

Department of Physical Medicine and Rehabilitation

शरीरिक चिकित्सा एवं पुनर्वास विभाग

All India Institute of Medical Sciences, Raipur

अखिल भारतीय आयुर्विज्ञान संस्थान, रायपुर (छत्तीसगढ़)



आरोग्यम् सुख सम्पदा



CME ON

“CHALLENGES AND SCOPE OF REHABILITATION”

DATE : 28th FEBRUARY 2020

VENUE : LECTURE THEATRE 4, AIIMS, RAIPUR

Dear Delegates,

On behalf of the organising committee of Department of Physical Medicine and Rehabilitation at AIIMS Raipur, we warmly welcome you to the Continuous Medical Education Programme on '**Challenges and Scope of Rehabilitation**' to be held on **28th February, 2020** at **Lecture Theatre 4 of AIIMS Raipur**. This CME aims to bring in the experts to share their experience in the field of Physical Medicine and Rehabilitation and is designed to develop awareness in the scientific minds of students as well as teaching Faculties towards Physical Medicine and Rehabilitation. We look forward for your enthusiastic participation in our small endeavour.

Patron in chief and Director

Prof. (Dr.) Nitin M. Nagarkar

Patron and Dean

Prof. (Dr.) S.P. Dhaneria

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Prof. (Dr.) Karan Preepra

Organizing Secretary

Dr. Jaydeep Nandi

Organizing Chairperson

Prof. (Dr.) Alok C. Agrawal

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Travel & Accommodation Committee

Mr Jakaram Narasimhulu

Mr Dheerendra Kumar

Mr Keshav Kumar Yadav

Stage Committee

Mr Vijay Nagre

Mr Hritvansingh Parmar

Mr Manoj Bansal

THE JOURNEY OF PMR IN INDIA:

Physical Medicine and Rehabilitation or Physiatry is a medical speciality focused on prevention, diagnosis, rehabilitation and comprehensive management for patients who experience functional limitations resulting from injury, disease or



malformation. Personalities as diverse like US President Franklin Delano Roosevelt to Philanthropist Bernard Baruch supported the early establishment of PMR while Dr Frank Krusen set up the first university affiliated PMR department at Temple University Medical School in 1921. The history of PMR in India is intertwined with the personal story of Dr. Mary Verghese. **Prof (Dr.) Suranjan Bhattacharjee**, Senior Consultant (CMC Vellore and Ex Director CMC Hospital Vellore) will share with us the fascinating stories of its growth and potentials.

BENEFITS AVAILABLE TO PWDs IN INDIA:

Persons with Disabilities comprise 2-3% of our population (as per census 2001 and 2011) and are really "THE INVISIBLE MINORITY" of our great nation. In USA they comprise 18% of population (not because we are good in preventing disabilities, but simply because we have poor data). In the early 70's, eminent social workers like Baba



Amte gave credibility to the disability rights movement in India by working for leprosy cured patients. We underwent a long journey since then with enactment of various legislations that ensured that PWDs are not left behind in the nation's growth. **Mr. Rajesh Tiwari**, Deputy Director, Ministry of Social Justice and Empowerment, Govt. of C.G will share with us the benefits and programmes for PWD's in the state and central level.

DIABETIC FOOT AND ITS ORTHOTIC MANAGEMENT

Diabetic Foot is a foot that exhibits any pathology that results directly from Diabetes Mellitus or any long-term (or "chronic") complication of Diabetes Mellitus. Researchers from University of Washington estimates that the lifetime incidence of foot ulcers within the Diabetic community is

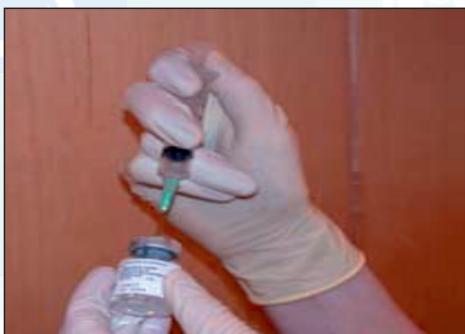


around 15% and may become as high as 25%. A whole industry has developed around Diabetic Foot with newer technologies coming up related to its diagnosis and orthotic management.

Prof. (Dr.) Rajendra Sharma, HOD RML Hospital, New Delhi (Ex Director AIIPMR, Mumbai, Ex Medical Superintendent Safdarjung Hospital New Delhi) will briefly describe about Diabetic Foot and the principles behind its management.

SPASTICITY MANAGEMENT AND ROLE OF BOTULINUM TOXIN

Botulinum Toxin inhibits release of Acetylcholine at neuromuscular junction causing reversible denervation atrophy and hence its clinical effect is limited by collateral sprouting (2-6m). It is helpful in case of MS, Cerebral Palsy, Head Injury, Spinal Cord Injury and Stroke Survivors.



Prof. (Dr.) Ajay Gupta, Professor, Department of PMR, VMMC & Safdarjung Hospital, New Delhi will give us valuable insights about spasticity, its unique position in Psychiatry and the role of Botulinum toxin in its management.

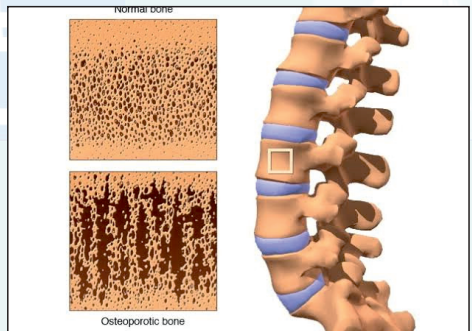
SPINAL CORD INJURY AND ITS REHABILITATION

Dr Silver JR wrote about Leatherheads Hospital in 1944 that they gave him charge of a newly opened Spinal Unit with the advice from a formidable surgeon that *"They are hopeless cases-Most of them die"*. The attitude was similar to that faced by Lord Horatio Nelson in 1805 when he suffered SCI due to sniper's bullet. At that time, Surgeon General Beatty after confirming his SCI commented *"My Lord, unhappily for our country, Nothing can be done For you"*. From that hopeless situation we have travelled a long way in spinal cord injury rehabilitation and **Prof. (Dr.) Sanjay Wadhwa**, Professor, Department of PMR, AIIMS, New Delhi and our IAPMR President will give a valuable talk on the principles behind it.



OSTEOPOROSIS AND ITS COMPREHENSIVE MANAGEMENT

Robert P Heaney (Surgeon General's report on bone health 2004) had lamented that *'The tragedy of osteoporosis is that it is largely preventable.* Osteoporosis, the most common Metabolic Bone Disease, affects 200 million persons worldwide. After 50 years of age, an exponential rise in fractures occurs, with 40% of women and 13% of men experiencing one or more osteoporotic fractures in their lifetimes. These numbers will continue to grow exponentially as the elderly population of industrialized nations increases. **Prof. (Dr.) Alok C. Agrawal**, HOD Ortho AIIMS Raipur will enlighten us with a short lecture on osteoporosis and its comprehensive management.

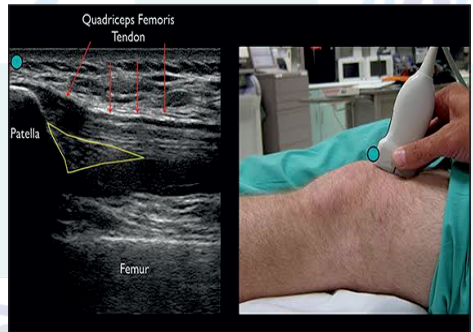


COMMON PATHOLOGIES AROUND KNEE

For many athletes (especially soccer or alpine skiing) the most dreaded injury is that of the acute knee-it can spell the end of a professional career. We are often tempted to believe that all knee painful conditions have something to do with

osteoarthritis or cartilage degeneration. In reality there

are a wide range of possibilities. Given the thin soft tissue envelope around the knee and the fact that knee pain is rarely referred, the pain generators around the knee often can be elucidated with a complete history and thorough physical examination. **Dr. Jaydeep Nandi**, AP PMR at AIIMS Raipur will describe the common pathologies around knee in young active adults.



REHABILITATION FOR CENTRAL ORIGIN BALANCE PROBLEMS

Non Vestibular Imbalance, defined as imbalance that is not due to inner ear or vestibular nerve disorder can be very frustrating to the clinician because the symptoms are often vague and vestibular test results are normal. Consequent to proper diagnosis, the management focuses on

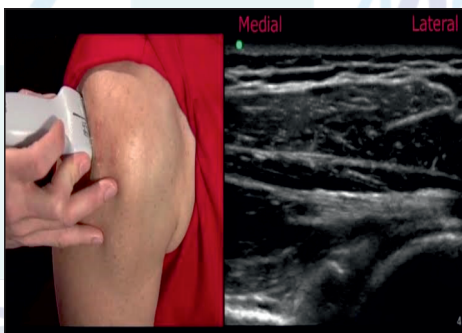
adaptation (Ability to adapt to

head movement), Habituation (Repetitive Exposure to provoking stimulus), Substitution (using vision and Somatosensory Input) and Compensation (Gradual functional recovery). **Mr Vijay Nagre**, MRW & Physiotherapist, AIIMS Raipur will give a demonstration cum lecture on balance retraining in central origin balance problems.



COMMON PATHOLOGIES AROUND SHOULDER

Sports are ingrained in the consciousness of Chhattisgarh, more indelibly than almost anywhere else of India. For athletes performing overhead sports (tennis, bowling or swimming) high demands are usually placed on one's shoulder and so shoulder pain become one of the most common



musculoskeletal maladies in them. One of the most complex and mobile joints of the body, the shoulder is traversed by muscle, tendon, and bone and is surrounded by major neurovascular structures, all of which may serve as potential sources of local and referred pain. **Dr. Sushil Kumar Nayak**, SR PMR AIIMS Raipur will talk about some common shoulder joint pathologies in young active adults.

PULMONARY REHABILITATION IN ACUTE CARE SETTINGS

Outpatient Cardiopulmonary Rehabilitation deals with long term improvement of cardiovascular status of a patient suffering from Myocardial Infarction or RLD/ COPD (to name a few). On the other hand a different challenge waits for the team in the ever changing acute care setting,



more so with the introduction of newer methods of life support or thoracic organ transplantation. In the USA more than 5 million patients survive an episode of critical illness in an acute care hospital in each year. The CVS problem in them can be diverse, ranging from weaning from mechanical ventilator, decannulation to combatting intermittent infection with inefficient airway clearance. **Ms Shalini Singhal**, Jr Physio, AIIMS Raipur will give a demonstration lecture on pulmonary rehabilitation in acute care setting.

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Program Schedule: 28/02/2020-FRIDAY

10:00 hrs – 11:00 hrs: Registration
11:00 hrs – 11:30 hrs: Inauguration
11:30 hrs – 13:30 hrs: Scientific Session – I
13:30 hrs – 14:00 hrs: Lunch break
14:00 hrs – 15:50 hrs: Scientific Session – II
15:50 hrs – 16:00hrs: High Tea
16:00 hrs – 17:00 hrs: Scientific Session – III
17:00 hrs – 17:30 hrs: Valedictory Session

Registration Fees (On Spot) : Rs. 300/- (For External Delegates) ; Nil (For Internal Delegates of AIIMS Raipur)

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