



SGRD Synapse

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SRI GURU RAM DAS UNIVERSITY
OF HEALTH SCIENCES, SRI AMRITSAR

Monthly update of Sri Guru Ram
Das University of Health Sciences,
Sri Amritsar



New Simulation Lab Started



A new Simulation Lab at SGRDIMSR, Sri Amritsar was inaugurated on August 3rd, 2024, by S. Harjinder Singh Dhami, President, Shiromani Gurudwara Prabandhak Committee. The new lab is a state-of-the-art facility, fully equipped with mid and high-end simulators for advanced training opportunities. The lab offers training sessions for both undergraduate & postgraduate students for Basic Life Support and Advanced Cardiovascular Life Support training which are integral components of the curriculum. Furthermore, faculty development programs focused on skill enhancement can be conducted regularly.



Dear Friends,

As human beings we have achieved immense progress in making our lives comfortable but this has been ruthless to our environment. The human induced environmental damage is escalating with serious consequences such as climate change, ecosystem loss and land desertification. This environment day please give it a thought and contribute in making world greener and sustainable for future generations. We can make practical contributions as an individual:

- ✦ Plant more trees
- ✦ Walk more drive less
- ✦ Stop using plastic
- ✦ Installation of Solar Panels
- ✦ Rain water harvesting

Our little contribution can go a long way in saving our planet.

"Our land, Our future.

We are #GenerationRestoration"

(World Environment Day Theme 2024)



Dr. Manjit Singh Uppal
Vice Chancellor

National Anti-Ragging Week Celebration



SGRD University of Health Sciences, Sri Amritsar celebrated National Anti Ragging Week from 12th - 18th August 2024 to raise awareness among students and faculty about the dangers and consequences of ragging and to foster a safe and inclusive campus environment. It provided a platform for disseminating information about ragging. Various activities like poster presentations, discussions, workshops and roleplays were conducted. Students were informed about help line and support services available.

Nursing Farewell Party - Ciao Bash



Clinical Snippet Unraveling the mystery of Epidemic Dropsy



A 15-year-old male child presented with the complaints of swelling over both feet for 1 month, fever, headache for 15 days, shortness of breath from 10 days. On examination, pallor was present. Pitting type of edema was present over both feet with no tenderness. Routine blood investigations revealed anemia, leukopenia with no other abnormalities. Blood and urine culture were sterile. Tropical fever, Rheumatic Fever workup & Tuberculosis workup were all negative. Echocardiography was normal. Ocular examination revealed glaucoma. There was a history of similar complaints in other family members as well. Hence a suspicion of Epidemic Dropsy (Argemone Oil Poisoning) was kept. Attendants revealed that they started using a different mustard oil for cooking, prepared at a local presser shop. Sample of oil was sent for testing, the results of which showed evidence of Argemone Oil in it. Hence the diagnosis of Epidemic Dropsy was made. Patient was managed conservatively and discharged successfully after 10 days of treatment and hospital stay.

Dr. Gursharan Singh Narang
Professor & Head, Department of Paediatrics

Sri Guru Ram Das University of Health Sciences

Overall Rank		City	REG	ARE	ILE
2024	2023				
17	18	Amritsar	155.4	108.2	15

Breastfeeding Week Celebrated



Department of Community Medicine in collaboration with SGRD College of Nursing celebrated Breastfeeding Week from 1st - 7th August on the theme of 'Closing the Gap: Breastfeeding support for all'.

Poster competition, health talks, role plays and well baby competition was organised during this week.



Health Communication - Lifestyle Medicine



SGRD Institute of Medical Sciences & Research, Sri Amritsar organised a workshop on 'Health Communication - Lifestyle Medicine' for medical students on 26th - 27th August.

NCD Screening Camp Organised



Department of Community Medicine organised a health camp on screening for NCDs especially hypertension and diabetes was organized at Health and Wellness Centre, Jagdev Kalan on 2nd August. About 400 people were screened.

Resource Faculty for Scientific Sessions



Department of Ophthalmology

- ① Dr. Shakeen Singh participated as online Panelist in Webinar Series by Eye Bank Association of India by LVPEI, Hyderabad.

Department of Dermatology

- ② Dr. Saurabh Sharma chaired a session during CME on 'Dermoscopy: Beyond the naked eye' at BFUHS, Faridkot.

Department of Physiology

- ③ Dr. Sukhjinder Kaur Dhillion delivered an online lecture on 'Lifestyle Factors & Cardiovascular Risk' at UGC-MMTTC, GNDU, Amritsar.

Department of Dietitics

- ④ Dr. Cheenam Bhatia authored a book titled 'Parents Handbook on Kids Nutrition'.

College of Nursing

- ⑤ Dr. Sukhbir Kaur delivered a talk on the topic of 'Types of Variables in quantitative research' organized by NIUSN, Greater Noida, UP.

Awards and Achievements



- ⑥ Dr. Anupama Mahajan (Director Principal), ⑦ Dr. Sukhdeep Kaur (Paediatrics) and ⑧ Dr. Amritpal Singh Bhatia (Surgery) completed Curriculum Implementation Support Program (CISP) at CMC Ludhiana from 4th - 5th July 2024.

- ⑦ Dr. Sukhdeep Kaur (Department of Paediatrics) completed Advanced Neonatal Resuscitation Program (ANRP) at GMCH Amritsar.

- ⑨ Dr. Manpreet Kaur (Principal Nursing College) got elected as TNAI Punjab State Treasurer for the term of 4 years.

World Thalassaemia Day Celebrated

Department of Paediatrics, SGRDIMS, celebrated World Thalassaemia Day. The theme for the World Thalassaemia Day 'Empowering Lives, Embracing Progress: Equitable and Accessible Thalassaemia Treatment for All. Guest speakers gave talks highlighting new research and treatment options, early screening and access to quality care.



Faculty Development Program on Universal Human Values

Faculty Development Program on Universal Human Values was conducted at SGRDUHS from 29th - 31st August. The course aims to help participants to understand and live a fulfilling life in harmony with themselves, family, society and nature.



SGRD
Synapse

►► Marching forward....

Discovering Tomorrow's Health, Today



Department of Genetics' was established with focus specifically on the genetic basis of human traits, health & disease. It delves into the complexities of the human genome, exploring how genes influence our development, physiology, susceptibility to illness and response to treatments. Researchers and educators within this department employ a diverse range of tools and technologies to unravel the genetic underpinnings of both rare and common conditions. This includes studying inheritance patterns, identifying disease-causing genes, understanding gene-environment interactions, and developing new diagnostic and therapeutic strategies. The ultimate goal is to improve human health and well-being through a deeper understanding of our genetic blueprint.

Centre for Advanced Research and Development (CARD) was also established by the University. It will provide an over-arching structure for research activities in different areas of Medical Sciences. It will also facilitate development of scientific and professional manpower through research programmes leading to the award of Ph.D. degree, MD/ MS, & M.Sc. in the different specializations of Medical Sciences.



Dr. AP Singh
Dean, SGRDUHS

International Day of Yoga



International Nurses Day Celebrated

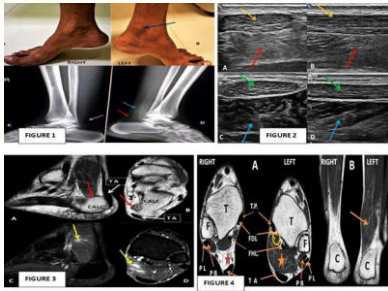


International Day Against Drug Abuse



Case Scenario

Accessory Soleus Muscle



A 32 year old male patient presented with a soft swelling in the lower part of left leg posterior to the medial malleolus. FNAC from the swelling raised suspicion of mesenchymal lesion. The plain skiagrams of right (A) and left ankle (B) show swelling along posteromedial aspect of left ankle (blue arrow in B) with normal lucency of kager's fat pad on the right side (yellow arrow in C). There is a soft tissue opacity along the posteromedial aspect of left lower leg and ankle (blue arrow in D) and partial effacement of kager's fat lucency (red arrow in D). [Figure 1]. USG of the right ankle in transverse (A) and longitudinal (B) planes show normal hyperechoic kager's fat (red arrows). The normal tendoachilles is seen (yellow arrows). USG of the left ankle in transverse (C) and longitudinal (D) planes show a soft tissue deep to the tendoachilles (green arrows) & isoechoic to muscles (blue arrows). [Figure 2]. MRI of the left ankle in sagittal (A) and axial (B) planes show normal tendoachilles (TA). A well-defined soft tissue is noted, isointense to the muscles with fleshy insertion on the superomedial calcaneum (CALC). MRI of the left ankle of patient with PDFS sequence in sagittal (A) and axial (B) planes show ill defined hyperintensity in the above described area - FNAC changes. [Figure 3]. MRI of both ankles with T1WI sequence in axial (A) and coronal (B) planes show normal hyperintense kager's fat in the right ankle (red asterix in A). Image B shows a large soft tissue in the left ankle (yellow asterix in A) appearing isointense to muscles and lying superficial to the flexor retinaculum (yellow circle in A); inserting on the superomedial calcaneum (yellow arrow in B). The flexor tendons appear normal (yellow arrows). [Figure 4]. Based on this, diagnosis of accessory soleus muscle was made.

Q1 - What are common anatomical variants of muscles?

- Muscle anatomic may consist of absence of a muscle, supernumerary muscles, deviation from the normal course, or an anomalous origin or insertion. Accessory muscles are anatomic variants representing additional distinct muscles that are encountered along with the normal complement of muscles.

Q2 - What is the commonest clinical presentation of accessory muscles?

- 2-Accessory muscles are commonly overlooked at imaging evaluation. Although they are typically asymptomatic and encountered as incidental findings, accessory muscles have been implicated as a potential source of clinical symptoms. Such symptoms are usually due to mass effect of the supernumerary muscle, with the patient presenting with either a palpable swelling or secondary compression of adjacent structures such as nerves, vessels, or tendons.

Q3 - What is origin and insertion sites of soleus muscle and accessory soleus muscle?

- The soleus lies deep to the gastrocnemius and arises from (a) the posterior aspect of the head and upper shaft of the fibula, (b) the soleal line of the tibia, (c) the middle third of the medial border of the tibia, and (d) a fibrous band bridging its fibular and tibial origins. The fibers converge on a short tendon, which normally joins the deep surface of the Achilles tendon.

Q4 - What are the types of accessory soleus muscle?

- 4-Five types of accessory soleus have been described on the basis of insertion characteristics. Insertion points include the Achilles tendon, the upper surface of the calcaneus with a fleshy muscular insertion, the superior surface of the calcaneus with a tendinous insertion, the medial aspect of the calcaneus with a fleshy muscular insertion, and finally, the medial aspect of the calcaneus with a tendinous insertion. It is innervated by the posterior tibial nerve, and the blood supply is via the posterior tibial artery.

Q5 - What is the commonest age of presentation of accessory soleus muscle?

- 5- Clinically evident accessory soleus muscles have a male predilection and commonly manifest in the 2nd and 3rd decades of life, a fact that may be attributable to the increase in muscle mass and activity during this period. It has a prevalence of 0.7%–5.5%.

Q6 - What are the imaging modalities to diagnose for accessory soleus muscle and why it needs to be differentiated from pathology?

- Plain skiagram, ultrasonography, CT and MRI can help in diagnosing this entity. A soft tissue structure similar in appearance to the normal muscles at abnormal sites can raise suspicion of an accessory muscle. It is important to diagnose it from pathology to prevent unnecessary interventions.

Q7 - What is similar accessory muscle seen in this region?

- Tibiocalcaneus Internus is commonly seen in this region. It can be differentiated from accessory soleus muscle that it lies deep to the flexor retinaculum.

Q8 - What is the treatment for accessory soleus muscle?

- Although an accessory soleus lies outside the tarsal tunnel, it has been implicated in tarsal tunnel syndrome in cases in which the muscle attaches to the medial aspect of the calcaneum. Symptomatic cases have been successfully treated with fasciotomy, tendon release, excision, or debulking. Asymptomatic cases do not require active treatment. They need to be followed up only.

Food for thought

RE-THINK,
RE-USE,
RE-GREEN

