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 Tamil Nadu- 603 203.

Section Editors



Dr. R. Nanda Kumar



Dr. U.P. Srinivasan



Dr. Saswati Tripathy



Dr. Lakshmi Sasikanth



Dr. V. Sudhir



Dr. C.N. Ilankumaran



Dr. N.A. Rajesh



Dr. V. Sindhu



Dr. M. Deepak



Dr. V.I. Sujith Velayudhan  
Indira

EDITORIAL OFFICE  
SRM Global Hospitals

Mahatma Gandhi Road,  
SRM Nagar, Potheri,  
Kattankulathur,  
Tamil Nadu - 603 203.



Send in your Case Studies and Articles to:  
brandinghead@srmglobalhospitals.com  
manoja@srmglobalhospitals.com

www.srmglobalhospitals.com

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## President's message

# Greetings!

At SRM Global Hospitals, our mission is clear, to lead in providing advanced, patient-centered healthcare that sets new standards of excellence. Our Centers of Excellence in Emergency & Trauma, Cardiac, Gastro, Neuro, Renal, and Organ Transplantation highlight our dedication to advanced care and superior outcomes. Expanding into Orthopaedics, Obstetrics and Gynaecology, and Paediatrics, we continue to deliver world-class healthcare.

We are also enhancing our capabilities with the integration of advanced robotic surgery systems. Our focus is on refining its application to ensure even greater precision, reduced recovery times, and improved clinical outcomes for our patients. It aligns with our commitment to staying at the forefront of medical innovation.

As we continue to evolve and innovate, it is my pleasure to introduce SRM Global Pulse, the first edition of our quarterly magazine. This publication will offer insights into our latest advancements, upcoming initiatives, and the people who drive our mission. It will also highlight the success stories of our patients and the positive impact we have on the communities we serve. Through SRM Global Pulse, we aim to keep our partners, patients, and the public informed and engaged as we continue our journey toward healthcare excellence.

Thank you for your continued support and trust in SRM Global Hospitals as we strive to shape the future of healthcare together.

Warm regards,

**Dr. P. Sathyanarayanan**

President, SRM Group of Companies  
SRM Global Hospitals.



From the Chief Editor's desk

## *Greetings!*

It gives me immense pleasure to introduce SRM Global Hospitals' Health Magazine. This platform represents our commitment to advancing healthcare, sharing innovative medical knowledge, and we are fostering a deeper connection between our hospital, medical professionals, and the community. As Director of the Institute of Cardiac Sciences, I have witnessed the remarkable evolution of healthcare, driven by innovation, research, and collaboration across multiple disciplines. We take pride in providing comprehensive and compassionate care, combining our expertise with the latest technology to improve patient outcomes. This magazine aims to provide valuable insights into the exceptional work being carried out across our institutes—from groundbreaking cardiac procedures to pioneering treatments in gastroenterology, neurology, and general medicine. Through case studies and patient success stories, we aim to showcase the commitment of our teams in delivering exceptional results and world-class medical care. We believe that knowledge is key to advancing healthcare, and this magazine serves as a vital resource for both professionals and patients alike. As we progress in our medical journey, we look forward to sharing more success stories and innovations that define our commitment to excellence in quality healthcare.

Thank you for being part of the SRM Global Hospitals family. Together, we continue to build a healthier future.

Warm Regards,

**Dr. T.R. Muralidharan**

Chief Editor, SRM Global Pulse

Director, Institute of Cardiac Sciences

SRM Global Hospitals.



From the Associate Editor's desk

## *Greetings!*

It is with immense pride that I extend a warm welcome to all readers of SRM Global Hospitals' quarterly magazine. As the Chief Operating Officer, I have the privilege of overseeing the remarkable efforts of our medical and administrative teams as they work tirelessly to provide the best possible care for our patients. At SRM Global Hospitals, we strive for excellence in every aspect of healthcare, from advanced medical treatments to the compassionate care that is the hallmark of our institution. This magazine serves as a reflection of our commitment to staying at the forefront of medical advancements, as well as our dedication to education, innovation, and holistic patient care. Our goal with this publication is to offer insights into the multidisciplinary expertise at SRM Global Hospitals, showcase success stories, and highlight the groundbreaking work being done across our specialties. Whether it is the advancements in cardiac sciences, neurocare, gastroenterology, or general medicine, we aim to provide our readers with valuable knowledge that can inspire and inform. As we continue to grow and innovate, I want to thank our entire community – doctors, nurses, staffs, and patients – for their unwavering support. Together, we are creating a future where healthcare knows no bounds.

Wishing you all health, wellness, and continued learning through this exciting initiative.

Warm Regards,

**Dr. V.P. Chandrasekaran**

Associate Editor, SRM Global Pulse

Chief Operating Officer

SRM Global Hospitals.



## Sub-Editor's message

# Greetings!

Welcome to this edition of SRM Global Pulse, where we bring you closer to the latest innovations, success stories, and expert insights from SRM Global Hospitals. As your sub-editor, my role is to ensure that each story resonates with clarity, compassion, and commitment to health literacy, helping you stay informed and engaged.

Our goal with SRM Global Pulse is to highlight the milestones and advancements that impact patient care. We also aim to shed light on the personal stories that propel our mission forward. We believe that healthcare communication should be accessible to everyone, bridging the gap between complex medical information and your daily wellness needs.

Thank you for being part of our journey toward excellence in healthcare. We hope this edition enriches your understanding and brings you valuable insights to support a healthy lifestyle.

Warm Regards,

**Dr. R. Swaminathan Veerasamy**

Sub-Editor, SRM Global Pulse

Clinical Superintendent

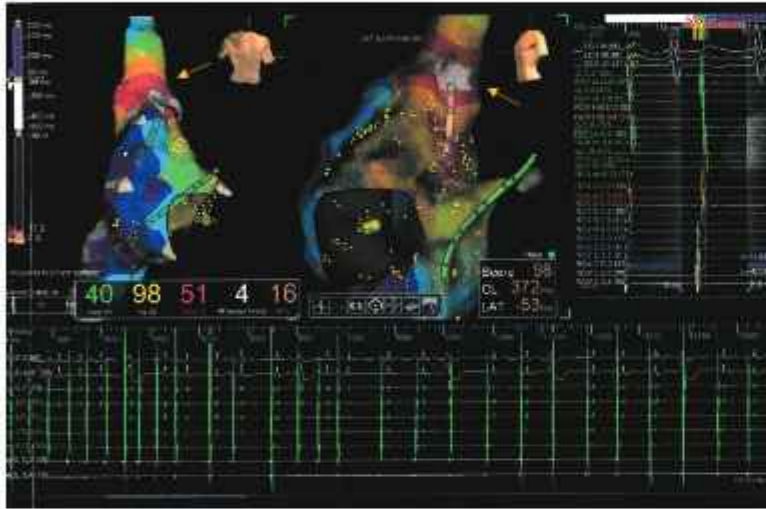
SRM Global Hospitals.



## Institute of Cardiac Sciences

# Ablation of Focal Atrial Tachycardia with zero fluoroscopy using Ensite-X 3D mapping system

### ABLATION IMAGES



### Dr. T.R. Muralidharan

MBBS, MD, DM.,  
Director - Institute Of Cardiac Science  
SRM Global Hospitals



### Dr. C.S. Aravind, MBBS, MD, DM.,

Senior Consultant - Institute of  
Cardiac Sciences



### Dr. R. Swaminathan

**Veerasamy, MBBS, MBA, MD, PDCC.,**  
Consultant - Cardiac Anaesthesia

## Introduction

Focal atrial tachycardia (AT) is an uncommon but impactful arrhythmia. While fluoroscopic guidance is typical in ablation, newer zero-fluoroscopy 3D-mapping technologies like Ensite-X reduce radiation exposure while maintaining efficacy. This case details successful zero-fluoroscopy ablation for focal AT in a young patient.

## Case Presentation

A 21-year-old female presented with recurrent episodes of symptomatic palpitations. An ECG confirmed focal atrial

tachycardia with brief, spontaneous runs. Her symptoms began following a recent hospitalization for a suspected viral fever, possibly dengue. An initial evaluation, including echocardiography and cardiac MRI, ruled out myocarditis. Additionally, an occasional right ventricular outflow tract (RVOT) ventricular premature complex (VPC) was noted.

Based on her symptoms and ECG findings, she was scheduled for an electrophysiological study (EP-Study) with RFA. The procedure was performed under zero fluoroscopy using the Ensite-X 3D mapping system. During EPS, the arrhythmia focus was localized to the superior septal area of the right atrium. Ablation was successfully performed at this site, resulting in the non-inducibility of tachycardia, and no spontaneous episodes were observed post-procedure. The RVOT VPC was managed conservatively, and the patient tolerated the procedure well.

## Discussion

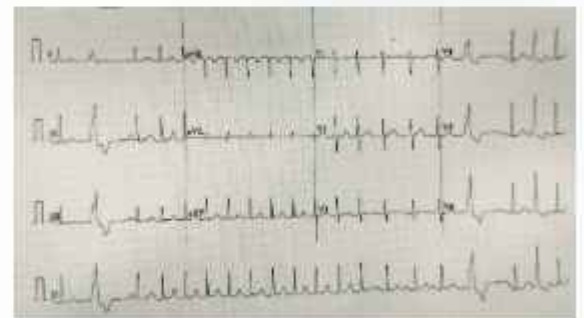
Symptomatic focal ATs are relatively rare, often seen in structurally normal hearts, and can be triggered by stressors such as infections or fever. In this patient, a post-viral inflammatory process might have contributed to arrhythmia onset. The use of the Ensite-X 3D mapping system allowed for precise localization and effective ablation of the arrhythmia focus without radiation exposure, highlighting the benefits of zero-fluoroscopy techniques in electrophysiology procedures.

In cases of focal AT, especially in young patients, zero-fluoroscopy ablation using advanced mapping systems can provide a safe and effective treatment option while avoiding the risks associated with radiation exposure.

## Conclusion

This case illustrates that focal AT can be effectively managed with 3D-mapping-guided ablation without fluoroscopy. Advanced zero-fluoroscopy techniques ensure safety and procedural success, particularly beneficial for younger patients.

ADMISSION ECG



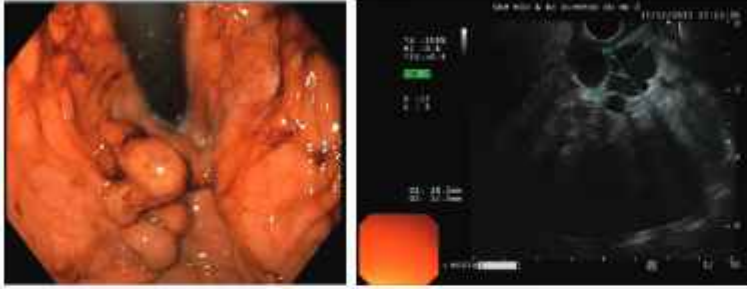
POST ABLATION ECG





## Institute of Gastro and Liver Sciences

# EUS-Guided Coiling and Glue Injection Successfully Treats Gastric Varices at SRM Global Hospitals



### Introduction

Endoscopic ultrasound (EUS)-guided coiling and glue injection is an advanced therapeutic technique for managing gastric varices. This minimally invasive procedure involves precise localization of varices using EUS, followed by the deployment of coils and injection of cyanoacrylate glue to achieve hemostasis and prevent rebleeding. Compared to conventional endoscopic methods, EUS guidance enhances safety by reducing the risk of embolism and improving targeting accuracy.

### Case Presentation

A 58-year-old male with a long-standing history of liver cirrhosis secondary to chronic alcohol use presented with upper gastrointestinal bleeding and abdominal discomfort. An endoscopy revealed the presence of large gastric varices, a complication of portal hypertension commonly associated with cirrhosis. Given the high risk of rebleeding and the challenging nature of treating gastric varices with conventional methods, the patient was considered for an advanced minimally invasive approach: Endoscopic Ultrasound (EUS) guided coiling and glue injection.

### Discussion

Gastric varices are dilated submucosal veins in the stomach, which are prone to rupture and cause life-threatening bleeding. They are a serious complication of liver cirrhosis due to increased portal pressure. Traditional endoscopic methods like Glue Injection alone are less effective for gastric varices, making them more difficult to manage compared to esophageal varices.

EUS-guided coiling and glue injection is a cutting-edge technique that allows precise targeting and closure of varices. Using endoscopic ultrasound, the interventional team can visualize the varices in real time, ensuring precise treatment. In this case Patient who presented to us with UGI Bleed underwent

### Department of Medical Gastroenterology



#### Dr. N.A. Rajesh

MBBS, MD, DM (Gastroenterology),  
Clinical Head &  
Senior Consultant



#### Dr. R. Ramalingam

MBBS, DM (Gastroenterology),  
Consultant

### Department of Liver Anaesthesia



#### Dr. C. Varun

MBBS, MD,  
Senior Consultant



#### Dr. Teena Thomas

MBBS, MD,  
Consultant

EUS guided coiling and glue after haemodynamics stabilization. This approach reduces the risk of rebleeding, distal embolisation, secondary ulcers which are complication of conventional glue injection alone without coiling.

In this case, the patient's gastric varices were successfully treated using EUS guidance. The coil and glue combination ensured the closure of the varices, stabilizing the patient's condition and preventing further bleeding.

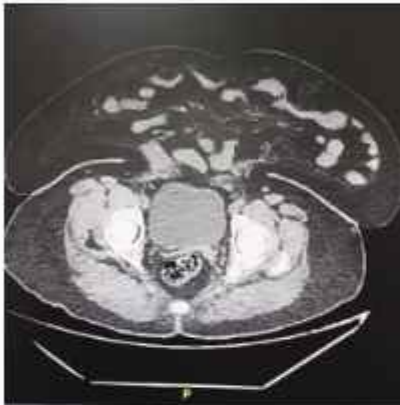
### Conclusion

The EUS-guided coiling and glue injection procedure proved to be a highly effective, minimally invasive treatment for gastric varices in this patient with cirrhosis. The advantage of EUS guided coiling over conventional endoscopic glue injection is that it can be performed even in acute ongoing GI bleed when endoscopic vision is impaired. The patient experienced no post-procedure complications and was discharged in stable condition with a significant reduction in the risk of rebleeding. This case shows the advanced capabilities of SRM Global Hospitals in treating complex gastrointestinal conditions and highlights the benefits of using EUS-guided interventions to achieve better outcomes with lower risks.



## *Institute of Gastro and Liver Sciences*

# A Successful Repair of a Challenging Case of Large Ventral Hernia with Loss of Domain at SRM Global Hospitals



*Department of Surgical  
Gastroenterology*



**Dr. U.P. Srinivasan**  
MBBS, MS, MCH,  
Clinical Head &  
Senior Consultant

## Introduction

A successful repair of a challenging case of a large ventral hernia with loss of domain in a patient with multiple co-morbidities. Employing advanced techniques, our surgical team restored the integrity and function of the abdomen, greatly enhancing the patient's quality of life. This procedure exemplifies our dedication to delivering expert care for complex hernia cases while achieving optimal outcomes for our patients.

## Case Presentation

A 63-year-old female patient presented with a large abdominal bulge, discomfort, and difficulty breathing when lying flat. She had a history of previous abdominal surgeries, leading to the development of a large ventral hernia over several years. The hernia had progressed to the point where a significant portion of the abdominal contents (intestines) had moved outside the abdominal cavity, creating a condition known as loss of domain. This condition posed significant challenges in her daily life, including digestive issues and mobility problems. The complexity of the hernia and her medical history required a detailed preoperative plan for successful hernia repair.

## Discussion

Large ventral hernias with loss of domain are complex conditions where a significant portion of the abdominal contents remains outside the abdominal cavity. Surgical repair poses unique challenges due to the size of the hernia and the reduced capacity of the abdominal cavity to accommodate the herniated organs. In such cases, restoring the abdominal domain and preventing recurrence are critical considerations.

At SRM Global Hospitals, a multi-disciplinary team of surgeons, anesthesiologists, and critical care specialists devised a comprehensive plan for the patient. Preoperative preparation included progressive pneumoperitoneum, a technique used to gradually increase the capacity of the abdominal cavity before surgery. The surgical team performed a complex hernia repair using a combination of mesh and component separation technique, which allowed for reconstruction of the abdominal wall and safe reintegration of the herniated contents into the abdominal cavity.

Postoperative care was crucial to the patient's recovery, with careful monitoring to ensure no complications such as respiratory distress or infection.

## Conclusion

The patient underwent a successful repair of the large ventral hernia with loss of domain and experienced a marked improvement in her quality of life. The innovative surgical approach, coupled with meticulous pre- and postoperative management, allowed for the reintegration of the abdominal contents without complications. The patient recovered well and was discharged in stable condition, with follow-up care focusing on maintaining abdominal wall integrity and preventing recurrence. This case highlights SRM Global Hospitals' expertise in managing complex hernia cases, providing patients with advanced treatment options and excellent outcomes.



## Institute of Emergency and Critical Care Unit

# A Rare Case of Hippopotamus Bite: An Unusual Encounter in Wilderness Medicine



## Case Presentation

A 58-year-old male who is a zookeeper presented to our ED with a hippopotamus animal encounter with multiple injuries over the face, chest, abdomen, and gluteal region. After airway, breathing and circulation stabilization, a wound wash, a tetanus and rabies vaccine with immunoglobulin were given. Patient was started on IV fluids and broad-spectrum prophylactic antibiotics, wound debridement, and excision of the wound in the gluteal region, leaving the resulting wound open. Then, delayed closure was carried out as there was no wound infection. Multiple rib fractures with hemothorax on the left chest were treated with left ICD, and multiple abrasions over the chest were left open with adequate cleaning and dressing done. The patient had a left ramus of mandible fracture with subcutaneous emphysema, for which ORIF was done.

## Discussion

In India, though the annual incidence of animal bites was high (1.7%), most of them were dog bites (91.5%), and hippopotamus bite incidence reports were not available. A hippo bite is a wild and rare one whose saliva can contain oral bacterial flora and powerful salivary digestive enzymes (lysozyme and peroxidase) that can chemically damage human flesh, which plays a strong role in wound infection. There are few non-medical paper publications that report about the death rates about hippo bite. Sincere collaboration of emergency team, surgeons, intensivists, microbiologist/infectious diseases teams, veterinarians, and their opinions were meticulously given equal importance in patient management, which helped us to prevent severe infection/sepsis resulting in amputations.

## Conclusion

The high incidence of hippopotamus bite wound infection should raise a red flag to all treating surgeons to be more aggressive in the wound debridement, and this has a significant impact on patient outcomes where patients are at risk of chronic osteomyelitis and permanent disability. A clear treatment strategy and protocol have to be designed. In the future, we should conduct an exhaustive review of the primary and grey literature outlining the impacts of conflict on both human communities and hippo populations and all known intervention measures to be taken.

*To our knowledge, this is the first case report in medical literature on the clinical presentation and outcome of our patient who was attacked by a hippopotamus in Vandalur Zoo.*



**Dr. Arthi Rajendran**  
MBBS, DNB.,  
Senior Consultant



**Dr. A. Sirmela**  
MBBS, MD.,  
Consultant



**Dr. H. Shananth  
Saravanan,** MBBS, MD, MS.,  
Consultant



**Dr. R. Sindhu**  
MBBS, MD, MS, DNB.,  
Consultant

## Introduction

Hippopotamuses are large, semiaquatic mammals native to sub-Saharan Africa. Their name comes from the Greek for "river horse" because of the time they spend in the water. Most domestic animal bites are very common, but wild animal bites are very rare, with few case reports. They are capable of opening their impressive jaws from 150 to 180 degrees and generating 1,800 PSI of biting force, which is strong enough to snap a crocodile into half.



## Department of General Medicine

# Mycoplasma Pneumoniae Infection Presenting with Severe Cold Agglutinin Hemolytic Anemia: A Rare Case Report



**Dr. R. Nanda kumar**, MBBS, MD.,  
Consultant - General Medicine



**Dr. Vigneshwaran**, MBBS, MD.,  
Consultant - General Medicine



**Dr. Arthi Rajendran**, MBBS, DNB.,  
Senior Consultant - Emergency  
Medicine & Critical Care Unit



## Introduction

*Mycoplasma pneumoniae* is a common cause of community-acquired pneumonia, often mild but potentially leading to serious complications. This infection can cause both respiratory and extrapulmonary symptoms, complicating diagnosis and treatment. While respiratory symptoms may include tracheobronchitis and pneumonia, rarer extrapulmonary effects can involve multiple systems, including hematologic issues like cold agglutinin-induced hemolysis. Although this hemolysis is usually minor, it can occasionally become severe and potentially fatal as demonstrated in this case.

## Case Presentation

A 44-year-old woman with no prior health issues presented to the emergency department after 10 days of fever, fatigue, and headache.

Earlier treatment with ceftriaxone and chloroquine showed no effect. She was presented with a fever of 102°F, respiratory rate of 28, oxygen saturation of 88%, heart rate of 110 bpm, and blood pressure of 140/90 mmHg. Lung auscultation revealed bilateral crackles; neurologic exams were normal.

Lab tests showed hemoglobin at 5.3 g/dL, WBC at 42,000 cells/cu.mm, platelets at 564,000/cu.mm, and RBC at 1.6 million/cu.mm. CRP was 34.2 mg/L, ESR was 140 mm/hr. Imaging revealed right-sided pleural effusion and bilateral pneumonia. Initial treatment included piperacillin/tazobactam and IV fluids. Hemoglobin dropped further to 4.6 g/dL by the next day, with WBC at 36,390 cells/cu.mm, LDH at 1329 U/L, and positive Coombs' test, raising suspicion of cold agglutinin disease. *Mycoplasma pneumoniae* IgM and IgG confirmed the diagnosis.

The patient was moved to the ICU, receiving warm blood transfusions, corticosteroids (methylprednisolone), and clarithromycin followed by levofloxacin. Her condition improved, with hematologic recovery and symptom relief.

## Discussion

This case illustrates a rare instance of severe hemolysis linked to *Mycoplasma pneumoniae*, characterized by high cold agglutinin titers. Infections commonly induce mild hemolysis via cold agglutinins, but severe cases, like this one, are rare and typically associated with severe pulmonary issues. IgM-mediated cold agglutinins caused hemolysis, as reflected in elevated LDH and low haptoglobin.

Managing *Mycoplasma*-induced hemolysis varies, but supportive care, corticosteroids, and antibiotics are crucial. Corticosteroids reduce hemolysis, while antibiotics help clear the pathogen. This case emphasizes considering *Mycoplasma pneumoniae* in atypical pneumonia cases with hematologic symptoms.

## Conclusion

*Mycoplasma pneumoniae* should be considered in pneumonia with unusual hematologic signs, especially when cold agglutinin-induced hemolysis is present. Early detection and prompt treatment with supportive care, corticosteroids, and antibiotics are key to managing severe hemolysis. This case underscores the complexity of *Mycoplasma pneumoniae* infections and the importance of vigilance for extrapulmonary complications.

# CENTERS OF EXCELLENCE



## INSTITUTE OF CARDIAC SCIENCES

The Institute of Cardiac Sciences at SRM Global Hospitals is a leading center for comprehensive heart care, combining the expertise of both Cardiology and Cardiothoracic Surgery to provide exceptional treatment for a wide range of cardiovascular conditions. The Cardiology team excels in diagnosing and managing heart diseases through advanced procedures like angioplasty, stenting, electrophysiology, and non-invasive cardiac imaging. Meanwhile, the Cardiothoracic Surgery department specializes in performing complex heart surgeries such as open-heart surgery, valve repairs, aortic aneurysm surgeries, and minimally invasive procedures. With state-of-the-art technology and a multidisciplinary approach, the Institute offers patients cutting-edge care from diagnosis to recovery, ensuring high success rates and optimal outcomes in both medical and surgical heart treatments.



## INSTITUTE OF GASTRO & LIVER SCIENCE

The Institute of Gastro and Liver Sciences offers cutting-edge diagnostic services, including endoscopy, colonoscopy, liver biopsy, advanced imaging, and laboratory tests to accurately diagnose gastrointestinal and liver conditions. Our expert interventional gastroenterologists specialize in minimally invasive procedures such as ERCP and endoscopic ultrasound for both diagnostic and therapeutic purposes. We provide comprehensive liver transplant services, covering evaluation, surgery, and post-transplant care. Our personalized treatment plans focus on medication, lifestyle modifications, and nutritional counseling by our dietitians to optimize patient health and manage complex gastrointestinal disorders.



## INSTITUTE OF EMERGENCY MEDICINE AND CRITICAL CARE UNIT

The Institute of Emergency and Critical Care Unit is staffed with highly skilled and experienced emergency physicians, critical care specialists, and healthcare professionals who are committed to delivering the highest standard of care to every patient. Our expert interventional cardiologists specialize in minimally invasive procedures like angioplasty, stenting, and balloon valvuloplasty to treat a range of cardiac conditions. Our highly skilled cardiac surgeons perform advanced procedures such as CABG and valve repair/replacement surgeries. We provide specialized care in our Cardiac Intensive Care Unit (CICU), equipped with the latest technology for continuous monitoring. Additionally, we offer remote consultations and follow-ups to ensure seamless care and recovery for our patients.



## INSTITUTE OF NEURO SCIENCES

The Institute of Neuro Sciences provides advanced diagnostic services, including MRI, CT scans, EEG, EMG, and nerve conduction studies. Our skilled neurosurgeons perform complex procedures such as brain tumor resection, spinal fusion, and epilepsy surgery. Interventional neurologists specialize in minimally invasive treatments for stroke, aneurysms, and AVMs using techniques like thrombectomy and embolization. We offer comprehensive neurorehabilitation, including physical, occupational, speech, and cognitive therapies. Our team also handles epilepsy with medication, ketogenic diet therapy, and surgical options like temporal lobectomy. For critical neurological care, we provide round-the-clock management of severe conditions such as brain injuries and status epilepticus.



## INSTITUTE OF RENAL SCIENCES

The Institute of Renal Sciences at SRM Global Hospitals provides advanced diagnostic services, including imaging, lab tests, and minimally invasive procedures to assess urological and nephrological conditions. Our specialists perform treatments such as endoscopic surgeries, lithotripsy, and interventional radiology. We offer advanced surgical options, including robotic-assisted and laparoscopic surgeries, as well as kidney transplants. Our personalized treatment plans focus on medication management, lifestyle changes, and dietary counseling to effectively manage chronic conditions.



## INSTITUTE OF SOLID ORGAN TRANSPLANT

The Institute of Solid Organ Transplant provides comprehensive diagnostic services, including advanced imaging, specialized blood tests, and biopsy procedures to thoroughly evaluate organ health and determine the best treatment approach. Our highly skilled transplant surgeons are experts in performing complex surgeries with precision and meticulous care, ensuring the highest standards of patient safety and outcomes. Post-transplant, we offer extensive support, including personalized medication management, continuous health monitoring, and specialized rehabilitation services to ensure a smooth recovery and enhance long-term patient well-being.



## Winter health and Wellness tips

### Drink water



Even minor dehydration is linked to a number of potential cognitive and bodily problems. Considering that 20% of daily fluid intake comes from food, it's recommended women drink 8-ounce glasses of water per day and men consume 12 for optimum hydration.

### Eat your vegetables



Filling up on root vegetables, fiber and vitamins C and D can help support your immune system. Colorful and healthful foods like carrots, beets, broccoli, cauliflower, in-season fruits and protein are all part of a balanced diet. Eating some Brussel sprouts beats a few days with a nasty cold.

### Keep moving



Exercise contributes to physical and mental health, and setting a regular schedule is key. It's not as easy to stay active in winter, but there are many mobile apps and videos for indoor workouts. If you go out to shovel, be careful, bend your knees and pace yourself.

### Get some sleep



Adults should aim to get 7-9 hours of sleep per night. Some experts suggest turning your devices off an hour before bedtime because the blue light from screens often decreases a person's ability to sleep restfully, as can television. Consider non-digital reading or listening to music.

### Wash your hands



Regular hand washing is one of the simplest and most effective ways to stay healthy. Wash your hands before touching your eyes, nose or mouth and after you've been in a public place. Remember, use soap, fully lather your whole hands, scrub for 20 seconds and rinse under clean water.

### Fight the flu



Vaccination is a powerful tool in preventing diseases and protecting your health. It works by strengthening your immune system to fight infections effectively. Vaccinations, handwashing, a balanced diet, and staying active, will boost your overall wellness. Regular checkups and timely immunizations will safeguard yourself and your community from preventable illnesses.

### Take Advantage of Natural Light



Winter days are shorter, so make the most of daylight hours. Go outside during mid-day when sunlight is strongest to help boost vitamin D levels and improve mood. Create a Morning Routine, start your day with a walk or just 5-10 minutes outside to set your circadian rhythm, which can help regulate sleep and energy levels.

### Dress Warmly



The body releases heat more quickly in colder climates, making us more vulnerable to diseases and hypothermia. Winter clothing should be made of wool since it retains heat. Due to the inability to keep the body warm and potential for skin rashes, synthetic clothing should be avoided. Prioritize cozy and breathable fabrics to ensure your health and comfort throughout the cold season.

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# SRM Global in the News

## எஸ்ஆர்எம் குளோபல் மருத்துவமனையில் 77 வயது முதிய நோயாளிக்கு இதய வால்வு பொருத்தப்பட்ட வெற்றிகர சிகிச்சை

சென்னை, 20. 12 இயல் வயது நோயாளிகள் அடங்கிய 99 வயது இயல் வயது நோயாளிகள் 77 வயது ஒரு நோயாளிக்கு இதய வால்வு பொருத்தப்பட்ட வெற்றிகர சிகிச்சை மேற்கொண்டது. இதற்கான சிகிச்சை மருத்துவமனையில் மேற்கொண்டது. இதற்கான சிகிச்சை மருத்துவமனையில் மேற்கொண்டது. இதற்கான சிகிச்சை மருத்துவமனையில் மேற்கொண்டது.

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## 23-day-old infant undergoes surgery for rare condition

The Hindu Bureau CHENNAI

SRM Global Hospitals performed an emergency surgery on a premature baby with Amyand's hernia, a rare condition in which the appendix is located in the

The boy, who was born at 28 weeks, underwent the surgery on the 23rd day after his birth.

**Three-part surgery**  
The surgery was performed in three parts – in-

ginal exploration that was performed to examine and assess the groin area, appendectomy to remove the appendix and herniotomy to repair the hernia by removing the hernia sac and fixing the defect in the abdominal wall. Post-procedure, the baby recovered well.

The paediatric surgery team, led by M. Saravana Babaji and N. Prathiba, performed the procedure with the assistance of the anaesthesia team, according to a press release.

## BANGLADESH CANCER PATIENT TREATED IN CITY

DC CORRESPONDENT CHENNAI, 20.12

A 78-year-old pancreatic cancer patient from Bangladesh is relieved of his/her cancer-related symptoms including loss of appetite and weight loss. His condition was the result of a liver tumor obstructing the bile duct. The minimally invasive procedure based on an advanced endoscopic-ultra-sound technology created a new internal pathway for the bile to drain. SRM Global Hospitals successfully treated the patient using Cholecystoduodenostomy (CDD).

Dr. N. Rajesh, Gastroenterologist, SRM Global Hospitals, said, "Considering the patient's old age and physical weakness, we opted for a minimally-invasive endoscopic procedure with the support of advanced endoscopic ultrasound technology and created a surgical connection between the common bile duct and an alternative portion of the duodenum, a part of the small intestine, for the bile to drain. We have also used a newly developed stent (electro-catheter tubes approximating metal stent) to strengthen the new pathway." he added. Dr. P. Sathyaajayam, President, SRM Group of Companies said after the 30-minute procedure, the patient improved with reduction in jaundice and quick improvement in appetite. The endoscopic Cholecystoduodenostomy (CDD) is a recent medical innovation with advantages like it generates virtual images of internal organs using high-frequency sound waves instead of x-ray camera. SRM Global Hospitals is one of the few centres in the country to perform the procedure which has high clinical success rates and low adverse events.



## Hearty Fun Facts



**Hard Working Muscle:** Your heart beats about 100,000 times a day, pumping around 2,000 gallons of blood through your body daily. That's enough to fill a small swimming pool every week!



**Electric Energy:** The heart produces its own electrical impulses. This means that, in theory, a heart can continue to beat even outside the body as long as it has an oxygen supply!



**Strongest Muscle:** Pound for pound, your heart is the hardest-working muscle in your body. It can generate enough energy in one day to drive a truck for 32 kilometers (20 miles).



**The Power of Laughter:** A good laugh is not only fun but also heart-healthy! Laughter can increase blood flow by up to 20% that helps in improving your cardiovascular function.



**Size Doesn't Matter:** An average adult heart is about the size of two fists clasped together, while a child's heart is closer to the size of one fist. Despite its size, it powers an entire human body!



**A Heart for Life:** A human heart beats approximately 3 billion times over a 75-year lifetime without taking a break. Talk about stamina!

## Meet the Team

### Admin Team



**Dr. V.P. Chandrasekaran**  
Chief Operating Officer



**Dr. R. Swaminathan Veerasamy**  
Clinical Superintendent



**Ms. J. Amutha**  
Chief Nursing Officer



**Mr. D.R. Manjunath**  
Head of Operations



**Mr. M. Surulivel**  
Assistant General Manager  
of Operations



**Mr. J. Jayamurugan**  
Assistant General Manager of  
Operations & Facilities



**Ms. L. Anto Leena Rubini**  
Assistant General Manager of  
Operations, Facilities and  
Customer relation



**Dr. K. Shubashini**  
Senior Manager of  
Clinical Operations



**Mr. P. Veera Prakash**  
Group Head of Sales  
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**Mr. Susanta**  
Head of International  
Patient Services

### Technical Team



**Ms. R. Manoja**  
Content Writer -  
Branding



**Mr. L. Robinson**  
Graphic Designer -  
Branding



**Ms. M.J. Monishaa**  
Secretary - Institute  
of Cardiac Sciences

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