

# INDIAN MEDICAL ASSOCIATION



VIJAYAWADA  
&  
BEZWADA MEDICAL ASSOCIATION

VOLUME I

**Vaaritha Vedika**

NO. 1

PRESIDENT

Dr. R. VENKATESWARA RAO

EDITOR

Dr. B. MALLIKARJUNA RAO

HONY. SECRETERY

Dr. C. S. N. VITTAL

## President's Desk

*Taking the reigns at a critical juncture, we have set ourselves some humble targets.*

*“United we stand”. Unity amongst us is what we try to achieve. Frequent interactions and combined efforts in effecting IMA's activities is going to be our main approach.*

*“More the merrier”. Already 20 new entrants to our august gathering. Still several others lurking outside and need to be enlightened and enlisted. The details of membership and FBS, etc. in this issue may attract them. Please pass on the message.*

*‘Change is the law of life’. Computerization is our answer to the changing needs of IMA. Members' database is being developed. Please help us by returning the questionnaire we sent to you all.*

*With active cooperation from everyone of you, we hope to achieve our aims with ease, come whatever hurdles may.*

— Dr.R.Venkateswar Rao

## Editor's Pen

*This is the third volume of the earlier "Meditabloid" and the name was changed after the advise of some of our senior members. We wanted it to be a comprehensive issue with a judicious mixture of academic, administrative, social and lighter topics. But the inaugural issue might have been tilted towards some particular topics. We'll try to cover the other topics in the coming issues. Friendly advises and comments are most welcome. Articles contributed by members will be gratefully accepted.*

— *Dr Mallik*

### ANNIVERSARY FUNCTION & Dr YELLAPRAGADA SUBBA ROW MEMORIAL ORATION

*Indian Medical Association, Vijayawada and Bezwada Medical Association celebrated Anniversary function on the pleasant evening of 8th October; Sunday. The function was special in a way that we felicitated Padmasri Dr. Kakarla Subbarao who also delivered Dr Yellapragada Subba Row Memorial Oration.*

*The function started with the opening remarks by President Dr. V. Somanadham, who recounted the events of the past one-year. Later Hony. Secretary Dr. K. Sivarama Krishna presented the Secretary's report.*

### **Anniversary Function (Contd.....)**

*Dr. S. V. Ranga rao, Neuro Surgeon received this year's "Prize for Best clinical case presentation" instituted by Dr Chaganti Suryanarayana in memory of Kasinadhuni Nageswara rao pantulu garu, for his case of "Sinusitis complicating brain abscess".*

*Later the pleasant task of handing over the reigns to Dr. R. Venkateswara rao, the President elect was performed by Dr. V. Somanadham. Dr. R. Venkateswara rao in his Presidential speech outlined the various measures his team of office bearers is going to undertake during the coming year. Dr. C. S. N. Vittal, Hony. Secretary elect introduced the newly elected office bearers and executive committee members to the gathering.*

*The Chief Guest Dr Kakarla Subba Rao was felicitated by presentation of Citation by Dr. Nageswara Rao, Radiologist from Soumya Apollo Hospitals and Shawl and Bouquet by President Dr. R. Venkateswara Rao.*

*Later the second part of the evening's procedures, Dr Yellapragada Subba Row memorial oration started with the lighting of the ceremonial lamp by the Chief guest Dr. Kakarla Subba Rao. Mr. Markandeyulu of Lederle laboratories presented the life history of Dr. Yellapragda Subba Row.*

*Dr. K. Pattabhiramaiah presented Dr Kakarla Subba Rao to the audience. Dr. R. Venkateswara Rao presented the gold medal to the Orator.*

*The Oration was about "The fading image of the Doctors".*

*In a delectable oration , which caught immediate and rapt attention of the members, Dr. Subba rao narrated the reasons for this sad state of affairs and the ways to rectify them.*

*This Oration was instituted by our Association long back and later M/S Lederle Laboratories came forward to sponsor this biennial event.*

*The Function was followed by Dinner.*

## CLINICAL MEETING 28-10-2000

On the first Clinical meeting of the new IMA year, chaired by President Dr. R. Venkateswara Rao, five of our members presented cases and papers.

1. Two cases of Left coronary  
PTCA & Stenting - Dr. Y. V. Rao  
Paper presentation
2. A case of Motor Neuron disease -Dr. T. V. Narayana Rao
3. A case of acute Pancreatitis -Dr. P. Venkateswarlu
4. A case of pregnancy  
complicated with hypertension -Dr. T. V. Narayana Rao
5. A case of SLE - evolution over  
a period of 2 1/2 years -Dr. T. V. Narayana Rao

## CLINICAL MEETING 25-11-2000

On the second clinical meeting of the year, chaired by President Dr. R. Venkateswara Rao, six of our members presented clinical cases.

1. A case of right hemi  
hepatectomy for a massive  
hemangioma of Liver - Dr. R. V. Sivaram Prasad  
- Dr. Vikram Das  
- Dr. V. N. Varaprasad
2. An unusual case of Acute  
abdomen- Ultrasound diagnosis  
is acute Pancreatitis - Dr. V. N. Varaprasad
3. Pulmonary manifestations of  
systemic diseases - Dr. T. V. Narayana rao  
a few case reports - Dr. M. Sarala
4. A case of foreign body in stomach - Dr. V. Ram Prasad
5. Interesting X-rays - Dr. Y. Poornachandra rao

***We wish to give a brief summary of all cases and papers presented in the clinical meeting in the news letter for the benefit of the members who couldn't attend the meeting. Hence the members who are presenting the cases or papers are requested to submit brief summaries in the office.***

## NEWS FROM SPECIALITY CHAPTERS

**Indian Academy of Pediatrics, Krishna district Branch**  
organized Children's week from 8th of November 2000.

- 8th : Medical Camp for slum children at Kandrika
- 9th : Medical Camp for street and orphan children at SKCV Trust school at Bhavanipuram
- 10th : Pediatric Health Quiz for school children at Little Buds school, Satyanarayana puram
- 11th : Seminar on "Primary Education and Child health" at IMA Hall
- 12th : Medical camp for rural children at Kanumuru, Pamarru Mandal
- 13th : Health Talk for Anganwadi health workers at Sunnapu Battilu centre
- 14th : Painting competition for school children at IMA Hall

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*- Its all KIDs show!!! - Other associations ! Are you listening?*

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Many Diseases are Self-Limiting  
Nature Cures Them



I.A.P. Poster

## COMING EVENTS

December 10th, 2000	<b>Dr Bobba Dharma Rao Memorial Oration - Nephrotic Syndrome</b> By <i>Dr. Girish Narayan MD DM</i> Prof. of Nephrology, OGH, Hyderabad
December 24th, 2000	<b>Mega-Health Mela at Edupugallu</b>
From December 15th	<b>Sports meet, IMA Vijayawada</b>
December 23rd, 2000	<b>Clinical meeting</b>
December 30th, 2000	<b>Cultural programme and Family get together, IMA, Vijayawada</b>
December 28th-30th	<b>IMA, National Conference at Calcutta</b>

### *CME Programme on Dialysis*

IMA Vijayawada will be arranging programmes for members to acquire first hand experience with recently introduced investigations and procedures etc.

Dr N Ammanna, Nephrologist will be conducting a programme at his Nephrology unit on Dialysis **on 7/2/2001, Sunday at 8 AM to 10 AM** and accompanied by **breakfast**. The number of persons allowed is 25 on a first come- first- served basis. Please send your intentions before 1st January 01.

### ***Thanks Galore !!***

*The new venture of publishing 'Patient Education Handouts' took off briskly with one on Malaria, provided to us at very short notice.*

*Thank you Dr. Sudhakar.*

*Not only the 2nd of the above series came from him, but the entire design and content of our AIDS awareness campaign springs from him.*

*Thank you Dr.Samaram*

*No more 'sorries' for power interruptions - we have a new generator now.*

*Thank you Dr. Ammanna*

*With him Back in Action, we have the News Letter back too.*

*Thank you Dr.Mallik. (Printed without permission of Editor)*

**- Hony. Secretary, IMA, Vijayawada**

# NEW EXECUTIVE COMMITTEE 2000-'01

## OFFICE BEARERS

<b>President</b>	-	Dr. R. Venkateswara Rao
<b>Vice-President</b>	-	Dr. P. Ramesh Babu
<b>Hony. Secretary</b>	-	Dr. C. S. N. Vittal
<b>Joint Secretary</b>	-	Dr. S. Prabhakar
<b>Treasurer</b>	-	Dr. Y. Ramesh Babu
<b>Hony. Asst. Director CGP Subfaculty</b>	-	Dr. P. Guru Prasad
<b>Secretaries BMA</b>	-	Dr. T. Anjaneya Sarma Dr. M V. L. N. Murthy

## Executive Committee Members:

Dr. N. Ammanna  
Dr. M. Jaganmohan  
Dr. Kalesha Vali  
Dr. R. Nanaiah  
Dr. E. S. Prabhakar  
Dr. K. S. R. K. Prabhakar  
Dr. K. Vasumathi  
Dr. P. V. Ramana Murthy  
Dr. P. Ramesh Babu  
Dr. Y. V. Rao  
Dr. A. Sasibala  
Dr. L. Subba Rao

## Ex Officio

Dr. V. Somanadham  
Dr. K. Sivarama Krishna

**Drug of this issue & Issue of a drug**

**CISAPRIDE**

CISAPRIDE is indicated in the symptomatic treatment of nocturnal heartburn due to gastroesophageal reflux disease (GERD). This drug is very frequently prescribed for GERD as well as an adjuvant to H2 blockers, proton pump inhibitors and also for constipation.

But of late it has been implicated in development of cardiac arrhythmia when used with ketoconazole, itraconazol, miconazole IV, troleandomycin, antidepressants, most antibiotics, antifungals, HIV protease inhibitors etc.

On March 23, 2000, Janssen Pharmaceutica Inc. announced that it has decided to stop marketing cisapride (Propulsid) in the United States as of July 14, 2000. The effective date of the voluntary action is intended to provide adequate time for patients and physicians to make alternative treatment decisions.

Cisapride is a prescription drug treatment approved only for severe nighttime heartburn experienced by adult patients with gastroesophageal reflux disease (GERD) that does not adequately respond to other therapies.

As of December 31, 1999, use of cisapride has been associated with 341 reports of heart rhythm abnormalities including 80 reports of deaths. Most of these adverse events occurred in patients who were taking other medications or suffering from underlying conditions known to increase risk of cardiac arrhythmia associated with cisapride.

Physicians who are treating patients with severely debilitating conditions for whom they believe the benefits of the cisapride may still outweigh its risks are encouraged to contact Janssen at 1-800-JANSSEN. The company will continue to make the drug available to patients who meet specific clinical eligibility criteria for a limited-access protocol.

Since the drug's approval in 1993, cisapride's labeling has been revised several times (most recently in January 2000; see FDA Talk Paper T00-6) to inform health care professionals and patients about the drug's risks. Despite these risk management efforts, the firm decided in consultation with the Food and Drug Administration that continued general US prescription access to the drug poses unacceptable risks.

*Source - Harrisononline*

Great minds have purposes, others have wishes.

— Washington Irving



## FAMILY BENEFIT SCHEME

### A.P. STATE BRANCH OF INDIAN MEDICAL ASSOCIATION

#### **AIMS AND OBJECTIVES:**

1. To provide immediate substantial financial aid to the family of the members of the scheme on his/her demise.
2. To promote life Membership of IMA.

#### **FEES:**

1. The fees to be paid at the time of admission is Rs. 1500/- (Rupees fifteen hundred only).
2. Every member of the Scheme shall contribute Rs.50/- (Rupees fifty only) each time towards, Fraternity Contribution in the event of death of a member, which will be paid to the Nominee of the Deceased member.
3. A member pays the Fraternity Contribution continuously for a period of 25 years only. Afterwards he/she need not pay such contribution, but enjoys all the privileges of a regular member.
4. The Fraternity Contribution will be drawn from the Caution Money Deposit Account of each member and paid to the Nominee of the deceased member within 60 days of the claim received complete in all respects. Then a demand will be made by the Secretary by a bill under certificate of posting to each member once in 6 months i.e., in January and July each year for the outstanding dues as on that date. This amount is to be paid by all the members within 30 days of the demand, failing which a late fee of 25/- per month or part thereof delay will be levied. If the dues are not cleared within six months, a registered notice will be given asking for the payment of dues which if not paid by the date specified in the notice will result in the termination of membership and forfeiture of caution deposit without any further notice.

#### **ELIGIBILITY FOR MEMBERSHIP**

1. Must be a life member of IMA through A.P. State Branch. When Husband and Wife are doctors and intend to join the scheme, they have to join as individual members in the Scheme.
2. Must be below 45 years of age as on the date of payment of the relevant fees for admission into FBS by demand draft.

## **PROCEDURE OF MEMBERSHIP**

1. Doctors desiring to join the scheme will apply to the Secretary of the Family Benefit Scheme in the prescribed application form along with a DD of Rs.1500/- drawn in favour of **Hony. Secretary Family Benefit Scheme, A.P. State IMA** payable at Hyderabad and (Xerox copy of the subscription receipt for life membership of IMA. (Accepted subject to verification from State IMA Office) / Life Membership Certificate and proof of date of birth (Certified copy of S.S.C. or Matriculation Certificate) and shall get the application duly attested and forwarded by the local branch Secretary.
2. Must submit a Voluntary Health Declaration in the prescribed proforma. However it may be noted that the presence of any of the diseases is not a disqualification for joining the scheme. But want on concealment of the same can lead to disqualification at a later date, under Clause X Sub Clause I of the Constitution of FBS.
3. Must enclose two passport size photographs, one pasted to the application form duly attested by the local branch Secretary/President and the other kept free along with the application form.
4. The application forms can be had from the Family Benefit Scheme Office at Hyderabad or the Local IMA Branch Secretary. Only application forms supplied by the FBS office are to be used.

### **CLAIMS:**

In the event of death of a member, the nominee shall inform the same to the Secretary and ask for the claim form.

The claim form duly filled in along with the DEATH CERTIFICATE and other relevant enclosures as noted in the claim form are to be sent to 10. The application for enrolment must be made only in the specific application secretary of the Scheme through the Secretary of the Local branch of IMA duly attested and forwarded by him.

The first Nominee (or the second Nominee in the case of prior death of the first Nominee) of the deceased member will get the benefits as follows:

The Fraternity Contribution Benefit will be calculated according to the membership strength of the scheme on the 1st day of the month in which the death has occurred; at the rate of Rs.50/- per member.

### **SALIENT FEATURES - THE FBS "A" SERIES**

1. The series is started with the primary aim of providing an opportunity for doctors above 45 years of age who have missed the earlier

opportunity to join the existing series to enjoy the benefits of the Family Benefit Scheme.

2. The Scheme operation in the series will be identical to the existing scheme. (Fees, procedure for membership, claims etc).
3. All the constitutional provisions will be the same as in the existing scheme.
4. The same Managing Committee will have administrative and financial control of the FBS "A" series also.
5. The FBS "A" series will commence from 1st July 1995. To start with there will be no age limitation for the first six months i.e., up to the 31st December 1995. From 1st Jan. 1996 the enrolment will be open only to members below 60 years of age and subsequently every 6 months the age limitation will be brought down by 5 years till the age limitation is brought to 45 years as in the present scheme.
6. The FBS "A" series has become operative from 1st Jan. 1996.
7. The accounts, of the two series will be separate. The members of each series will be contributing to deaths in the respective series only. The Fraternity Contribution Benefit also will be computed on the basis of the membership strength of the respective series.
8. The members are entitled for enrolment in any one series only
9. When the two series reach concurrent status, i.e., when the upper age limit becomes 45 years, the allotment of members to the two series will be made by lots to fill in the vacant position in the existing FBS series caused by deaths, Voluntary Retirement and Terminations of the members in the existing series. The application for enrolment must be made only in the specific application form for the FBS "A" series supplied by the FBS office.
11. All payments to the FBS "A" series have to be made only by Demand Drafts payable at Hyderabad drawn in favour of **Hony. Secretary Family Benefit Scheme 'A' Series AP State IMA.B**

**Office Address**

***Hony. Secretary,***

**FAMILY BENEFIT SCHEME**

IMA A.P. STATE, IMA Building, Sultan Bazaar

Hyderabad - 500 027

Tel Nos.4656328 (PP) 4656378 (PP)

# PROFESSIONAL PROTECTION AND WELFARE SCHEME

## **Aims & Objectives**

- a) To protect and help members in litigation concerned with medical profession, which may arise during the process of their professional practice.
- b) While the member goes through the litigation the scheme will provide to the member the necessary medical expertise and proper defense procedure and monetary aid.
- c) The scheme by virtue of its organization can secure necessary medical records from any of the medical establishments / hospitals as and when necessary to facilitate proper build up of the case. This helps to get rid of unwarranted monetary loss and mental strain to the member.
- d) To provide legal aid to the members of the scheme.
- e) To promote Social Service Activities such as to provide Medical Aid to the poor and needy, to undertake family welfare programmes, to organize blood donation camps. To conduct first Aid classes and to organize AIDS awareness programmes etc.
- f) To conduct CME programmes to doctors periodically to update their knowledge.

## **Eligibility**

Annual and life members of the Indian Medical Association A.P. State Branch are eligible to become the members of scheme. Annual Members after becoming scheme members should see that they continue to be IMA members throughout the period of this scheme coverage.

## **Jurisdiction**

Any claim arising within the jurisdiction of Andhra Pradesh alone will be entertained by the scheme.

## **Procedure for Enrollment**

- a) The Managing Committee of PP & W Scheme reserves the right of admission of any member to join in the scheme.
- b) The application form should be attested by the concerned Hony. Secretary of the local branch confirming the membership status of the member.

## Membership Fee

Members joining in the scheme should pay the admission fee and become members of PP & W Scheme and in addition they have to pay Annual Fee structure once in every year for scheme 1A, 2B and 3D whichever they select.

### A. Scheme 1A

Individual Membership

Admission Fee

- a) General Practitioners  
(MBBS Doctors with non-operative techniques) **Rs.500/-**
- b) MBBS who does Surgery / Gynec / Obst / Anesthetists / Surgical Specialties, Medical Specialties, Super Specialties, Diagnostic Doctors (Pathology, Ultra Sound, Micro Biology etc.) **Rs.600/-**

### Individual Annual Fee Structure for Scheme 1A

Risk Benefit Sum	MBBS with non-operative techniques		MBBS who does Surgery, Surgical Specialities, Obst. & Gynec.		Medical Specialists Pathologists, Radiologist & Microbiologist		Super Specialities, Medical & Radiation Oncologists, Anesthetists	
	Rs.2.5 Lakhs	Rs.5 Lakhs	Rs.2.5 Lakhs	Rs.5 Lakhs	Rs.2.5 Lakhs	Rs.5 Lakhs	Rs.2.5 Lakhs	Rs.5 Lakhs
Annual Fee	Rs. 150	Rs. 300	Rs. 450	Rs. 900	Rs. 200	Rs. 400	Rs. 700	Rs. 1400

### *Take it easy*

#### *Fortune Telling*

A man was wandering around a fairground and he happened to see a fortune teller's tent. Thinking it would be good for a laugh, he went inside and sat down.

"Ah....." said the woman as she gazed into her crystal ball. "I see you are the father of two children."

"That's what you think," said the man scornfully. "I'm the father of three children."

The woman grinned and said,

"That's what you think."

IMA Members under scheme 1A are covered for the lapses committed in their clinic/nursing home and also for the lapses committed in other Nursing Homes and hospitals.

**B. Scheme 2B**

**Nursing Home Coverage (Corporate Hospitals are excluded)**

**Admission Fee : Rs.1000/-**

**Annual Fee Structure For Scheme 2B**

<b>Risk Benefit Sum</b>	<b>Rs.2.5 Lakhs</b>	<b>Rs.5 Lakhs</b>	<b>Add Bed Fee as per bed strength</b>	<b>Beds</b>	<b>Rs.2.5 Lakhs</b>	<b>Rs.5 Lakhs</b>
Annual Fee	Rs. 2500	Rs. 5000			1 to 10 11 to 15 16 to 20 21 to 25	Rs.750 Rs.1250 Rs.1500 Rs.2250

There off after 25 beds onwards add Rs.75 for Rs.2.5 Lakhs benefit and Rs.125 for Rs.5 lakhs benefit for each extra bed.

Members under scheme 2B, the benefit covers the risk and lapses committed in that Nursing Home by the member, his consultants and the entire staff. The benefit will not apply to the lapses committed by the member in the other Nursing Homes and Hospitals. Any false information regarding bed strength will not entitle the member to get the benefits of the scheme.

**Scheme 3 D**

Diagnostic Centres (Corporate establishments excluded)

Admission Fee: Rs.1000/-

**Annual Fee Structure For Scheme 3D**

<b>Risk Benefit Sum</b>	<b>Category-I CT/MRI with all other facilities</b>	<b>CATEGORY - II</b>			
		<b>(a) X-Ray</b>	<b>(b) Ultra Sound</b>	<b>(c) Endo Scopy</b>	<b>(d) Pathology Bio Chemistry &amp; Micro Biology</b>
Rs. 2.5 Lakhs	Rs. 15,000/-	Rs. 15,000/-	Rs. 15,000/-	Rs. 15,000/-	Rs. 15,000/-
Rs. 5 Lakhs	Rs. 30,000/-	Rs. 30,000/-	Rs. 30,000/-	Rs. 30,000/-	Rs. 30,000/-

Nursing Homes having separate diagnostic centres should also take the policy of 3D for diagnostic centres.

D. For all schemes the admission fee has to be repaid if the members do not renew their annual membership within one month after expiry of their coverage period. Anyhow the scheme coverage will not be allowed for the grace period of one month.

### **IMA NATIONAL SOCIAL SECURITY SCHEME (IMA NSSS)**

#### **AIMS AND OBJECTS OF THE SCHEME:**

The scheme shall provide financial assistance to nominee of member of the scheme in the event of his/her death.

#### **ELIGIBILITY OF THE MEMEBRS**

Any life member of IMA upto age of 60 years residing in India is eligible to become a memembr of this scheme but members above the age of 40 years and below the age of 60 years, must be continuous members of I.M.A. atleast for 3 years on the day of joining the scheme.

#### **ABOUT SCHEME:**

Total Members Enrolled	..	4564
Total Deceased Members whom DFC Given	..	73
DFC given to last deceased member's nominee	..	Rs.1,76,860.00

#### **FEESCHEDULE**

Amount for D.D. for various age groups	Advance Fraternity Contribution (A.E.C.)	Membership Fees	Admission Fees	Total
1. Below Age 30 Years	1000	50	1000	2050
2. Between 31-40 Years	1000	50	2000	3050
3. Between 41-50 Years	1000	50	3000	4050
4. Between 51-55 Years	1000	50	4000	5050
5. Between 56-60 Years	1000	50	5000	6050

For forms or any query, please inform Dr. Kirti M. Patel - Chairman or Dr. Yogendra S. Modi - Hony. Secretary, I.M.A. N.S.S.S. 2nd Floor, A.M.A., House, Nr. Natraj Cinema, Ashram Road, Ahmedabad 380 009, Gujarat, Phone/Fax: (079) 658 54 30, E-mail: [imagsb@icenet.net](mailto:imagsb@icenet.net) : Website: [www.imagujarat.org](http://www.imagujarat.org)

### **INDIAN MEDICAL ASSOCIATION:: VIJAYAWADA**

#### **Subscription details**

Annual Membership	Single	-	Rs. 360.00
Annual Membership	Couple	-	Rs. 650.00
Life Membership	Single	-	Rs.3020.00
Life Membership	Couple	-	Rs.5030.00
Associate Annual Member		-	Rs. 200.00

## Phenyl Propanolamine

A five-year study by Yale University researchers suggests that one of the most common nonprescription medications, phenylpropanolamine, found in many cold and cough remedies and appetite suppressants, increases some users' risk of a stroke.

The Consumer Healthcare Products Association (CHPA), a trade group that spent \$5 million on the study, now is raising doubts about its validity.

At a Food and Drug Administration advisory committee meeting Thursday, the CHPA, the FDA and a coauthor of the study will present their takes on the research, which focuses on a compound called phenylpropanolamine and hemorrhagic stroke, or bleeding in the brain.

Lead author Ralph Horwitz, chairman of internal medicine at Yale, emphasizes that the risk of hemorrhagic stroke in adults under 50, the group he studied, is very low to begin with.

Phenylpropanolamine, or PPA, has been on the market for half a century, the CHPA says. Each year, billions of doses are consumed in USA, according to the Yale study.

PPA is available in several hundred nonprescription cough, cold and allergy remedies and appetite suppressants. It helps constrict blood vessels, relieving nasal congestion. Clinical trials have shown that it aids weight loss.

More than 20 years ago, case reports began appearing that linked PPA products to hemorrhagic stroke. Many of the cases were in young women who had taken appetite suppressants.

"It's a cardiac and brain stimulant. It's a weak one, but there are some people who are exquisitely sensitive to it," says Raymond Woosley, chairman of pharmacology at Georgetown Medical School in Washington, D.C. In 1992, concerned that the FDA might remove over-the-counter PPA weight-control products from the market, the Nonprescription Drug Manufacturers Association, precursor of the CHPA, joined the agency in proposing a large-scale epidemiological study of the drug's association with hemorrhagic stroke.

The study consisted of 702 men and women ages 18 to 49 who had suffered cerebral hemorrhage. They were recruited from hospitals in four regions.

Each stroke patient was matched by age, sex, race and location with two control subjects who had not had a stroke.

All participants were interviewed about their medical history, health behaviors and medication use.



The scientists noted whether the patients had used PPA within three days of the onset of stroke symptoms.

For the control subjects, who had not suffered a stroke, the researchers noted their PPA use within three days of the day and time when the matched patient's stroke symptoms began.

Of the stroke patients, 27 reported using PPA within the three key days, compared with 33 of the control subjects. Overall, the study found that stroke patients were about 50% more likely to have used PPA within that period than control subjects were.

The association was much higher among the six patients, all women, who had used appetite suppressants. They were about 16 times more likely to have taken PPA during the key three-day period than the matched control subjects.

"I don't think there's any question in my mind that PPA appears to increase the risk of brain hemorrhage," Horwitz says.

In a six-page response filed with the FDA, though, the CHPA writes: "We believe the study data do not support a serious challenge to the safety of phenylpropanolamine in over-the-counter medicines."

The study did not establish that PPA use causes hemorrhagic stroke, the CHPA writes. And the study contained too few PPA-exposed cases and control subjects to reach an unbiased assessment about any link between the drug and stroke, according to the CHPA.

"Horwitz has taken a very strong stand on what we think is a very thin layer of data," says R. William Soller, a CHPA senior vice president.

CHPA consultant Charles Hennekens, a visiting professor at the University of Miami, says more research is needed before any decision is made on PPA.

Woosley, who has not reviewed the Yale study's findings, notes that some drug risks appear only when subsets of patients are analyzed. If PPA use causes even one stroke a year in the USA, he says, "it's unacceptable."

### *Take it easy*

#### **Blind date**

"How was your blind date?" a college student asked her roommate.

"Terrible!" the roommate answered. "He showed up in his 1932 Rolls Royce."

"Wow! That's a very expensive car. What's so bad about that?"

"He was the original owner."

Members of IMA, Vijayawada who participated  
in the AIDS awareness lectures in various colleges  
of Vijayawada on 1st December 2000

1	Chaluvadi Satyavathi College	Dr.P.Venkateswarlu	Dr.M.Madhavi	Dr.Jhansi	Dr.Padmavathy
2	Krishnaveni Degree	Dr.Nanda Kumar	Dr.P.M.C.Nayudu	Dr.Srinivas	
3	Loyola Degree College	Dr.P.Ramesh Babu	Dr.Y.Ramesh Babu	Dr.D.Sambasiva Rao	
4	Loyola JuniorCollege	Dr.B.Ramachandra Rao	Dr.P.Rambabu	Dr.Y.Sai Kishore	
5	Maris Stella College	Dr.G.Maru	Dr.K.Vasumathi	Dr.P.V.Ramana Murthy	
6	Montessori Degree College	Dr.K.Pattabhi Ramaiah	Dr.Y.Raja Rao	Dr.Sasibala	
7	Montessori JuniorCollege	Dr.Y.Sandhya	Dr.P.Ranganadh	Dr.G.Eswar	
8	Sapthagiri JuniorCollege	Dr.K.Kamala	Dr.S.Sudhakar	Dr.Sriramachandra Murthy	
9	Sarada DegreeCollege	Dr.V.R.R.Bhupathi	Dr.Hima Bindu	Dr.Sriramachandra Murthy	
10	Sarada Junior College	Dr.N.Suryanarayana	Dr.V.R.R. Bhupathi		
11	Sathavahana College	Dr.V.Ram Prasad	Dr.S.Prabhakar	Dr.Y.V.Rao	Dr. G. Maru
12	Siddhartha Arts Degree College	Dr.G.Samaram	Dr.Kalesha Vali		
13	Siddhartha Arts JuniorCollege	Dr.R.S.Rama Devi	Dr.T.V.Narayana Rao		
14	Siddhartha Mahila Collage	Dr.E.Haribabu	Dr.Deeksha	Dr.T.Madhu	
15	SRR & CVR Degree College	Dr.P.Rambabu	Dr.Raja Gopal	Dr.N.V.Krishna Rao	
16	SRR & CVR JuniorCollege	Dr.T.V.Narayan Rao	Dr.A.Venkaiah	Dr.G.C.S.Srinivas	
17	Syed Appalaswamy Degree College	Dr.T.Sai Prasad	Dr.P.Padmaja		
18	Syed Appalaswamy JuniorCollege	Dr.C.V.Subba Rao	Dr.K.Prabhadevi		
19.	Patamata Z P H School	Dr. M. Ramarao	Dr. V.V.B.Chowdary		
20.	Nagarjuna Engineering College	Dr.K.S.R. K. Prasad	Dr. Hema Patimi	Dr.T.Vijayalakshmi	

## *Take it easy*

### **RULES OF THE PIT**

Don't hurt yourself.

All bleeding stops.

Don't lose your cool.

Everybody has to die sometime.

You can't hurt a dead man.

Never yell at the nurses (refer to Rule #1.)

Don't get excited about blood loss-unless it's your own.

Don't hit patients or doctors-unless necessary.

SEX isn't everything, but it's a hell-of-a-long-way ahead of anything that's second.

The patient will be all right if he is okay.

The pain will go away when it stops hurting.

All fevers will eventually come back to normal on the way to room temperature.

There's always time sometime.

Common things are common.

A strawberry by any other name would be a heart with acne.

Anything that can go wrong, will go wrong.

If nothing has gone wrong, you've obviously don't understand the situation.

If you can keep your head among all this confusion, you obviously don't understand the situation.

Uncommon manifestations of common diseases are more common than are uncommon diseases.

Death is a severe stage of shock, or shock is a pause in the act of dying.

In medicine, always remember never to say always and never.

If you can't see it, it's probably not there.

Remember, "Toast always falls jelly-side down."

If a patient has a catheter —he needs it.

To be right is only half the battle; to convince the patient is more difficult.

Always do whatever you do best.

Remember, the problem is always better than the X-ray looks.

*-Anonymous, found circulating at San Francisco Emergency Hospitals 1970-71*

## NEWS IN BRIEF

**IMA Vijayawada** organized a Guest lecture session on AIDS at IMA Hall on 12th November, 2000 . *Dr. N. Kumarswamy* from Chennai spoke on "**Management of HIV disease in India**" and *Dr. S.R. Agarwal* from Hyderabad spoke on "**Primary care and disease prevention of HIV infection**"

**IMA Vijayawada along with IAP Krihna and APNA Krishna** conducted a painting competition for school children on November 14th. There was an enthusiastic gathering of children from various schools.

**National Newborn Week celebrations** were celebrated from November 15th - 21st, 2000 and on this occasion, IMA along with IAP and APNA conducted **Interaction session on "Newborn care and Safe delivery practices"** and **Quiz for health workers and midwives** on November 20th 2000 from 2.30 PM to 5.30 PM

**Institute of Public Enterprises & IMA - AP** combinedly organise a conference on **Medical Informatics** at **Siddhartha Medical College** on 24th and 25th of November. On behalf of IMA, Vijayawada a paper on "**Examples of Database Usage in Medical Practice**" - was presented by our Hony. Secy.

**IMA, AP State Conference** took place at Nellore from December 2nd-3rd, 2000.

"Once you eliminate the impossible, whatever remains, no matter how improbable, must be the truth."

- *Sherlock Holmes*

(by Sir Arthur Conan Doyle, 1859-1930)

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