

INDIAN TRANSPLANT NEWSLETTER

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MULTI ORGAN HARVESTING AID NETWORK

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Dr. Sumana Navin, Chennai

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Asst. Editor

Ms. Ann Alex

Designed By

Mr. Suresh Kumar J

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The Editor, ITN Desk
MOHAN FOUNDATION

Toshniwal Building, 3rd Floor
267, Kilpauk Garden Road, Kilpauk
Chennai 600010.

Tel : +91-44-26447000

Email: info@mohanfoundation.org

Website: www.mohanfoundation.org

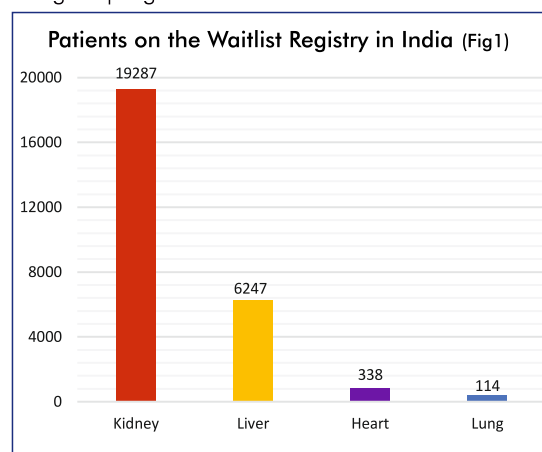
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Editorial Desk**Has the Deceased Donation Programme Slowed Down in India**

The current data coming from many states in India indicate that the deceased donation programme has slowed down lately. The year 2017 was a good year for the programme but this has not been so for the last two years. The deceased donation rate was consistently rising from 2012 to 2017 and went up over four times, but after this it has not seen any rise.[1] In any case only 13 of the 36 States and Union Territories were contributing to deceased donation transplantation in India and in the last three years no new state or Union Territory has been added to the list of contributors. The whole of Eastern India, except for a few deceased donations in Kolkata, has not seen any donations happen.

It is noticeable that Tamil Nadu the leader state in the programme also has plateaued over the last few years. The reasons being given are - a few bad media reports about the programme creating a trust deficit, fall in the fatal road traffic accidents in Tamil Nadu, and some hospitals not being able to perform as well as previous years. The state of Kerala peaked in 2015, but fell after that.[2] For the last three years it has been affected by many public litigations regarding brain deaths followed by knee-jerk reactions by the government in clamping down on the programme with some government orders without proper investigations and brain death audits.[3,4] However, in this downturn the only state that has shown a rise has been the state of Maharashtra. In this state there is a unique system with many independent organ donation bodies (Zonal Transplant Coordination Centres) working in around four cities that spearhead the programme and look after all the local logistics to make donations happen.

The need to review this slowdown is becoming increasingly urgent as the waiting lists have grown (Figure 1) and corrective measures are required to bring the programme back on track.



State	Kidney	Liver	Heart	Lung
Maharashtra	5561	1474	148	27
Tamil Nadu	5376	490	49	23
Karnataka	2963	862	103	64
Telangana	3664	3103	-	-
Kerala	1449	298	30	-
Rajasthan	274	20	8	-
Total	19287	6247	338	114

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State	Source
Maharashtra	: ROTTO - December 2018
Tamil Nadu	: www.tnos.org - 19 Sep 2019
Karnataka	: Jeevasarthakathe - 20 Sep 2019
Telangana	: www.jeevandana.gov.in - 20 Sep 2019
Kerala	: www.knos.org.in - 19 Sep 2019
Rajasthan	: www.rnos.org - 19 Sep 2019

...continued on page 2



In a first, African American man gets a full-face transplant

Robert Chelsea, 68, became the first African American and just the 15th person in the US to get a full face transplant at the Brigham and Women's Hospital in Boston, Massachusetts in July 2019. Mr. Chelsea suffered extensive injuries to his face after a drunk driver hit him in 2013. He underwent 30 surgeries, but he was still incapacitated as the doctors could not reconstruct his lips, part of his nose and his left ear. He spent a year and a half on the face transplant waiting list for a donor face. He was unable to accept an earlier offer in 2018 because the donor's skin tone was much lighter than his. Finally, in July this year, the family of a 62-year-old man who had suddenly died agreed to the donation. The donor's skin tone was almost identical to Mr. Chelsea's. Following a 16-hour surgical procedure involving over 45 doctors and nurses, Robert Chelsea received his face transplant. He made a good recovery and was able to eat, talk and breathe on his own after just 10 days. He is now ready to 'face' the world.

Permission for first study in Japan to attempt growing human organs in animals

For the first time, a controversial stem-cell research study has been given government permission in Japan. The study aims at implanting modified animal embryos (mice, rats, or pigs) with human 'induced pluripotent stem' cells that have the potential to form any part of the body. Human cells will be grown in rat and mouse embryos, then brought to term in a surrogate animal, as part of experiments set to be carried out at the University of Tokyo. This could lay the foundation for the future where human organs for transplant could be grown inside animals. The research team is led by Hiromitsu Nakauchi, a professor of genetics at Stanford University.

Rise in organ donation among the BAME community in UK

NHS Blood and Transplant, UK has encouraging news – there were 121 deceased donors from the black, Asian and minority ethnic (BAME) community last year, the highest number to date. The number of donations has increased by 51% in the last five years. Donor ethnicity plays an important role in a successful transplant. But relatively few people from BAME backgrounds sign up, resulting in a disproportionate number of minorities on transplant waiting lists. In all, 32% of those on the waiting list were from BAME backgrounds, though about 13% of the general population is BAME. Just 8% of all deceased donors were from these communities last year. The data also revealed that only 42% of BAME families agreed to organ donation by a deceased relative when asked in hospitals, compared with 71% of families from a white background. The most common reasons given for refusal among BAME groups is not knowing if a relative wanted to be a donor, or religious and cultural beliefs. When families do not have a discussion or conversation about organ donation, it is a lost opportunity to save lives.

...Editorial continued

The Daunting Task of Handling a Foreign National's Organ Donation in India

In deceased donation in India there are occasionally unusual donations that happen and one such donation is when a foreign national becomes brain dead and the family wishes to donate the organs of their family member. There have been a few such instances in the country which were handled partly by the transplant coordinators from MOHAN Foundation. With no clear-cut protocols these donations sometimes can become quite daunting and time consuming with uncertainty about their outcome.

In the first such donation that happened way back in 1998, the family members actually travelled to India from the USA when the donor families were being honoured at a function held in Chennai in October 1999.[5] In the second such donation by a lady from France (where they follow the presumed consent law) despite the language issue the donation went through.[6] And in a third donation in Mumbai, a donor family from Nepal decided to donate. Nepal is a neighbouring country however the complexity was similar with multiple permissions required including the embassy. Equally complex and challenging is the transfer of body after donation and this requires multiple clearances. The unclear and long-drawn-out procedures can put off families from donating. There are no easy solutions but like post-mortem procedures, foreign national donations require simplification and a clearly laid out procedure too.

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6. www.mohanfoundation.org. India: Donor Memorial: Donor Memorial of Marie Therese Hampart Zoumain. Available at: <https://www.mohanfoundation.org/donor-memorial/donor-profile.asp?tid=57> [Last accessed on 2019 October 25]



Green corridors hit a century in Pune with donated heart being accorded 'VIP' status

The traffic police in Pune created a 'green corridor' on 6th September 2019 to make sure that the heart of a deceased donor reached the destination hospital, Ruby Hall Clinic. Only after this was done was the way cleared for the Chief Minister of Maharashtra, Mr. Devendra Fadnavis who was visiting the city to proceed. The Chief Minister waited at the airport while the heart was sent on. This corridor was the 100th green corridor in Pune since the first one was initiated in the year 2015. Mr. Pankaj Deshmukh, Deputy Commissioner of Police (traffic), Pune, said, "It is fulfilling that through a well-managed green corridor we can contribute to the movement of organ donation."

The precious heart came from a 19-year-boy who had suffered from a brain haemorrhage and was eventually declared brain-dead by doctors at Yashodhara Hospital, Solapur, a town located about 250 km from Pune. The hospital authorities sought consent from the boy's parents for organ donation. Mr. Sukant Bele, transplant coordinator of Zonal Transplant Coordination Centre (ZTCC), Solapur said, "The boy was studying engineering. His parents readily agreed for organ donation and they were supportive throughout." The heart was brought to Pune using a chartered flight. Mrs. Arati Gokhale, Central Coordinator, ZTCC, Pune said, "It is an encouraging factor for all of us that we have achieved the 100th green corridor in Pune. The traffic police has always been of great help to us. Today, they gave priority to the heart and then made way for the Chief Minister to proceed. The journey would not have been made possible without the help and assistance of the traffic police."

Peritoneal dialysis to be included in the National Dialysis Programme

The Health Ministry announced the Pradhan Mantri National Dialysis Programme (PMNDP) in 2016 and in the first phase haemodialysis centres were to be set up in all districts. Now peritoneal dialysis is to be included in the ambit of the programme as it avoids infrastructure costs, maintenance, staffing, and offers patient autonomy and flexibility in lifestyle since it can be done at home. Therefore, the Health Ministry has released guidelines for establishing peritoneal dialysis services which will serve as a comprehensive manual to States that intend to set up peritoneal dialysis. The guidelines were formulated after an extensive consultative process that was coordinated by the National Health Systems Resource Centre and an expert committee. Prof. Vivekanand Jha, Chair of the committee said that mass-based peritoneal dialysis programmes have the potential to substantially bring down the cost of treatment. Dr. Narayan Prasad, Secretary General, Indian Society of Nephrology and a member of the expert committee emphasised the need to develop simple self-care tools for people on peritoneal dialysis to prevent development of complications.

First bone donation in Pune carried out successfully

The first bone donation in Pune took place at the state-run Sassoon General Hospital on 25th August 2019 when a 49-year-old ex-serviceman's bones and corneas were donated to the hospital. Mrs. Arati Gokhale, Central Coordinator, Zonal Transplant Coordination Centre, Pune said the donor, Mr. Vijay Maruti Kadam, who had served in the army for 17 years, died after he hanged himself. When his body was brought to Sassoon Hospital by the police, his family was approached by the eye donation counsellor, Ms. Manisha Pandhare, for cornea donation where Kadam's wife, nephew and cousin gave their consent. It was felt that the family may consider other tissue donation as well, so Mr. Akash Salve, Transplant Coordinator, MOHAN Foundation counselled the family about skin and bone donation to which they agreed. After the medico-legal formalities were completed, a team of orthopaedic surgeons at Sassoon Hospital retrieved a few ribs and the iliac crest ensuring that there was no disfigurement. The bones were transported from Pune by Mr. Salve and handed over to the Bone Bank at Tata Memorial Hospital, Parel, Mumbai.

Liver transplant registry initiated by Liver Transplantation Society of India

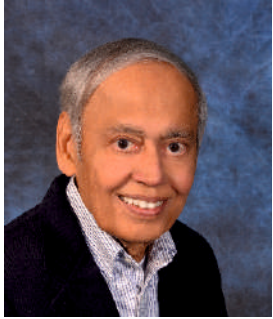
Making transplant data from India available is much needed for credibility within the country as well as internationally. The Liver Transplantation Society of India (LTSI) initiated a voluntary liver transplant registry on 15th August 2019. Eleven hospitals from Delhi NCR, Kerala, Karnataka and Tamil Nadu reported data of 74 transplants in a little over two months. Dr. Sonal Asthana, HPB and Multiorgan transplant surgeon from Bengaluru and Secretary of the Indian Liver Transplant Registry said that the registry aims to collate national data of the procedures and their outcomes.

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 I, Sunil Shroff, hereby declare that the particulars given above are true to the best of my knowledge and belief.
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A Recipient of Two Kidney Transplants



By
Swami Swaminathan

After growing up in India, I migrated to the U.S.A in my late twenties. Throughout my working life, I was active and healthy and had no major health problems. Then, suddenly one day, I got violently sick. Whenever I ate, I vomited shortly afterwards.

I was always tired. Initially, I thought that my sickness was due to jet lag from my trip to India. After a few days of suffering, I went to the hospital. After numerous medical tests, doctors at the hospital told me that my kidneys had failed and I was immediately put on dialysis treatment in May 2004. When I began dialysis, I had a catheter inserted in my chest to draw and filter my blood through the Kidney Dialysis machine. Later on, a doctor created a fistula in my arm through a minor surgical procedure. The fistula took about four weeks before it could form and be used for dialysis. My dialysis sessions lasted three hours each, and I had three sessions per week. However, this time frame can vary, based on individual patient's needs.

I developed infections repeatedly while I was on the catheter; a staph infection necessitated a hospitalization in my local hospital and subsequently at a city hospital, located 100 km away. When the city hospital changed my antibiotic, I began to improve immediately. Also, dialysis treatment can deplete the body of certain nutrients. To compensate, dialysis centers add supplements, such as calcium, Vitamin D and iron during the treatment. Due to over-prescription of iron (Epogen), I developed Non-Hodgkins Lymphoma and received chemotherapy treatment in 2006, in conjunction with the ongoing dialysis treatment. The stress of undergoing chemotherapy and dialysis treatments took a toll on me and I grew progressively weaker. I consulted an Integrative Medicine Doctor, who prescribed Glutathione treatment. It helped me to regain my strength and, in effect, saved my life.

Lesson Learned: My father and my first cousin died from kidney failure. I was never informed about their disease. Since I had not been aware of my family's history, I could not take any preventative actions ahead of time. In order to prevent such recurrence for my siblings and other relatives, I sent a detailed letter about our family's health history and about my health problems. In that letter, I also asked them to go for medical check-ups every two years in order to test and verify the adequate functioning of their kidneys. I hope other families in India do inform their siblings about their families' inherited diseases and about the need for undergoing appropriate medical check-ups on a regular basis.

When I got better, I successfully went through a series of requisite medical tests and qualified for getting a kidney transplant. After my qualification, I was put on the Waiting List for receiving a kidney from a deceased donor. Unlike with other organ transplants, a person can donate one of his/her kidneys and continue to live a normal life with the remaining kidney. Also, a live-donor kidney functions better and lasts longer than a deceased-donor kidney. Based on these facts, I was encouraged by the kidney transplant hospital to seek a live-donor kidney. Initially, two of my sisters in India expressed interest in donating one of their kidneys to me. However, when I asked them to be tested to see if their blood type matched mine, they got "cold feet" and did not comply. Upon checking with other kidney patients, I found that they had similar experiences with their relatives and friends also.

Solution: "The Kidney Donor's Journey - 100 Questions I Asked Before Donating My Kidney" by Ari Sytner is an excellent book for potential Live Kidney Donors and their intended kidney recipients. In the author's own words: "I wrote this book to serve as a bridge to educate and empower ordinary people to see a complete picture of the Kidney Donation Road-map." I would recommend that a copy of this book or a video based on the contents of this book be made available at dialysis centers and transplant hospitals, and even on YouTube, for educational purposes for both potential donors and recipients.

After five years on kidney dialysis, I received my first kidney transplant from a deceased donor in October 2009. Due to medical errors, my transplanted kidney lasted only three months and, as a result, I went back on dialysis treatment for an additional three years. After undergoing further medical tests, I was re-qualified for my second transplant. Finally, I received my second transplant in 2012. My second kidney has been functioning satisfactorily for the past seven years.

Follow the Rules: I strictly followed the prescribed dietary and fluid intake restrictions while on dialysis. These restrictions were lifted following my transplant. I take all medications, as prescribed. I know that doing otherwise could result in the failure of my transplanted kidney. In addition, doing regular physical exercises while on dialysis and after the transplant has made me feel better, both physically and mentally.

I know that many of my relatives and some of my friends in India are lax in taking prescribed medications for their medical conditions. However, failure to take the prescribed medications, especially immune-suppressant medications, as prescribed, will result in the failure of the transplanted kidney.

Caregiver Role is Critical: Dialysis patients require kind and compassionate care when they are on dialysis. Care giving should continue even after they have received transplants and stopped only when the patients are able to take care of themselves.

...continued on page 8



FORT organises Summit on 'Organ Care Systems & Transportation' in collaboration with MOHAN Foundation



Dr. Marti Manylich, President, TPM-DTI Foundation, Spain lighting the lamp



Dr. Promila Gupta, Principal Consultant, DGHS addressing the audience



Dr. Sumana Navin, Course Director, MOHAN Foundation asking a question to Dr. Maria Paula Gomez, TPM-DTI Foundation, Spain

heart transplantation in Australia. Dr Darius Mirza (Queen Elizabeth Hospital, Birmingham) elaborated on the role of Organ Care Systems (OCS) in liver transplantation and experience in India. Dr. Maria Paula Gomez (Executive Director TPM-DTI Foundation, Spain) shared the TPM model for deceased organ donation in India – leading practice implementation. Dr. Avnish Seth, Director, FORT summarised the main discussion & action points at the end:

- Organ Care Systems are invaluable for all organ transplants. Challenges include the cost, number of machines, transportation by air and acceptability by transplant teams
- Marginal or DCD donors should be utilized
- Newer techniques to prolong the shelf life of organs
- Feasibility of the use of helicopters and drones
- Involvement of the critical care teams



Dr. Sunil Shroff, Managing Trustee, MOHAN Foundation discussing the use of drones for transporting organs from one place to another

Critical Care Workshop on Brain Death and Organ Donation held in BJ GMC & Sassoon Hospital, Pune



Dignitaries lighting the lamp during the inaugural function

A Critical Care Workshop on Brain Death and Organ Donation was held in BJ GMC & Sassoon Hospital, Pune on 24th August 2019. The faculty members were Dr. Urvi Shukla from Aditya Birla Memorial Hospital, Dr. Abhijeet Deshmukh from Ruby Hall Clinic, Mrs. Arati Gokhale, Central Coordinator, ZTCC, Pune, Mrs. Lalitha Raghuram, Country Director and Dr. Sumana Navin, Course Director from MOHAN Foundation (MF). The workshop coordinators were Dr. Jimmy Gupta, Mr. Akash Salve and Mrs. Jaya Jairam also from MF. About 110 delegates registered including doctors, nurse educators, ICU nursing staff, transplant coordinators and social workers working in the field of organ donation.

At the inaugural function, the Guest of Honour Dr. Murlidhar Tambe (Deputy Dean), Dr. Ajay Chandawale (J.J Hospital Dean), Dr. Ajay Tawre (Medical Superintendent), Dr. S. A. Sangle (HOD Medicine), Mrs. Arati Gokhale, and members of the MOHAN Foundation team lit a lamp. The workshop concluded with a valedictory function and certificate distribution. This workshop was supported by SBI Foundation & SBI DFHI Ltd.



Dr. Murlidhar Tambe felicitating Dr. Sumana Navin, Course Director, MOHAN Foundation



A participant receiving her certificate from Mrs. Lalitha Raghuram, Dr. S A Sangle (HOD Medicine), Mrs. Jaya Jairam and Dr. Sumana Navin



Group Photo

Fitness Among Transplant Professionals



Dr. Gomathy Narasimhan
Senior Consultant, Abdominal Trauma, HPB Surgery, Liver and Renal Transplantation
Dr. Rela Institute & Medical Centre, Chennai

Healthcare professionals and health – Interestingly they don't seem to go hand in hand when it comes to the "Health of Healthcare professionals". This has been shown in any number

of studies. The reasons quoted in a survey among healthcare professionals from Greece published in 2019 are lack of time (58%), erratic schedules (41%) and pure negligence (37%).

Let us for a moment apply these reasons to the life of a transplant professional and we see all these factors multiplied by a factor of ten or more. Are we then setting the stage for higher incidence of "lack of health" among transplant professionals???

Well, let us view the same situation from the disease and the patient perspective. The epidemiology of the disease process leading to transplantation is predominantly non communicable disease (NCD). In liver transplantation too, the focus has now shifted from infective aetiology to Non-alcoholic steato hepatitis (NASH) or Non-alcoholic fatty liver disease (NAFLD), which falls under the category of NCD. The outcome of this group of patients depends not just in the immediate success of transplantation but in the long-term survival and quality of life. This can only be achieved by constant education by the transplant professional to the patient about the need to follow preventive measures (Healthy Lifestyle!) which will help avoid recurrence of the original disease in the transplanted organ.

A 2013 study published in the International journal of obesity concluded that providers perceived to be overweight or unhealthy may be vulnerable to biased attitudes from patients, and that providers' excess weight and lack of fitness may negatively affect patients' perceptions of their credibility, level of trust and inclination to follow medical advice. As a result, the responsibility to stay healthy is multiplied for a transplant professional as opposed to a healthcare professional in another speciality. How can we go about this given that at least two of the factors quoted in the Greek study are REAL in the field of transplantation? The new physical activity strategy for the WHO European region (2016 -2025) seeks to initiate efforts at every administrative level to promote exercise among all age groups and throughout their lives. Several innovative methods have been adopted by programs world over to promote health awareness among transplant professionals considering the long work

hours and the frequent emergency procedures that must be undertaken. One such is the availability of a gymnasium inside the hospital premises at Seoul university. Very often, a small spark or a trigger is what is required to get a "health awareness" epidemic started in a unit. It then follows a cascade where teams register for runs, sign up at a nearby gymnasium to get a quick workout in between the long day's schedule, the cafeteria gets sensitised to the "low carb - high protein" requirement of the health-conscious professionals and so on and so forth.

In the words of Mr. Nagaraj, a post liver transplant patient who recently participated in the world transplant games held in UK "When I told my doctors I was walking 5 km every day after my transplant, they encouraged me to participate in the World Transplant Games and I did a half marathon. I took the advice from my doctors very earnestly because I have seen them discuss fitness-related matters among themselves and their office displays their participation in sporting events etc. It was a huge inspiration to me." I don't think we, as transplant professionals, are left with much of a choice – we must take care of our health both in our own interest and in our patient's interest!

Fitness for transplant recipients



Dr. Dinesh Jothimani is the
Director of Hepatology at
Dr. Rela Institute and Medical
Centre and an Ultra
Marathoner himself.

Patients undergoing transplantation are in profound catabolic state leading to malnutrition, generalised weakness and easy fatigability.

This could be due to various reasons such as the disease process, poor appetite, nausea, medications related, altered bowel habit, recurrent infection, repeated third space fluid aspiration etc. These patients have poor exercise tolerance and most of them have restricted mobility.

Transplant is a major surgery conducted on patients with severe end organ damage, with failed medical therapy. Presence of restricted mobility and physical inactivity can delay postoperative recovery. For these reasons, physically inactive patients may get delisted from transplantation. Therefore, we encourage patients to be physically active while waiting for transplantation. As clinicians, we should reiterate at every visit regarding physical fitness.

There are no set protocols available for these patients. In general, we recommend at least 45 minutes of mild physical activity such as walking or cycling or regular physiotherapy-aided mobility always helps. Regular activity helps both physical and mental well-being as they await a transplant.

On an equally important note, recovering from a transplant involves changes in haemodynamic as well as metabolic parameters, and is a gradual and continuous process with need for special attention to nutrition and healthy lifestyle.

Low physical activity and sedentary lifestyle following transplantation may lead to obesity causing poor quality of life. Coupled with immunosuppressive medications sedentary lifestyle can increase the risk of cardiovascular diseases, diabetes, dyslipidemia and fatty liver disease. The latter could be worrisome if the indication for liver transplant was NASH cirrhosis. Cardiovascular disease remains the leading cause of death in patients following solid organ transplantation. Improving fitness in transplant recipients is important to reduce long-term morbidity and mortality. Multiple methods should be adopted to encourage patients to carry out physical activity. Importance of exercise and diet should be discussed on every clinic visit, modern gadgets such as smart watches, mobile applications can be utilized to monitor activity.

Recipients should be encouraged to walk or jog at least 4 times a week. In the West, patients participating in Transplant Games is not an uncommon scenario, but rarely seen in our population. Mr. Nagaraj, a post liver transplant recipient, recently proved this notion wrong.



Mr. Nagaraj (Liver Recipient)
holding the Indian flag

In his words- "After transplant, I decided that I will focus on my health and stay fit. During one of my Clinic visits, my doctor encouraged me to start jogging and mentioned about World Transplant Games for the recipients. I read more about the games and that motivated me to participate in it. I started training very intensively by running 10 to 12 km every day. I also set up a Home

Gym for weight training and trained regularly. I participated in 21 km run (Half Marathon), 1500 m race, 5 km road race and 100 m relay at World Transplant Games (WTG) that was held at Newcastle, UK in August 2019. I recently joined swimming to improve my stamina. Every day I spend one hour running and one hour swimming. Alternate days I do weight training. It is two years after my transplant and I have not fallen sick. My medication has been reduced to the lowest level. I am sure that the physical activities are helping me to stay fit and healthy. I will participate in the next World Transplant Games which will be held at Houston, USA in May 2021. Hopefully, will win a few medals!"

...Recipient speaks continued from page 4

In my case, my wife was my caregiver and she provided all the support that I needed. Caregiver training and Support Groups for their periodic interactions would be a good idea.

Setbacks Can Happen: As mentioned earlier, dialysis patients can get secondary infections and other diseases. Also, their transplanted kidneys could fail. They and their caregivers should be vigilant and take appropriate steps to overcome setbacks.

My Seva: Opportunities to Help Others

1. Patient Support Groups: Most dialysis centers in the U.S.A. have Patient Support Groups. With the encouragement of the Social Worker at my dialysis center, I participated in a Patient Support Group. I and other dialysis patients from my center, as well as from the nearby centers, attended the Patient Support Groups meetings at an outside location. We had the opportunity to compare notes about our respective dialysis treatments, our medications and our efforts to get on the Transplant Wait List. We all benefited from sharing our experiences and through our interactions.

2. PAC (Patient Advisory Council) Membership: I participate in meetings set up to monitor, improve and maintain the quality of services provided by dialysis centers in both my Regional Quality Monitoring Network (includes New Jersey, Puerto Rico and Virgin Islands) and the National Coordinating Center that has the overall responsibility for these activities.

Participants discuss the following in the meetings.

- a) what we had learned as patients at our respective dialysis centers
- b) changes and improvements that could help other dialysis patients and those patients who are on the Waiting List for transplants
- c) our inputs when the Administrators discuss changes/improvements they want to recommend to dialysis centers

Recently, I proposed that a pharmacist be employed at every dialysis center in my region to examine all medications every dialysis patient is taking. In addition to the kidney disease, many dialysis patients have other health problems, such as diabetes, heart problems. As a consequence, they receive medications from many specialists and these specialists do not consult each other when they prescribe the medications. A pharmacist will be able to examine the prescriptions for every patient, identify those medications that either alone or in combination with the other prescribed medications, could affect the health of patients and relay them to the specialists who prescribed them. I also included two medical research reports as evidence for my proposal.

After lengthy discussions over two sessions, my regional network administrators have decided to conduct a trial using a pharmacist in one of the dialysis centers within the region.

3. My Gratitude:

Every night, I pray to God and express my gratitude for the following:

- God's blessing enabled me to receive two kidneys anonymously from total strangers for my transplants
- Due to Government regulations, kidneys from deceased persons are donated anonymously by their close relatives. Therefore, my nightly prayers include a request to God to bestow his blessings to the two deceased donors and their close relatives.

The 22nd edition of the Summer World Transplant Games (WTG) organised by the World Transplant Games Federation was held from 17th – 23rd August 2019 in Newcastle Gateshead, UK. Close to 2250 athletes from 60 nations competed in the games. The Indian contingent comprised Ms. Reena Raju, Manager and 14 athletes – 11 organ recipients and three donors. The team brought home four gold and three silver medals. We congratulate the winners and all the participants, and Ms. Reena Raju for making India proud!

The World Transplant Games were first held in 1978, in Portsmouth, also in the UK; it had less than 100 participants from only five countries. The World Transplant Games Federation was officially formed in 1987 and now has nearly 70 member countries worldwide. It celebrates successful transplantation 'powered by the gift of life' through unique events – namely the Summer and Winter World Transplant Games. The Summer World Transplant Games are held every two years and the Winter Games in the intervening years. The WTG gives recipients the motivation to strive towards full rehabilitation through exercise, camaraderie, and healthy living. They also provide them with a way of saying 'thank you' to those who made it all possible – the donors, their families, health care professionals, researchers and carers. Without them, there would be nobody at the starting line...

We share some inspiring stories about the team –

The manager who put her heart and soul into the WTG 2019



Ms. Reena Raju holding the Indian flag



Mr. Kishore Suryawanshi (kidney recipient) and Ms. Reena Raju (double heart transplant recipient) holding the Indian flag

Ms. Reena Raju, the founder of the NGO Light a Life – Reena Raju Foundation, is a fighter. Her fighting spirit is exemplified by the fact that she has undergone two heart transplants. Her fitness played a key role during the second transplant and in fact the doctors said that it was only because she had kept herself so fit after the first heart transplant that she was even able to undergo the second transplant. Reena who won medals at the WTG held in 2017 in Spain was the manager this time around for the WTG 2019.



Recipients and donors at the World Transplant Games

She had not planned on even taking up this role because she was suffering from endometriosis, but she found out that the main challenge for the athletes was funding. She approached many associations and institutions, but help was not forthcoming. Finally, Reena decided to don the mantle of manager and raised funds through her own NGO.

Brothers-in-arms

Anil Srivatsa calls it his Gift of Protection to his brother when he donated one of his kidneys to him in 2014. Dr. Arjun Srivatsa, a neurosurgeon was diagnosed with chronic kidney disease and needed a transplant. He approached his brother Anil and asked him if he could donate a kidney. Anil said while there were questions in his mind about how his family would cope if something were to happen to him and about life with one kidney, but the support from his family and his brother's need enabled him to make the decision to donate. Seeing his brother getting back to his work as a neurosurgeon and saving lives gave new meaning to his decision. Anil has travelled 85,000 km across 41 countries over 300 days creating awareness about organ donation. Dr. Arjun Srivatsa won gold in Golf, while Anil Srivatsa won gold in ball throw at the WTG 2019.



The Srivatsa brothers

Daring daughter

Ankita Shrivastava from Bhopal is now 25 years old. She was just 21 when she donated a part of her liver to her mother in 2014. Unfortunately, her mother passed away a few months after the transplant. Despite the mental trauma of losing her mother and a physical setback, Ankita started training for the WTG just 12 months later. She won three medals at the WTG 2019 – golds in long jump and ball throw and silver in the 100 m race.

World Transplant Games 2019

It's a hat-trick

Balveer Singh, 41, from Lucknow underwent a kidney transplant in 2011. He is the only Indian to have won golds in badminton at the 2015 and 2017 World Transplant Games, and he made it a hat-trick of medals by winning a silver in the same sport this time. He said that he wanted to break the myth that a person is not fit once he or she goes through a transplant.

Role model

Digvijay Singh Gujral is from Jabalpur, Madhya Pradesh and underwent a kidney transplant in 2011. Fitness became his focus after his transplant, he is now a professional bodybuilder. He is a role model for transplant recipients. He won a silver in squash at the WTG 2019.

Love in the time of 'dialysis'



Mr. Kishore Suryawanshi (kidney recipient) and a fellow athlete

Kishore Suryawanshi met his wife-to-be Aarti Kashikar while they were both on dialysis awaiting kidney transplantation. Kishore received his kidney from his sister and Aarti from her mother. Kishore is a sprint specialist and this was his first time at the WTG. Kishore also runs an NGO-Chaya Kidney Foundation-with his wife to counsel people on transplantation.

Made for each other



Dr. Arvinder Singh Soin, Chairman, Institute of Liver Transplantation and Regenerative Medicine(right) with liver transplant recipient Mr. P K Rattan (left), his wife who was the donor Mrs. Roopa Arora (second from left) and his family

Mr Praveen Kumar Rattan, a 49-year-old Senior Accounts officer in the Engineering Department of Chandigarh Administration is a shining example that a person can lead a healthy life after undergoing a major surgery like a liver transplant. Praveen was diagnosed with end-stage liver cirrhosis in December 2010.

He soon started treatment with Dr Arvinder Soin at Medanta – The Medicity who recommended a liver transplant. Praveen's wife Roopa Arora agreed to be the brave donor and Praveen underwent a transplant on July 05, 2011. Roopa is a government school teacher in Chandigarh. The couple leads a healthy, productive life post the transplant and are an inspiration in many ways.



Liver transplant recipient Mr. P K Rattan and his wife Mrs. Roopa Arora (Liver donor) holding their medals



Mr. P K Rattan and his wife Mrs. Roopa Arora with a fellow athlete

Praveen and Roopa competed in track and field, race walk and cycling in the 40-49 age category at the WTG 2019. The couple were also the first Indians to participate in the Transplant Games of America in August 2018 where they won medals. Both Praveen and Roopa are thankful to their new lease of life and are keen on 'giving back'. They are doing their bit by counselling grieved families to consider deceased organ donation and creating awareness amongst people about organ donation. Both of them have also recently finished with their Master in Mass Communication and Journalism and are now pursuing their Masters in Social Work to take forward their passion in promoting organ donation and helping individuals awaiting transplants. The couple had a daughter before the transplant and post the transplant the couple was blessed with a son in 2014. Praveen says, "For me, my hero will always be my wife who gave me this precious gift."

"The Rattans' is a truly inspiring story. This donor-recipient couple had a baby after the transplant and recently became India's first to participate in the World Transplant Games as a couple! Shows how normal the recipient and donor are after a liver transplant!"

Dr. Arvinder Singh Soin

Chairman, Institute of Liver Transplantation and Regenerative Medicine
Medanta – The Medicity

The other participants at the WTG 2019 were -

- Amar Nath Tanwar, Haryana, Kidney recipient
- Vishnu Nair, Kerala, Kidney recipient
- Karhun Nanda, Haryana, Heart recipient
- Davis Jose Kollannur, Kerala, Double kidney recipient
- Raghavendra Nagaraj, Tamil Nadu, Liver recipient
- Sridhar M.J., Karnataka, Kidney recipient



Mrs. Roopa Arora (Liver donor) with a fellow athlete



Mr. Nagaraj (Liver recipient) in front of Gateshead International Stadium



Mr. Nagaraj at the start line

MOHAN Foundation participates in the 16th Congress of the Asian Society of Transplantation held in Greater Noida, Delhi-NCR

The 16th Congress of the Asian Society of Transplantation (CAST) and the 30th Annual Conference of the Indian Society of Organ Transplantation (ISOT) was held from 29th September to 2nd October, 2019 at India Exposition Mart Limited (IEM), Greater Noida, Delhi-NCR.

Deceased Donor Organ Transplantation in Asia – Invited Lectures and Panel Discussion



Dr. Sunil Shroff, Managing Trustee, MOHAN Foundation introducing the session on Deceased Donor Organ Transplantation in Asia

Dr. Sunil Shroff, Managing Trustee, MOHAN Foundation was invited to introduce a series of lectures by a highly qualified group of experts on 'Deceased Donor Organ Transplantation in Asia' and then moderate a panel discussion on the topic. Dr. Shroff gave the introduction followed by perspectives from India (Dr. Vasanthi Ramesh), Turkey (Dr. Mehmet Haberal), Iran (Dr. Katyoun Najafizadeh) and China (Dr. Aijun Pan). Each of the speakers gave an overview of the regions in their country doing deceased donor transplantation, attitude of the public and medical professionals to organ donation, main provisions of the transplant law, number of live, DBD & DCD donation transplants done in the last 10 years, main challenges facing the deceased donation programme when it first started and at present, and recommendations to overcome these challenges.

Following this Dr. Shroff moderated the panel discussion. The panelists included the speakers along with representatives from India (Dr. Arti Vij), Thailand (Dr. Adisorn Lumpaopong), South Korea (Jong Cheol Jeong) and Japan (Kenji Yuzawa). One of the pertinent questions was – 'How can India help other SAARC or South Asian Countries in developing the Deceased Donation programme.'



Dr. Sunil Shroff, Moderator of the panel discussion on Deceased Donor Organ Transplantation in Asia with panelists Prof. Mehmet Haberal, Turkey and Dr. Vasanthi Ramesh, Director, NOTO, India



Dr. Sunil Shroff (second from left) with the panelists for the discussion on Deceased Donor Organ Transplantation in Asia

Deceased Donor Transplantation – Symposium

Dr. Sunil Shroff also moderated a session on 'Deceased donor Transplantation – A case-based Symposium.' The panelists included Dr. Ashish Sharma, Dr. Vikas Jain, Dr. Manisha Sahay, Dr. Umesh Oza and Dr. Syed Jamal Rizvi. A system of voting was included in the session to get the opinion of the audience as well.



Dr. Sunil Shroff, Managing Trustee, MOHAN Foundation explaining the voting system while moderating the session on Deceased Donor Transplantation – A case-based Symposium



Dr. Sunil Shroff (extreme left) with the panelists for Deceased Donor Transplantation – A case-based Symposium

Annual Transplant Coordinators' Conference

The Annual Transplant Coordinators' Conference was organised by the National Organ and Tissue Transplant Organization (NOTTO) in association with the Indian Association for Transplant Coordinators (IATC) under the aegis of AST and ISOT on 30th September and 1st October 2019. It was supported by PSG Hospitals and the Knowledge Partner was ORGAN India. At the inauguration, Prof. Anant Kumar, Organising Secretary, CAST 2019 and Dr. Vasanthi Ramesh, Director, NOTTO were felicitated.



Prof. Anant Kumar, Organising Secretary, CAST 2019 being felicitated by Mr. C.B. Chandrasekaran, Manager-Medical Tourism and Multi-Organ Transplantation, PSG Hospitals and President IATC



Dr. Harsha Jauhari (middle) and Dr. Avnish Seth, Director, FORT (right) felicitating Dr. Vasanthi Ramesh, Director, NOTTO

Dr. Sumana Navin, Course Director, MOHAN Foundation was invited as faculty for three sessions at the conference. During her session 'Scope of transplant coordination in India' Dr. Sumana highlighted the various roles donned by transplant coordinators in India, their achievements, and the scope for coordinators. She also compared their role in India with other countries such as UK, Spain, Australia, and USA.

In her session 'Conditional donation – Is it a way forward to increase the donor pool' she put forth questions to the audience with the help of various case scenarios. There was an animated discussion about conditional donation to family members and to Indians only, and the need for transparency in organ allocation.



Dr. Sumana Navin, Course Director, MOHAN Foundation speaking about the scope of transplant coordination

She also chaired the session on 'Transplantation of Human Organs Act (THOA) – Issue based discussions.' The talks 'Live donor transplant: lacuna in THOA in handling separated donor' and 'Deceased donor transplant: Definition of adult vs paediatric – What does THOA say?' brought about interesting discussions about the difference between a divorced and a separated couple, how does adult deceased donation differ from paediatric donation, the definition of the word minor (not paediatric) in the law, and the forms that are used. The session also touched upon the procedure for unclaimed bodies and whether it has been done in India.

Eminent national and international faculty, both transplant coordinators and doctors, covered various topics, some of which were Initiatives by the Indian Government to improve the organ donation programme, Ethics in transplant coordination, Contribution by various NGOs in promoting the cause, Counselling families for hand and skin donation, Challenges in documenting swap donation, Women and kidney transplant, Ideal and marginal donor in deceased donor transplant – what a coordinator should know, Donor selection in living donor transplant, Identification and certification of brain death in Australia – how is it different from India.

There were two panel discussions – one on 'Brain death – "Clear the air" in the 25th year after THOA' and the other on what India requires to meet the world standards in organ donation and transplantation. The second panel had State regulatory body representatives from Kerala, Pune, and Telangana sharing their views from the dais with Dr. Vasanthi Ramesh, Director, NOTTO moderating the discussion.



Ms. Rajinder Kaur, Transplant coordinator PGIMER, Chandigarh (extreme right) and team doing a role play on brain death and organ donation

An interesting twist to the sessions was the role plays that were factored in as part of the schedule. Various groups brought out in creative ways what happens during a counselling session with the family and the organ donation process and discussion between donor hospitals and recipient hospitals. Participants were also given the opportunity to present during the free paper session and to display their posters.



(left to right) Dr. Sanjay Nagral being felicitated by Mr. J. Nethaji, DGM-Multi-Organ Transplantation, MGM Healthcare and Mr. Anesh P.V, Organ Transplant Coordinator, Kerala Network for Organ Sharing



Ms. Trilly Mathew, Head – Organ Transplant Coordinator, Nayati Healthcare Research Pvt. Ltd. (L) and Dr. Rajasekhar Perumalla(R) felicitating Dr. Manisha Sahay



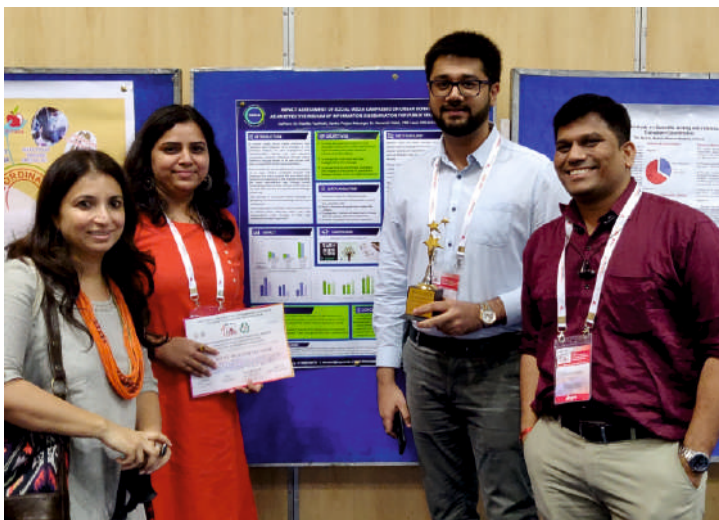
(L-R) Lt. Col. Sandhya Nair (Retd.), Senior Transplant Coordinator, Batra Super Speciality Hospital and Research Centre receiving a memento from Mr. Senthil Kumar, Senior Transplant coordinator, Govt. Stanley Hospital, and Mr. J. Nethaji, DGM-Multi-Organ Transplantation, MGM Healthcare



(left to right) Mrs. Arati Gokhale, Central Coordinator, ZTCC Pune and Dr. Sumana Navin, Course Director, MOHAN Foundation handing over the Best Free Paper Presentation Award to Mrs. Rathir, PSG Hospitals, Coimbatore



(left to right) Mrs. Arati Gokhale, ZTCC Pune, Dr. Noble Gracious, Mrithasanjeevani-KNOS, Dr. Vasanthi Ramesh, NOTTO and Dr. G. Swarnalatha, Jeevandan Telangana during the panel discussion on Emerging towards world's standards – What India needs



(left to right) Ms. Sunayana Singh, Dr. Geetika Vashisth, Dr. Devansh Vaish and Mr. Sourabh Sharma from ORGAN India with their poster which won the Best Poster Award



Ms. Ann Alex, Programme Associate, MOHAN Foundation making a presentation on Impact of Myths on Organ Donation and Transplantation in Movies and Television Serials on the Public in India



Ms. Ann Alex sharing on why it is important to talk about Movies and Television depicting false information on organ donation



Sadhna Mundari was a shy young woman. She kept mostly to herself. While not very social, she was extremely passionate about her career. As an Apparel Designer and Fashion Merchandiser, she had ambitious plans for her future.

These plans were brutally cut short on the unfortunate day on August 08, 2019 when Sadhna was declared brain dead at Artemis Hospital (Gurugram).

Sadhna had fallen down in her bathroom a week back on July 31. While there was no apparent injury, she started getting headaches for which a neurologist was consulted who advised admission but Sadhna did not take that very seriously.

On August 05, 2019 she became dull and unresponsive and her friends took her to a hospital in Noida where she received primary treatment. She was later shifted to Artemis Hospital for further management where CT scan showed that she had brain haemorrhage. She had to be kept on ventilator support and on August 8, Sadhna was declared brain dead. She was only 27 years old.

When the doctors at Artemis Hospital along with MOHAN Foundation counsellor broke this news to Mr. Dashrath Mundari (Sadhna's father), he showed amazing calm and fortitude. He understood brain death and accepted that he had lost his young daughter. This gave courage to the team to bring up the subject of organ donation.

Amid all the grief and tragedy that had befallen him and his family, the brave man gave consent for organ donation. He understood that even though his daughter was no more, she was in a position to save many struggling to be alive. His only concern was that his daughter's organs be used wisely for the needy. Both her kidneys and her liver were used to save other people's lives. Corneas were also retrieved.

Sadhna was born and brought up in Bilaspur. She did her Bachelor's in Design from NIFT, Gandhinagar and worked in the city for some time. In 2014, she moved to Gurugram and started working with IFAZONE as Fashion Designer and Merchandiser.

Sadhna displayed an interest in design from a very young age. Her mother recalls her childhood days when she used to draw designs and make clothes for her dolls. She pursued that interest and turned it into her vocation. Her mother said, Sadhna was a "laadli" in the whole family and that they wholeheartedly supported her decision in pursuing a career in Fashion Designing. The heartbroken mother could not hide the pain of losing her daughter and broke down while remembering her.

Sadhna's father, Mr Mundari, is a Manager at SARB (State Asset Recovery Branch) at SBI, Bhilai. He was the only family member that had come to the hospital from Bhilai and therefore alone when approached with this challenging request. He however said there was no doubt in his mind as he took this difficult but 'right' decision. He had to convince Sadhna's mother and sister back in Bilaspur of his decision. He shared that it was not an easy thing to do.

A close friend of Sadhna shared something extraordinary about her nature. He said that she was a very pure soul and if someone did something wrong she would always blame the situation, never the person. He also shared that the two of them had spoken about organ donation and that he wasn't surprised that her father agreed as this is what she would have wanted him to do.

Her last rites were performed with her family in Bilaspur, Chhattisgarh. She died a young, untimely death but remains alive in many people.

-Shafia Malik, Transplant coordinator, Artemis Hospital, Gurugram

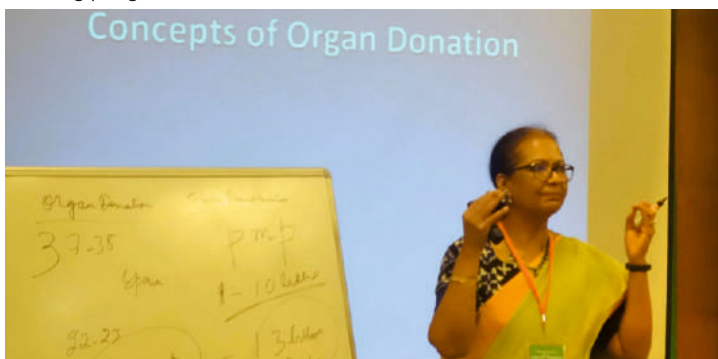


The team paying their respects

7th FORT-MOHAN Foundation Training on Transplant Coordination held at FMRI, Gurugram

MOHAN Foundation in partnership with FORT (Fortis Organ Retrieval & Transplant) successfully completed the 7th FORT-MOHAN Foundation training on Transplant Coordination from July 29 to August 2, 2019. The training was held at Fortis Memorial Research Institute (FMRI), Gurugram. A total of 61 delegates of varied profiles - transplant coordinators, doctors, nurses, medical social workers, senior managers, medical superintendent and counsellors from 8 states namely, Uttar Pradesh, Haryana, Maharashtra, Rajasthan, Delhi, Kerala, Punjab, Andhra Pradesh of India and a few from Nepal, attended the training.

A panel discussion and open house was held on the last day where the queries of the participants were addressed. The panelists were Dr. Vasanthi Ramesh (Director, NOTTO), Dr. Sunil Shroff (Managing Trustee, MOHAN Foundation) and Dr. Sumana Navin (Course Director, MOHAN Foundation). The panel discussion was moderated by Dr. Avnish Seth (Director, FORT) and Ms. Pallavi Kumar (Executive Director NCR, MOHAN Foundation). Certificates were distributed by Dr. Sunil Shroff & Dr. Avnish Seth to all the delegates who had successfully completed the training programme.



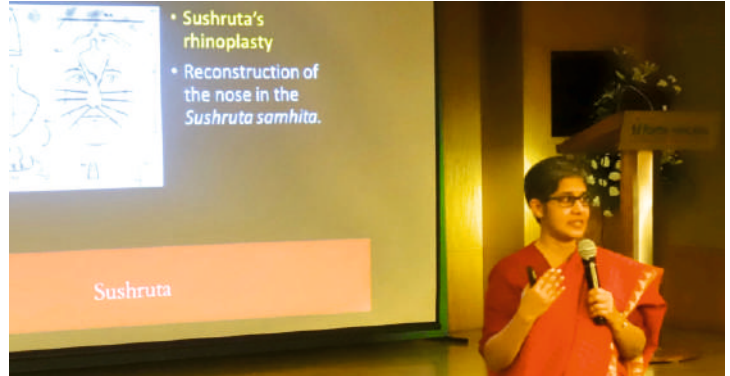
Mrs. Lalitha Raghuram, Country Director, MOHAN Foundation explaining the basic concepts of organ donation



A participant asking a query regarding a legal form given in the law manual provided by MOHAN Foundation



Participants engaged in role play



Dr Sumana Navin, Course Director, MOHAN Foundation taking a session on history of organ transplantation



Participants of the 7th FORT - MOHAN Foundation Training on Transplant Coordination

One Week Transplant Coordinators' Training Programme Held in Pune



Dignitaries at the inaugural function



Ms. Pallavi Kumar, Executive Director NCR, MOHAN Foundation felicitating Dr. Shehroz Bombaywala, Intensive Care Specialist, Yashodhara Super-Speciality Hospital, Solapur



Participant Dr. Nikhat Parveen Shaikh, Healthway Hospitals, Goa taking part in the session on the role of media



Group activity on Transplantation of Human Organs Rules (Forms)



Dr. Shailesh Puntambekar, Galaxy Care Multi-Specialty Hospital speaking about the first successful uterine transplant in India



Training Programme



Panel discussion by participants on the ethics of organ donation and transplantation

At the training, there was an intense experience-sharing session by 21-year-old Shreya Siddanagowder, Asia's first bilateral above elbow hand transplant recipient. The participants were inspired by Shreya's grit and determination and were full of admiration for Shreya's parents. Shreya's mother Suma was present as well. Dr. Shailesh Puntambekar from Galaxy Care Multi-Speciality Hospital elaborated on the unique transplant that he and his team performed – the first uterus transplant in India on 18th May 2017. It was successful with the birth of a baby girl, Radha, on 18th May 2018 in Pune. She was the first baby to be born after a uterus transplant in the Asia-Pacific region and the 12th such baby to be born in the world.

Dr. Atul Mulay, Secretary, ZTCC, Pune and Dr. Avnish Seth, Director, FORT congratulated the participants and presented the completion certificates to them at the valedictory function.



Kiran Deep Sandhu, Anaesthesiologist, Wockhardt Hospital, Nashik explaining management of a brain dead organ donor



Participants and faculty with Ms. Shreya Siddanagowder, Asia's first bilateral above elbow hand transplant recipient

One Week Transplant Coordinators' Training Programme Held in Visakhapatnam



Dr. K. Satyavara Prasad, Chief Transplant Coordinator and Member Convener, Jeevandan Andhra Pradesh lighting the lamp along with Mrs. Lalitha Raghuram, Country Director, MOHAN Foundation, Dr. Sumana Navin, Course Director, MOHAN Foundation and Mrs. C H Indira, Transplant Coordinator, Pinnacle Hospital during the inaugural function

MOHAN Foundation in collaboration with Jeevandan, Andhra Pradesh conducted a one-week Transplant Coordinators' Training Programme from 14th to 18th October 2019 at Visakha Institute of Medical Sciences, Visakhapatnam. There were 40 participants not only from different places in Andhra Pradesh, but also Tamil Nadu, Karnataka, Chhattisgarh, Assam, and West Bengal. This was the 66th training programme conducted by MOHAN Foundation.

Dr. K. Satyavara Prasad, Chief Transplant Coordinator & Member Convener, Jeevandan, Andhra Pradesh was the Chief Guest at the inaugural function. MOHAN Foundation was represented at the training by Mrs. Lalitha Raghuram, Country Director, Dr. Sumana Navin, Course Director, Ms. Sujatha Suriyamoorthi, Manager – Information Systems & Programme Manager, Dr. Bhanu Chandra, Manager - Operations and Ms. Ann Alex, Programme Associate. Ms. Indira from Pinnacle Hospital was a part of the organising team.

At the valedictory function, Dr. G. V. Reddy from Pinnacle Hospital presented the completion certificates to the participants.

Note: The training programmes are supported by the Tata Trusts.



Dr. Krishnam Raju Penmatsa, Consultant Nephrologist, Indus Hospital and OneLife Clinic speaking on Chronic Kidney Diseases



Dr. Bhanu Chandra, Operations Manager, MF moderating the Role Play



Participants during the activity on the Transplantation on Human Organs Act - Forms



Faculty from Apollo Hospitals Health City Dr. Venkata Saibabu B, Consultant Anaesthesiologist (left) and Dr. Atchyuth Rao Gongada, Head, Anaesthesiology and Intensive Care (right) being felicitated by Dr. Sumana Navin, Course Director, MOHAN Foundation

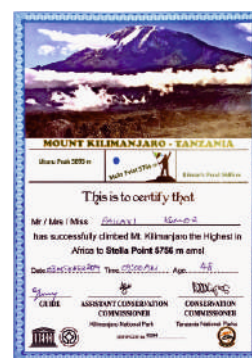


(from left to right) Dr. Bhanu Chandra, Ms. Sujatha Suriyamoorthi, Dr. G. Venkateswar Reddy, Head and Consultant Cardiologist, Star Pinnacle Heart Centre and Ms. Ann Alex handing over a completion certificate to Ms. Aparna Jana, Susrut Eye Foundation and Research Centre, West Bengal



Group Photo with the faculty and participants

Pallavi Kumar summits Mount Kilimanjaro as her tribute to organ donors and their families



Ms. Pallavi Kumar, Executive Director NCR, MOHAN Foundation summits Mount Kilimanjaro as her tribute to organ donors & their families

Certificate

On October 03, 2019, Ms. Pallavi Kumar, Executive Director, MOHAN Foundation summited Mount Kilimanjaro and unfurled a flag expressing her tribute to organ donors for their selfless act of giving a part of themselves to keep others alive. This is the highest such tribute by any Indian and perhaps from anywhere in the world. Last year, Pallavi summited the Everest Base Camp reaching an altitude of 5380 meters (17600 feet above sea level). This year she climbed higher 5756 meters (18885 feet above sea level) as she feels no tribute is too high for organ donors and their families.

Standing at a height of 5,895 meters, Mount Kilimanjaro is the highest peak of Africa and the tallest freestanding mountain on Earth. Also known as the "Roof of Africa", this colossal mountain is a part of the seven summits of the world. Pallavi says, "It was a very challenging and demanding hike over 6 days on the Machame route. The summit night on Kilimanjaro was intense. We began at 2 am from 1,245m (4,084ft.) of ascent into extreme altitude above 5,500m (18,000ft). It took more than 8 hours to reach the summit and I had serious issues with breathing, fatigue and cold. The oxygen levels were so low that every step was a herculean task but what kept me going was my strong need to reach the top and the inspiration I took from families who have made this tough choice in their hour of grief and loss. It was a very special moment when I could finally display the flag expressing my gratitude to organ donors. It made it seem all worth the effort."

Zee TV Rajasthan awards and honours Mrs. Bhavna Jagwani of MFJCF



Mrs. Bhavna Jagwani, Convener, MFJCF presented an award by Zee TV Rajasthan

Group picture at the awards event

On 11th August 2019, Zee TV Rajasthan honoured and awarded Mrs. Bhavna Jagwani, the Convener of MOHAN Foundation Jaipur Citizen Forum (MFJCF) in an event at Jaipur for her contribution towards the promotion of the organ donation cause in Rajasthan. Mrs. Jagwani appealed to the community to join hands with MFJCF to spread the message of organ donation in Rajasthan.

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