpha thalassaemia trait cannot be excluded	
Hb	9.8 g/dl	(reference range 11.5-15.5)
WBC	8.94	
Platelets	214	
RBC	3.14	
HCT	0.34	
MCV	72 sl	(reference range 80-98)
MCH	24.8 pg	(reference range 27-33)
MCHC	29.8 g/dl	(reference range 31-37)

Contributed by : **Dr Niraj Yanamandra**, Consultant, Rainbow Hospitals



## SIMS BLACK TRAVELLING FELLOWSHIP - 2019

This fund was created in 1951 by Sir Arthur and Lady Sims, their daughter Mrs Margaret Black, and Messrs Cooper, Triffitt and Company. The purpose of the Sims Black Travelling Professorship is to:

- Contribute to postgraduate education by presenting lectures, participating in seminars, group discussions and clinical demonstrations (if appropriate).
- Gather information about systems of postgraduate education and training and assist in developing programmes.



This year it awarded to **Prof. Zarko Alfirevic** who is Professor of Fetal and Maternal Medicine, Head of Department of Women's and Children's Health and Associate Pro-Vice Chancellor (Clinical) at the Faculty of Health and Life Sciences the University of Liverpool.

He is also Director of Fetal Medicine Unit and Harris Wellbeing Preterm Birth Research Centre at Liverpool Women's Hospital, one of the largest stand-alone maternity hospitals in Europe with more than 8,000 births per annum.

His main research interests are evidence based medicine and clinical trials in high risk obstetrics. He chaired the RCOG Academic Board between 2014 and 2017 and received RCOG Annual Academic Prize in 2018.

He is Co-ordinating Editor of the Cochrane Pregnancy and Childbirth Group, has over 290 publications listed in PubMed and speaks regularly at the international meetings world-wide on topics related to preterm birth, fetal growth restriction, induction of labour and evidence based medicine.

### Hyderabad Visit:

While in Hyderabad he addressed the ISOPARB Hyderabad chapter. He delivered a lecture on Preterm Birth and participated in a Panel Discussion on Preterm PROM. He then interacted in a small group discussion on research Methodology conducted by Fernandez Foundation.





## Chennai Visit



### PG Interaction & Research Session



## The Chennai Visit Described in Dr. S. Suresh's Inimitable Style

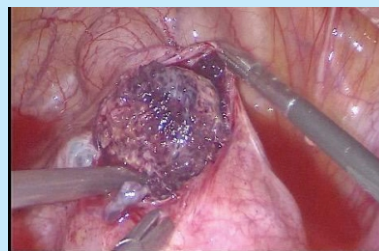
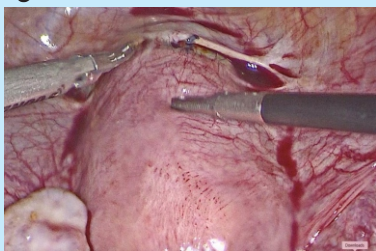
**Come on Chennai and India :**

**Time to soar in the academic world !**

#### Key take home points of the visit :

- Must define your research question precisely
- Have a simple primary outcome and don't try to find answer too many questions
- Secondary outcomes must be kept to a few
- Use the PICO for designing the study
- In today's world multicentric studies are the order of the day
- Need for two Chennai RCTs One for induction of labour and another for late onset FGR
- Two studies were presented one from Joseph Nursing Home . Well appreciated and he said this should be an RCT to be published in 1 year
- Excellent brainstorming. He always took the other point of view and analysed it critically in a very polished manner and made everyone feel good .
- One of the best 3 hours spent More such sessions are required.

### Quiz - 2 : What is this Condition ?



Contributed by : **Dr Niraj Yanamandra**, Consultant, Rainbow Hospitals

## THE ONE CONSTANT IN MY LIFE : THE LOST ART OF READING

**Ms. Ratna Rao Shekar**

Journalist Ratna is a serial magazine launcher, having founded and edited magazines like Housecalls, Wow Hyderabad, Naari among others. She is the author of a book of short stories, The Purple Lotus and Other Stories. She believes that stories we tell each other will survive, even if it is not in the form we know it today!



Life, often is unpredictable. One moment it goes up to an euphoric high, and the next it has crashed to a depressive low. I have had my share of happiness, grief, anxieties and turmoil. Yet the one constant that has been with me all my life has been books and reading. When I am sad, I find respite in books, when anxious I find solace in books, and even when I am happy it is with books that my happiness achieves a completeness.

When I was young, we didn't have other forms of entertainment like television, computers or even malls. Growing up in Hyderabad we didn't even have that many places to go "hang out" as the kids today have. My mother might get me a Finlays organdy sari for the 16th birthday, but I had to take a few minutes off to visit the neighbouring bookshop, AA Husain to browse through their books, and treat myself to a book even as my mother told me to hurry up. All our birthday gifts were from this one bookshop. Andre Gide, Sartre, Camus Huxley were books that were gifted to me by close friends, and that I still cherish.

Life, often is unpredictable. One moment it goes up to an euphoric high, and the next it has crashed to a depressive low. I have had my share of happiness, grief, anxieties and turmoil. Yet the one constant that has been with me all my life has been books and reading. When I am sad, I find respite in books, when anxious I find solace in books, and even when I am happy it is with books that my happiness achieves a completeness.

Since we couldn't download books or could afford to buy too many books, we scoured second hand markets and Hyderabad pavements had some of the best such Sunday markets, where the man would thrust Eric Segal's Love Story on us, saying, madam please take this, very good story. And I ended up buying it, as I had just gone mooney over the film, starring Ali McGraw and Ryan O Neal. Never mind that I was shocked to find a book that I had gifted a friend, right here among other second hand books!

Or there were the libraries. Then, as now, libraries give me a high, that most often comes from a glass of good red wine or meeting an old crush. I could not borrow or read all the books in the library. But that was not the point. Just the fact that there were so many on the shelves, arranged in alphabetical order, leaning one against each other, was enough to make me intoxicated. I remember my first treat to a library, when my grandfather took me to a children's library and got me cards that entitled me to borrow my first Enid Blytons and Agatha Christies. How many treasures have I not discovered in these libraries that I visited? From Daddy Long Legs, To Kill a Mocking Bird, Gone with the Wind to Huckleberry Finn that were few of the classics that I read here for the first time.

Of course, when I went to the US, I could not believe the number of books the library in my university in Oklahoma. Best of all, I thought I had died and gone to heaven when I went to the New York Public Library in Manhattan recently, which was so magnificent ---from the building to the books, to the discipline and the hush of scholarliness, This to me, was a kind of hallowed space where so many great minds were speaking, and were inspiration to so many others like Tom Wolfe who used the library's facilities for writing his works, and recently had donated all his handwritten notebooks to the library in a gesture of gratitude.

The years have passed. And in these years, friends have moved on. Some friendships have withered. Parents have died. Children have moved to places that are not a train's journey away. And the city that was my home has changed. I myself may have become older, the eyes not so sharp and skin less taut. But to this day the childish joy in accumulating books remains. As I said, life has its ups and downs, its griefs and its joys. But a book has seen me through every phase of my life.



Royal College of Obstetricians & Gynaecologists

All India Coordinating Committee RCOG SOUTH ZONE

**REVISION COURSE FOR PART (3) MRCOG EXAMINATION**

2 Circuits with feedback  
Workshop based sessions  
Video sessions

Candidates should have passed part 2  
28 Registrations only  
First come first serve basis

Dates: 26<sup>th</sup> & 27<sup>th</sup> September 2019  
Venue: Chennai

To register email : drumaram@gmail.com



### MRCOG Part - 3, Training In Chennai

28 candidates and 25 enthusiastic faculty from India participated. The UK faculty were Dr Anju Aggarwal, FRCOG, Leeds and Mr Mohsen Iskander FRCOG, Merseyside.

## Save the Date

Empowerment Through Education

Save the Date  
29<sup>th</sup> October - 1<sup>st</sup> November 2020

**AICC RCOG 2020**  
Kochi

Scientific Secretariat : AICCRCOG 2020  
Women's Health Department, Aster Medcity  
South Chittoor P.O., Changanassery  
Kochi 692021, Kerala.

Conference Secretariat : Marudeshwara Enterprises,  
A2, Shanthi Apartments, New no 16, (Old no. 21)  
TTK 1st Cross Street, Akarpet, Chennai - 600 019

For registration please contact: info@aiccrcog2020.com  
or visit www.aiccrcog2020.com

**BASICS & BEYOND 2019**  
ORGANISED BY AICC-RCOG SOUTH ZONE AND BANGALORE RCOG TRUST  
ON PERINATAL HEALTH- NATURE AND NURTURE

Date:  
16<sup>th</sup> & 17<sup>th</sup> November 2019  
Saturday & Sunday  
Venue:  
Bangalore Medical College Auditorium  
Fort, KR Road  
Bengaluru-560 002

KMC Points 4 for both days

Website : www.blore-rcog.com

## Quiz Answers

### Quiz 1 - Answer

Possible alpha thalassaemia trait.

Check husband's haemoglobin electrophoresis. Check patient's iron studies.

Needs preliminary genetic counselling about the condition. Urgent as Patient is already in the 10<sup>th</sup> week

### Quiz 2 - Answer

Scar ectopic