



TRAUMA & EMERGENCY TEAMS ACADEMIC MEDICINE SENTINEL



Proclaiming & Promoting Academic Leadership

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**Official Voice of
Academic College of Emergency Experts
(ACEE)
&
Emergency Medicine Association (EMA)
An INDUSEM Undertaking**

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From the Editor's desk...

Hello Doctors,

As I'm penning this editor's note, I dedicate it to all the millennials and genZ : our Youth, hustling way too hard to achieve their goals as fast as possible, keeping on stake their physical & mental health. In today's fast-paced world, the youth face a myriad of health challenges due to their lifestyle choices which is a growing concern that demands immediate attention. Traditionally associated with older adults, cardiovascular-pulmonary-renal-musculoskeletal diseases are now affecting individuals at younger ages due to various lifestyle factors.

Recently, my 15 years old niece was diagnosed with depression with chronic sleep deprivation, etiology : board exams study pressure, which went unnoticed till late though her parents are quite supportive; A 22 years old boy living in my neighbourhood, from a well-off family, is Obese-class II - BMI 38.2 with coronary artery disease and OSA, few days back he presented to me, drowsy and in severe respiratory distress; A 25 years old student of mine was recently diagnosed with cervical spondylosis, etiology : slackened lifestyle, compromising her post graduation studies; these are merely few incidents that I'm highlighting, there are several more which need to be addressed promptly and efficiently. According to WHO, 1 in 4 youths suffer from some/any health related issues, globally; apart from RTA, violence, pregnancy related complications and infectious diseases; sedentary behaviours, poor nutrition, inadequate sleep, substance abuse, academic/work and peer pressure, increased screen time have become common place, leading to a surge in health issues among young individuals.

This article aims to shed light on the detrimental effects of these lifestyle factors and emphasizes the importance of adopting healthier habits to safeguard the well-being of our youth.

1. Sedentary Lifestyle. Lack of physical activity and prolonged periods of sitting, has a profound impact on physical & mental health leading to weight gain and obesity, increased blood pressure, elevated cholesterol levels, reduced heart health, poor body posture leading to headache and back pain, overall increasing the risk of developing chronic conditions

such as cardiovascular diseases, diabetes, musculoskeletal disorders and much worse. Encouraging regular exercise/yoga, outdoor activities, and keeping oneself active can help combat these health issues and enhance overall well-being.

2. Psychological Factors : Psychological factors such as stress, anxiety, and depression have been linked to an increased risk of mental health issues and cardiovascular diseases in youth. Chronic stress activates the body's stress response system, leading to elevated blood pressure, inflammation, and unhealthy coping behaviours like overeating or excessive alcohol consumption. Mental health support, stress management techniques, and promoting a healthy work-life balance are essential for protecting physical & mental health.
3. Unhealthy Eating Habits : The prevalence of unhealthy dietary patterns, including excessive consumption of processed foods, sugary beverages, junk/fast food and high-fat meals leads to obesity, high blood pressure, high blood sugar levels, abnormal lipid profiles and multi-nutrient deficiencies . A diet rich in fruits, vegetables, whole grains, lean proteins, and healthy fats is essential for maintaining good health. Promoting nutritional education and encouraging healthier eating habits can go a long way in reducing the risk of overall health issues in youth.
4. Inadequate Sleep: The youth often prioritize academic, social, and technological engagements over sleep, leading to acute to chronic sleep deprivation. Insufficient sleep affects cognitive function, impairs academic performance, and contributes to mental health issues. Additionally, poor sleep is linked to an increased risk of obesity, diabetes, hypertension, depression, anxiety disorder, disruptive behaviour and compromised immune function. Promoting good sleep hygiene practices and raising awareness about the importance of adequate sleep can significantly improve overall health and well-being.
5. Tobacco and Substance Use: Tobacco use,

including smoking and vaping, is a significant risk factor for cardiovascular diseases. Substance abuse, including alcohol and illicit drugs, poses a threat to heart health in youth. It is crucial to raise awareness about the detrimental effects of tobacco and substance use and provide resources for prevention and cessation.

In Conclusion, the health issues faced by youth due to their lifestyle choices are a growing concern. By addressing the risk factors associated with a sedentary lifestyle, promoting healthy dietary habits, discouraging tobacco and substance use, limiting screen time, ensuring adequate sleep, and addressing psychological well-being, we can empower young individuals to

lead healthier lives. It is essential for parents, educators, healthcare providers, and policymakers to collaborate in implementing effective interventions and creating an environment conducive to positive lifestyle changes. By fostering a supportive environment, a culture of healthy living, emphasising on the importance of health education & awareness campaigns and encouraging early intervention, through collective efforts, we can protect the health and well-being of our youth, ensuring a brighter and healthier future for generations to come.

Thankyou & Stay Healthy!

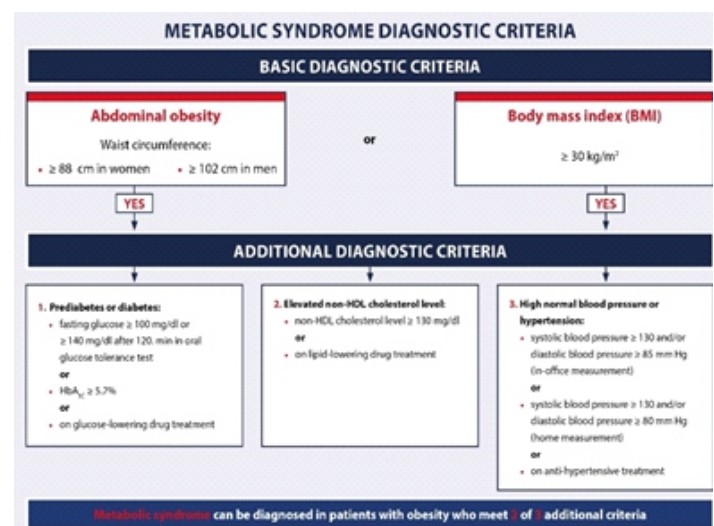
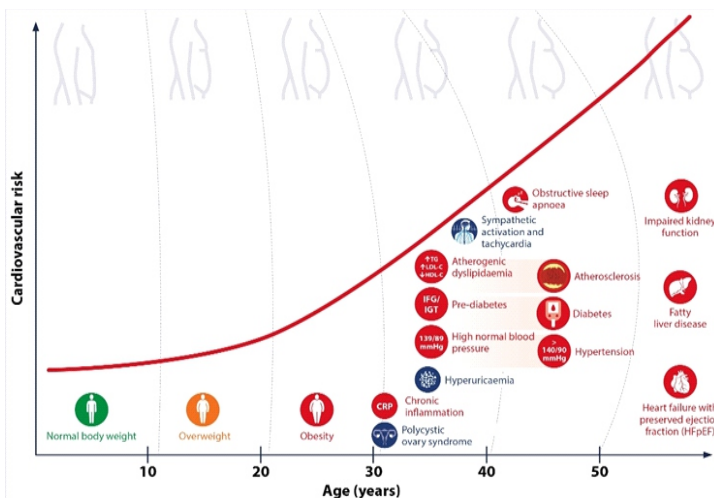
What is Metabolic Syndrome?

Metabolic syndrome (MetS) refers to the presence of a cluster of risk factors specific for cardiovascular disease. Metabolic syndrome (MetS) greatly raises the risk of developing diabetes, heart disease, stroke, or all three.

According to the National Heart, Lung and Blood Institute (NHLBI) & American Heart Association (AHA), the cluster of metabolic factors involved includes:

- **Abdominal obesity.** This means having a waist circumference of more than 35 inches for women and more than 40 inches for men. An increased waist circumference is the form of obesity most strongly tied to MetS.
- **High blood pressure** of 130/80 mm Hg (millimeter of mercury) or higher. High blood pressure is strongly tied to obesity. It is often found in people with insulin resistance.
- **Impaired fasting blood glucose.**
- **High triglyceride levels** of more than 150 mg/dL.
- **Low HDL (good) cholesterol.** Less than 40 mg/dL for men and less than 50 mg/dL for women is considered low..

Because the worldwide population is aging, and because MetS is more likely the older you are, the American Heart Association has estimated that MetS soon will become the main risk factor for cardiovascular disease, ahead of cigarette smoking



Management of Components of Metabolic Syndrome (MetS)

METABOLIC SYNDROME				
	Obesity	Impaired glucose regulation	Hypertension	Dyslipidaemia
Dietary modification: content (↓ simple carbohydrates, ↓ trans fats and saturated fatty acids, ↑ omega-3 fatty acids, ↓ salt and caloric value (↓ by 500-600 kcal); increased physical activity (150-300 min of moderate-intensity or 75-150 min of vigorous-intensity aerobic physical activity per week); reducing alcohol intake; smoking cessation; sleep hygiene.				
Indications for medical management	BMI ≥ 27 kg/m ²	• Diabetes • Consider in patients with pre-diabetes	• SBP ≥ 140 mm Hg and/or DBP ≥ 90 mm Hg (in-office measurement) • SBP ≥ 135 mm Hg and/or DBP ≥ 85 mm Hg (ambulatory measurement)	LDL-C ≥ 70/55 mg/dl***
Treatment target	Weight loss by 5-7% 7-15%**	Glycated hemoglobin < 7.0% consider < 6.5%	BP in-office/ambulatory < 130/90 mm Hg****	LDL-C < 70/55 mg/dl*** & ≥ 50% non-HDL-C < 100/85 mg/dl***
Step 1	GLP-1RA	Metformin	ACE-I/ARB + CCB or TD	Statin**** at maximal tolerated dose
Step 2*	• Naltrexone/bupropion • Orlistat	GLP-1RA	ACE-I/ARB + CCB + TD	+ Ezetimibe
Step 3*	Metabolic surgery	+ Sodium-glucose cotransporter-2 inhibitor (SGLT2) + Other medications	+ Aldosterone antagonist + β-blocker	Triglycerides > 200 mg/dl + fenofibrate/omega-3 fatty acids

* Should treatment target fail to be achieved, take the next step. ** In all patients and patients with diabetes, respectively. *** In high risk and very high risk groups, respectively. **** High-potency atorvastatin/rosuvastatin. ***** In patients above 70 years of age < 140/90 mmHg (in-office measurement) and < 135/85 mmHg (ambulatory measurement).
ACE-I - angiotensin-converting enzyme inhibitors; ARB - angiotensin receptor blocker; BMI - body mass index; BP - blood pressure; CCB - calcium channel blocker; DBP - diastolic blood pressure; GLP-1RA - Glucagon like peptide-1 receptor agonist; LDL-C - LDL cholesterol; non-HDL-C - non-HDL cholesterol; SBP - systolic blood pressure; TD - thiazide/thiazide like diuretic.

EM-HIMACHAL 2023

Hosted by EM Himachal Chapter

The very first edition of EMHIMACHAL conference concludes in the lap of Nature at Kufri, Shimla.

EMHIMACHAL was an academic feast for the residents and physicians of the region showcasing the range and depth Emergency medicine to them. It began from 25th of May with a hands-on workshop on Acute Care Ultrasound Delivered by Dr. Sanjeev Bhoi, Dr. Tej Prakash, Dr. Vimal Krishnan and Dr. Siju Abraham, the top Leaders of EM in India.

It was followed by a hands-on Basic and Advanced Airway Workshop Conducted by Dr. Manpreet Singh, Dr. Dheeraj Kapoor from GMC Chandigarh and their team which was then followed by a CME on Tropical infections and a poster competition, where the first prize was won by Dr. Diksha Negi. This workshop was sponsored by the Indian Council of Medical Research, New Delhi and that is the proof of pure academics in the conferences and workshops held by EMINDIA, INDUSEM, and ACEE at the state level chapters.



EM-PUNJAB 2023

Hosted by EM Punjab Chapter

The Department of Emergency medicine, AIMS, Mohali under the leadership of Dr RituGupta, Associate professor & Head, UnderSecretary EMA, Punjab, organized the 1st CME of Punjab chapter of the Emergency medicine association of India, on "Basic Emergency and Trauma Care" on 28th March, 2023, certified by the Academic College of Emergency experts in India. The CME comprised of didactic interactive lectures and Hands On training on Evolution of department of Emergency medicine from Casualty, Triage of patients, approach to patients with chest pain, management of polytrauma patients, airway management, medicolegal aspects, blunt trauma chest and abdomen. Guest Faculty from Tricity included Dr Manpreet Singh, Professor GMCH 32, Chandigarh. It was an interactive CME of 6 hours sessions with active participation from the audience. In the end, Emergency Medicine quiz was held that was also well attended by all the delegates.



Sri DEVARAJ URS MEDICAL COLLEGE

Your safety our priority

The Department of Emergency Medicine at Sri Devaraj Urs Medical College, SDUAHER, KOLAR, INDIA organized a poster competition and community outreach program on the occasion of the international Emergency Medicine Day on 27th May 2023. Campaign theme of this year was "Your safety our priority".



THEME

This year the Emergency Medicine Day campaign is dedicated to safety. Safety for our patients, who need care, attention and relief from pain and disease. Safety for our colleagues, who need to be able to work in a secure environment, for the right number of hours with the right number of patients in order to be able to give them the right amount of our time and energy. Only in these conditions are we sure to provide the patient with a safe haven in an emergency

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secretary

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Assistant Professor

Emergency Team

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Dr Dinesh K

Prof & DMS

Dr Deepak Hongaiah

Associate Professor

Dr Krishnamoorthy

Assistant Professor

Dr Nikhil Reddy

Dr Aravind SR

Activities

❖ POSTER COMPETITION

Seminar Hall, EMD

09:00 AM

❖ COMMUNITY CPR

PROGRAMME



A community outreach programme on first aid and CPR was organized at Kolar Fire safety office for all the staff of the fire safety, included hands on training.



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