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# INDUS ALIVE

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A Health & Wellness Magazine by INDUS HOSPITALS, Mohali, (Pb.) India

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# Social Activities

## Free Medical Checkup Camp organised by Indus Hospitals



Specialities	Doctor Name	Qualifications	OPD Days
Anesthesia & Pain Management	Dr. SPS Bedi	MBBS MD	Mon to Sat
	Dr. Arjun Joshi	MBBS MD	Mon to Sat
	Dr. Devinder Grewal	MBBS MD	Mon to Sat
Cardiology & Interventional Cardiology	Dr. Mahesh Garg	MBBS MD DM	Mon to Sat
Cardio Thoracic Vascular Surgery	Dr. Ashwani Bansal	MBBS MS MCh	Mon to Sat
Colorectal Surgery	Dr. Pankaj Garg	MBBS MS	On Call
Critical Care & Emergency Medicine	Dr. Jogesh Aggarwal	MBBS MD	Mon to Sat
ENT Surgery	Dr. Potluri Praneeth	MBBS MS	Mon to Sat
Family Medicine	Dr. Sakshi Grover	MBBS DNB	Mon to Sat
Gastroenterology Surgery	Dr. BS Bhalla	MBBS MS	Mon & Wed
Gastroenterology	Dr. Rajan Mittal	MBBS MD DM	Mon to Sat
General Surgery	Dr. Anil Kr Sharma	MBBS MS	Mon to Sat
Gynaecology & Obstetrics	Dr. Jasmine Kang Rana	MBBS DNB	Mon to Sat
Internal Medicine	Dr. Kanwar Singh Bhinder	MBBS MD	Mon to Sat
Internal Medicine	Dr. Mayank Sharma	MBBS MD	Mon to Sat
Joint Replacement & Sports Medicine	Dr. B. Harna	MBBS, MS, DNB	Mon to Sat
Microbiology & Transfusion Medicine	Dr. Parminder Kaur Gill	MBBS MD	Mon to Sat
Nephrology & Dialysis	Dr. Narinder Sharma	MBBS MD DNB	Mon to Sat
Neurology	Dr. Ruchi Jagota	MBBS MD DM	Mon to Sat
Neurosurgery	Dr. Rajnish Kumar	MBBS MS MCh	Mon to Sat
Nutrition & Dietetics	Dt. Niyati Tejaswini	Msc	Mon to Sat
	Dt. Gauri	MSc.	Mon to Sat
Oncology (Orthopedics)	Dr. Rajat Gupta	MBBS MS DNB	On Call
Oncology (Radiation)	Dr. Vinod Nimbran	MBBS MD	Tue   Thu   Sat
	Dr. Kamalpreet Kaur	MBBS DNB	Mon to Sat
Medical Oncology	Dr. Deepak Singla	MBBS MD DM	Mon to Sat
Oncology (Surgical)	Dr. Ashwan Kallianpuri	MBBS MS MCh	Mon to Sat
	Dr. Ashwani K Sachdeva	MBBS MS MCh	Mon to Sat
Orthopedics & Joint Replacement	Dr. VPS Sandhu	MBBS MS	Mon to Sat
Pathology	Dr. Ankush Nayyar	MBBS MD	Mon to Sat
Pediatrics, Neonatology & Hematology	Dr. Kushagra Taneja	MBBS MD	Mon to Sat
Pediatrics Surgery	Dr. Abhishek Gupta	MBBS MS MCh	Mon to Sat
Pediatrics Cardiology	Dr. Amitoz Singh Baidwan	MBBS DNB FNB	Mon to Sat
Plastic & Reconstructive Surgery	Dr. Ritwik Kaushik	MBBS MS MCh	Tue   Thu   Sat
Psychiatry, Behavioral & Drugs Rehabilitation	Dr. Prannay Gulati	MBBS MD	Mon to Sat (1st & 3rd Thu Outside)
	Dr. Vikas Bhateja	PhD(Cognitive Psy.) M.phil (Cl. Psy)	Mon to Sat
Counseling Psychologist	Mrs. Sarnit Chopra	MA PGDFCG	Mon to Fri
Pulmonology & Sleep Medicine	Dr. Kanwaljit Singh	MBBS MD	Mon   Wed   Fri
Radiology	Dr. Bhavneet Singh	MBBS MD, DNB	Mon to Sat
	Dr. Jaspreet Singh	MBBS MD, DNB	Mon to Sat
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Urology	Dr. Prashant Bansal	MBBS MS DNB	Mon to Sat
Vascular Surgery	Dr. Vishal Attri	MBBS MS	Mon to Sat (Every Fri Outside)

## From us to you

Throughout the year we generate awareness around specific conditions and diseases that people struggle with daily. Indus Healthcare is committed to bring today's most pressing health issues to the forefront for public awareness.

In this issue of Indus Alive you will find various topics related to health issues, their management and follow-up.

Looking forward for your feedback and suggestions.

[feedback@indushospital.in](mailto:feedback@indushospital.in)

For sending in your articles,  
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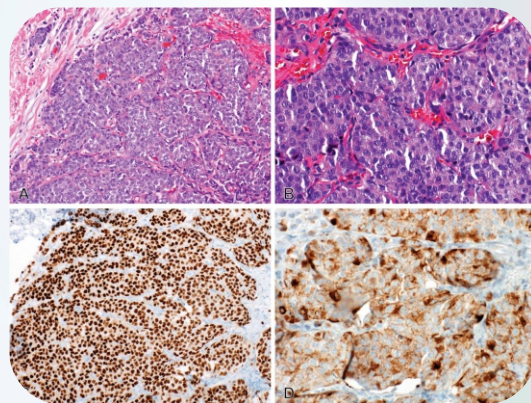
# IMMUNOHISTOCHEMISTRY

## In Cancer : A General Review

Cancer remains one of the leading causes of mortality worldwide, posing significant challenges to healthcare systems and individuals alike. With the increasing understanding of cancer biology and the advent of precision medicine, the role of immunohistochemistry (IHC) has become indispensable in cancer diagnosis, prognosis, and treatment. In this comprehensive guide, we will explore the principles, applications, and advancements of immunohistochemistry in the context of cancer.

### Understanding Immunohistochemistry:

Immunohistochemistry is a technique used to visualize the presence, localization, and distribution of specific proteins in tissue sections using antibodies that bind to target antigens. This technique leverages the principles of immunology and histology to identify biomarkers that are relevant to cancer biology. By staining tissue sections with specific antibodies and visualizing them under a microscope, pathologists can gain insights into the molecular characteristics of tumors and their microenvironment.



### Applications of Immunohistochemistry in Cancer:

1. **Diagnosis:** Immunohistochemistry plays a crucial role in the diagnosis of various cancer types by identifying specific biomarkers that are characteristic of different malignancies. For example, the detection of hormone receptors (e.g., estrogen receptor, progesterone receptor) and human epidermal growth factor receptor 2 (HER2) in breast cancer tissue samples helps guide treatment decisions and predict patient outcomes.
2. **Prognosis:** Certain biomarkers detected by immunohistochemistry can serve as prognostic indicators, providing valuable information about the aggressiveness of tumors and the likelihood of disease progression. For instance, the expression of Ki-67, a marker of cellular proliferation, has been correlated with tumor grade and patient survival in various cancer types.
3. **Prediction of Therapeutic Response:** Immunohistochemistry enables the identification of predictive biomarkers that can guide treatment selection and predict response to specific therapies. For example, the expression of programmed cell death ligand 1 (PD-L1) in tumor tissue has been associated with response to immune checkpoint inhibitors in patients with various malignancies. Another example would be ER, PR, Her 2 neu for Targeted therapy in breast cancer.
4. **Tumor Classification and Subtyping:** Immunohistochemistry aids in the classification and subtyping of tumors based on their molecular characteristics. This information is essential for determining the most appropriate treatment strategies and predicting patient outcomes. For example, the expression of specific markers such as cytokeratins and mucins helps differentiate between different subtypes of lung cancer.

### Advancements in Immunohistochemistry Technology:

Recent advancements in immunohistochemistry technology have expanded its capabilities and improved its sensitivity, specificity, and multiplexing capacity. Some notable advancements include:

1. **Multiplex Immunohistochemistry:** Multiplex immunohistochemistry allows for the simultaneous detection of multiple protein targets within the same tissue section, enabling the characterization of complex molecular pathways and cellular interactions in the tumor microenvironment.
2. **Quantitative Analysis:** Digital pathology and image analysis algorithms enable quantitative analysis of immunohistochemistry data, providing objective and reproducible measurements of biomarker expression levels and spatial distribution patterns.
3. **Multiplexed Imaging Techniques:** Emerging multiplexed imaging techniques, such as multiplexed ion beam imaging (MIBI) and CODEX (CO-Detection by indEXing), offer high-dimensional spatial profiling of protein markers in tissue samples, allowing for deeper insights into tumor heterogeneity and immune cell interactions.
4. **Liquid Biopsy-Based Assays:** Liquid biopsy-based assays, such as circulating tumor cell (CTC) and circulating tumor DNA (ctDNA) analysis, incorporate immunohistochemistry to detect and characterize tumor-derived biomarkers in peripheral blood samples. These assays hold promise for non-invasive cancer detection, monitoring, and personalized treatment selection.

### Challenges and Future Directions:

While immunohistochemistry has revolutionized cancer diagnostics and personalized medicine, several challenges remain, including inter-laboratory variability, standardization of protocols, and interpretation of results. Future directions in immunohistochemistry research include the development of novel biomarkers, integration with other omics technologies, and validation of predictive models for treatment response and patient outcomes.

### Conclusion:

Immunohistochemistry continues to play a pivotal role in cancer research and clinical practice, providing valuable insights into tumor biology, patient prognosis, and treatment response. With ongoing advancements in technology and methodology, immunohistochemistry holds promise for further enhancing our understanding of cancer pathogenesis and improving patient outcomes in the era of precision oncology.

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MBBS, MD  
HOD Histopathology



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# ASTHMA

## Key facts

- Asthma is a major non-communicable disease (NCD), affecting both children and adults, and is the most common chronic disease among children.
- Inflammation and narrowing of the small airways in the lungs cause asthma symptoms, which can be any combination of cough, wheeze, shortness of breath and chest tightness.
- Asthma affected an estimated 262 million people in 2019 and caused 455 000 deaths.
- Inhaled medication can control asthma symptoms and allow people with asthma to lead a normal, active life.
- Avoiding asthma triggers can also help to reduce asthma symptoms.
- Most asthma-related deaths occur in low- and lower-middle-income countries, where under-diagnosis and under-treatment is a challenge.

## Overview

Asthma is a chronic lung disease affecting people of all ages. It is caused by inflammation and muscle tightening around the airways, which makes it harder to breathe.

Symptoms can include coughing, wheezing, shortness of breath and chest tightness. These symptoms can be mild or severe and can come and go over time.

Although asthma can be a serious condition, it can be managed with the right treatment. People with symptoms of asthma should speak to a health professional.

## Impact

Asthma is often under-diagnosed and under-treated, particularly in low- and middle-income countries.

People with under-treated asthma can suffer sleep disturbance, tiredness during the day, and poor concentration. Asthma sufferers and their families may miss school and work, with financial impact on the family and wider community. If symptoms are severe, people with asthma may need to receive emergency health care and they may be admitted to hospital for treatment and monitoring. In the most severe cases, asthma can lead to death.

## SELF-CARE

People with asthma and their families need education to understand more about their asthma. This includes their treatment options, triggers to avoid, and how to manage their symptoms at home.

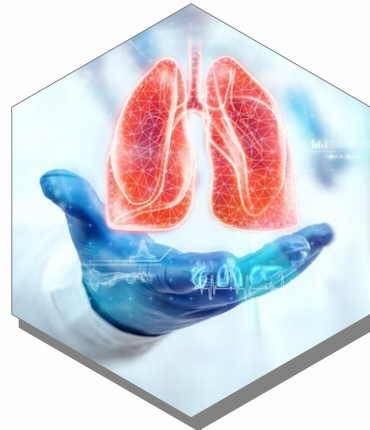
It is important for people with asthma to know how to increase their treatment when their symptoms are worsening to avoid a serious attack. Healthcare providers may give an asthma action plan to help people with asthma to take greater control of their treatment.

### Dr. Kanwaljit Singh

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## Symptoms

Symptoms of asthma can vary from person to person. Symptoms sometimes get significantly worse. This is known as an asthma attack. Symptoms are often worse at night or during exercise.

Common symptoms of asthma include:

- a persistent cough, especially at night
- wheezing when exhaling and sometimes when inhaling
- shortness of breath or difficulty breathing, sometimes even when resting
- chest tightness, making it difficult to breathe deeply.

Some people will have worse symptoms when they have a cold or during changes in the weather. Other triggers can include dust, smoke, fumes, grass and tree pollen, animal fur and feathers, strong soaps and perfume.

Symptoms can be caused by other conditions as well. People with symptoms should talk to a healthcare provider.

## Causes

Many factors have been linked to an increased risk of developing asthma, although it is often difficult to find a single, direct cause.

- Asthma is more likely if other family members also have asthma - particularly a close relative, such as a parent or sibling.
- Asthma is more likely in people who have other allergic conditions, such as eczema and rhinitis (hay fever).
- Urbanization is associated with increased asthma prevalence, probably due to multiple lifestyle factors.
- Events in early life affect the developing lungs and can increase the risk of asthma. These include low birth weight, prematurity, exposure to tobacco smoke and other sources of air pollution, as well as viral respiratory infections.
- Exposure to a range of environmental allergens and irritants are also thought to increase the risk of asthma, including indoor and outdoor air pollution, house dust mites, moulds, and occupational exposure to chemicals, fumes or dust.
- Children and adults who are overweight or obese are at a greater risk of asthma.

## Treatment

Asthma cannot be cured but there are several treatments available. The most common treatment is to use an inhaler, which delivers medication directly to the lungs.

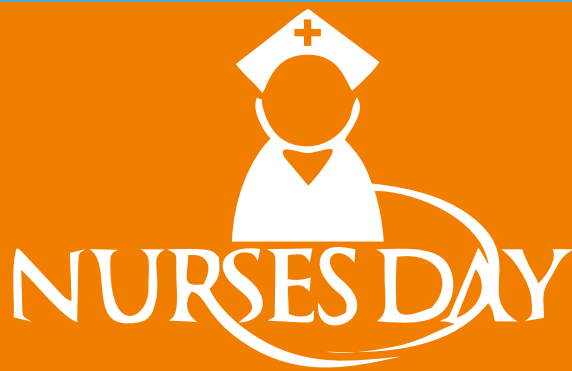
Inhalers can help control the disease and enable people with asthma to enjoy a normal, active life.

There are two main types of inhaler:

- bronchodilators (such as salbutamol), that open the air passages and relieve symptoms; and
- steroids (such as beclometasone) that reduce inflammation in the air passages, which improves asthma symptoms and reduces the risk of severe asthma attacks and death.

People with asthma may need to use their inhaler every day. Their treatment will depend on the frequency of symptoms and the types of inhalers available.





# Nurse's Role in promoting Culture of Patient Safety

## International Nurses Day

12<sup>th</sup> May

Nursing has come a long way since the days of Florence Nightingale and her pioneering actions that define her as "The Mother of Modern Nursing." One thing that has not changed, and is unlikely to change anytime in the near future is the presence of illness and its effect on people.

Illness has the power to strike down the mightiest of individuals; no one is immune. As nurses we must be knowledgeable about how diseases affect our patients. Due to the high patient load and often intense time constraints placed on nurses, it can be easy to simply treat the physical being and move on to the next patient, resident, or client. It is important to care for the whole person and to see them as just that; a whole person, not just a patient or diagnosis. Holistic approach the core of nursing involves thinking about and assisting patients with the effects of illness on the body, mind, emotions, spirituality, religion, and personal relationships. It also involves taking into consideration social and cultural differences and preferences. Every person is their own individual.

In recent years, emphasis on improving the quality of care provided by the nation's hospitals has increased significantly and continues to gain momentum. Because nurses are integral to hospitalized patients' care, nurses also are pivotal in hospital efforts to improve quality. As hospitals face increasing demands to participate in a wide range of quality improvement activities, they are reliant on nurses to help address these demands. One of the important aspects of quality is patient safety. And patients see nurses as their safety nets - the people strong enough to speak up when something in patient care isn't right, such as a medication that might be not be in the patient's best interest. But often things get in the way and prevent nurses from being strong patient advocates. Patient safety to nurses means they are committed to provide "safe, competent and ethical care" through their code of ethics. Today, nurses are taking a much more pro-active role, but we still have a long way to go. Nurses still face enormous challenges when trying to advocate for patients. One way of improving the quality of care and preventing medical errors is to learn from medical errors. Joint Commission on Accreditation of Healthcare Organizations (JCAHO), utilizes a voluntary reporting system to capture serious adverse events. The purpose of this type of voluntary reporting is to identify and respond to such events to improve the quality of care delivered. Root Cause Analysis approaches "what happened, why it happened, what to do to prevent from happening again. Learn from reported medical errors to prevent re occurrence. Emphases on prevention, not punishment are few aspects which will create a culture of awareness on patient safety.

Healthcare organizational culture has a profound effect on patient safety and quality of care. Simply put, if the culture does not promote a safe environment where errors are identified and reported, patient care delivery will be adversely affected.

Errors are more likely to be reported when clinicians or nurses "feel safe to do so and it becomes a culturally accepted activity" (Cohen, 2000, p. 729). Failure or resistance to reporting errors because of fear is characteristic of a culture of blame (Larson, 2000). Organizations with a positive safety culture include communications founded on mutual trust, shared perceptions of the importance of safety, and by confidence in the efficacy of preventive measures.



### INTERNATIONAL PATIENT SAFETY GOALS

Goal 1	Goal 2	Goal 3
Identify patient correctly	Improve effective communication	Improve safety of High alert medications

The report's recommendations center around four themes: improving and increasing nursing education, supporting nurses in practicing to the fullest extent of their education and training, creating a culture and systems in which nurses act as full partners with other healthcare professionals, and collecting better nursing workforce data.

Nurses should strive to always make the most of the short time they have with each patient. As nurses we need to promote a patients psychological and emotional well being in order to facilitate physical healing. When we do this our relationship with the patient changes and grows into something more positive than before. This leads to better patient outcomes and can increase the happiness and purpose in your work as a nurse. With regard to nurses themselves, the extensive study of Arthur et al. (1999) showed that nurses in few countries believe in a confidential relationship between nurses and their patients based on truthfulness and respect. Despite their individual cultural features, nurses across the world do have much in common when it comes to caring and their practice.





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