Taking our voices to the furthest corners

Marián Sedlák

Exclusive interview w the IFMSA-SCORP General Assis

KNOW OUR STANDING

The details about every standing committee, what it does and what it stands for



the 2016 Calendar

FOR ALL THE UNDERGRAD MEDICAL **CONFERENCES** HAPPENING AROUND THE COUNTRY

March 2016 - Issue 01



MSAIIS THE FORC AWAKENS

First issue special inclusions... The IFMSA and the birth of MSA India

Euthanasia Decoded

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LOVE, SEX aur DHOKA

A SEMINAR ON

SEX EDUCATION

AND INTIMATE RELATIONSHIPS



DR. RAJAN BHONSLE
HOD, SEXUAL MEDICINE, GSMC & KEM HOSPITAL

11th SEPTEMBER
4:30 PM Onwards
ANATOMY HALL
GRANT MEDICAL COLLEGE,
MUMBAI







MSAI Vani Issue No. 1











Microsoft HoloLENS

An Eye over an Eye

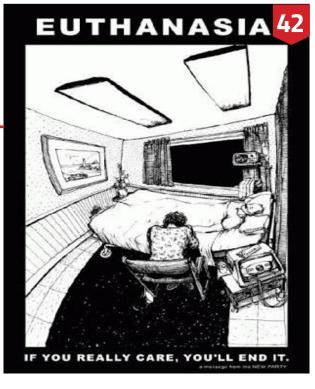
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Live. Beyond

Organ Donation camp in association with MOHAN org





How to stop being human in 5 years or less

Oh I wrote everyday all right! I wrote notes and answers condensed to fit into those impossibly tiny florescent post-its that adorned the pages of the many textbooks lining my shelves and any other flat surface available in my room. I wrote tons of words which eventually stopped reading like or even looking like they belonged to English, though I could swear, to anyone who peered at them quizzically, that they were in fact legible. I wrote till the only person who could understand what I have written was me. After a point, even that didn't hold true. But, it has been five long years since I took on the task of writing an editorial and honestly, I have never been this blank in my life. Nothing

comes back. Nothing.

We leave school with so many talents and non-academic achievements. Why is it that somewhere along the way, in the quest to become the ideal (Indian) son or daughter, do we simply sacrifice these very 'talents'? It's so ironical. Our parents make sure that we join all the extracurricular classes that can fit in the 24hrs of the day and yet are sceptical when one chooses to pursue one of them as a career option. We, at MSAI, chose to take up medicine, out of the many (read: 3) options we had for a variety of oh-so-noble reasons but are we actually becoming doctors or are we simply trying to ace exams? Don't we find ourselves hopelessly lost when there is nothing to study for? 'Healing' hasn't remained our job. 'Studying' has taken over. We are bred to be intellectuals; and only intellectuals, with a side order of the basic functional understanding of everything artsy.

It's all about the great Medical School Rat Race.... As medical students, we know that once we get into medical school, its a given that we will come out with a 'Dr.' preceding our names. A straight road with a set plan. The dancer, the singer, the actor in us may come out once a year for the annual festivals that last for some four or five days and then nothing. The sole purpose of becoming a doctor gets lost within the piles of notes and the gossamer thin pages of fat textbooks. Somewhere down the road, the people who are probably closest to humanity, sadly lose touch with the human inside.

This is what the newly formed Publication Support Division of the Medical Students Association of India will aim for. To bring back that lost world of the written word. My newly formed team of adorably energetic bunch of writers and artists and I have brought out this edition in half time only so that the new bunch of medicine and dental aspirants stepping into MSAI (and through that, into IFMSA) can keep their heads on their shoulders and their hearts in their right places and work for the greater good without losing themselves to the harrowing academic rat race.

Lets all take a breath now and pledge to make our brains only a part of our being and the not the core. Lets not turn into hard, cold machines that simply stare at the walls every time a book is taken away from us. Lets write or sing or dance and bring back the colourful people we were when we were snotty nosed kids of fourteen.

This isn't just a magazine to us anymore, it is a loud hoarding to show the world what can be done and what is being done to make it a much better place to live in.

- Schweta Rane (Publication Support Division Director)



Message from the President's Desk

It brings me great delight to introduce you all to MSAI's official magazine which reflects the kind of efforts and hard work put in everyday by medical students all over India. Success is no longer said to be an individual's achievement. In this modern era success is a cumulative effort of a group of individuals who are trying to make a difference in the world. Change is what we strive for.

At MSAI, a medical/dental student's life is much more than getting good grades at the University exams. It is the vision of young minds at MSAI to revolutionize medical education. We believe in an overall development of the individual with the maximum exposure to latest happenings in the world.

The International Federation of Medical Students Association is a one of kind organization, which is of, for and by medical students around the world. Five years ago, we Indians had so little knowledge about what was happening in the medical field outside our country. Today IFMSA provides us with plentiful opportunities that we now have students going for WHO internships, attending United Nations meetings and being a part of the medical community at the international level.

We are exposed to so much more

information and opportunities for growth even in the soft skills aspects including communication skills which is very vital for the overall development of a medical student. Opportunities are endless at MSAI and IFMSA. Get a chance to experience the world at large.

I am very proud to introduce you to the vibrant and dynamic group of young colleagues of mine who wish to make a mark in the medical community by their selfless service and everlasting love to the community and the medical fraternity at large. Medical education has a long way to go in India. Let's strive together for a better and brighter future for the medical community in India.

Jai Hind.

- Naren Nallapeta (President 2015-16)



Message from the Secretary's Desk

A doctor has a multi-faceted role in society. He is not only a leader in terms of health equality and rights, but also has the noble task of curing people from long standing disease and promote mental well-being.

We at the Medical Students Association of India, a Student Body affiliated to International Federation of Medical Students Association, hope to create better physicians and also prepare them to be global health-care leaders.

From its inception, MSAI has constantly worked for the benefit of medical students and society alike through various committees expanding health services to various people, spreading awareness about various diseases and modes of prevention and facilitating medical research, clinical skill development through various exchanges and workshops.

As part of the Standing Committee on Medical Education, we hope to have various workshops for clinical skill development, provide a health resource tool for doctors and guide for residency exams for India and USMLE alike.

Likewise, as an extension of the Medical Education Committee, we are proud to launch our very own newsletter /magazine which aims to keep fellow MSAI'NS updated about IFMSA Events Globally and an update of the internal NMO activities as well. In addition, we aim to keep them in loop about the recent developments in medicine and evidence based medicine to expand their knowledge base.

I sincerely wish my Best to Newsletter/Magazine Team especially our beloved head of Publications Support Division – Schweta Rane, who has been a constant performer. You and the fellow team are the best bunch of juniors one could ask for.

I also wish to thank our team of advisors – Dr. Mobeen Syed, Dr. Suresh Gupta and Dr. Puneeth Gupta who have been a constant source of inspiration for us.

I wish you'll all the very best!

Let's take MSAI to a new level!

- Priyanka Manghani (National Secretary)











National Secretary

M John Raj



Treasurer

2015 - 2016



MSA INDIA

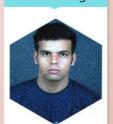
The EB and Team of Officials

Rutesh Vardhan



Director of Memberships

Romil Singh



Technologies Support Division Director

Kamya Swaminathan



Co- head networking and web administration

Apeksha Kakkar



Director of Marketing and Public Relations

Schweta Rane



Publication Support Division Director

Abhinav Dhingra



Project Support Director

Anand Kumar



Project Support Director



SCORP



SCORE











Mokshada Sharma

Nishtha Khatri



SCOPH

Ashwini Ronghe





Mubasshir Babar





Pankhuri Banerjee





Dattatreya Sitaram

MEET OUR CONTRIBUTORS



Mokshada Sharma **Editor**

Mokshada Sharma is a final year M.B.B.S. student at Terna Medical College and Navi Mumbai Municipal Hospital, Vashi. She is inclined towards entrepreneurship and believes that medical students should reach out beyond just the scope of hospitals and books. She is passionate about MSAI and is also the National Exchange Officer 2015-16. She enjoys reading, music and backpacking around the world.



Anuja Abhyankar
Assistant Editor

Anuja Abhyankar is in her final year of MBBS at GGMC, Mumbai. She keeps saying that while she is in love with the arts, she is married to the sciences! An avid reader, she can also carry off the role of an amateur writer and poet with ease. She is a linguist at heart and can write and speak in English, Hindi, Marathi, Sanskrit and German. She loves public speaking and dramatics and has trained in Bharatnatyam, a classical Indian dance form, for 5 years. She is an environmentalist and loves trekking for weekend getaways.



Anmol Patted
Assistant Editor

Anmol Patted is a sixth term student at KLE University's Jawaharlal Nehru Medical College, Belagavi, Karnataka. she is zealous in her medical research and her subjects of interest are maternal health, mental health and endocrinology. Her hobbies include craftwork, singing and travelling.



Apurva Lunia
Assistant Editor

Apurva Lunia is a 3rd year medical student at Mahatma Gandhi Medical College, Jaipur. While struggling to store as much as she can about medicine in her grey matter, she tries to find time to write, read, dance (she happens to be a professionally trained Kathak dancer, another classical Indian dance form). She also volunteers at a youth NGO for HIV positive kids.



Saniya Sahasrabudhe - IFMSA Correspondent

For past year and half, Saniya Sahasrabudhe has been managing her own blogging site (writing opinion based articles, presenting and editing the posts). She is a third year MBBS student at Grant Government Medical College, Mumbai. She is also a correspondent for Lexicon, the online medical magazine

Bushra Nizami - IFMSA Correspondent

Bushra Nizami is from YMT Dental College, Mumbai. She is a third year BDS student and she loves her chosen field. As a dentist, she wants to be the best she can and make a difference along the way as well. Although she has no formal training in writing or journalism, she has through high school and junior college, done a lot of literary work.



Ramya Arasu - Event Correspondent

Ramya Arasu is a 2nd year MBBS student in Govt Villupuram Medical College, Tamilnadu. She has been the assistant editor in her college magazine for the past two years. Reading books has been her passion since a young age and has been motivating her to get involved in various magazine and literature related activities.

K P Abhishek - IFMSA Correspondent

A final year MBBS student with a keen interest in neuroscience and research, K P Abhishek has recently presented his research work in autonomic neuropathy at the IDF conference in Canada. He is also a professional western classical violinist and a member of the Indian National Youth Orchestra.



MEET OUR CONTRIBUTORS



Mehndi Dandwani Medical News Correspondent

Mehndi Dandwani is a final year M.B.B.S student from Terna Medical College. Aided by her grueling quest for knowledge, she strives to gather the latest medical updates from all over the world, compile it in a captivating way so that more and more people can gain benefit out of it. She believes that we can't change our education system, but we can definitely amend our approach towards learning. Apart from that, she also has a penchant for dancing and baking.



Azher Syed Medical News Correspondent

Azher Syed is an Intern at Deccan College of Medical Sciences, Hyderabad. He is a Neuroscience aspirant and he likes teaching. His research areas are Neurodegenerative diseases, cognitive sciences and oncology. He likes networking, exploration, adventures. Outside his theatre, he is a trim writer and a witty soccer player with a zeal to fly aero-engines.



Deesha Kumar Medical News Correspondent

Deesha Kumar is a first vear medical student at Sarojini Naidu Medical College, Agra. With carpe diem as her life motto, she seeks growth, one of the main reasons why she chose this profession. She is always in for some adventure and new experiences because she believes that, life is after all, what you make it. She also believes that one should be an up-stander and learn from their surroundings. She feels that working for this magazine is a baby step towards a brighter and better future.



Malvika Tukra Event Correspondent

Malvika Tukra is a second year M.B.B.S. student.
Reading, writing articles and oration have always been her passions. But, ever since she got into M.B.B.S. she could not get an opportunity to follow it and she feels that joining this magazine has helped her reignite her love for writing!



Radhika Ramesh - Creative Team

Radhika Ramesh is a IInd Year MBBS student at GGMC, Mumbai. Aspiring to be a neurosurgeon, she is inclined towards research activities in the field of surgery. Outside academics, she has keen eye for programming and editing, and interests herself in writing opinion based articles.



Amogh Nadkarni is a IInd year MBBS Student at Grant Government Medical College and Sir J.J. Group of Hospitals. An avid reader and a prolific writer, Amogh aspires to specialize in Internal Medicine.



Mubasshir Babar - Creative Team

Pritesh Jadhav - Event Coordinator

Pritesh is a final year medical student from Mumbai following a simple design process...Travel to the future>>See what he will do>>Come back and do it now! In his free time he enjoys learning about people, traveling, and dancing (albeit terribly). He also happens to double up as an amazing stock investor, an ace horse better and is a septa-linguist as well.

Mubasshir Babar is currently in his final year of MBBS and serves as the National Officer for Reproductive Health and AIDS at the MSAI. Being our in-house computer wiz, he is adept at almost all the graphic-editing & designing software available and enjoys working behind the scenes on the technicalities of most of the events that take place in college and beyond.

Medical Students Associa

of INDIA





Who are We?

Medical student association of India is a non-government organisation of, for and by medical students founded in Oct 2011. It has been registered as a society in New Delhi under the Societies Act. MSAI is India's first both nationally & internationally represented federation for medical and dental students, adopted as the 100th member nation organisation (NMO) to the International Federation of Medical Students Association (IFMSA) on March 6th, 2012 in Accra, Ghana. We work very closely with many of our partner universities and other organisations keeping in mind the primary objective to improve medical education within India, promoting awareness and implementation of public health issues and encouraging communication and synchrony in the global health community. It is also our mandate to be service provider for the medical students in India.

tion

he International Federation of Medical Students' Associations (IFMSA) is a non-partisan and non-profit organisation recognised as one of the oldest and largest student-run organisations in the world, representing 1.2 million medical students from 101 countries. The IFMSA is specialised in organising worldwide professional and research exchanges for medical students. In total the IFMSA organises more than 10.000 medical clerkships around the globe. Furthermore the IFMSA, together with its National Member Organisations carries out projects and campaigns aimed at increasing and sustaining health of the general population. The core activities of the IFMSA are focused around the areas of public health, medical education, human rights and reproductive health including HIV/AIDS.





HOW TO JOIM?

Details for becoming members is as fol-

Step 1: Fill in the membership form

Step 2: Forward the form to our memberships officers:

Ruthesh Vardhan: ruthesh.knl@gmail.com and our General Secretary: Priyanka Manghani: drpriyankalata@gmail.com

Step 3: Pay a fee of Rs. 1000/- one time membership fee towards MSAI. Details of the same will be provided to you by our membership officer.

That's it!! Be a proud member of the International Federation of Medical Students Associations (IFMSA).

Your membership will be confirmed through an email (with a unique plexus card number) as well as a membership card will be dispatched to you which will reach you in a month's time. (PS: considering the details of your home address are provided properly.)

Note: You will be getting regular updates about all our activities as well as the international opportunities through the Plexus mailing list. For any further doubts please feel free to write to us at: msai-india@ifmsa.org

STERNATIONAL FEDERATION

IFMSA

CAL STUDENTS ASSO

The International Federation of Medical Students' Associations was one of the numerous international student organisations set up directly after the end of the Second World War. The first meeting that saw the establishment of the Federation was held in Copenhagen, Denmark in May 1951. The first members of this new organisation were England, Austria, the Federal Republic of Germany, Finland, Norway, Sweden, the Netherlands, Switzerland and Denmark. London saw the first General Assembly of IFMSA in July 1952. The meeting had a total of thirty participants from ten countries. IFMSA has always focused on student mobility and exchange as well as conference and workshop organisation. The first conferences were the Student International Clinical Conferences, which were quite successful in the 1950s. Various summer schools have been organised through the years, starting in 1963 in Denmark, the UK and Scandinavia. The 1970s medical students saw a need for the decentralisation of IFMSA. To this aim, IFMSA contributed to the creation of regional medical student organisations

in Africa and Asia. Subsequently, regional vice-presidents were elected for six regions as a way of promoting regionalisation but this structure was abandoned after a <mark>few years. In the early 1980s IFMSA issued a number</mark> of resolutions and declarations on topics ranging from Medical Education to the Prevention of Nuclear War to Primary Health Care. 1986 also saw the start of the Leadership Training Programs in collaboration with World Health Organisation. These training programs are still active today. Official relations with WHO started back in 1969, when the collaboration resulted in the organisation of a symposium on "Programmed Learning in Medical Education." In the following years, IFMSA and WHO collaborated in the organisation of a number of workshops and training programs. IFMSA has been collaborating with UNESCO since 1971. Since 2007 IFMSA has been an official supporting organisation of HIFA2015 (Healthcare Information for All by 2015) and today IFMSA is an organisation of 103 Nation Member Organisation from over 90 different countries.

MSQI: The Force Awakens

IFMSA was introduced to India by the then National Officer of Research Exchange of IFMSA Grenada, Ms Tanvir Kahlon back in December 2010. The idea of establishing this organisation simply died down, given the circumstances faced by students in the Republic of India. Not long after that, group of medical students from Krishna Institute of Medical Sciences University along with folks from Terna Medical College, Kasturba Medical College & KPC Medical College decided to take the first step, to give birth to this organisation in India, since then there was no turning back. From a group of students, they managed to give birth to the first medical student's organisation in India which is known as Medical Student's Association of India in 2011. The organisation only grew bigger every single day and by the end of 2011, MSAI was the largest represented medical student association in India having more than 5000 members from 90 different medical schools across India.

The 100th NMO

The Executive team of MSAI worked tirelessly to co-ordinate with medical students around the country to establish regional committees & local committees before applying to become a member at the International Federation of Medical Students Association.March 2012, IFMSA's General Assembly took place in Ghana where MSAI was officially adopted as the 100th Nation Member Organisation of IFMSA after 61 years. Not far after that, MSAI organised its first event as IFMSA Chapter India – The International Interactive Workshop under the leadership of Suranjana Basak from MGM Medical College which turn to be a success. MSA India believes nothing is impossible and had taken the challenge to host the 61st General Assembly of IFMSA August Meeting and won the hosting rights too, probably the only candidate NMO in the history of IFMSA who organised the General Assembly. Having said that, the only driving force in MSA India is the passion of Indian medical students wanting to have an organisation that bridges them to the international community and we are committed to it.

MEET OUR STANDING COMMITTEES

Standing Committee on Research Exchange

The Standing Committee of Research Exchange is a sub-committee in MSAI that focuses on promoting the ideals of research in the country where research per se, is not very popular even in the midst of the 21st century. Indian medical students are still lost when it comes to conducting basic medical research. SCORE also aims at unearthing the deficiencies that prevail in the health systems of the country that are so acutely holding us back from going from being a developing country to a developed country.

MSA-India in the year 2014 decided to undertake a mammoth pan-India study to assess the baseline health status of adolescents. The youth of today is going to be the productive section of society tomorrow, and India is going to have the world's largest working population by 2050. Hence, understanding their physical, mental, emotional and social health- and their knowledge, attitude and perceptions as well, is of paramount importance. The project started off with building the study proposal and the actual study instrument- an exhaustive structured questionnaire based on WHO core modules.

This questionnaire is being administered to children in high schools and colleges across India by our members. We hope to close this study within a few months' time, after analysing and interpreting all the data we have, and making recommendations to the concerned authorities thereafter. For the year 2015-16, we will be undertaking a mental health assessment for Indian youth, again on a pan-India scale. We hope this study is replicated in other IFMSA nations too.

Bianca S. Honnekeri, National Officer for SCORE.







the shortest way to yourself is around the world



Standing Committee on Professional Exchange

Our profession may not give us a lot of time for ourselves but that doesn't mean that we don't get enough opportunities to add meaning to our lives

We, the Standing Committee of Professional Exchange (SCOPE) give you the opportunity to work in a foreign nation, imbibing a different culture, language, food and their way of life.

MSAI is the 100th member organisation with IFMSA that conducts exchange programmes for medical students around the world.



Through our programming and opportunities, we aim to develop culturally sensitive students' intent on shaping the world of science in the upcoming future. An exchange will introduce you to a country no holiday ever could. It is a journey of self-discovery and personal growth filled with unforgettable memories that not only lets you explore professional opportunities but also puts you out of your comfort zone, pushing you to test your limits.

It being our first year of SCOPE, the team is focusing on popularising the idea of exchanges having held several events across medical colleges in the country and have had more than 300 requests to go on an exchange to other countries. We believe we shall revolutionise exchange programmes for Indian students and shall strive to make this experience one that you shall cherish all your life.

Mokshada Sharma, National Officer for SCOPE





- I. AWARENESS: HIV/AIDS is widely prevalent in our society and it has been observed that though the common man is well versed with this disease, there are myths and misconceptions looming in society, hence, we aim to bring down the discriminative acts against people suffering from AIDS, impart knowledge regarding the means by which it spreads and instil in minds that HIV patients deserve to live a normal and healthy lifestyle, free from social stigma.
- 2. SCORA aims at being up-to-date with the scientific research, global documentations and upcoming technology that aids in improving reproductive health. Periodic SCORA meetings held regularly aim at discussing policies that advocate healthy reproductive life and analyses various mediums in which these policies can be implemented and brought into action.

3. Aims at instilling in the youth of this

generation –a) Complete personality development b) Factual, complete and honest information about sex and healthy sexual life c) Also helps adolescents face biological changes during puberty.

4. It also aims at imparting knowledge on the proper use of oral contraceptives and clarifying facts regarding abortion, laws governing it and its consequences.

Focus Goals -

I. World Aids day - An initiative to increase awareness of various sexually mediated diseases was implemented by conducting a marathon -World AIDS Day Marathon '15, to extend solidarity and support to the AIDS victims.

Sexperience

- 2. LGBT rights: Events for the promotion of rights of the Lesbian, Gay, Bisexual and Transgender community hold special emphasis in multicultural societies like India.
- 3. Sexperience: One of the most successful events held under the SCORA banner, the sex education seminar held by Dr. Rajan Bhonsle aimed at targeting the medical population specifically, with regards to the whole notion of sex especially in societies where sexual feelings are shunned with greater emphasis on different gender and different identities.

Mubasshir Babar, National Officer for SCORA



Standing Committee on Medical Education

SAI has a dedicated team which aims to implement an optimal learning environment for all medical students around the country – SCOME. SCOME acts a discussion forum for students interested in different aspects of medical education, in the hope of pursuing and achieving the aims of the standing committee under IFMSA

Mission: We aim to bring about progress in medical education. In the recent past we had worked in the following areas:

- * International projects
- * National meetings, conferences
- * Locally implemented projects

Our Projects:

- * Student –mentor programme to help newly admitted medical students pick their way through the convoluted years of med school.
- * Orientation programmes especially in medical ethics and emergency medicine for the final year MBBS batch starting their internships

- * Career counselling sessions for a comprehensive guide to the opportunities and career options after graduation. We especially aim at making students make informed decisions as to where and how to go about working for their post graduation.
- * National Conferences, seminars, workshops that reach out to young under-graduates and help them dive into the depths of the respective subjects they are learning by introducing them to lectures and talks by the stalwarts of their fields.
- * Webinars with international faculty to help out in USMLE preps and introduce research methodology to inculcate the culture of medical research in Indian students which has been found to be sadly deficient as yet.

Early this year, we also started a campaign to provide medical clinical books and textbooks at a highly subsidised rates to all the medical students across the medical colleges in Mumbai delivered at their doorstep.

On a national level, SCOME is coordinated by the SCOME core team which consists of 2 National Officers and Local Officers of medical education from each state.

Pankhuri Bannerjee, National Officer for SCOME



The Standing Committee of Human Rights and Peace. Human rights are very essential and each right has a role to play in our day to day lives. As medicos, we are duty bound to contribute to the field of humanity. Our aim at the standing committee of Human Rights and Peace is to extend this message to everyone and to prove that human rights were not drafted for the sake of it, but to make them worthy in the true sense.

There are 30 Human Rights, of which the rights that hold paramount importance in India include- Right to Equality (woman rights, gender equality, etc.), Freedom from discrimination, Right to life, liberty, personal security, Right to education and freedom from torture or degrading treatment.

The MSAI SCORP team conducted various events and activities this year which are illustrated below:

- Abundant life ministries orphanage: During this event, children were taught about Hand hygiene and gender equality.
- St Elias school: The children were lectured on SCORP topics dealing with Right to equality, importance of education and child abuse.
- Bapnu Ghar : Woman at Bapnu Ghar were counsel regarding domestic violence
- Woman's Rights event conducted under the banner of 'Protect, Empower and Inspire' the basic need of the hour: The event focused on teaching the adolescent group to respect girls, changing social attitudes, elimination of discrimination and all forms of violence against girls. The girls were also taught basic ways which can protect them to stay safe both physically and emotionally.
- Aamcha Ghar: This is a shelter care for girls where we addressed issues such as mutual respect, good and bad touch and right to education.
- Human Rights day celebrations: For the first time, Human Rights day was celebrated in India on 10 December. A role play was performed in order to sensitise people to the human rights issues and to help spread awareness regarding international human rights day.
- 'A step towards peace' activity was conducted in collaboration with an NGO named Pragati at the Pragati child centre. Hand and finger printing activity was conducted on the silhouette of a dove signifying contribution of children to world peace.
- Drawing competition in 3 schools: Topic given to the children for this competition was Human Rights and Peace. Entries from 150 enthusiastic participants were received.



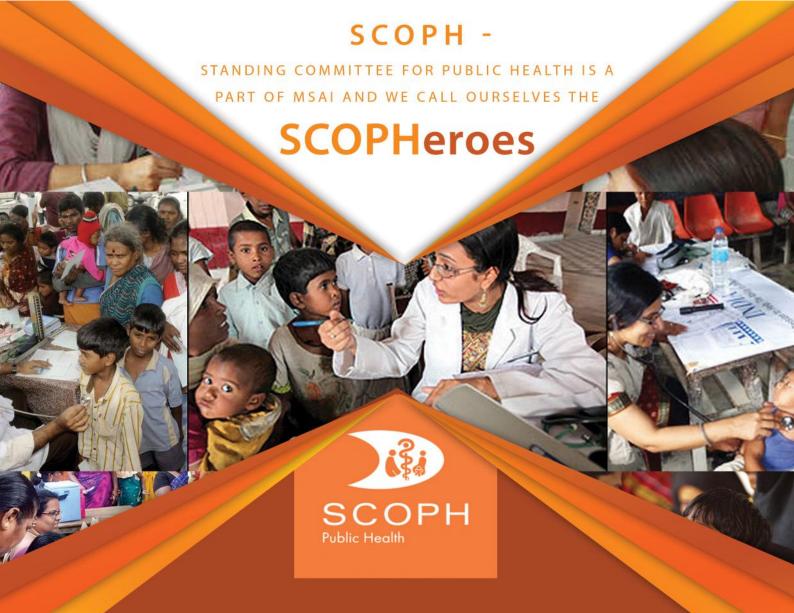
Each entry portrayed varied but wonderful ideologies. As these young minds filled the lifeless sheets with colours and the surrounding with smiles, each one of us had an experience of a life time.

- Make the world smile campaign: multiple activities were conducted under this campaign. The society's pride is a child's smile and hence to preserve this priceless possession at hand, the MSAI SCORP team introduced 'MAKE THE WORLD SMILE CAMPAIGN'. The target group included, but was not limited to, children living in orphanages. We distributed food goodies, soaps, clothes, towels and toothpastes and other basic necessities during this campaign.
- International women's day event: A seminar was conducted at the YMCA hall in Mumbai. The participating women were given an insight into various topics such as domestic violence, gender equality, female foeticide and health related topics such as menopause, osteoporosis, breast cancer were also covered.

The SCORP MSAI team intends to plan many more innovative activities and campaigns which will help people and serve humanity.

A big thanks to all the SCORP officers and volunteers who helped us expand the team and helped spread the message of universal brotherhood implying 'we are all one, we are all equal.'

- Nishtha Khatri, National officer for SCORP



The events conducted in 2014-2015 are:

- I) Rabies event: The SCOPH team participated in the IF-MSA-IVSA global rabies event conducted by IFMSA and vaccinated over 100 dogs. The team was featured in their newsletter
- 2) Celebrating motherhood and Nutrition awareness camp: Several camps have been conducted at bapnu ghar by our team for over 40 women and they were taught about hand hygiene, food and cancer awareness.
- 3)Health awareness in a children's shelter: A program was held in the children's shelter and they were taught about nutrition and common diseases along with hygiene, stress and sex education
- 4) World diabetes day and Non Communicable Disease awareness programs: Camps were conducted on the occasion of WDD and over 200 people were taught about the symptoms and diagnosis of diabetes along with prevention. These were submitted as a part of Non-Communicable Disease Alliance program.
- 5) Organ donation drive: Organ donation drives were conducted across states and over 100 people signed up.

- 6) ROME- A research workshop was conducted for over 50 students where the basics of research methodology was taught.
- 8) Blood donation camp- Camps were conducted across 7 states for which MSAI created a new record in the Limca book of records
- 9) Geriatrics- Health sessions with cataract screening were conducted at old age homes in over 4 states
- 10) Communicable diseases: Several programs were held for respiratory disorders including swine flu and tuberculosis. A vector borne disease awareness event for malaria and dengue was held over 4 states.
- II) World kidney day: Activities regarding prevention and treatment for acute and chronic renal failure were conducted in the wards across several hospitals across the country.
- 12) World Hand Hygiene Day: The Hy five event was conducted across slums over several states to help create awareness about hand hygiene

Orange hugs from -Ashwini Ronghe and Shrujana Ambati, National officers for SCOPH



"They motivated the society to provide encouragement, religious counseling, and social re-integration of the AIDS victims."

very year, World AIDS day is observed on 1st December and is an opportunity for people worldwide to unite in the fight against HIV. It is a day to support the people living with HIV and to commemorate the people who have died fighting it. The three-kilometer stretch along the waterfront of Marine drive was a fitting venue for the marathon to create awareness about HIV/ AIDS on the occasion of World AIDS day. Over 250 enthusiastic students came together on the morning of November 29th, 2015 in Mumbai to create awareness about HIV/ AIDS. The marathon was aimed at breaking the shroud of silence surrounding HIV/AIDS and to facilitate the rehabilitation of the victims. The event also cast light on the modes of its transmission, course of the disease and its prevention.

The marathon was organized by the Standing committee of reproductive health including HIV/AIDS (SCORA) of Medical Students Association of India. There were 197 registered participants and 34 on spot registrations. Each participant was given a unique identification number, a red wrist band and a red tee sporting the quote "Hate the disease, not the diseased". The marathon was flagged off outside the Hindu gymkhana at 9:45 a.m. There were two check points where water and Glucovita biscuits were offered to the participant. One was 1.25km from the start point and the other was at Nariman point where the runners were stamped. The marathon ended outside the Hindu gymkhana. The first participant to finish the marathon completed it in a record time of fifteen minutes. The first three runners in both male and female category were awarded prizes.





■ Symbol of Support



The event highlighted the various social myths and debunked them. The misconception that only gay men and drug pushers suffer from AIDS was clarified. While it is true that gay individuals are at a higher risk of infection, the virus can affect individuals of any sexual orientation. Blood transfusions with infected samples due to improper screening is another leading cause of the infection. The participants conveyed to their audience that the disease does not spread by touching, hugging, working together, sharing utensils, public toilets or public swimming pools with an HIV infected individual.

The WAD' 15 team stood up for the rights of the HIV individuals and spoke up against bigotries such as "AIDS patients have brought this fate upon themselves.

■ In Unity there is Strength



They should be shunned from society." They motivated the society to provide encouragement, religious counselling, and social re-integration of the AIDS victims. The team also served as a source of inspiration for the innovative youth nationwide, to create awareness and ultimately leading to prevention of the disease. The general public was made aware of the new and advanced methods in treatment of the disease, pre and post exposure prophylaxis and the highly active antiretroviral therapy (HAART).

The participants of the marathon expressed their heartfelt solidarity towards victims of HIV/AIDS using the message board featuring best wishes, words of encouragement and personal experience in fighting the disease.

The Team behind the Dream!



These message boards and the sulfide props used in the marathon were installed in the JJ Hospital premises on the event of AIDS Awareness Week by Maharashtra Association of Resident Doctors (MARD).

"Alone we can do so little, together we can do so much"- The Team WAD









When 'I' becomes 'We', illness becomes wellness!

The marathon which was successfully pulled off under the leadership of Mubasshir Babar (NO SCORA), Anuj Awad, Amogh Nadkarni, Saniya Sahasrabudhe, Radhika Ramesh, Varun Parmar and Svetanshu Sajwan along with the help of amazing volunteers who played small yet significant roles in the worldwide fight against HIV/AIDS. The participants went back with a different outlook towards both, the disease and the diseased. A sense of compassion and goodwill was instilled in them. The

participants pledged to keep the momentum of the event going throughout the year and hope to contribute their bit towards the commitment of ending the AIDS epidemic by 2030 as part of the Sustainable Development Goals of the United Nations.

Volunteers - Keval, Tanvi, Vinay, Karan, Srushti, Sahil, Neeta, Urshita, Vinayak, R.Siddharth, Sanika Chitnis, Nitish, Anwesha, Nikhil Pantbalekundri, Akansha Singh





n behalf of the "World Suicide Day" a lecture session by Dr. Rajan Bhonsle, Professor and Head of Department of Sexual Medicine at Seth G.S. Medical College and K.E.M. hospital and Dr. Sagar Mundada, Chief Resident of Psychiatry at Grant Government Medical College and Sir J.J. Hospital was organised by Mubasshir Babar (then LO SCORP, now NO SCORA)

and the organising committee. The session included lectures about the importance of sex education in school and college curriculums, love and intimate relations, and a Q and A session on suicide prevention

The lecture was attended by 600+ medical and non-medical students and teachers. The session started with a brief presentation about MSAI by Mr. Mubasshir Babar followed by the sex education lecture by Dr. Rajan Bhonsle. During the I hour lecture session the speaker discussed various issues like marital rape and various myths related to virginity prevailing in India. The audience found the talk to be enlightening as these issues are seldom discussed in day today life.

Dr. Bhonsle also highlighted the importance of sex education which has to be started from a very young age of 3 to 4 years which will help to prevent child abuse and also make the children confident of their sexuality when he/she comes of age. As the lecture came to an end, the Q and A session was interactive where the audience unabashedly discussed their doubts in this topic.

Following this, was the talk on suicidal tendency and its prevention by Dr. Sagar Mundada who is also the President of the Maharashtra Association of Resident Doctors. It comprised of a lecture and a Q and A session where the audience asked questions regarding various personal and familial problems. The session helped the audience understand love, care and the importance of psychological interventions in necessary circumstances. With suicidal rates becoming very high among students, the audience found this session to be very useful and helpful.



THE LARGEST LECTURE HALLS OF THE CITY OF MUMBAI WAS FILLED TO THE BRIM WITH PEOPLE



The Team with Dr. Sagar M

The program ended with a vote of thanks and a closure ceremony. Everybody in the audience received a certificate from MSAI and letters of appreciation was given to the speakers, organisers and volunteers.

The Team with Dr. Rajan Bhonsle





WE HAD THE 'TALK'...

- I) Dr. Rajan Bhonsle highlighted the point that it is usually assumed that women are abused only in rural and under developed areas where as this is myth almost about 80% are violated in any settings, he also highlighted the issues of marital rape and women being considered as the submissive. He told the audience importance of love and sense of caring and respect in a relationship. This opening of his lecture was focused on the empowerment of women as a community.
- 2) In society where we live bleeding during first intercourse is considered as a sign of virginity which is a myth.

Also length of male genital organ and its relation with pleasure and myths associated with it were highlighted by the speaker.

3) Dr. Bhonsle talked about importance of sex education by parents since extremely young age and importance of using words like 'vagina' and 'penis 'like we use words:-eyes, nose etc. This would help children in simplifying the process of description which is unnecessarily complicated because of taboo associated with it. This would particularly help in reducing child abuses as child would be would be able to say and

distinguish the touch. Most importantly child would be confident of his /her sexuality when he comes of the age.

4) He also focused on the issues of masturbation, hygiene practices and most importantly talked about the delusional and choreographed pornography. Dr. Bhonsle stressed on the fact that pornography focuses the act of sexual intercourse as a violent pleasure full act rather than one associated with emotions and loving attitude.

To help future doctors to cope up with various professional and personal challenges they are likely to come across later on in their careers.

erna Medical College Auditorium (Dental Campus), Nerul, Navi Mumbai witnessed a grand seminar 'Compendium' on 15th October, 2015. Organized by Shweta Kane & Hansel Misquitta (Members of the Medical student Association Of India), the aim of this seminar was to help future doctors to cope up with various professional and personal challenges they are likely to come across later on in their careers. The seminar witnessed the participation of more than 300 undergraduate and postgraduate medical students from various colleges of Mumbai and Pune.

The seminar started at II:30 am with introduction to 'Compendium' followed by a jovial yet captivating lecture of Dr. Harish Shetty, an eminent psychiatrist. He addressed the audience on stress management and dispelled the common rumors related to stress. The need for knowledge on medical ethics in the field of medicine was catered to by Dr.Urmila Thatte (HOD pharmacology, KEM Hospital) in the second lecture of the seminar.

A NEWER OUTLOOK TO BRAINSTORMING

The sensitive and much debated topic of 'IVF and Surrogacy' was discussed by renowned IVF specialist Dr. Jatin Shah (MD, DGO, Director of Mumbai Fertility Clinic and IVF Centre). Dr. Tupkari enlightened the students on their social responsibilities and duties. The most awaited lecture was 'The Post MBBS Path To Success'. Preparation for PG Entrance Exams and USMLE is a nightmare for all the MBBS students aspiring for PG. Dr. Sumer Sethi (CEO, DAMS) and Dr. Mala Shrinivasan calmed the nerves of the audience by giving a detailed lecture of the pattern of these examinations and the various study methods to be adopted during the preparation period. The grand and enriching seminar concluded at 6:30 pm with the vote of thanks.





lighting of the Auspicious lamp

by Dr Neeraj Ravlani and Dr VS Bhatt



COMPE







The other highlights of the seminar were new MSAI registrations, a small presentation on IFMSA MSAI Scintilla and a short skit on 'stigma surrounding mental illness in our country.' Participation certificates were awarded and snacks provided to the participants. The joint effort of the organizers and the volunteers-Sonali Mehta, Anshruta, Pooja Joshi, Ishita Dwivedi, Prithesh, Anuj Awad, Saniya, Keval and Radhika led to the huge success of 'Compendium'! Kudos to the team for their efforts!

Hansel Misquitta

The brain behind the event; and her co-organizer, Shweta Kane PicAlongside- Dr Sumer Sethi, an eminent Indian Radiologist and CEO of Tetraradiology Services.



NDIUM . CONCLAVE





Felicitation ceremony graced by the presence of Dr Harish Shetty, a notable psychiatrist, and Dr. K G Ghorpade, Dean ,Terna Medical College.

FIGHTING FOR HUMAN RIGHTS

The Standing Committee of Human Rights and Peace took up the herculean task of promoting and spreading awareness of human rights all over the city of Mumbai. It was supplemented with a small effort in the direction of spreading smiles on the faces of some less fortunate children of the city by young MSAI-ians

e at MSAI are strong believers in human rights. In order to commemorate Human Rights Day, which falls on 10 December, SCORP MSAI, which is a sub-committee, conducted flash plays in various locations across the city. This was done in order to promote awareness and encourage youth to inculcate a strong voice against the oppression of women, backward communities, poor and disabled persons.

The flash plays were conducted at Nerul Railway Station and Inorbit Mall, Vashi, both of which are popular hubs of the youth. Eight students from Terna Medical College and 12 from Grant Government Medical College were the volunteers. The skit which was written by -Nitish Nadkarni, Siddhesh Sonawane, Saniya Sahasrabudhe, Astha Saravia, Kaushal Vanjani and Harish Kumar reflected the various violations of human rights.

Act I demonstrated the fundamental right to peaceful public assembly, by staging peaceful protests that are disrupted by oppressive police. This was followed by a narration of the history of human rights. Act 2 portrayed freedom of speech and expression, which showed a panel headed by a moderator, who discussed and explained its meaning. Act 3 reflected the right to equality, by showing a scene that had gender and racial discrimination in a

social setting. Act 4 portrayed the importance of directive principles of state policy, as students brought out the need for progress and adequacy of state infrastructure and facilities, to move forward in the new millennium. The final act was dedicated to the right to education, as scenes that depicted child slavery and child labour were adapted from the famous movie, 'Shivaji the Boss'.

The flash play ended with the citing of various positive steps taken in order to uphold human rights. "Hum honge kamyab" (we will be successful), should be the anthem of the youth, the volunteers proclaimed.

Many people in the audience responded positively, and through the word of social media, this incident was widely reached.

Additionally, MSAI, conducted an inter-school drawing competition, and received an overwhelming response from many schools. Two bright volunteers, Nishtha and Saniya, have prepared an extensive letter that highlights all there is to know about human rights, and have also added numerous novels and movies pertaining to the subject. A social media campaign to promote awareness has been undertaken.





THE 'MAKE THE WORLD SMILE' CAMPAIGN



aughter is the sun that drives winter away from the human face'

With this intent, the members of Medical Students Association of India devised 'Make The World Smile' Campaign. On 3rd November 2015, a 6 member team including Sonali Mehta, Shweta Kane, Nikita Gupta, Riya, Lakshmi and Aditya Meecheri visited a Bhayander based orphanage 'Aamchaghar'. This orphanage serves as a home 23 beautiful girls from 6 to 19 years of age, a pet cat and a dog. Considering the age of the girls and the presence of pets, a brief talk on menstrual hygiene, menstruation and hand hygiene was given. Diwali, the festival of lights, was celebrated with the children, clothes and goodies collected by our volunteers were distributed, which lit their face with joy and glee.

"A Step **Towards** Peace" Campaign As the second leg of the campaign, a similar visit to 'Shanthi Nilayam' Guntur, Andhra Pradesh was organised by Nagarjun Thota on 23rd December 2015. This orphanage serves as a home for 24 HIV positive orphan and semi orphan children. The team talked to the children about various aspects like personal hygiene and counselled the children mentally to face this deadly disease. The children assumed the team to be 'Santa Claus' when they distributed Christmas gifts, clothes, stationery, and welcomed the New Year with these new friends.

'A Step towards Peace' a children-oriented art activity was conducted in association with an NGO 'Pragathi' at Dharavi, Mumbai for kids between 6 to 15 years of age on November 3rd 2015. With 'Human rights and peace' as the theme, the children were first made to understand the basis of human rights, followed by creating colourful handprints pasted to a chart along with a dove on olive branch. As time went by children shed their shyness, and gathered crayons to join the MSAI team including Neha Masrani (LO SCORP), Nishtha Khatri (No SCORP), Saatchi Kuwelkar and 5 other volunteers











World Diabetes Day, 14th November 2015, was celebrated in a unique way in Chengalpattu, Tamil Nadu by the members of the Medical Students Association of India. In partnership with Sree Renga Hospital, a diabetic camp was held in the hospital campus. Despite heavy torrential rains, the local officer for research exchange of MSAI, Dr. K. P. Abhishek conducted the camp. It was a day long camp.

The services available at the camp were free of cost and included random blood sugar testing, counselling for appropriate diabetic care, complication screening for those diagnosed with diabetes, complete blood count and a complete dental examination. The data obtained from the camp was collected for epidemiological studies.

A total of hundred and seventeen participants were screened. Twenty-nine of which were already diabetic and thirty-five others were detected newly with a high RBG value. They were advised to take the Oral Glucose Tolerance Test. In addition, sixty-six attendees were taken for a complication screening and eight others had impaired glucose tolerance and were identified as the pre-diabetics. They were counselled on lifestyle modification in order to prevent further progression of this imparity into diabetes.

The feedback from the participants was positive and encouraging. Most acknowledged that the camp had helped them gain more knowledge about diabetes. Such free health checks up camps are the need of the hour and we look forward to more such camps in the near future.







THE WRATH OF NATURE (CHENNAI FLOODS)

2 015 had hostile plans for Tamil Nadu as it recorded one of 'the worst rains in a century', with Chennai being particularly hit. The city came to a standstill by the first week of December as power supply was cut off, mobile networks were non functional and roadways, railways and the airport were not operational. While the Indian Coast Guard, Navy and the Indian National Army carried out rescue operations on one side, the doctors and students of MSAI participated in multiple relief camps in their local neighbourhood and volunteered in some of the worst hit areas.

Basic medical kits were assembled and doctors visited affected locales to examine the people and provide appropriate treatment. Fungal infections, upper respiratory tract infections, diarrhoea, flu like illnesses, infected cuts were commonly encountered and treated. Along with other volunteers across the city MSAI members participated in distributing food and water packets, blankets, mosquito repellants, sanitary napkins and other such basic commodities.

.....contd









Thalassemia - An Ounce of Prevention worth a Pound of Care!



halassemia is a disorder caused as a consequence of genetic mutations leading to disrupted hemoglobin synthesis. It is particularly prevalent in our Indian population and there will always be an increased need to improve our knowledge of the various treatment modalities available.

MSA India, in association with Foundation Against Thalassemia, conducted an awareness drive at Faridabad on the 12th of February '16.

Counselling sessions were conducted for children undergoing treatment for the same. Parents were also advised on the need for special care for their children in terms of nutrition and the precautions to be taken when it comes to repeated blood trans-

Dr. Abhinay, Dr. Hansa Dogra and Dr. Keshay, have provided contact details to the patients, helping them acquire blood transfusions free of cost at their hospital. Anmol Sharma also helped them with the work. They also distributed Iron Chelating Medicine - Deferasirox at a subsidized rate.

<mark>Vario</mark>us modes of diag<mark>nosis and treatment such</mark> as Hydra treatment, Xmn polymorphism test and Mutation analysis were also highlighted.

It was an educational event with an underlying noble cause and has indeed provided us with the exposure we needed. We are hopeful that our presence has made a difference in the path to achieve the big milestones ahead with respect to this deadly, often sidelined disease.



Free Medical Camp at Puducherry

r. Jeff Walter Rajadurai (Former State Director of Tamilnadu and Former EB member, MSAI), organised a free medical camp in his clinic. He covered around 5000 people in his locality.

Patients who needed follow up were adequately counselled.

Report of the free medical camp:

Details of the camp were -Date: 10.01.2016 Day: Sunday Time: 10 am to 3pm Venue: Subam Clinic, Sundarapuram, Coimbatore

Type of patient encountered-Total patients: 137

No.of diabetics: 85 No. of systemic hypertension:

No. of thyroid disorders: 2 No. of orthopedic cases: 25

No. of cardiac cases: 5 No. of respiratory infection

cases: 26

No. of urinary tract disorder

cases: 10 No. of dermatological disor-

ders: 6

No. of protein energy malnutrition children: 2

No. of ophthalmological disorders: 4

No. of female cases: 55 No. of male cases: 75

No. of children: 7 (below 14

year of age)

No. of cases who need MRI/CT

scan screening: 6

No. of cases who need X ray

screening: 7



Women's Health Awareness Programme

31st October 2015, YMCA, Andheri, Mumbai

In this era marked by rapid change and new ideologies, International Women's Day, since its inception in 1911 has been celebrated to assert women's right to work, vote, be trained and hold public office. Today, International Women's Day is recognized by the UN and is an official holiday in 27 countries. But, even though women have made great strides, a gender equality gap still exists. Important progress has been made, but it has been slow and uneven.

To bridge the gap between existing knowledge, attitude and perception of women, an interactive session on Women's health and Equality was conducted in the YMCA(Young Men's Christian Association) hall at Andheri, Mumbai on 31st October '15 targeting women of the age group 20 to 60. Lectures and presentations extensively covering topics like Gender equality, Domestic violence, Menopause, Osteoporosis and Breast Cancer were conducted with the aim of empowering women to face the problems they face in day to day life.

The programme started with a skit by Sonali Mehta in order to sensitize women on the much prevalent problems plaguing the grassroots of the community, Gender equality and domestic violence, they were made to understand how important is their role as a mother and how can they alter the current scenario, that domestic violence, dowry, sex determination were all punishable offences under law and were encouraged to contact the NGO and help centres, and assist others with such cases.

Several health issues encountered by women like menopause, osteoporosis, and breast cancer were comprehensively discussed via skits and talks. In a talk conducted by Rajashree Vast and Murlidhar Pamarthi women were made aware of the physical and psychological changes during menopause; they were informed of the medical problems that might occur and the importance of regular health checkups. These were followed by demonstration of simple bone strengthening exercises, and the role of a proper diet in the overall well being and prevention and care of osteoporosis by Pritesh Jadhav, Vinay Samant, Amogh Nadkarni and Anuj Awad. Neha Masrani then presented and discussed the risk factors, signs for early diagnosis and techniques, self-examination, myths related to breast cancer following which Self-checklists were distributed in order to enable women to regularly check for any presenting signs along with a video demonstrating the same. Pink ribbons were pinned for everyone as the symbol for breast cancer.

After the presentations the women took a pledge along with Nishtha Khatri (NO SCORP) to practice Gender equality, raise their voice against Domestic Violence and to give importance to their own health with proper nutrition, exercise and medical care. Pink ribbons were pinned for everyone as the symbol for breast cancer



Organizing Secretary -

Neha Masrani (LO SCORP)

Organizers -

Mubasshir Babar (NO SCORA), Nishtha Khatri (NO SCORP), Rajashree Vast (LO SCORP), Sonali Mehta (LO SCORP)

Volunteers -

Amogh Nadkarni, Anuj Awad, Keval Shah, Khalid Ahmad, Mehndi Dandwani, Murlidhar Pamarthi, Neeta Sonar, Nitish Nadkarni, Pritesh Jadhav, R. Siddharth, Radhika Ramesh, Sahil Shinde, Saniya Sahasrabudhe, Shweta Nayar, Tanvi Shah, Varun Chelani, Vinay Samant, Zarin Rangwala



Marián Sedlák is a 4th year medical student in Košice, Slovak Republic, currently working as SCORP General Assistant. He is also the IFMSA soft skills and human rights trainer.

Since childhood he has always been very passionate about human rights.

He chose medicine as his future profession because he has a strong desire to work directly with people. In humanitarian work he feels he can connect everything he loves: medicine, human rights and peace building, exploring different cultures, meeting new people and travelling.

He tells Saniya Sahasrabudhe how working in SCORP brings us closer to the human nature of people and how SCORP enables us to make friends all over the world, merge our passion for human rights and peace and fight for the world we dream about.

I) With regards to the importance of NMO's in disaster health response; How should a NMO prepare itself for an uneventful situation and in which aspects can medical students actually help?

As future healthcare professionals, it should be our responsibility and commitment to ensure the safety of all the people endangered by disasters and their consequences. Medical students can contribute to disaster management on many levels - in prevention, responses and recovery. We should also draw specific attention to human rights violations during disasters, because during these emergencies are targeted populations even more vulnerable. By our work in NMOs and Local committees we can contribute to the disaster and humanitarian response through educating and training medical students on acting in disasters settings. We can equip and empower medical students with the tools and skills to implement disaster risk reduction activities and emergency preparedness mechanisms in their communities, which is one of recommended approaches towards disaster management nowadays. IFMSA has also developed the International Training Disaster Medicine Trainers (TDMT) which aims to build the capacity within medical students, to fill the gaps in disaster and emergency medicine in medical curricula. Participants in this course will get comprehensive knowledge of the problems that healthcare professionals face during disasters. There are various topics included in this course, from basic practical skills, through ethical dilemmas and challenges in international coordination taught by a wide range of teaching methods, including traditional lectures, field and computer simula-

tions and case-based discussions.

2) You were a part of IFMSA'S delegation to the Red Cross conference /meet; how was the experience? And any specific take home message for the NMO 's?

32nd International Conference of the Red Cross and Red Crescent took place on the 8th-10th December 2015 in Geneva, Switzerland. The International Conference meets every four years and brings together the states parties to the Geneva Conventions of 1949, the International Red Cross and Red Crescent Movement, including the 189 National Red Cross and Red Crescent Societies, their International Federation of Red Cross and Red Crescent Societies (IFRC), the International Committee of the Red Cross (ICRC) and other important actors for example the World Health Organization (WHO), World Medical Association (WMA) or Médecins Sans Frontières (MSF). Speakers and panelists were reputable and experienced personalities of global importance as ambassadors, UN envoys or field workers with many years of experience. contd...



Marián Sedlák SCORP General Assistant

...They offered participants a very vivid and realistic view of the challenges, which organizations and workers have to face in the areas affected by violence, natural disasters or other emergencies. As the delegates of the IFMSA we tried to establish and promote partnerships with international organizations and important actors in the field of global health and humanitarian actions. The conference was divided into several themes and commissions, which discussed the most important issues in the humanitarian field, such as International humanitarian law, Healthcare in Danger, gender based violence, disaster risk reduction and other important subjects. We have presented medical students 'views on these topics and we tried to lobby for a greater involvement of young people in international humanitarian projects. Also for NMOs all around the world, cooperation with NGOs can lead to more opportunities for medical students to participate in national, regional and international humanitarian projects and programs.

3) We, in India are not connected /exposed to refugee crises but it is a major world concern at moment and we cannot be disconnected from it!

So can you please describe the current situation and how it is being managed (specially the health care aspect of it)?

During the last two decades, the number of migrants and people forced to leave their homes have been constantly rising every day. This displacement level

has its origins in multiple emergency situations all over the world, such as ongoing and long-lasting conflicts, political persecutions, human rights violations, natural disasters and climate changes. The estimated number of international migrants has increased from 154 million in 1990 to 232 million today, whereof the UNHCR estimates that 59.5 million people are forcibly displaced. The majority of internationally displaced people are still residing in neighboring countries. Current migration crisis in Europe and EMR region is the worst regional humanitarian disaster in recent years. More than I million migrants arrived to Europe by sea in 2015 and 3771 migrants died or are missing only in Mediterranean sea (Data: UNHCR). With more than 83,000 arrivals to Europe since the start of 2016 and 410 migrant deaths in Mediterranean sea (IOM, updated as of 12 February 2016), the situation is not improving at all. Throughout the internet, you can find many articles from various NGOs, governmental organizations or popular media, so you can make a general opinion about this problem. Personally I see the biggest problem in two things. The first one is responsible journalism. Publishing the facts which are right is the cardinal principle of journalism. I completely understand that journalists sometimes cannot guarantee the, truth, of their news, but facts they use in their articles must be accurate, giving all the relevant facts they have and ensure that they are not writing lies (which is happening in many cases). Many people here in Europe create their personal opinion about this problem based on media and they do not check facts which are presented in those articles. This opens doors to extremism, far right parties, xenophobia and generally negative attitude towards migrants and refugees in Europe. Second fundamental problem is very vague reaction from governments and European Union to solve this crisis. Despite many warnings to create a safe passage for migrants and refugees who are fleeing war and persecution from humanitarian organizations working directly with people in Mediterranean Sea or along transit routes, we still miss organized action to protect migrants and their lives. Actions done by governments and EU are not based on protection of people's lives, human rights and dignity, but on improving the protection of borders, segregation of people who do not have the right to claim asy-

lum in EU countries and ostensible fight against human traffickers.

Access to healthcare is one of the fundamental human rights. Access to healthcare for refugees and undocumented persons is usually different from one country to another. Compared to the past, the situation for refugees and undocumented persons is getting better. Along the transit routes, there are emergency spots, where volunteers from NGOs provide urgent medical aid to migrants. I personally attended one medical mission in Dobova refugee camp in Slovenia. The majority of medical problems we had to solve were connected to cold winter weather, hence we had many patients with sore throats, colds, fevers, frostbites, minor traumas and similar. But we also had to manage more complicated conditions like collapses, myocardial infarctions, renal failures, broken bones etc. Medical students can play a significant role in healthcare for migrants and refugees, because we have two abilities which are really unique: we have the medical knowledge thus we can cure diseases and solve problems and we also have an advocacy options to ensure that all necessary measures will be taken to protect all migrants and refugees coming to Europe.

4) As a general secretary of SCORP could you please elaborate on the importance of IFMSA and its Member Nations in health care workforce building

The vision of IFMSA is a world in which all medical students unite for global health and are equipped with the knowledge, skills and values to take on health leadership roles locally and globally. I think this global vision reflects aims and objectives for NMOs to create sustainable healthcare workforce for the future generation.

In capacity building activities we do in IFMSA and NMOs, we create sustainable development of healthcare on national and regional level. Our activities can supplement many important topics which are still missing in medical curriculum around the world. We are also creating an international net of active medical students and future doctors who are willing to improve global health in general. These contacts will be very important for cooperation between NMOs and countries and they are the base for a successful international medical cooperation in the future.

5)Last question;

You visited 11 countries in the year 2015 (every medical students dream!) also in one of your posts you talked about how parents out of love sometimes stop us from living life we want! (It seems this is the situation everywhere in the world)

So what would your advice to all travel geek medical students?

Ha-ha, this is very interesting question! I just love working with human rights and peace in IFMSA, because IFMSA offers us various possibilities to travel and meet amazing people all around the world. Of course, since we are students, our wallets are usually empty and we have difficulties to fund our journeys. I use all my money from part time jobs to fund my IFMSA travelling, but I do not regret it at all. As future medical professionals, we already know that life can give us many awesome experiences, but also bad ones. I believe we need to use our opportunities when we can, because we never know until when we will be able to use them. That 's why I love to commit 100% to everything I do, with all my passion and love, which also describes my tattoo: Ab imo pectore. So I will just say: Use all your opportunities. Educate yourself more than is expected, go far beyond your limits and find friends who have the same values as you. Be happy with what you do and if you can, give your hand to those who need our help the most. World needs more people who care about those in need, especially in our young generation, because it will be us, who





A transnational organ donation and transplantation project

On the first of August in the year 2005, IFMSA undertook a multinational organ donation project. The countries the project was implemented in were India, Serbia, Croatia, Macedonia, Lebanon and Ukraine with SCOME and SCOPH as the main IFMSA standing committees involved with it.

The project was installed primarily for the purpose of educating medical students about the process of organ donation and organ transplantation. Knowledge about the process would make them more likely to register as future organ donors themselves and they would be able to guide their family, relatives and friends in making such a decision too.

The main goals in this project as stated by IFMSA are:

- I) Education and professional training of medical students.
- 2) Involvement of as many NMOs as possible, so that this type of education on organ donation is accessible to all medical students interested in this area.
- 3) Cooperation with other governmental and non-governmental agencies in improving our national donor registers and networks.

Organ donation promotion project is an educational one, to educate medical students about the importance of organ donation in modern medicine, its implications and the magnitude that it might gain in the future. Working on this project, students will organize lectures, attend debates and more importantly organize public education drives that will help raise awareness about this medical approach among the common man and motivate people to consider organ donation themselves. To accomplish this task, an interdisciplinary approach is needed including lawyers, ethicists and theologists, along with physicians as well as establishing good cooperation with state institutions, experts, citizens representatives, NGO's, etc all while ensuring that no religious and cultural barriers are breached in the effort.

The project will be carried out in three phases:

First phase of the project:

Conducting a survey among medical students, to explore their attitudes, opinions and knowledge about organ donation. *Second phase of the project:*

After interpreting the results, to organize promotional activities of this project.

This includes lectures, round tables, debates, Workshops and special Donor's Days.

Third phase of the project:

After two years of project activities, to conduct a feedback survey among the same participants as were in the first phase survey. After analyzing the results, trying to find out how much was achieved by running this project.







How is India helping in this project?

MSAI enthusiastically undertook the campaign and launched it under the name "Live Beyond". Three public drives carried out, two in Maharashtra and one in Andhra Pradesh and Karnataka.

In Maharashtra, Priyanka Manghani along with a group of medical students carried out a small drive in a housing society in Thane district and covered a crowd of about 50 people while in Nashik, led by Sonali Mehta the group of medical students addressed around 1200 college students in the age group of 18-20 years. Among this crowd were also present "swayamsevaks", people who were getting trained to handle community issues.



★ at Andhra Pradesh with Mohan Foundation

In Andhra Pradesh, Priyanka Majety and some medical students tied up with MOHAN foundation (Multi Organ Harvesting Aid Network) and conducted a public awareness drive with 6 colleges from Andhra Pradesh and 1 from Karnataka, medical and non-medical included. They gave basic information about the organ donation and transplantation process. Medical students were addressed about brain death diagnosis and their colleges were given contacts to approach in case of such an event. They also helped one of the medical college administrations in setting up a brain death declaration committee. The students were also given information about getting enrolled with the MOHAN registry and issuance of donor cards. A great response was experienced here too with around 350-400 students registering with MOHAN. Their effort helped in saving 4 lives and that was the greatest reward they could receive for their hard work.

★ The main topics addressed were:

-To create awareness about the sensitive topic in the community.

-To clear out doubts and restrictions laid by religious and cultural practice taboos.

-To guide the crowd about the process of organ donation and organ donor cards.

-Give the community an idea about brain death.

An overwhelming response was experienced with almost 550-600 students pledging to donate organs.

National ADOLESCENT HEALTH SURVEY

Imparting Knowledge

Our President Naren Nallapeta addressing the crowd on adolescent health

Health services and promotions targeted at Adolescents are initiatives that have emerged as part of serious scientific discussion quite recently. Adolescence – the period of life between the ages of 10 and 19 as defined by the WHO – is a dynamic time of physical and mental development. "Common sense is the collection of all prejudices one acquires by age eighteen" was a favourite quote by Einstein. Aside from its humour the quote highlights the fact that the complex process of personality maturation takes place in adolescence.

The WHOs adolescent health programs calls attention to the uniqueness of the adolescent age in its report – 'Health for Adolescents'. Adolescence is one of the most rapid phases of development, with the biological maturity preceding psychosocial maturity. Younger adolescents may be particularly vulnerable when their capacities are still developing and they are beginning to move outside the confines of their families. The changes in adolescence have health consequence not only in adolescence but also over the life-course. And thus the very particular nature and importance of adolescence mandates explicit and specific attention in health policy and programmes.

The MSAI ever since its conception has had a keen awareness on current health trends and social needs. In understanding the aforementioned points as well as in recognition of the urgent need for large-scale research into adolescent health, the MSAI initiated the Pan-India Adolescent Health study in 2014. Nearly 2 years since its launch the study is drawing to a close with consolidation of collected data and analysis happening currently.

The many objectives of this study gives it an enormous scope, the activities of which cover all aspects of primordial, primary and secondary prevention. Both physical and mental health status of the individual and risk factors for lifestyle disease are assessed. In addition the level of awareness towards diseases is noted; it is combined with an awareness program on general health and healthy lifestyle as well as operational research into implementation and barriers in implementation of such awareness programs.

All methods of assessment were carried out by the time-tested and standardized WHO core questionnaire modules. The questions covered hygiene, physical and mental health, diet, substance use, sexual behaviours, violence and injuries.

The participants were recruited through stratified random sampling from schools and with informed consent subjected to the questionnaire.

The final results are expected to reflect the general health status of Indian adolescents. Identification of prevalent singular health trends can be done by analysis of individual modules used in the survey. Adolescence is the ideal time to build health awareness because several risk factors have its beginnings in this phase; when prevention strategies are applied in adolescence, a marked and lasting improvement in the quality is expected to be a marked improvement in the quality of life in future. The data from this research will aid in discovery of effective prevention strategies. Also owing to the multi-national scope of this study it can foster comparative research and combined strategies to address the issue of adolescent health all over the world.





Medical Research - The Hows and the Whats

A Research Methodology workshop

With an aim to promote interest and to provide knowledge about various aspects of conducting and publishing a research project, M. John Jeba Raj, the State President of Tamil Nadu took the initiative to convene a seminar-cum-workshop for the same. It was conducted at the Hotel Vassi Plazae in Kancheepuram District of Tamil Nadu on the 24th of October 2015. The program began at 9am and the session took place in 4 parts. It started off with an amazing ice breaking session which was especially lauded by all the delegates in attendance that day. The programme co-ordinator Dr. Saranya followed it with the welcome address and continued on to introduce the Speakers.

The first session was titled the 'Introduction to statistical analysis' and was presided by Dr. A. Balaji. A group activity was held at the end of the session. After a brief, strategically placed break for the morning tea and snacks, the day carried on with the interesting lecture on the 'Tests of significance'. The session showed remarkable success wherein the delegates got the chance to have hands-on experience with the workings of statistical software. Lunch was a served at around 1.15pm. The workshop picked up both in terms of tempo and enthusiasm post lunch. A total of 8 group activities were conducted by Dr. Saranya along with Dr. A. Balaji which addressed basic questions like how to write a research paper, how to get published and ventured into revealing the many hidden aspects of journal publication.

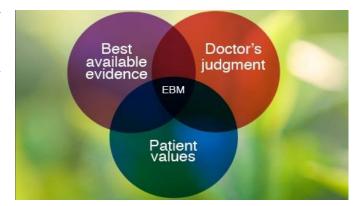
The Valedictory function was a grand affair. One person from each group was selected based on their participation and ability to learn and was awarded. The feedback forms were distributed and collected among all the 35 members that had assembled. The programme ended late in the afternoon at 5pm, with the Vote of Thanks given by the State President himself, M. John Jeba Raj.

Evidence Based Medicine Revealed

A Workshop on EBM, what it is and what it isn't

't has been noticed that, many a times, the term EBM is often T has been noticed that, many a times,
met with blank faces. Evidence Based medicine is the process of systematically reviewing, appraising and using clinical research findings to aid the delivery of optimum clinical care to patients. An Evidence Based Medicine workshop was conducted simply to promote awareness and use of evidence based medicine among medical students. It took place at Hotel New Chrome in the city of Chennai, Tamil Nadu on the 1st of November 2014. The programme was divided into 2 sessions which began at 1pm with a scrumptious lunch. The first session began with a welcome address given by V. Suveka, the local officer for Human Rights and Peace for the State of Tamil Nadu, along with the 'Introduction of the Guest Speaker. The further programme was presided over by Dr. Puneet Gupta where he introduced EBM. A 10 min break was called for shortly after the session wherein the appraisal sheets for the first programme were distributed.

The second session was on 'How to practice EBM' and included a direct demonstration on the PubMed and Cochrane lab websites. After the end of the talk, an orderly group discussion among the 14 students assembled took place. The feedback forms were distributed and collected. The State Director M. John Jeba Raj concluded the event by thanking all those who attended





Dear Doctors,

I am the CEO of Drbeen Corp. A US based medical education institution. You can find us at drbeen.com. Our mission is to improve healthcare practices, and we believe that this mission requires doctors that can recall and integrate medical concepts rapidly. We believe that clear concepts are fundamental for better recall.

CEO of Drbeen Corp.

Dr. Mobeen Syed

I am proud that through MSAI we are able to assist a large number of medical students and doctors to achieve this target.

A humble word of advice for you is persistence. Persistence is the only way to achieve your goals. And, remember, persistence means that you not only carry on towards your goals during the good times but also during hardships, challenges, difficulties, failures, and disappointments. Persistence is the key to eventually reach the excellence that you want to achieve. Every successful

person has persistence as their fundamental modus operandi. And, remember humans are such that they do things that no one has done before: no-one had gone to moon before humans decided that they will do this, and they did it. This means to accomplish your goals you don't need examples of things previously done, you need determination and persistence. I am proud of the MSAI, its executive board, its advisors, and most all of you - its members. Study well and be the best!



Our Legal Partners

Goyal & Co.

The practice was founded by Mr. Sunil Goyal who has about 30 years of experience at the Bar independently handling the Court litigation in India for sizeable Private Multinational and Corporate Clientele. Mr. Sunil Goyal holds degree in LLB from Vikram University. The firm has 28 years of experience in the legal field representing various clients before different forums. They are principally a Delhi based Law Firm, however they have access to a wide network of Lawyers and Counsel for support, throughout India. The Firm is assisted by Mr. Deepak Jagran Advocate, Dr Sushil Gupta and Dr. S. Bhardwaj who holds doctorate degree in Constitutional Law from University of Columbia.

The Firm's clients include corporations and business houses of all sizes. Their few esteemed clients include Berger Paints India Ltd., Shaw Wallace Breweries Ltd., SABMiller India Ltd, Lime Chemicals Ltd., K N Modi Group of Industries, QAI India Ltd, Indian Air Force Benevolent Association, Air Force Group Insurance Society, Sharp Business Systems India Ltd. World Wide Immigration Consultancy Services.





Dr. Puneet Gupta

It's indeed a matter of great pride for me to see MSAIs 'Vani' coming out with the first issue. It will indeed be the voice of Medical Students in a Global perspective. So Get Up and Speak Yourself Out.

I have been associated with Medical Students Association of India for over 5 years now. I have seen the association grow. The Association had teething troubles but it finally established itself as the official Indian representation to International Federation of Medical Students Associations. Finally medical students from India get an opportunity for international exchange programs, attend international meetings and do a lot lot more during their learning days. I am impressed by the fact that MSAI works in a democratic way and is totally governed and run by medical students. As an adviser our roles have been just seeing them grow. On a personal note as a Public Health Dentist my area of interest has been Research and Medical Education and I think SCORE and SCOME does very well. I also wish the members will not only read but write for the magazine and make it a popular read.



Dr. Suresh K Gupta

A great pleasure it is for me, to write this up for the inaugural issue of MSAI Vani Magazine. Having worked with this team of young and enthusiastic medical students and future doctors of India, for years now, it is a surreal feeling to see, how far they have come, in their goals and missions. Initiatives and Projects taken up by MSAI in India and overseas through IFMSA (International Federation of Medical Students Association) are indeed commendable and praiseworthy. Knowing these young doctors, training them in Internal Medicine and guiding them along the way, is something that I have cherished all along, in my life in United States.

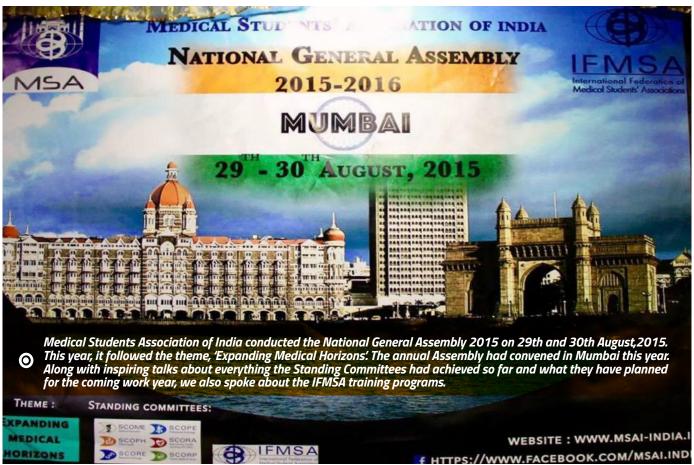
By introducing MSAI Vani Magazine and the Newsletter, MSAI Board and Members, are truly working towards expanding globally, by promoting medical literature and Evidenced Based Medicine (EBM) and with the global aim of health leadership and practice.

I wish our Medicos at MSAI, the road ahead is bright, be focused on your goals, the success is within reach.

Wish you only the very best, always.

Dr. Suresh K. Gupta
Internal Medicine & Geriatrics
Vice Chairman, Maryland State Board of Physicians
Fellow, Federation of State Medical Boards USA
Commissioner, Human Rights Commission Montgomery County
Maryland
Senior Physician, Embassy of India Washington DC USA

NATIONAL GENERAL ASSEMBLY



Sic Itur Ad Astra "Thus do we reach the stars"

∎he year 2015 had been a very successful year. We had been accepted in the IFMSA Macedonia General Assembly and the team was bustling with renewed vigour. What better way to celebrate this than with the team that made it possible. Hence, we came up with the idea of a NGA. Mumbai team under the leadership of Priyanka Manghani, National Secretary took the responsibility and arranged an unforgettable union of all the state teams. People we had only heard of on WhatsApp and spoken to over social media were finally meeting, sharing opinions and passionately defending their ideas for a better MSA India.

President Naren Nallapeta presided over our Standing Committee sessions with presentations from the National Heads. Bylaws were amended & the two days were done even before we knew it.

We ended our NGA with a very eventful dinner together and the delegates went back home with hilarious stories and tons of new friends and acquaintances.

We also had talks on the IFMSA, it's plan of action and the upcoming training program it had announced earlier that month. At the end of the talk the feedback charts were scrutinised and everybody contributed to the 'Take home Message' board.

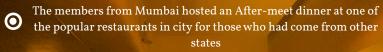














The recipients for the award for outstanding achievement to MSAI were



Dr. Jeff Walter - Tamil Nadu



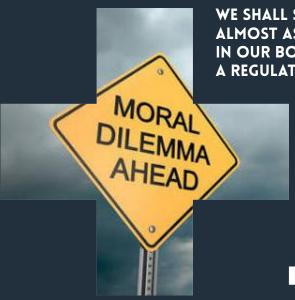
Priyanka Manghani - Maharashtra



Advisory board - Dr. Mobeen Sayed



Advisory board - Dr. Suresh Gupta



WE SHALL SUPPORT EUTHANASIA ALMOST AS MUCH AS ANY OTHER CELL IN OUR BODY SUPPORTS APOPTOSIS, IN A REGULATED AND PLANNED WAY.

DYING WITH DIGNITY

An assisted dying law would not result in more people dying, but in fewer people suffering.

e often find ourselves struggling between the utilitarian and deontological approach towards ethics, as medical students, we're expected to abide by the Hippocratic Oath's core principles that are fast becoming a passé, a relic from a bygone era. As physicians-in-training, we need to consider how the Hippocratic Oath applies to medical dilemmas which were not relevant or even present in the time of Hippocrates, such as abortion, physician-assisted suicide, and genetic testing etc. Having conflicting views on this issue makes a health care participant look up to the guidelines and ethic, so a distinction is made between the right to choose ones own death and the right to choose another's death. If you ask me why someone would choose death, I can't tell you; it's no business of mine, and a fortiori, none of yours either. But what I can tell you is that it's a patient's prerogative to refuse getting a treatment, and as doctors in training it's our duty to view the situation both objectively and subjectively. Euthanasia and assisted suicide are part of palliative care, making them legal only offers more choice to patients as well as their family

members who have to go through an ordeal of watching their loved ones die a rather poisonous and slow death.

In our country, people hesitate to openly discuss the concept of their Quietus, just as much as venereal diseases. Even though passive euthanasia under exceptional circumstances is legalised in India, it's important to understand why euthanasia, whether active or passive, and PAS, should be accepted by everyone, considering that the only powerful argument in favour of this act is that of mercy. Here, the palliative care and quality of life issues in patients with terminal illnesses like advanced cancer and AIDS or paralysed individuals have become an important concern for clinicians. Parallel to this concern, another controversial issue has arisen -euthanasia or "mercy -killing" of terminally ill patients.

...A distinction is made between the right to choose one's own death and the right to choose another's death. If you ask me why someone would choose death, I can't tell you; it's no business of mine, and, a fortiori, none of yours. "

Euthanasia-A peaceful death

Proponents of physician-assisted suicide (PAS) feel that an individual's right to autonomy automatically entitles him to choose a painless death. The opponents feel that a physician's role in the death of an individual violates the central tenet of the medical profession. Moreover, undiagnosed depression and possibility of social 'coercion' in people asking for euthanasia put a further question mark on the ethical principles underlying such an act.



These concerns have led to strict guidelines for implementing PAS. Assessment of the mental state of the person consenting to PAS becomes mandatory and here, the role of the psychiatrist becomes pivotal.

While switching channels, every once in a while we all happen to come across certain headlines that make me question the protocols of this noble profession, like the one in West Bengal where a young life was begging to be killed or the infamous and heart wrenching case of Aruna Shanbaug, hearing about these incidents compels me to pen down my thoughts on the forever debatable topic, Euthanasia and physician assisted death (PAS), not in a clichéd way but by comparing it with the study of human body and how we need to debunk certain myths related to it. A large number of doctors and medical students are apprehensive of such practices because they appeal to the notion that physicians must maintain an absolute repugnance to killing, and often point out that autonomy and

self-determination are rarely pressing concerns once people actually find themselves at the end of life.

Flipping through the pages of Robbins has only given my viewpoint a technical dimension, and find analogy between these "socially unacceptable" acts and our own body's inbuilt mechanism of cell death. This comparison may seem queer at first, but if we strain our brains a bit, the very purpose of medicine as a science is explained in our course books, the texts don't support the concept of euthanasia directly but the fact that our body, as Wikipedia notes, has two main pathways for cell death, necrosis and apoptosis. In contrast to necrosis, which is a form of traumatic cell death that results from acute cellular injury, apoptosis is a highly regulated and controlled process that confers advantages during an organism's lifecycle. The aforementioned definitions can be used to compare apoptosis with euthanasia and PAS. Also, there has been a plethora of researches on an emerging concept, Whole-body apoptosis, where the implications and repercussions of such an attempt to engineer programmed bodydeath into ourselves and our descendants are considered. Although an idea like this may take ages to get accepted into a society like ours, and if the current scenario and stigmas are taken into account, it might even be rebuked.

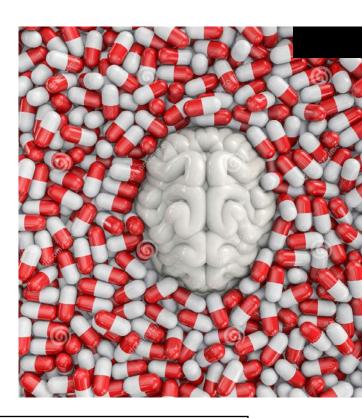
As the years have passed, some of the myths presented by proselytes have made many academics feel the need to dispel some of those myths, one of those is that euthanasia and physician-assisted suicide do not ameliorate suffering. They certainly do. Loving families and compassionate professionals faced with the agony of caring for a dying patient will certainly feel the same sort of relief as a loving dog-owner does as he watches his pet slip into sleep for the last time. There are a lot of other preposterous yet thought provoking myths related to the acceptance and legalisation of euthanasia. But one major misconception that needs to be cleared is that euthanasia is an issue of individual choice, it needs consent of the terminally-ill patient as well as the understanding on the physicians' side as well. With that being said, I can only hope for a path that's best these critically ill patients, which according to me is euthanasia as it frees them of their agony.





ith the creation of space age technology, came the era of telehealth, mobile clinics, nanobots, Google glasses, biosensors etc. These eye-popping newfangled gizmos are no longer novice to the health sector, but have demonstrated their immense potential to streamline and revolutionize health care. With the advent of Smart phones, Smart-Watches, Smart TV, even the pills we pop called as smart pill/digital pill/ingestible sensor are smitten by the tech bug.

So no more reminding grandma to take her medications on time, for here comes the smart pill to our rescue. But, what exactly is a smart pill? These are nothing but digital medicines having tiny Imm2 sensors made of metals like magnesium, copper, silicon etc.



THE DIGESTIBLE SENSORS

SMART PILLS

A new gizmo taking the medical world by storm







Think Smart, Tread with the Trend

On entering in our metabolic system, these dissolve in the gastric acid, with metals acting as electrodes that can trigger an electric current, thus eliminating requirement of any external power source for functioning.

On activation in our body, it picks up minute electrolytic changes, measures pH, pressure and temperature and via sensor placed on one's torso, they decode the data and transmit it to the user's Smartphone via the Bluetooth.

These simultaneously monitor heart rate, physical activity and sleep patterns.



An end to the cumbersome therapeutic regime!

These pills are a boon to the medical sector in various ways. By programming them, they actuate alert messages if a scheduled dose is forgotten, Sensors also notify the users if the drugs have crossed the expiry date, even concomitant drug interactions are warned off.

These sensors have the potential to be used for long term treatment of diseases like tuberculosis, diabetes, thereby ensuring good patient compliance and reducing the menace of defaulters, failures, relapses, drug resistance, all crucibles of poor patient adherence.

The first FDA approved Smart pill was marketed by Proteus in 2012 in North America. Proteus also teamed up with Novartis and Otsuka to integrate sensors with active pharmaceuticals.

Pill Cam-Colon has been developed by an Israeli company, to replace the existing invasive endoscopic procedures, the pill containing 2 miniature video cameras, batteries and LED source, provides real time images of the digestive tract. Thus facilitating the diagnosis of plethora of ailments like Chron's, polyps, gastro-paresis, colon cancer etc.

However, nothing comes without a devil's bargain. Obstacles like cost, illiteracy, age, apprehensions about swallowing a microchip hinder its usage and growth. Pharmaceutical companies like Adhere Tech have even devised smart pill bottles which light up and send voice messages as a reminder for scheduled dose and timely refill. Smart phone adherence applications like MyMedschedule, My Meds, Remind me are also extensively used these days.

So, a shout out to all the tech geeks out there, how smart can you get? Book your smart pill soon.



Must have Medical Mobile Apps

I. Medscape

7. Daily Rounds

2. Prognosis: Your

8. Epocrates

Diagnosis

9. PubMed Mobile

3. Auscultation

4. Micromedix Drug Information

10. First Aid -American Red Cross

II. Drugs.com

5. Plexus MD

Medication Guide

6. Skyscape

12. MedPage Today

An Eye over an Eye – MICROSOFT HoloLENS

Are you the one who got busted while studying Cunningham perplexed where to make the right nick and bump and still miss the subtle nerve ganglion?

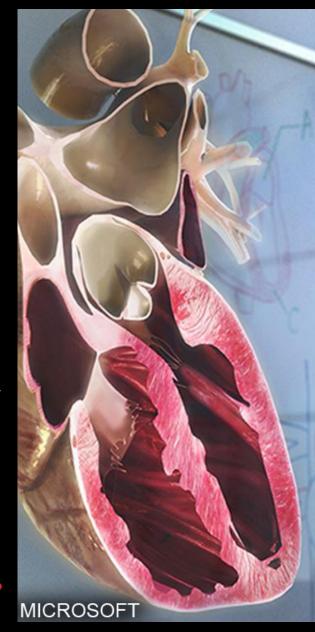
HERMANN EBBINGHAUS, THE GERMAN PSYCHOLOGIST STATES, THAT AS TIME PASSES, MEMORY FADES AND THAT ALL NEW KNOWLEDGE WE ACQUIRE IS DESTINED TO BE FORGOTTEN IF IT IS LEARNED JUST ONCE

Over the last 200 years, we've traveled through the historical age of barber surgeons to this modern era of medicine, achieving not only the Human genomic 'Era', but also the bionic arm on Lady Claudia Mitchell. How did we get here? How did our forefathers bring us from traditional practice of medicine to cutting edge technology, a drive to strive for this little human life & the core concept of atomicity

A comprehensive understanding of anatomy in itself is a challenge. It was in 3rd Century BC, Herophilus of Chalcedon & his younger contemporary Erasistratus of Ceos in Alexandria made 'human cadaveric dissection' the dominant means of learning anatomy, much to the dismay of so-called 'empiricists', a renegade rival school of medicine, which considered human dissection having no scientific utility in teaching anatomy. This resistance further increased in the European world, which valued the sanctity of the church more than that of scientific quest, until the 14th century in Italy when the human dissection was revived as a tool for teaching anatomy post hiatus of over 1,700 years . Over the time, true understanding of medicine continued to be challenged with cadaveric procurement hurdles depending not only illegal means of grave robbing and murder, but also marginalizing the society by using the corpses of poor. However, this eventually arose utility of the body donation programs.

Today due to ever expanding scope of medicine, depth of the curricula, while we continue to see the magic of medicine from the artificial pancreas, smart pills, and labs on a chip, Medical students feel bogged down not only by the sheer amount of stress to imbibe & but also to fare well in the test. Despite medicine being divided into factual knowledge & procedural knowledge; the former remains a major time-consuming chunk, with difficulties in visual imagination & its correlation. But does this mean that, we have no chance but to stick to conventional methods of reading? Not anymore!

HoloLens is our genie which has the potential to make understanding a lot easier and time savvy making it a totally, different world of holographic medicine. So are you the one who is married to your screen or ace exams constantly? I call it the holographic medicine for the future surgeons of anatomy & pink puffers of physiology; time for becoming the Ironman. No more keeping up with the lectures and completing assignments anymore.









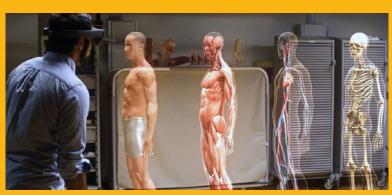
The holographic medicine for the future surgeons of anatomy & pink puffers of physiology; time for becoming the Ironman.

"...A NEXT REVOLUTION IN TEACHING ANATOMY, A FASTER EFFICIENT WAY OF LEARNING AND UNDERSTANDING GENETICS..."





A hologram appears life like which can move, pleomorphic & rather an illuminated simulator of any an object like any other object in the real world but without any physical mass or resistance.



Build on next level of computing, technically speaking, it is a powerful device with more computing power than our average laptops inbuilt with a holographic processing unit which makes light work of processing a large amount of data per second while running on Windows 10. It is easily portable so much so that it can be viewed from different angles & distances.

Just like our sensory system, it has advanced sensors to capture information about what we're doing & the environment we're in, then making it work like projector via the lens forming multidimensional full colored images which can go 2D, like a piece of paper or a TV screen or be 3D just like other physical objects in your real world. Not just that, it understands gestures and where you look, and maps the world around you, supplemented with an enabling voice & environment creating a new way for us to communicate, create & explore. The Microsoft team is collaborating with Case Western Reserve University in helping medical students appreciate and understand the 3D nature of Human body. Marks Griswold, Professor of Radiology at CWRU, mindful of the conventional methods of teaching & challenges faced by medical students is taking the lead in bringing this new concept of 3-D imaging via the holoLensin what he believes in teaching, assessing & guiding his students both in classroom & remotely per se, a next revolution in teaching anatomy. Additionally, students will be able to better appreciate the structure cum physiology of heart & simultaneously co-relate a femur to types of fractures they may see in the clinic, thus a faster & efficient way of learning and understanding genetics.

Cancer researcher Rosalie Sears, Ph.D., is able to print very small tumor a replica of patient's cancerous growth to which she can attack with any number of treatments and determine the potent drug and understand communication between cancer cells. Today, Researchers & clinicians use 3D printers to produce body parts and organs, from robotic hands to tiny beating hearts made from actual human cells. Pediatric cardiologist Matthew Bramlet, MD, has already witnessed the benefits of 3D printing at Children's Hospital of Illinois in Peoria, where he practices. There, surgeons prepare for and plan surgeries for children with complex heart defects with the help of 3D models of their patients' hearts .

While undergraduate medical education is heading towards technology-enhanced, student engagement, educators may find this to be the learner-centered active approach; though some concerns may arise due to its economic factors & ethical concerns. The answer lies in time where we would be able to say how much of an impact a hologram would create.

Franklin rightly said: Tell me and I forget, teach and I will remember, involve me and I learn.



his page is dedicated to help students take a note of most of the popular medical conferences happening across the states that have an active MSAI presence so that they can actively exploit their extracurricular and curricular talents and rise to their fullest potential.

(Your contribution to this page for further issues will be highly appreciated)

FEBRUARY

NOTE

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY	Bombay Medical Congress Cuffe parade (INHS Ashvini hospital),
1	2	3	4	5	6	7	Mumbai. Contact - 011-23019665
8	9	10	11	12	13	14	Zenith – Rajiv Gandhi Medical College, Thane MUHS, IMA, MSAI accreditated www.facebook.com/zenithrgmc Karan - 98205 24326
15	16	17	18	19	20	21	Trinity - Lokmanya Tilak Municipal Medical College, Sion, Mumbai
22	23	24	25	26	27	28	MUHS, IMA, MSAI accreditated pr.trinity2016@gmail.com Swassth-ik, Topiwala Medical College & Nair Hospital, Mumbai
29							MUHS, IMA, MSAI accreditated www.facebook.com/tnmcswaasthik

MARCH

NOTE

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY	Hridaya – Terna Medical College,
	1	2	3	4	5	6	Navi Mumbai Hansel - 98336 90352 ASCLEPIAD, SBHGMC Dhule
7	8	9	10	11	12	13	MUHS, MSAI accredited Aniruddh - 9967911144; aniruddh.shah@gmail.com www.facebook.com/beats015/
14	15	16	17	18	19	20	AMCON - Smt. N.H.L. Municipal Medical College, Gujarat IMA and MSAI accreditated
21	22	23	24	25	26	27	amcon.adrenaline@gmail.com Adit - 97724304018
28	29	30	31				AURA 2016, Pondicherry Institute of Medical Sciences, Pondicherry Sony T Jacob - 8940220800
							INVENTUM 16, Pravara Institute of Medical Sciences, Loni, Maharashtra

AUGUST

NOTE

MONDAY	TUESDAY	WEDNESDAY 3	THURSDAY	FRIDAY 5	SATURDAY	5UNDAY	Confluence - GSMC, MUMBAI MUHS and IMA accredited Akshar - 93228 79759 www.facebook.com/confluencegsmc
8	9	10	11	12	13	14	Elixir, Byramjee Jeejibhoy Medical College , Pune Tanvi modi – 9657725795 www.facebook.com/bjgmc.elixir
15	16	17	18	19	20	21	Mediace – Smt. Kashibai Navale Medical College and General Hospital, Pune
22	23	24	25	26	27	28	Aditi - 91670 02044 www.facebook.com/sknmcmediace
29	30	31					Innovation 2016, Grant Government Medical College, Mumbai MUHS and IMA accredited Facebook page - Inpovation GMC
Magazine w		may send in a m	t had not finalize essage to the nun rested in for mor	ibers provided a			Facebook page – Innovation, GMC Mumbai Tanay Sinha - 84518 62715

SEPTEMBER

NOTE

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY	SYNAPSE 2016, Bankura Sammilani Medical College, Bankura, West Bengal Debraj Choudhury 9126393543
5	6	7	8	9	10	11	Pulse 2016, All India Institute of Medical Sciences, Delhi, an All India Institute of Medical Sciences Medical Fest
12	13	14	15	16	17	18	PHRONESIS '16, Melmaruvathur Adhiparasakthi Institute of Medical Sciences and Research,
19	20	21	22	23	24	25	Melmaruvathur, Tamil Nadu PROMETHEUS 2016, Medical fest
26	27	28	29	30			MS Ramaiah Medical College, Bangalore, Karnataka Cultural and Med. Fest.

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A peak MSAI's quaterly



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FENESTRA

Fenestra-The First Issue



Fenestra is a window, an opening, a vista. Fenestra is a peek out into the big world or a peek inside a secluded soul; an opportunity to crane our necks out of the tiny box we have enclosed ourselves in or a privilege to dwell into the depths of our own complex beings.

The Medical Students Association of India brings to you its very own quarterly Newsletter, Fenestra, the window into MSA India.

Moonlight Woods the world, from horizon to horizon.

How much it can fill your room, depends upon your window...

> VOL. 1 ISSUE 01



VOL. 1

The dawn of the written word

MSA India (MSAI) is still a very young organisation, as far as organisations go, in India. In the quest to find a strong foothold and make its voice heard over and above the current cacophony of deafening and maddening policies and attitudes when it comes to medical education and practice in this country, the founder members of MSA India had initiated such a strong recruitment and membership campaign that its after-shocks, even after four tedious and eventful years, still get us hoards of zealous and enthusiastic young medical students every month.

Medical students, who come in with their own extensive ideas and expectations of what they think MSA India and IFMSA would be and end up being thoroughly confused halfway through the work year. As a solution to this problem, the Executive Board and the Standing Committee on Medical Education, with the initiative taken by our own President for 2015-16, this year, decided to blow the dust off of the old bye-laws, forage through them and give birth to what is a well respected and well established division in the IFMSA, the Publication Support Division. And it was high time they did.

The Publication Support Division (PSD), headed by yours truly, within 3 months of laying its foundations, came up with two concrete publications aiming to be ready for the delegation going to the Malta General Assembly this March; the first and our most ambitious project being the MSAI Vani.

The Vani is our full-fledged annual magazine that rose with the tagline "Taking our voices to the furthest corners". 'Vani', in sanskrit, means voice, the power of speech, and it seemed highly apt for the first magazine of the organisation that echoes our work and our ideals to be named so.

A nation wide call for young scribes resulted in an extremely talented and hardworking team that worked overtime to get the magazine ready just in time. The magazine is a pristine glass showcase displaying proudly what MSA India has achieved in the past year. The first edition of the magazine also serves as an information booklet for everyone who is curious about how MSAI is built up, how it came into being, what it does and a lot more. We aimed to dispel ignorance and I believe *Vani* has been successful in doing so with insouciant ease.

-Schweta Rane
Publication Support Division Director
MSA India

ISSUE 01

The MSAI Vani- A venture full of hope







Here are some glimpses of the first baby project of the PSD - the MSAI Vani. You can view the full PDF on www.issuu.com as well as the MSAI website (msaindia.org). For your own copy, send in a mail to pub.msai@gmail.com and we'll add you to our mailing list!

