Convocation, Annual Day
Research Presentation
Programme of NEIGRIHMS-2015
SCIENTIFIC ABSTRACT PUBLICATION BOOK OF 6TH CONVOCATION, ANNUAL DAY 2016

March 4th & 5th, 2016

Organized By:
Organizing Committee of 6th Convocation, Annual Day, NEIGRIHMS

Hosted By:
Scientific & Research Committee of NEIGRIHMS

Supported By:
Department of Medical Education, NEIGRIHMS
Message

I am really happy to note that NEIGRIHMS is celebrating its 6th Annual Research Presentation Programme and Convocation on 4th and 5th March, 2016. The event is a great occasion for us to celebrate and take stock of the performance and accomplishments of faculties, students and staff of the Institute in the various areas of Academics, Research and Healthcare Services. On this auspicious day, besides conferring degrees to the students who have graduated in the last academic session, outstanding performers in various fields and disciplines will be honored and felicitated in an endeavor to enhancing the work culture, academic and research excellence of the Institute.

It gives me a sense of great pleasure that over the last few years the institute is rapidly moving forward in its mission to achieve “Excellence” in the field of medical education and capacity building, in health research, and in becoming a “Destination of Quality Medical Care” in the Northeastern Region of India. In this context, the institute has already reached several milestones and brought laurels.

I am delighted to note that NEIGRIHMS has contributed immensely in the field of medical research. It is really noteworthy that more than half of the time of this ‘Annual Day’ celebration has been devoted in the presentation of original research works by our faculty, residents and students with over 100 scientific papers to be presented, which I believe would be of the highest scientific standards. Besides, our institute has come out with over 125 research papers and chapters in reference books in the last academic year itself. The number of research publications and extramural research projects, currently being conducted in the Institute are a testimony to the research excellence and hard work of our faculties and research scholars, for which they deserve all the accolades.

On this auspicious occasion, I wish that NEIGRIHMS continues to grow and excel in the field of medical education and research, and I am sure that the 6th convocation ceremony of NEIGRIHMS will be a grand success.

I wish the organizers the very best of performance.

Prof. A.G. Ahangar
Director
Dear all,
I am overwhelmed to announce the 6th Convocation & Annual Day Celebration on March 4th & 5th this year. It gives me immeasurable pride that though NEIGRIHMS had made a humble start, she has been growing by leaps and bounds and has been striving to accomplish her mission in every way. And on the propitious occasion of the Convocation day, which will be celebrated along the Annual day, not only our graduates from both the medical and nursing fraternities but also post-graduates and post-doctoral candidates will be honoured.
I am also glad that together with patient care and academies, our faculties, SRDs and students have been actively involved in research activities and the annual day will serve as a great platform to present their various research papers.
I am thankful to the Director, Prof. AG. Ahangar for his innovative ideas and good leadership and wholeheartedly congratulate the Prof. G.K Medhi and the Organizing Committee for their painstaking and fruitful work.

Prof. Vandana Raphael,
Dean,
NEIGRIHMS
MESSAGE

I am delighted that the Institute is celebrating its 6th Annual Research Presentation Programme and Convocation on the 4th & 5th March, 2016.

During the past few years the institute has expanded in various disciplines and also excelled in terms of providing untiring Health Care Services to patients not only from within the State of Meghalaya but also from other neighbouring States.

I am very confident that this 6th Annual Research Presentation Programme and Convocation will bring out the medical talents of our esteemed faculty and residents, thus proving beneficial to all the budding doctors and research scholars of the Institute.

This Convocation will also add another milestone to the progressive academic development of the Institute and also boost the morale of other students both in the Medical as well as in the Nursing stream.

I wish the Annual Research Presentation Programme and Convocation a grand success.

(D.T. Umdor)
Deputy Director
NEIGRIHMS
It is a proud privilege for the Organizing Committee to host the 6th Annual Day and Convocation of NEIGRIHMS this year. I am glad that besides conferring degrees to the students passed out in the last academic year, outstanding performers in various fields and disciplines will be felicitated to motivate them and their peers to keep up the good work.

Since faculties, SRDs and students of our institute possess an inquisitive and research-oriented mind, we can boast of a healthy output in the field of research, both community-based and hospital-based. I hope that the annual day research presentation programme will be an arena where the research scholars can share their work on various fields.

On this joyous occasion, I wish that everyone associated with NEIGRIHMS, in every small or big way, excel in their respective fields so that, in the process, the institute will achieve towering heights.

I am grateful to have amongst us our ever-inspiring Director, Prof. A.G. Ahangar. I, sincerely, thank the members of the organizing committee for extending their helping hand and meticulous management.

Jai Hind!

Prof. Manuj K. Saikia,
Organizing Chairman.

6th Convocation, Annual Day NEIGRIHMS
From the desk of the Organizing Secretary

I am indebted to the Institute for giving me the honor of organizing & coordinating the prestigious 6th Convocation, Annual day of NEIGRIHMS. On behalf of the Organizing Committee, heartily welcome you to the Scientific Research Presentation Programme & 6th Convocation, Annual day of NEIGRIHMS.

This day is an important one for us to commemorate the past and present achievements as well as to motivate for the future harvest.

It is heartening to know the great interest of our Resident Doctors, Students & staff from various Departments & fields.

In spite of being a relatively Newer Institute, owing to this enthusiasm of our Resident Doctors, Students & Staff, we have evolved significantly in the field of research day by day.

The abstracts & list of published papers, submitted for Scientific Research Paper Presentation can be indicative of the quality, quantity and the areas of research being carried out in NEIGRIHMS.

It can also serve as a source for identifying the strengths, opportunities in different areas for exploring collaborative research and importantly to guide financial and strategic support to the departments which have high potential.

The Organizing Committee, with the Guidance of Dynamic and Inspiring Director, Prof. A.G Ahangar, has left no stone unturned to ensure that the 6th Convocation, Annual day of NEIGRIHMS turns out to be a very memorable event.

Long live NEIGRIHMS

Dr. Md. Yunus,
Sub dean, Research
& Organizing Secretary
6th Convocation, Annual Day NEIGRIHMS
Message

It is a great pleasure to be involved with organizing the scientific programmes of the 6th Convocation & Annual Day Scientific Presentation Programme of NEIGRIHMS to be held on 4th and 5th March 2016. I really feel proud that over a hundred platform and poster presentations, from original scientific works carried out by the faculty, residents and postgraduate students of this institution would be delivered on the Annual Day. Further, it has been observed that nearly 128 scientific papers and chapters in reference or text books have been published from NEIGRIHMS during the last one year and the abstracts of these articles are being compiled in the form of an abstract book. This itself testifies the amount of research being carried in this institution.

I take this opportunity to thank each one of you for your much valued scientific contribution, which collectively places NEIGRIHMS among the top medical institutions of the country. I am extremely thankful to all the members of the Academic and Scientific Committees for their excellent and coordinated efforts in efficiently planning and organizing the scientific programme and for publishing this abstract book wonderfully.

I extend my Best Wishes to all members of the organizing team!

Prof. P.K. Bhattacharya
Chairman, Academic Committee
Message

It is a matter of great pride and pleasure that North Eastern Indira Gandhi Regional Institute of Health & Medical Sciences (NEIGRIHMS), Shillong is celebrating its 6th Annual day & Convocation on 4th & 5th March, 2016 wherein Degree Certificates for various Graduate, Post Graduate, and Post-Doctoral Programmes will be conferred to the students and scholars. I am, indeed, indebted for giving me the opportunity along with the other esteemed faculty members to coordinate the scientific events and publication of abstract book for the occasion.

A comprehensive scientific presentation programme based on the research works carried at the institute will be the hallmark of the auspicious occasion this year.

Let me take the opportunity to thank all the members of Academic & Research Committee and Scientific Publication Committee for their support and participation. With all my heart, I congratulate the organizing committee for their tireless job in bringing about the various proceedings and events on the occasion.

I am also thankful to the director for his guidance.

I wish the event a grand success.

Prof. G.K. Medhi,
Chairman of the Scientific Publication Committee
Head of the Department of Community Medicine, NEIGRIHMS
6th Convocation, Annual Day of NEIGRIHMS Research Presentation Programme is Co-ordinated By:

Academic and Research Committee:
- Chairman: Prof. P. K. Bhattacharya
- Secretary: Dr. R. Hajong
- Joint Secretary: Dr. Himesh Barman
- Members: Dr. Akash Handique, Dr. Binod Thakur, Dr. Massaraf Husaain, Dr. Biswajeet Saikia

Scientific Publication Committee:
- Chairman: Prof. G. K. Medhi
- Secretary: Prof. P.K. Goswami
- Joint Secretary: Dr. Annie B. Khyriem
- Members: Dr. Arup Jyoti Baruah, Dr. Julie Wahlang, Dr. Abhijeet Bhatia, Dr. Mohammad Jamil
SCIENTIFIC ABSTRACT PUBLICATION BOOK
of
6th Convocation, Annual Day NEIGRIHMS 2016

Edited by:

Dr Md. Yunus
Sub Dean Research
NEIGRIHMS
&
Organising Secretary
6th Convocation, Annual Day, Research Presentation Programme

Dr. G.K. Medhi
Professor & Head, Community Medicine
&
Chairman
Scientific & Publication Committee

CoEdited by:

Dr. Himesh Barman
Associate Professor, Paediatrics
&
Joint Secretary
Academic & Research Committee

Dr. Md. Jamil
Asstt. Professor, Medicine
&
Member
Scientific & Publication Committee

Dr. Julie Wahlang
Asstt. Professor, Pharmacology
&
Member
Scientific & Publication Committee
Awards & Certificates for 6th Convocation & Annual Day Research Presentation Programme (March 4th & 5th, 2016)

Prize & Awards Ceremony on 4th March 2016, 5:30 P.M. onwards at LT-I

Best Research Oral paper presentation:

A) Faculty

1st Prize: Dr. Pranjal Phukan, Department of Radiology
2nd Prize: Dr. Julie Wahlang, Department of Pharmacology
3rd Prize: Dr. Arindom Kakati, Department of Neurosurgery
Special Prize: Dr. Amitav Sarma, Department of Anatomy

B) SRD

1st Prize: Dr. Ripan Debbarma, Department of Pediatrics
2nd Prize: Dr. Frankie Shadap, Department of Neurosurgery

C) PG / Post Doctoral

1st Prize: Dr. Gouri Sankar Rudrapal, Department of Obstetrics & Gynecology
2nd Prize: Dr. Vikramjeet Singh, Department of Microbiology

D) College of Nursing:

1st Prize: Ms. Wandarica Tham

Best Poster Presentation:

A) Faculty

1st Prize: Dr. Pranjal Phukan, Department of Radiology
2nd Prize: Dr. Samarjeet Dey, Department of Anesthesiology & Critical care

B) SRD

1st Prize: Dr. Preeti J. Picardo, Department of General Medicine
2nd Prize: Dr. Joy Miller, Department of Neurosurgery

C) PG / Post Doctoral

1st Prize: Dr. Akash Roy, Department of General Medicine
2nd Prize: Dr. Girish Sharma, Department of General Surgery
1. Best Original Scientific Research Paper Publication in peer-reviewed indexed journal of good repute published in the year 2015-16:
   - Dr. S. R. Sharma, Associate Prof. Department of Neurology
   - Dr. T. Natung, Associate Professor, Department of Ophthalmology
   - Dr. Md. Jamil, Assistant Professor, Department of General Medicine
   - Prof. Vandana Raphael, Head, Department of Pathology

2. Best Senior Resident Award of NEIGRIHMS for the year 2016:
   1. Dr. Ripan Debbarma – Department of Pediatrics
   2. Dr. Ankit Kr. Jitani – Department of Pathology
   3. Dr. Taso Beyong – Department of General Medicine

3. Best Post Doctor Student for the year 2016:
   Dr. Pravin Kumar Jha – Department of Cardiology

4. Best Post Graduate Student for the year 2016:
   Dr. Kalyan Sarma - Department of Radiology

5. Best Nurse Award of NEIGRIHMS 2016:
   1. Ms. Dosiisa Losii – Obs & Gynae ward
   2. Ms. H. Leirikhombah – Staff Nurse - Operation Theatre (3rd Floor)
   4. Mr. Suresh Parmer, Staff Nurse – CTVS ICU
   5. Ms. Emerald Syiem, Staff Nurse – Emergency Department

6. Best Technician Award 2016 on Regular Service:
   1. Mr. Ajit Chandra Deka – Sr. X-Ray Technician – Department of Radiology
   2. Mr. Mrinal Mandal – Perfusionist – Department of CTVS
   3. Ms. Arwaka Passah – Senior Lab Technician – Department of Microbiology

7. Best Employee of NEIGRIHMS 2016 on Regular Service, Group B:
   1. Mr. Franky Pyngrope – Officer Superintendent – Esstt.-I
   2. Mr. Thwetstar Syngkon – AAO, Accounts Section

8. Best Employee of NEIGRIHMS 2016 on Regular Service, Group C:
   1. Mr. Moheshwar Kiling - UDC, GAD
   2. Mr. William Nongbah - MTS – Esst.- I
   3. Mr. Bristerwell Marbaniang – UDC – Estt.- III

9. Best Employee of NEIGRIHMS on Regular Service 2016:
   1. Mr. Ruban Sarma, Upper Division Clerk, Office of Dean
   2. Mr. Dinesh Rai, MTS, Office of Director
   3. Mr. Shanbokleng Kharbh, P.S, Office of Deputy Director
   4. Mr. Willington Dkhar, Plumber, Engineering section
   5. Mr. Ferdinand Jarain, Electrician, Engineering Section
   6. Mrs. Julie Romein Nongbet, UDC, Examination Section
   7. Mr. Boldwin Warjri, Storekeeper, Store & Procurement Section
   8. Ms. Badarilyne Ryntathiang, Sr. Stenographer, Department of Radiology (Best Employee Non-Technical from Hospital)

10. Best Employee of NEIGRIHMS 2016 on Contract Service:
    • Ms. Jeniba Lakashiang, Jr. Lab Technician, Department of Biochemistry

11. Best Attendant of NEIGRIHMS (Hospital) 2016 from Outsourced Service:
    1. Mr. Michael Nongkhlaw, Laundry
    2. Mr. Seibor Kshiar, PICU
    3. Ms. Wandakerlin Japang, Department of Anesthesiology
    4. Mr. Jopkupar Snaitang, Blood Bank
12. Best Attendant of NEIGRIHMS (Sanitation) 2016 from Outsourced Service:
   1. Mr. Direstin Lyngdoh, Department of Sanitation
   2. Ms. Richel Mylliemngap, Department of Sanitation

13. Best Attendant of NEIGRIHMS (Administration) 2016 from Outsourced Service:
   • Ms. Ridiancy Pathaw

14. Best Attendance in CGR 2016 (Weekly Scientific Programme of this Institute) for the year 2016:
   Faculty - Dr. R. Hajong, Associate Professor, General Surgery
   PG – Dr. Bidyut Bikash Gogoi, Department of Pathology

15. Best Security personnel of NEIGRIHMS on regular service-2016:
   • Mr. Gautam Tamang, Security Guard, NEIGRIHMS (Regular Service)

16. Best Security Personnel (Outsource Male) 2016:
   1. Mr. Pintu Deb
   2. Mr. Bashisur Khonglam

17. Best Security Personnel (Outsource Female) 2016:
   • Ms. Shaimita Kharthingmaw

18. “Best Extracurricular Activity Award” for MBBS Student.
   • Ms. Shreya Paul, MBBS Student, Batch 2015

Prizes & Awards during Convocation at Auditorium on 5th March 2016 1 P.M. onwards

1. Best Outgoing MBBS Student 2010 Batch: Ms. Linda Kongbam

2. Best Outgoing B.Sc Nursing Student 2011 Batch: Ms. Neizokhonuo Nancy Miasalhou

   1. Dr. A. B. Khyriem, Associate Prof. Department of Microbiology

4. Academic Excellence Award 2015:
   A. Faculty:
   1. Prof. Vandana Raphael,
      Dean, Academic, Head, Department of Pathology
   2. Prof. P.K. Bhattacharya,
      Head, Department of General Medicine
   3. Dr. Md. Yunus,
      Sub Dean (Research), Additional Prof, Department of Anesthesiology & Critical Care
   4. Dr. Akash Handique,
      Associate Prof, Department of Radiodiagnosis
   5. Dr. Bhaskar Borgohain,
      Associate Prof, Department of Orthopedics
   6. Dr. S. L. Sailo,
      Associate Prof, Department of Urology

   B. Nursing Faculty:
   • Ms. Catherine Myrthong,
      Associate Professor & In charge Principal, College of Nursing

   C. Award of Excellence (Administration):
   • Mr. David Umdor, Deputy Director (Admin)
   • Mr. Banthom Rynjeh, Assistant Registrar, Academic

Prof. Manuj K. Saikia
Organizing Chairman
Contents

Programme on March 4th 2016
(Scientific Research Presentation Programme) 1

Programme on March 5th 2016
(Indira Gandhi Oration & Convocation) 7

Publication in Medical Journals from NEIGRIHMS 8

Publication in Books from NEIGRIHMS 16

Abstract

1. Etiology Of Unilateral Sensorineural Hearing Loss
   Abhijeet Bhatia, Pranjal Phukan, Mr Goutam Polley 17

2. Vaginal pH: A marker for menopause
   Subrat Panda, Ananya Das, Abanthem Santa Singh, Star Pala 17

3. Clinical effects of Adjuvant immune-modulation therapy using pulse
   Levamisole therapy in the management of difficult osteo-articular tuberculosis
   Bhaskar Borgohain, Tashi G. Khonglah, Asst. Professor, Cherrymikki Tariang 18

4. Tattoo practices in North East India - A hospital based cross sectional study
   Binod Kumar Thakur, Shikha Verma 19

5. Single Atrium – A Rare Case Report
   Amitav Sarma, Goutam Ch. Das, Jyotiprasad Kalita, Monuj Kumar Saikia, Bishwojeet Saikia 19

6. Results of Chronic Osteomyelitis treated by Antibiotic impregnated PMMA beads
   Bhaskar Borgobain, Tashi Khonglah, Cherrymikki Tariang 20

   Lyngdoh CJ, Bora I, Lyngdoh WV, Khyriem AB, Dass R, Dutta V 21

8. Pattern of Physical assault against women: a hospital perspective
   Daunipaia Slong, A.D. Ropmay, A.R. Marak, S.Barman, S. Konwar, A.J. Momin 21

9. Repair of Uro-genital fistula: Experience over 8 years from North-East India
   Stephen L.Sailo, Syed Wasim, Vakha, Mukut Debnath 22

10. Evolving A New Techniques For Cleaning Embalmed Cadaver Bones
    Biraj Bhuayan, Dr. Gautam Ch Das, Amitav Sarma 22

11. Transformaminal Lumbar Interbody Fusion (TLIF): A single center experience
    ArindomKakati 23

12. Castleman’s disease with calcifying fibrous tumor like features and co-existing hepatitis
    B virus Infection
    Evarisalin Marbaniang, Yookarin khonglah, Neizekhotuo Brian Shunyu, Bidyut Gogoi 23

13. Ear, Nose and Throat foreign bodies removed under general anaesthesia : A retrospective study.
    Hanifa Akthar, Brain N B Shunyu, Habib R Karim, Nari M Lyngdoh, Md.Yunus 24

14. Spectrum of childhood kidney diseases: 5 years experience
    Himesh Barman, Sourabh Gohain Duwarah 25

15. Clinical profile of children diagnosed with Tuberculosis in Tertiary hospital
    - a retrospective analysis
    Sourabh G Duwarah, Rosina Ksoo, Himesh Barman 25
Masaraf Hussain, S.R.Sharma, Hibu Habung

17. Spectrum of Pulmonary and Extra-pulmonary Tuberculosis: A two year retrospective study
Md. Jamil, Monaliza Lyngdoh, P. K. Bhattacharya, Akash Roy

18. Spectrum of Glomerular Diseases in Adult: A study from North East India.
Md. Jamil, P K Bhattacharya, Vandana Raphael, Y. Khonglab, Monaliza Lyngdoh, Akash Roy

19. AntiRabies Vaccine and Adverse drug Events: An Experience In An Antirabies Clinic Of North-East India
Julie Birdie Wahlang, Maxilline D.Marak, D.K.Brahma, Lalromawii, Joonmoni Lahon

20. Genital TB- A hidden threat to fertility- A case series of 4 patients
Dr. Manika Agarwal

21. Obstetric outcome in an era of active management for obstetric cholestasis
Nalini Sharma

22. Incisional Endometriosis—Can we prevent it?
Dr. Nalini Sharma, Dr Megha Nandwani, Dr. J Lalnunnem Theik, Dr. Santa Singh Abanther

23. Autologous Bone Marrow Progenitor Cell Transplantation for Therapeutic Angiogenesis in Critical Lower Limb Ischemia: A case report
Pranjal Phukan, Akash Handique, C. Daniala

24. Group formative feedback—relevance in professional development in preclinical years
Rituparna Barooab

25. A Clinicopathological Study Of Subcutaneous Mycoses From North East India
Shikha B. Thakur, Binod Thakur

26. Missed opportunity to diagnosed pulmonary tuberculosis at a tertiary care hospital
Dhanjit Nath, Swapan Kumar Saha, Happy Chutia, Amit Malviya, Manish Kapoor

27. Impact of Low Level of HDL-Cholesterol on Clinical Outcomes in ACS Patients Undergoing PCI
Dhanjit Nath, Swapan Kumar Saha, Happy Chutia, Amit Malviya, Manish Kapoor

28. Sutureless, Glue-less Conjunctival Autograft versus Conjunctival Autograft with Sutures in surgeries for Primary, Advanced Pterygium: A Comparative Study
Tanie Natung

29. A rare localization of an Osteochondroma involving the Scapula: a case report
Tashi G. Khonglah, Assistant Professor, Bhaskar Borgohain, Cherrymiki Tariang

30. Early experience with NPWT in management of difficult wounds at NEIGRIHMS
Tashi G. Khonglah, Bhaskar Borgohain, Cherrymiki Tariang

31. Association of thyroid disorders in females with primary infertility attending a tertiary-care hospital in northeast India
Chandan Nath, Happy Chutia, Alice Abraham Ruram, Akash Handique, Ananya Das

32. Association of Serum Magnesium Deficiency with Insulin Resistance in Type 2 Diabetes Mellitus
Happy Chutia, KG Lynrah, Alice Ruram, Chandan Nath

33. A Survey Study on the Emerging Role of Virtual Dissection Technology in Integrated Medical Teaching
Sarah Ralte, Asima Bhattacharyya
34. Comparison of Intraocular Pressure and Central Corneal Thickness in Non-Glaucomatous North-East Indian Tribals versus General Indians
   Aroonu Keditsu

35. A cross-sectional study to determine Prevalence of TB in Urban Slums of Shillong
   Sarkar Amrita, Talukdar Kasibik, Bora Madhab, Bhattacharyya Himabree, Pala Star, Medhi G.K

36. Clinical Profile of HSP in Children Attending Tertiary Care Centre
   R. Koo, Barman HI, Saurabh D

37. Challenges in the surgical management of oral cavity carcinoma- our experience
   Deepanava Das, N.B. Shunyu, Hanika Akhtar, A. Bhatia, Emanuel Momin

38. A prospective study on antimicrobial resistance in Neisseria gonorrhoeae
   : a re-emerging pathogen
   Elantamilan D, Khyriem AB, Lyngdoh WV, Dutta V

39. Detection Of New Delhi Metallo-Î²-Lactamase-1 (Ndm-1)
   Producing Enterobacteriaceae In Intensive Care Unit, Neigrihms
   Jyotismita Rajbongshi, Wihibov Valerie Lyngdoh, Pritwis Bhattacharyya, Annie Bakorlin
   Khyriem, Elantamilan Durairaj

40. Audit Of Neonatal Services Of Neigrihms: Analysis Of 2years Secondary Data
   Jeevan Silwal, Himesh Barman, Saurabh Gobain Duwarab

41. Intra-Articular Injection Of Platelet-Rich Plasma In The Management Of Chronic Low Back Pain Due To Facet Arthropathy: A Case Report With 12 Months Follow-Up
   Samarjit Dey

42. Health Camps: are we reaching the unreached?
   Rapthap K, Barman H, Duwarab SG

43. Pediatric lupus nephritis: an experience from north east India
   Ripan Debgharma, Himesh Barman, Saurabh Gobain Duwarab

44. Natural Killer Cell Lymphoma : A Case With Classification Dilemma
   Ankit Kumar Jitani, Youkarin Khonglah, Vandana Raphael, Ritesh Kumar, Bidyut Bikash Gogoi

45. Miliary Tuberculosis Complicated By Left Sided Pleural Effusion
   And Acute Respiratory Distress Syndrome
   Iadarilang Tiewsoh, Dr Bhupen Barman, Dr KG Lynrah, Dr Tasbo Beyong, Dr Neel Kantth Issar

46. Varied Presentations Of Myeloid Sarcoma: A Report Of 3 Cases
   Nababita Das, Vandana Raphael, Youkarin Khonglah, Jaya Misba, Ekta Jajodia, Ankit Kumar Jitani

47. Plasmodium Vivax Malaria with Severe Thrombocytopenia and Varied Skin Manifestations: A Case Report
   Tony Ete, Akash Roy, Prasanta Kumar Bhattacharya, Preeti Jane Picardo, Md Jamil,
   Ibandalin M Shangpliang, Chobin, Hage Nobin

48. Apocrine Hydrocystoma: Case reports of A Rare Benign Tumor
   Hage Nobin, Vandana Raphael, Pranoy Paul, Bidyut Bikash Gogoi, Ekta Jadoja

49. Post-ictal psychosis with self amputation of foot in a patient with epilepsy: a case report
   Sbri Ram Sharma, Arvind Nonpiur, Masaraf Hussain, Hibu Habung

50. Von Hippel-Lindau Syndrome (A Rare Multi-systemic Disease) ~ A NEIGRIHMS Experience
   Arindom Kakati, Joy L. Miller
51. Adverse Drug Reactions (Adr) Due To Cancer Chemotherapy In A Tertiary Care Teaching Hospital
   Jb Wahlang, L. Purnima Devi, C. Sarkar, R Kumar, D. k Brahma, Banjila S Nongkynrih, J Labon

52. Nimesulide Induced Leukocytoclastic Vasculitis And Hepatitis: A Case Report
   Prasanta Kumar Bhattacharya, Obang Perme , Bhaban Barman, Aakash Roy, Md Jamil, Monaliza Lyngdoh and jaya Mishra

53. Glycogen storage disease type 1a presenting as gouty arthritis in a young female without hypoglycaemia
   Tony Ete, Preeti Jane Picardo, Prasanta K. Bhattacharya, Animesh Misbra, Yookarin Khonglah, Jaya Mishra, Rinchin Dorjee, Monaliza Lyngdoh

54. Posterior Reversible Encephalopathy Syndrome In Hemophagocytic Lymphohistiocytosis
   Ripan Debbarma, Himesh Barman, Pranjal Phukan, Sriparna Dhar

55. Early experience with MIPO for difficult fractures at NEIGRIHMS
   Bhaskar Borgohain, Cherrymiki Tariang

56. Minimally Invasive Spine Surgery (MISS): A revolution in spinal surgery
   Dibyajyoti Bora, Arindom Kakoti, Frankie S Siangshai, joy L Miller

57. Neural Tube Defects : A single centre experience
   Frankie Shadap Siangshai, Arindom Kakoti, Joy Miller, Dibyajyoti Borah

58. Damage control orthopedics (DCO): the NEIGRIHMS experience
   Bhaskar Borgohain, Dukhum Magu

59. Lupus Pneumonitis mimicking Pulmonary Tuberculosis: A masquerade
   Prasanta Kumar Bhattacharya, Akash Roy, Md Jamil, Monaliza Lyngdoh, Kishore Kumar Talukdar

60. A Retrospective study of papillary carcinoma Thyroid in a tertiary care centre
   Aman MMA, Misbra J, Raphael V, Khonglah Y, Shunyu N B

61. Comparison of Extravascular Lung Water and chest X ray scores in ICU patients with APACHE II > 20
   A. Bhattacharyee, P. Bhattachurrya, Md Yunus, C. Daniala, A. Handique

62. Analysis of Lymphocyte Subsets in Alcoholic liver Disease
   Bidyut Bikash Gogoi, Vandana Raphael, K. G. Lyruab, Akash Handique, Noor Topno, Ankit Jitani

63. Endovascular management of intracranial aneurysm in an infant
   C. Barnab, P. Phukan, A. Handique, C. Daniala

64. Rheumatic Heart Disease Presenting with Quadrivalvular involvement: A case report
   Das KC, Mishra A, Kapoor M, Malviya A, Saba S

65. Assessment of Neutrophils/Lymphocytes ratio in suspected patients of acute coronary syndrome
   Dhanjit Nath, jaya Mishra, Amit Malviya, Animesh Misbra

66. Candida tropicalis – A study of virulence factors and antifungal susceptibility profile of the clinical isolates of an emerging non-albicans Candida spp
   Elantamilan D, W ValarieLyngdoh, Sneha Gupta, Diptanu Paul

67. Incidence of Gastrointestinal Malignancies In Tertiary Care Hospital
   Neel Kanth Issar, K.G Lyruab , B.Barman , Yookarin Khonglah

68. Study of viruses infecting upper respiratory tract with special reference to Respiratory Syncytial Virus in paediatrics patients attending NEIGRIHMS.
69. Paragonimus & Paragonimiasis In Meghalaya – Invasion Of Greener Pastures?  
P Chakraborty, A B Khyriem, W V Lyngdoh, S Gupta, S G Duwarah

70. Comparative evaluation of hemodynamic response, efficacy & safety of Levosimendan, Milrinone and Dobutamine in patients with low cardiac output syndrome following cardiopulmonary bypass for valve replacement surgeries. 
Sunny Aggarwal, MD Yunus, Prithwis Bhattacharyya, Mannu Saikia

71. Role of brush cytology and AgNOR in diagnosis of oral premalignant and malignant lesions 
Ekta Jajodia, Vandana Raphael, N. Brian Shunyu, Star Pala, Sarab Ralte, Ankit Jitani

72. Microalbuminuria as predictor of severity of coronary artery disease in non-diabetic patients 
Pravin kumar Jha, Manish Kapoor, Amit Malviya, Happy Chutia

73. Cholelithiasis with Factor XI deficiency: the devil and the deep sea 
Girish Sharma, R Hajong, A J Barnab, M Anand

74. Fetal Kidney Length and Transverse Diameter of Fetal Heart Measurement for Estimation of Gestational Age in Comparison to Conventional Parameters 
Gouri Sanjay Rudrapal, S. Panda, A.S. Singh, P. Phukan, N. Sharma, A. Das

75. Paraganglioma of the CaudaEquina region. A case report 
Gupta A (post graduate trainee), Misra J, Raphael V, Khonglah Y, Marbaniang E, Kakati A

76. Multimodality Imaging In Diagnosis Of Non-Specific Aortoarteritis: Mri With Contrast Enhanced Mr Angiography And Multi-Detector Ct Angiography To Determine Extent Of Involvement & Correlation With Disease Activity 
Sarma K, Handique A, Daniela C, Phukan P, Saikia M, Kapoor M, Lynrah KG

77. Spontaneous enterocutaneous fistula following inguinal hernia: a rare case report 
K. Lenish Singh, R. Hajong, A.J. Barnab

78. Type 1 Gall Bladder Perforation As A Rare Complication Of Cholangitis Causing Diagnostic Dilemma 
Madhur Anand, R. Hajong, A. J. Barnab

79. Squamous cell carcinoma in mature cystic teratoma of the ovary: a rare case report 
Das A, Nandwani M, Khan D, Singh A

80. Evaluation & screening for pre-invasive lesions of cervix by Visual Inspection with Acetic Acid (VIA) & Visual Inspection with Lugol's Iodine (VILI) in comparison with Pap smear 
Shweta Misra, Manika Agarwal, A. S. Singh

81. Sarcoidosis - A Diagnostic approach 
Paul Pranoy, Raphael V, Khonglah Y, Misra J, Marbaniang E, Lynrah KG, Jitani A

82. Prevalence of Non-albicans Candidemia in a tertiary care hospital in North East India 
Bora I, Prasad A, Lyngdoh W V, Khyriem AB, Lyngdoh CJ

83. Mean Signal Intensity Curve Analysis Of Brain Tumours By Dsc Mr Perfusion Imaging 
Ranjit Meher, C. Daniela, P. Phukan, A. Kakati, M Hussain, Y. Khonglab
84. Aetiology and Prognosis of Acute Kidney Injury – A Hospital based study in northeast India
Bhattacharya PK, Roy A, Md Jamil, Lyngdoh M, Talukdar K

85. Diagnostic dilemma: lupus related hepatitis versus autoimmune hepatitis in systemic lupus erythematosus
Samir Joshi, Bhupen Barman, KG Lynrah

86. Effect Of Topical Phenytoin On Wound Healing
Sandeep Ghosh, R Hajong

87. Isolated Tubercular Subcapsular Liver Abscess: A Rare Manifestation of Extrapulmonary Tuberculosis
Prasanta Kumar Bhattacharya, Aakash Roy, Md Jamil, Kishore Kumar Talukdar, Yookarin Khonglah, Kalyan Sarma

88. Comparative evaluation of conventional (manual) blood culture system and BacT/ALERT 3D (automated) blood culture system in a Tertiary care hospital
Elantamilan, T S Devi, Lyngdoh WV, Banik A, Khyriem AB, Bhattacharyya P, Barman H, Phukan AC

89. An Uncommon Case Of Filum Terminale Paraganglioma: A Case Report
Taraprasad Tripathy, Ranjit Meher, Pranjol Phukan, Arindom Kakati, Jaya Mishra

90. A Menace of Candida biofilms: Prospective study among the intensive care unit patients in tertiary health care centre in North east India
V Singh, I Bora, W V Lyngdoh, A B Khyriem, C J Lyngdoh

91. A comparative study to assess the knowledge regarding the ill-effects of tobacco consumption among boys and girls studying in selected higher secondary schools in Meghalaya
Ms C E Myrthong (Guide), Ms Hima Das (Co-guide), Banyllashisha Kharbitai, A Manizhiia Kayina, Aitimary Sangrang, Badasukshisha Nongbri, Barsba Sensua, Bawanpli Myring, Dakernaki Shadap, Gayatri Baragobain, Heimonmi Pohlong, Ibahunlang Nongsiej, Kh Roji Devi, Khwiramusa Boro, M Kimingdli, Pisa Yama, Rosylene Shangpliang, Sophia S. Suchiang, Sibani Mazumdar, Sweata Moirangthem, Ts Rican, Tenglang Bubhbang

92. A Study to Assess the Level of Stress and Coping Strategies among Nursing Students Studying in Selected Nursing Institutes in Shillong, Meghalaya
Ms Bina Kjongluh (Guide), Ms Purabi Devi (Co-guide), Kimneijou Khongsai, Angelie Ljingboikim, Dolly Valour Syiemiong, Khadem Anjibala, Hannah Barain, Larisa Palei Wablang, Lonsbamhjem Media Devi, Leiron Abhia Kom, Rimpi Talukdar, Minaci Mazumdar, Thokchom Milanda Devi, N. Biyarrani Devi

93. A study to assess the knowledge and attitude regarding HIV/AIDS and its prevention among class IX-XII students of selected Higher Secondary Schools in the urban area of Shillong
Ms Bina Kjongluh (Guide), Ms Purabi Devi (Co-guide), Leichombham Kalpana Devi, Angela Mukteib, Hennam Devina Devi, Jessica S. Warlapib, Judygiagre Khongbat, Kholi Eloni, Lynda Ngaihoiniang, Nabam Apung, Munisa Hijam, Philarisbisha Chyne, Philarisbalyne Syiem, Pinky Chetia, Rijun Sharma, Shelia Huidrom, Wadborlang Lyngdoh Marshillong, Yengkhoi Romjaka Devi

94. Comparing the corneal astigmatism in leprosy patients as compared to their age-matched normal population
Benjamin Nongrum, Shirley Chacko, Priya Thomas Mathew, Paulson
95. Psychiatric Complications In Chronic Kidney Disease (Ckd) Patients In North East India: Exploratory Study
Arvind Nongpiur, Dehir Roy, Monaliza Lyngdoh, Asst. Prof., Medicine

96. Serum Lipid profile in Malaria : A diagnostic clue
Bhupen Barman, Tony Ete, Dr. Syrung B Warjri, K G Lyraab

97. A descriptive study to assess the knowledge regarding weaning practice of infants among mothers having children below one year of age in a selected area of Meghalaya

98. Myocardial Infarction In Coronary Artery Fistula: An Uncommon Presentation
Animesh Mishra, Manish Kapoor, Tony Ete, Rinchin Dorjee Megjeji, Pravin Kumar Jha, Gaurav Kavi

99. Perioperative Myocardial Infarction- A Tough Challenge
Manish Kapoor, Tony Ete, Pravin Jha, Rinchin Dorjee Megeji

100. Thyroid Hormone Profile In Acute Coronary Syndrome Patients
Pravin Kumar Jha, Manish Kapoor, Amit Malviya, Happy Chutia, Chandra Kumar Das

101. Orbital diffuse large B cell lymphoma in a Paediatric patient: A rare case report
Thangkiew L., Nongrum B, Shullai W, Goswami PK

102. Opioid Overdose: Knowledge and Practices among Health Care Providers in Meghalaya
Himashree

103. A Comparative Study to Assess the Effectiveness of Poster Method on the Wall and Pictorial Method on Bins on Knowledge and Practice of Students and Health Care Workers Regarding Segregation of Bio-Medical Waste in NEIGRIHMS Hospital

104. A Cross-Sectional Study to Assess the Knowledge Regarding First-Aid Management of Selected Minor Injuries among Teachers of Selected School of Meghalaya

105. Title Delayed Hemolytic Transfusion Reaction (DHTR) due to Anti-c (small) & Anti N: A case report
Sharma B.S, Lyngdoh L.N, Marbanian E., Bhattacharyya D., Kibiar S. L., Das K.R.

The 12th South Asian Games at NEIGRIHMS Shillong
Perioperative Productivity & Efficiency of NEIGRIHMS Operation Theatre on a day
Landmark work done by Department of Medical Education, NEIGRIHMS (2015-16)
Organizing Committee for 6th Convocation, Annual Day, NEIGRIHMS
Scientific Programme

Session – I

Faculty Oral Presentation
(Lecture Theatre-II)
Time: 9:20 AM to 10:40 AM
Chair Person: Prof Sajida Ahmed, Prof Vandana Rapheal, Prof P K Goswami, Prof Animesh Mishra

<table>
<thead>
<tr>
<th>Timing</th>
<th>Abstract No.</th>
<th>Title/Topic</th>
<th>Speaker</th>
<th>Department</th>
</tr>
</thead>
<tbody>
<tr>
<td>9:20-9:30AM</td>
<td>ABS031</td>
<td>Association of thyroid disorders in females with primary infertility attending a tertiary-care hospital in northeast India</td>
<td>Chandan Nath</td>
<td>Biochemistry</td>
</tr>
<tr>
<td>9:30-9:40AM</td>
<td>ABS032</td>
<td>Association of Serum Magnesium Deficiency with Insulin Resistance in Type 2 Diabetes Mellitus.</td>
<td>Happy Chutia</td>
<td>Biochemistry</td>
</tr>
<tr>
<td>9:40-9:50AM</td>
<td>ABS014</td>
<td>Spectrum Of Childhood Kidney Diseases : 5 Years Experience.</td>
<td>Himesh Barman</td>
<td>Paediatrics</td>
</tr>
<tr>
<td>9:50-10:00AM</td>
<td>ABS018</td>
<td>Spectrum of glomerular diseases in adults: A study from North Eastern India</td>
<td>Md. Jamil</td>
<td>Genl. Medicine</td>
</tr>
<tr>
<td>10:00-10:10AM</td>
<td>ABS006</td>
<td>Results of Chronic Osteomyelitis treated by Antibiotic impregnated PMMA beads</td>
<td>Bhaskar Borgohain</td>
<td>Orthopaedics</td>
</tr>
<tr>
<td>10:10-10:20AM</td>
<td>ABS094</td>
<td>Comparing the corneal astigmatism in leprosy patients as compared to their age-matched normal population</td>
<td>Benjamin Nongrum</td>
<td>Ophthalmology</td>
</tr>
</tbody>
</table>

Session – II

Faculty Oral Presentation
(Lecture Theatre-II)
Time: 11:00 AM – 12:30 PM
Chair Person: Prof Sajida Ahmed, Prof Vandana Rapheal, Prof P K Goswami, Prof Animesh Mishra

<table>
<thead>
<tr>
<th>Timing</th>
<th>Abstract No.</th>
<th>Title/Topic</th>
<th>Speaker</th>
<th>Department</th>
</tr>
</thead>
<tbody>
<tr>
<td>11:00-11:10AM</td>
<td>ABS001</td>
<td>Etiology of unilateral sensorineural hearing loss</td>
<td>Abhijeet Bhatia,</td>
<td>Otorhinolaryngology</td>
</tr>
<tr>
<td>11:20-11:30AM</td>
<td>ABS003</td>
<td>Clinical effects of Adjuvant immune-modulation therapy using pulse Levamisole therapy in the management of difficult osteo-articular tuberculosis</td>
<td>Bhaskar Borgohain</td>
<td>Orthopaedics</td>
</tr>
<tr>
<td>11:30-11:40AM</td>
<td>ABS004</td>
<td>Tattoo Practices In North East India- A Hospital Based Cross Sectional Study</td>
<td>Binod Thakur</td>
<td>Dermatology</td>
</tr>
<tr>
<td>11:40-11:50AM</td>
<td>ABS008</td>
<td>Physical assault against women: a hospital perspective</td>
<td>Daunipaia Slong</td>
<td>Forensic</td>
</tr>
<tr>
<td>11:50-12:00 Noon</td>
<td>ABS009</td>
<td>Repair of Uro-genital fistula: Experience over 8 years from North-East India</td>
<td>Stephen L.Sailo</td>
<td>Urology</td>
</tr>
<tr>
<td>12:00-12:10PM</td>
<td>ABS010</td>
<td>Evolving a new techniques for cleaning embalmed Cadaver bones</td>
<td>Amitava Sarma</td>
<td>Anatomy</td>
</tr>
<tr>
<td>12:10-12:20PM</td>
<td>ABS011</td>
<td>Transforminal lumbar interbody fusion: A single centre experience.</td>
<td>Arindom Kakati,</td>
<td>Neurosurgery</td>
</tr>
</tbody>
</table>
### Session – III

**Faculty Oral Presentation**
*(Lecture Theatre-II)*

**Time:** 1:30 PM – 3:00 PM

**Chair Person:** Prof Prof Sajida Ahmed, Prof Vandana Rapheal, Prof PK Goswami and Prof Animesh Mishra

<table>
<thead>
<tr>
<th>Timing</th>
<th>Abstract No.</th>
<th>Title/Topic</th>
<th>Speaker</th>
<th>Department</th>
</tr>
</thead>
<tbody>
<tr>
<td>1:30-1:40PM</td>
<td>ABS013</td>
<td>Ear, Nose and Throat foreign bodies removed under general anaesthesia: A retrospective study.</td>
<td>Hanifa Akthar</td>
<td>Otorhinolaryngology</td>
</tr>
<tr>
<td>1:40-1:50PM</td>
<td>ABS030</td>
<td>Early experience with NPWT in management of difficult wounds at NEIGRIHMS</td>
<td>Tashi G. Khonglah</td>
<td>Orthopaedics &amp; Trauma</td>
</tr>
<tr>
<td>1:50-2:00PM</td>
<td>ABS021</td>
<td>Obstetric outcome in an era of active management for obstetric cholestasis.</td>
<td>Nalini Sharma,</td>
<td>Obstetrics &amp; Gynecology</td>
</tr>
<tr>
<td>2:00-2:10PM</td>
<td>ABS024</td>
<td>Group formative feedback—relevance in professional development in preclinical years</td>
<td>Rituparna Barooah,</td>
<td>Physiology</td>
</tr>
<tr>
<td>2:00-2:10PM</td>
<td>ABS025</td>
<td>A clinicopathological Study Of Subcutaneous Mycoses From North East India</td>
<td>Shikha</td>
<td>Dermatology</td>
</tr>
<tr>
<td>2:10-2:20PM</td>
<td>ABS027</td>
<td>Impact of Low Level of HDL-Cholesterol on Clinical Outcomes in ACS Patients Undergoing PCI</td>
<td>Swapan Kumar Saha,</td>
<td>Cardiology</td>
</tr>
<tr>
<td>2:20-2:30PM</td>
<td>ABS028</td>
<td>Sutureless, Glue-less Conjunctival Autograft versus Conjunctival Autograft with Sutures in surgeries for Primary, Advanced Pterygium: A Comparative Study</td>
<td>Tanie Natung</td>
<td>Ophthalmology</td>
</tr>
<tr>
<td>2:30-2:40PM</td>
<td>ABS033</td>
<td>A Survey Study on the Emerging Role of Virtual Dissection Technology in Integrated Medical Teaching’</td>
<td>Sarah Ralte,</td>
<td>Anatomy</td>
</tr>
</tbody>
</table>

### Session – IV

**Faculty Oral Presentation**
*(Lecture Theatre-II)*

**Time:** 3:15 PM – 4:45 PM

**Chair Person:** Prof Sajida Ahmed, Prof Vandana Rapheal, Prof PK Goswami, Prof Animesh Mishra

<table>
<thead>
<tr>
<th>Timing</th>
<th>Abstract No.</th>
<th>Title/Topic</th>
<th>Speaker</th>
<th>Department</th>
</tr>
</thead>
<tbody>
<tr>
<td>3:15-3:25PM</td>
<td>ABS096</td>
<td>Serum Lipid profile in Malaria : A diagnostic clue</td>
<td>Bhupen Barman</td>
<td>General Medicine</td>
</tr>
<tr>
<td>3:25-3:35PM</td>
<td>ABS026</td>
<td>Missed opportunity to diagnosed pulmonary tuberculosis at a tertiary care hospital</td>
<td>Star Pala</td>
<td>Community Medicine</td>
</tr>
<tr>
<td>3:35-3:45PM</td>
<td>ABS020</td>
<td>Genital TB- A hidden threat to fertility- A case series of 4 patients: North Eastern Indira Gandhi Regional Institute Of Health And Medical Sciences (NEIGRIHMS), Shillong, Meghalaya</td>
<td>Manika Agarwal</td>
<td>Obst &amp; Gynaec</td>
</tr>
<tr>
<td>3:45-3:55PM</td>
<td>ABS015</td>
<td>Clinical profile of children diagnosed with Tuberculosis in Tertiary hospital - a retrospective analysis</td>
<td>Saurabh Duwarah</td>
<td>Pediatrics</td>
</tr>
<tr>
<td>3:55-4:05PM</td>
<td>ABS017</td>
<td>Spectrum of Pulmonary and Extra-pulmonary Tuberculosis: A two year retrospective study</td>
<td>Md. Jamil/Monaliza</td>
<td>Genl. Medicine</td>
</tr>
<tr>
<td>4:05-4:15PM</td>
<td>ABS019</td>
<td>AntiRabies vaccine And Adverse Drug events:An Experience In An Antirabies Clinic Of North-East India</td>
<td>Julie Wahlang,</td>
<td>Pharmacology</td>
</tr>
<tr>
<td>4:05-4:15PM</td>
<td>ABS007</td>
<td>Urinary Tract Infection in Pediatric Population: Etiology and Resistance Pattern</td>
<td>Lyngdoh CJ</td>
<td>Microbiology</td>
</tr>
<tr>
<td>4:15-4:25PM</td>
<td>ABS102</td>
<td>Opioid Overdose: Knowledge and Practices among Health Care Providers in Meghalaya</td>
<td>Himashree</td>
<td>Community Med</td>
</tr>
</tbody>
</table>
Session – I

Oral Presentation: College of Nursing

(Lecture Theater-I)

Time: 9:20 AM to 10:40 AM

Chair Person: Dr. Md. Yunus, Dr. Bhaskar Borgohain, Dr. S L Sailo, Dr. Star Pala

<table>
<thead>
<tr>
<th>Timing</th>
<th>Abstract No.</th>
<th>Title/Topic</th>
<th>Speaker</th>
<th>Department</th>
</tr>
</thead>
<tbody>
<tr>
<td>9:20-9:30AM</td>
<td>ABS097</td>
<td>A descriptive study to assess the knowledge regarding weaning practice of infants among mothers having children below one year of age in a selected area of Meghalaya</td>
<td>Anusuya Goswami</td>
<td>College of Nursing</td>
</tr>
<tr>
<td>9:30-9:40AM</td>
<td>ABS091</td>
<td>A comparative study to assess the knowledge regarding the ill-effects of tobacco consumption among boys and girls studying in selected higher secondary schools in Meghalaya</td>
<td>Banvillashisha Kharbhiat</td>
<td>College of Nursing</td>
</tr>
<tr>
<td>9:40-9:50AM</td>
<td>ABS092</td>
<td>A Study to Assess the Level of Stress and Coping Strategies among Nursing Students Studying in Selected Nursing Institutes in Shillong, Meghalaya</td>
<td>Kimmeijou Khongsai</td>
<td>College of Nursing</td>
</tr>
<tr>
<td>9:50-10:00AM</td>
<td>ABS093</td>
<td>A study to assess the knowledge and attitude regarding HIV/AIDS and its prevention among class IX-XII students of selected Higher Secondary schools in the urban area of Shillong</td>
<td>Leichombam Kalpana</td>
<td>College of Nursing</td>
</tr>
<tr>
<td>10:00-10:10AM</td>
<td>ABS103</td>
<td>A Comparative Study to Assess the Effectiveness of Poster Method on the Wall and Pictorial Method on Bins on Knowledge and Practice of Students and Health Care Workers Regarding Segregation of Bio-Medical Waste in NEIGRIHMS Hospital</td>
<td>A Dipomala Devi</td>
<td>College of Nursing</td>
</tr>
<tr>
<td>10:10-10:20AM</td>
<td>ABS104</td>
<td>A Cross-Sectional Study to Assess the Knowledge Regarding First-Aid Management of Selected Minor Injuries among Teachers of Selected School of Meghalaya</td>
<td>Wandarica Tham</td>
<td>College of Nursing</td>
</tr>
</tbody>
</table>

Session – II

(Lecture Theatre-I)

Oral Presentation: PG / Post- Doctoral

Date 4th March 2016, Time: 11:00AM – 12:30 PM

Chair Person: Prof A. Bhattacharyya, Prof C. Sarkar, Prof G K Medhi

<table>
<thead>
<tr>
<th>Timing</th>
<th>Abstract No.</th>
<th>Title/Topic</th>
<th>Speaker</th>
<th>Department</th>
</tr>
</thead>
<tbody>
<tr>
<td>11:00-11:10AM</td>
<td>ABS060</td>
<td>A Retrospective Study Of Papillary Carcinoma Thyroid In A Tertiary Care Centre</td>
<td>Aman M M A</td>
<td>Pathology</td>
</tr>
<tr>
<td>11:10-11:20AM</td>
<td>ABS061</td>
<td>Comparison Of Extravascular Lung Water And Chest X Ray Scores In Icu Patients With APACHE II &gt; 20</td>
<td>Anirban</td>
<td>Anesthesiology</td>
</tr>
<tr>
<td>11:20-11:30AM</td>
<td>ABS062</td>
<td>Analysis Of Lymphocyte Subsets In Alcoholic Liver Disease</td>
<td>Bidyut Bikash Gogoi</td>
<td>Pathology</td>
</tr>
<tr>
<td>11:30-11:40AM</td>
<td>ABS065</td>
<td>Assessment Of Neutrophils/Lymphocytes Ratio In Suspected Patients Of Acute Coronary Syndrome</td>
<td>Dhanjit Nath</td>
<td>Cardiology</td>
</tr>
<tr>
<td>11:40-11:50AM</td>
<td>ABS066</td>
<td>Candida Tropicalis – A Study Of Virulence Factors And Antifungal Susceptibility Profile Of The Clinical Isolates Of An Emerging Non-Albicanscandida Spp</td>
<td>Diptanu Paul</td>
<td>Microbiology</td>
</tr>
<tr>
<td>11:50-12:00 noon</td>
<td>ABS067</td>
<td>Incidence Of Gastrointestinal Malignancies In Tertiary Care Hospital</td>
<td>Neel Kanth Issar</td>
<td>Medicine</td>
</tr>
<tr>
<td>12:00-12:10PM</td>
<td>ABS068</td>
<td>Study Of Viruses Infecting Upper Respiratory Tract With Special Reference To Respiratory Syncytial Virus In Paediatrics Patients Attending Neigiruhs, Shillong</td>
<td>Papa Chakraborty</td>
<td>Microbiology</td>
</tr>
<tr>
<td>12:10-12:20PM</td>
<td>ABS070</td>
<td>Comparative Evaluation Of Hemodynamic Response, Efficacy &amp; Safety Of Levosimendan, Milrinone And Dobutamine In Patients With Low Cardiac Output Syndrome Following Cardiopulmonary Bypass For Valve Replacement Surgeries</td>
<td>Sunny</td>
<td>Anesthesiology</td>
</tr>
<tr>
<td>12:20-12:30PM</td>
<td>ABS071</td>
<td>Role Of Brush Cytology And Agnor In Diagnosis Of Oral Pre malignant And Malignant Lesions.</td>
<td>Ektaj Jadodia</td>
<td>Microbiology</td>
</tr>
</tbody>
</table>
Session – III  
(Lecture Theatre-I)  
Oral Presentation : PG / Post- Doctoral  
Chair Person: Prof A. Bhattacharya, Prof C. Sarkar, Prof G K Medhi  

<table>
<thead>
<tr>
<th>Timing</th>
<th>Abstract No.</th>
<th>Title/Topic</th>
<th>Speaker</th>
<th>Department</th>
</tr>
</thead>
<tbody>
<tr>
<td>1:30-1:40PM</td>
<td>ABS072</td>
<td>Microalbuminuria As Predictor Of Severity Of Coronary Artery Disease In Non-Diabetic Patients</td>
<td>Pravin Kumar Jha</td>
<td>Cardiology</td>
</tr>
<tr>
<td>1:40-1:50PM</td>
<td>ABS074</td>
<td>Fetal Kidney Length And Transverse Diameter Of Fetal Heart Measurement For Estimation Of Gestational Age In Comparison To Conventional Parameters</td>
<td>Gouri Sankar Rudrapal</td>
<td>Obs &amp; Gynae</td>
</tr>
<tr>
<td>1:50-2:00PM</td>
<td>ABS076</td>
<td>Multimodality Imaging In Diagnosis Of Non-Specific Aortoarteritis: Mr With Contrast Enhanced MR Angiography And Multi-Detector CT Angiography To Determine Extent Of Involvement &amp; Correlation With Disease Activity.</td>
<td>Kalya Sarma</td>
<td>Radio Diagnosis</td>
</tr>
<tr>
<td>2:00-2:10PM</td>
<td>ABS080</td>
<td>Evaluation &amp; Screening For Pre-Invasive Lesions Of Cervix By Visual Inspection With Acetic Acid (Via) &amp; Visual Inspection With Lugol’s Iodine (Yili) In Comparison With Pap Smear</td>
<td>Sweta Mishra</td>
<td>Obs &amp; Gynae</td>
</tr>
<tr>
<td>2:10-2:20PM</td>
<td>ABS082</td>
<td>Prevalence Of Non-Albicans Candidemia In A Tertiary Care Hospital In North East India</td>
<td>Abhijit Prashad</td>
<td>Microbiology</td>
</tr>
</tbody>
</table>

Tea Break

<table>
<thead>
<tr>
<th>Timing</th>
<th>Abstract No.</th>
<th>Title/Topic</th>
<th>Speaker</th>
<th>Department</th>
</tr>
</thead>
<tbody>
<tr>
<td>2:20-2:30PM</td>
<td>ABS083</td>
<td>Mean Signal Intensity Curve Analysis Of Brain Tumours By DSC MR Perfusion Imaging</td>
<td>Ranjit Maher</td>
<td>Radio Diagnosis</td>
</tr>
<tr>
<td>2:30-2:40PM</td>
<td>ABS084</td>
<td>Aetiology And Prognosis Of Acute Kidney Injury – A Hospital Based Study In Northeast India</td>
<td>Akash Roy</td>
<td>Gen. Medicine</td>
</tr>
<tr>
<td>2:40-2:50PM</td>
<td>ABS086</td>
<td>Effect Of Topical Phenotoin On Wound Healing</td>
<td>Sandy</td>
<td>Gen. surgery</td>
</tr>
<tr>
<td>2:50-3:00PM</td>
<td>ABS088</td>
<td>Comparative Evaluation Of Conventional/Manual Blood Culture System And Bac/Alert 3d(Automated)/Blood Culture System In A Tertiary Care Hospital</td>
<td>T S Devi</td>
<td>Microbiology</td>
</tr>
<tr>
<td>3:00-3:10PM</td>
<td>ABS090</td>
<td>A Menace Of Candida Biofilms: Prospective Study Among The Intensive Care Unit Patients In Tertiary Health Care Centre In North East India</td>
<td>Vikramjeet</td>
<td>Microbiology</td>
</tr>
<tr>
<td>3:10PM-3:20PM</td>
<td>ABS100</td>
<td>Thyroid Hormone Profile In Acute Coronary Syndrome Patients</td>
<td>Chandra Das</td>
<td>Cardiology</td>
</tr>
</tbody>
</table>

Session – I  
(Lecture Theatre-III)  
Oral Presentation : Senior Resident Doctor  
Chair Person: Prof Sandra Albert, Prof P Bhattacharya, Prof P K Bhattacharya.

<table>
<thead>
<tr>
<th>Timing</th>
<th>Abstract No.</th>
<th>Title/Topic</th>
<th>Speaker</th>
<th>Department</th>
</tr>
</thead>
<tbody>
<tr>
<td>11:00-11:10AM</td>
<td>ABS034</td>
<td>Comparison Of Intraocular Pressure And Central Corneal Thickness In Non-Glaucomatous North-East Indian Tribal’s Versus General Indians</td>
<td>Avonuo Keditsu</td>
<td>Ophthalmology</td>
</tr>
<tr>
<td>11:10-11:20AM</td>
<td>ABS035</td>
<td>A Cross-Sectional Study To Determine Prevalence Of TB In Urban Slums Of Shillong</td>
<td>Sarkar Amrita</td>
<td>Community Medicine</td>
</tr>
<tr>
<td>11:20-11:30AM</td>
<td>ABS036</td>
<td>Clinical Profile Of HSP In Children Attending S Tertiary Care Centre.</td>
<td>Rosina Ksoo</td>
<td>Paediatrics</td>
</tr>
<tr>
<td>11:30-11:40AM</td>
<td>ABS037</td>
<td>Challenges In The Surgical Management Of Oral Cavity Carcinoma- Our Experience</td>
<td>Deepanava Das</td>
<td>Otorhinolaryngology</td>
</tr>
<tr>
<td>11:40-11:50AM</td>
<td>ABS038</td>
<td>A Prospective Study On Antimicrobial Resistance In Neisseria Gonorrhoea: A Re-Emerging Pathogen</td>
<td>Elantamilan D</td>
<td>Microbiology</td>
</tr>
<tr>
<td>11:50-12:00 noon</td>
<td>ABS039</td>
<td>Detection of New Delhi Metallo-B-Lactamase-1(NDM-1) Producing Enterobacteriaceaeintensive Care Unit, NEIGRIHMS</td>
<td>Jyotismita</td>
<td>Microbiology</td>
</tr>
<tr>
<td>12:00-12:10PM</td>
<td>ABS040</td>
<td>Audit Of Neonatal Services Of NEIGRIHMS: Analysis Of 2years Secondary Data</td>
<td>Jeevan Silwal</td>
<td>Paediatrics</td>
</tr>
<tr>
<td>12:10-12:20PM</td>
<td>ABS042</td>
<td>Health Camps: Are We Reaching The Unreached?</td>
<td>Raphap K</td>
<td>Paediatrics</td>
</tr>
</tbody>
</table>

Tea Break

<table>
<thead>
<tr>
<th>Timing</th>
<th>Abstract No.</th>
<th>Title/Topic</th>
<th>Speaker</th>
<th>Department</th>
</tr>
</thead>
<tbody>
<tr>
<td>12:40-12:50 PM</td>
<td>ABS043</td>
<td>Pediatric Lupus Nephritis: An Experience From North East India</td>
<td>Ripan Debbarma</td>
<td>Pediatrics</td>
</tr>
<tr>
<td>12:50-1:00 PM</td>
<td>ABS057</td>
<td>Neural Tube Defects : A Single Centre Experience</td>
<td>Franke Shadap</td>
<td>Neurosurgery</td>
</tr>
<tr>
<td>1:00-1:10 PM</td>
<td>ABS055</td>
<td>Early Experience With Mpo For Difficult Fractures At NEIGRIHMS</td>
<td>Cheryrmiki Tariang</td>
<td>Orthopaedics</td>
</tr>
<tr>
<td>1:10-1:20 PM</td>
<td>ABS095</td>
<td>Psychiatric Complications In Chronic Kidney Disease (CKD) Patients In North East India: An Exploratory Study</td>
<td>Debjit Roy</td>
<td>Psychiatry</td>
</tr>
</tbody>
</table>
### Session-I

**Poster Presentation : PG / Post- Doctoral**

**Venue**: In front of Lecture Theater I  
**Date**: 4th March 2016  
**Time**: 9:30 AM to 11:30 AM  
**Judges**: Prof Noor Topno, Prof C Daniala, Prof Manuj Saikia

<table>
<thead>
<tr>
<th>Serial No</th>
<th>Abstract No</th>
<th>Title</th>
<th>Presenter</th>
<th>Department</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>ABS022</td>
<td>Incisional endometriosis</td>
<td>Megha</td>
<td>Obs &amp; Gynae</td>
</tr>
<tr>
<td>2</td>
<td>ABS059</td>
<td>Lupus Pneumonitis Mimicking Pulmonary Tuberculosis: A Masquerade</td>
<td>Akash Roy</td>
<td>Gen Medicine</td>
</tr>
<tr>
<td>3</td>
<td>ABS063</td>
<td>Endovascular Management Of Intracranial Aneurysm In An Infant</td>
<td>C. Baruah</td>
<td>Radio diagnosis</td>
</tr>
<tr>
<td>4</td>
<td>ABS064</td>
<td>Rheumatic Heart Disease Presenting With Quadrivalvular Involvement: A Case Report</td>
<td>Das K C</td>
<td>Cardiology</td>
</tr>
<tr>
<td>5</td>
<td>ABS069</td>
<td>Paragonimus &amp; Paragonimiasis In Meghalaya – Invasion Of Greener Pastures</td>
<td>Sneha Gupta</td>
<td>Microbiology</td>
</tr>
<tr>
<td>6</td>
<td>ABS073</td>
<td>Choledeochal Cyst With Factor XI Deficiency : The Devil And The Deep Sea</td>
<td>Girish Sharma</td>
<td>Gen. Surgery</td>
</tr>
<tr>
<td>7</td>
<td>ABS075</td>
<td>Paraganglioma Of The Caudaequina Region. A Case Report</td>
<td>Gupta A</td>
<td>Pathology</td>
</tr>
<tr>
<td>8</td>
<td>ABS077</td>
<td>Spontaneous Enterocutaneous Fistula Following Inguinal Hernia: A Rare Case Report</td>
<td>Lenish Singh</td>
<td>Gen. Surgery</td>
</tr>
<tr>
<td>9</td>
<td>ABS078</td>
<td>Type 1 Gall Bladder Perforation As A Rare Complication Of Cholangitis Causing Diagnostic Dilemma</td>
<td>Madhur Anand</td>
<td>Gen. Surgery</td>
</tr>
<tr>
<td>10</td>
<td>ABS079</td>
<td>Squamous Cell Carcinoma In Mature Cystic Teratoma Of The Ovary: A Rare Case Report</td>
<td>Megha</td>
<td>Obs &amp; Gynae</td>
</tr>
<tr>
<td>11</td>
<td>ABS081</td>
<td>Sarcoidosis- A Diagnostic Approach</td>
<td>P Paul</td>
<td>Pathology</td>
</tr>
<tr>
<td>12</td>
<td>ABS085</td>
<td>Diagnostic Dilemma: Lupus Related Hepatitis Versus Autoimmune Hepatitis In Systemic Lupus Erythematosus</td>
<td>Samir</td>
<td>Gen Medicine</td>
</tr>
<tr>
<td>13</td>
<td>ABS087</td>
<td>Isolated Tubercular Subcapsular Liver Abscess: A Rare Manifestation Of Extrapulmonary Tuberculosis</td>
<td>Kishor</td>
<td>Gen Medicine</td>
</tr>
<tr>
<td>15</td>
<td>ABS098</td>
<td>Myocardial Infarction In Coronary Artery Fistula: An Uncommon Presentation</td>
<td>Rinchin Dorjee</td>
<td>Cardiology</td>
</tr>
<tr>
<td>16</td>
<td>ABS099</td>
<td>Perioperative Myocardial Infarction- A Tough Challenge</td>
<td>Tony Ete</td>
<td>Cardiology</td>
</tr>
</tbody>
</table>
### Session II

**Poster Presentation : Faculty**  
**Venue:** In Front of LT-I; **Time:** 1:30 PM to 3:00 PM  
**Judges:** Prof Noor Topno, Prof Manuj Saikia, Prof Daniala

<table>
<thead>
<tr>
<th>Serial No</th>
<th>Abstract No</th>
<th>Title/Abstract</th>
<th>Presenter</th>
<th>Department</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>ABS005</td>
<td>Title: Single Atrium – A Rare Case Report</td>
<td>Biswajeet Saikia</td>
<td>Anatomy</td>
</tr>
<tr>
<td>02</td>
<td>ABS012</td>
<td>Castleman’s disease with calcifying fibrous tumor like features and co-existing hepatitis B virus Infection.</td>
<td>E Marbaniang</td>
<td>Pathology</td>
</tr>
<tr>
<td>03</td>
<td>ABS016</td>
<td>Neurological sequelae in Carbon Monoxide poisoning-A Case Report</td>
<td>M Hussain</td>
<td>Neurology</td>
</tr>
<tr>
<td>04</td>
<td>ABS023</td>
<td>Autologous Bone Marrow Progenitor Cell Transplantation for Therapeutic Angiogenesis in Critical Lower Limb Ischemia: A case report</td>
<td>Pranjal Phukan</td>
<td>Radio diagnosis</td>
</tr>
<tr>
<td>05</td>
<td>ABS029</td>
<td>A rare localization of an Osteochondroma involving the Scapula: a case report</td>
<td>Tashi Khonglah</td>
<td>Orthopedics</td>
</tr>
<tr>
<td>06</td>
<td>ABS101</td>
<td>Orbital diffuse large B cell lymphoma in a Paediatric patient: A rare case report</td>
<td>Lanalyn Thangkhiew</td>
<td>Ophthalmology</td>
</tr>
<tr>
<td>07</td>
<td>ABS041</td>
<td>Intra-articular Injection of Platelet-rich Plasma in the Management of Chronic Low Back Pain due to Facet Arthropathy: A Case Report with 12 Months Follow-up</td>
<td>Samarjeet Dey</td>
<td>Anesthesiology</td>
</tr>
</tbody>
</table>

### Session-III

**Poster Presentation : SRD/JRD**  
**Venue:** In Front of Lecture Theatre-I  
**Date:** 4th March, 2016, **Time:** 3:00-4:00PM  
**Judges:** Prof Sandra Albert, Prof P Bhattacharya, Prof P K Bhattacharya

<table>
<thead>
<tr>
<th>Serial No</th>
<th>Abstract No</th>
<th>Title/Topic</th>
<th>Presenter</th>
<th>Department</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>ABS044</td>
<td>Natural Killer Cell Lymphoma: A Case With Classification Dilemmas</td>
<td>Ankit Kumar Jitani</td>
<td>Pathology</td>
</tr>
<tr>
<td>2</td>
<td>ABS045</td>
<td>Miliary Tuberculosis Complicated By Left sided Pleural Effusion And Acute Respiratory Distress Syndrome</td>
<td>Iadarilangtiewsoh</td>
<td>Gen. Medicine</td>
</tr>
<tr>
<td>3</td>
<td>ABS046</td>
<td>Varied Presentations Of Myeloid Sarcoma: A Report Of 3 Cases</td>
<td>Nabana Das</td>
<td>Pathology</td>
</tr>
<tr>
<td>4</td>
<td>ABS047</td>
<td>Plasmodium Vivax Malaria With Severe Thrombocytopenia And Varied Skin Manifestations: A Case Report</td>
<td>Chobin</td>
<td>Gen. Medicine</td>
</tr>
<tr>
<td>5</td>
<td>ABS048</td>
<td>Apocrine Hydrocystoma: Case Reports Of A Rare Benign Tumor</td>
<td>Hage Nobin</td>
<td>Pathology</td>
</tr>
<tr>
<td>6</td>
<td>ABS049</td>
<td>Post-Ictal Psychosis With Self-Amputation Of Foot In A Patient With Epilepsy: A Case Report</td>
<td>Hibu Habung</td>
<td>Neurology</td>
</tr>
<tr>
<td>7</td>
<td>ABS050</td>
<td>Von Hippel-Lindau Syndrome (A Rare Multisystemic Disease)- A Neighrims Experience</td>
<td>J Miller</td>
<td>Neurology</td>
</tr>
<tr>
<td>8</td>
<td>ABS051</td>
<td>Pattern Of Adverse Drug Reactions Due To Cancer Chemotherapy In Oncology Department of A Tertiary Care Teaching Hospital</td>
<td>B S Nongkynrih</td>
<td>Pharmacology</td>
</tr>
<tr>
<td>9</td>
<td>ABS052</td>
<td>Nimesulide Induced Leukocytoclastic Vasculitis And Hepatitis: A Case Report</td>
<td>Obang Parme</td>
<td>Gen. Medicine</td>
</tr>
<tr>
<td>10</td>
<td>ABS053</td>
<td>Glycogen Storage Disease Type 1a Presenting As Gouty Arthritis In A Young Female Without Hypoglycaemia</td>
<td>Preeti J Picardo</td>
<td>Gen Medicine</td>
</tr>
<tr>
<td>11</td>
<td>ABS054</td>
<td>Posterior Reversible Encephalopathy Syndrome In Hemophagocytic Lymphohistiocytosis</td>
<td>Rikan Debbarma</td>
<td>Paediatrics</td>
</tr>
<tr>
<td>12</td>
<td>ABS056</td>
<td>Minimally Invasive Spine Surgery (Miss): A Revolution In Spinal Surgery</td>
<td>Dibyoyoti Bora</td>
<td>Neurosurgery</td>
</tr>
<tr>
<td>13</td>
<td>ABS058</td>
<td>Short Communication: Damage Control Orthopedics (Dco): The NEIGHRMS Experience</td>
<td>Dukhum Magu</td>
<td>Orthopaedics</td>
</tr>
<tr>
<td>14</td>
<td>ABS105</td>
<td>Delayed Hemolytic Transfusion Reaction (DHTR) due to Anti c (small) &amp; Anti N: A case report</td>
<td>Bhumika</td>
<td>Blood Bank</td>
</tr>
</tbody>
</table>
Programme on 5th March 2016

Awareness Walkathon for
Jeevan Jyoti Rashtriya Abhiyan & Jan Suraksha Abhiyan,

Time: 09:00 AM
Venue: In front of Bank of Baroda, NEIGRIHMS campus
(Indira Gandhi Oration & Convocation)

Time: 10:30 AM onwards
Venue: Institute Auditorium

11:00 AM Key Note Lecture: Prof. Bipin Batra, CEO, National Board of Examinations, New Delhi
11:45 AM Indira Gandhi Oration: Dr. Sagar Galwankar, CEO, INDUSEM, USA
1:05 PM Welcome Song
1:10 PM Welcome Address: Prof. Manoj K. Saikia, Organising Chairman
1:15 PM Overview of NEIGRIHMS Administration: Shri D. T. Umdor, Deputy Director
1:20 PM Overview of Academics & Research at NEIGRIHMS: Prof. V. Raphael, Dean
1:30 PM Release of NEIGRIHMS News Magazine - “Pulse”
1:30 PM Address by Director NEIGRIHMS: Prof. A. G. Ahangar
Release of Souvenir “Scientific Abstract & Publication Book”
1:40 PM Address by Guest of Honour: Prof. Sri Krishna Srivastava, Vice Chancellor, NEHU, Shillong
1:55 PM Hippocratic Oath by MBBS Students
2:00 PM Presentation of Certificates / Awards
2:15 PM Address by the Chief Guest, Dr. Mukul Sangma, Hon’ble Chief Minister, Meghalaya
2:45 PM Vote of Thanks by Dr. Md. Yunus, Organising Secretary
2:50 PM High Tea
5:00 PM Cultural Programme
<table>
<thead>
<tr>
<th>Serial No</th>
<th>List of Publications</th>
<th>Primary Department</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.</td>
<td>Yunus Md , Singh M. Competency Based Medical Education’ – What’s there to know about this. Journal of Medical &amp; Health science 2016;6:48-9</td>
<td>Anaesthesiology</td>
</tr>
<tr>
<td>No.</td>
<td>Authors</td>
<td>Title</td>
</tr>
<tr>
<td>-----</td>
<td>---------</td>
<td>-------</td>
</tr>
<tr>
<td></td>
<td>Title</td>
<td>Journal</td>
</tr>
<tr>
<td>---</td>
<td>-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
<td>----------------------------------------</td>
</tr>
<tr>
<td>29.</td>
<td>Thakur BK, Verma S, Mishra J. Pyogenic granuloma with onychomadesis following plaster cast immobilization. Indian J Dermatol Venereol Leprol (E PUB)</td>
<td>Indian J Dermatol Venereol Leprol (E PUB)</td>
</tr>
<tr>
<td></td>
<td>Authors</td>
<td>Title</td>
</tr>
<tr>
<td>---</td>
<td>---------------------------------------------</td>
<td>----------------------------------------------------------------------</td>
</tr>
<tr>
<td>47.</td>
<td>Bhattacharya PK, Jamil Md, Roy A, Barman, B, Lyngdog M, Lynrah KG.</td>
<td>Aetiology, Burden of Disease and Clinical Profile of Chronic Kidney Disease in North East India.</td>
</tr>
<tr>
<td>No.</td>
<td>Authors</td>
<td>Title</td>
</tr>
<tr>
<td>-----</td>
<td>----------------------------</td>
<td>----------------------------------------------------------------------</td>
</tr>
<tr>
<td></td>
<td>Authors</td>
<td>Title</td>
</tr>
<tr>
<td>---</td>
<td>----------------------------------</td>
<td>----------------------------------------------------------------------</td>
</tr>
<tr>
<td>76.</td>
<td>D E, Khyriem AB, Lyngdoh WV, Rajbongshi J, Sabhapandit D.</td>
<td>Characterization of Beta-Hemolytic Streptococci from Clinical Isolates in a Tertiary Care Centre in North-East India.</td>
</tr>
<tr>
<td>77.</td>
<td>Dutta V, Lyngdoh Wv, Bora I, Choudhury B, Khyriem Ab, Bhattacharyya P.</td>
<td>Characterization Of Candida Species From Intensive Care Unit Isolates In A Tertiary Care Centre In North-East India: A Retrospective Study.</td>
</tr>
<tr>
<td>78.</td>
<td>Dr. Ishani Bora, Dr. Wihiwot Varaline Lyngdoh, Dr. Vikramjeet Bakorlin Khyriem, P.</td>
<td>“Bacteriological profile of renal stones in a tertiary care center.</td>
</tr>
<tr>
<td>79.</td>
<td>Dr. Jyotismita Rajbongshi, Dr. Annie Bakorlin Khyriem Dr. Vikramjeet Singh, Dr. Madhur Anand, Dr. Stephen Lalfakzuala Sailo, Dr. Wihiwot Varaline Lyngdoh.</td>
<td>Chromobacterium Violaceum Causing Fournier’s Gangrene: A Rare Presentation With Non-Fatal Outcome.</td>
</tr>
<tr>
<td>81.</td>
<td>Elantamilan D, Lyngdoh VW, Choudhury B, Khyriem AB, Rajbongshi J.</td>
<td>Septicaemia caused by Myroides spp.: a case report.</td>
</tr>
<tr>
<td>No.</td>
<td>Author(s)</td>
<td>Title</td>
</tr>
<tr>
<td>-----</td>
<td>-----------</td>
<td>-------</td>
</tr>
<tr>
<td></td>
<td>Title</td>
<td>Authors</td>
</tr>
<tr>
<td>---</td>
<td>-----------------------------------------------------------------------</td>
<td>------------------------------------------------------------------------</td>
</tr>
</tbody>
</table>
### List of Publication in Books from NEIGRIHMS (March 2015 – February 2016)

<table>
<thead>
<tr>
<th>Serial No</th>
<th>List of Publications</th>
<th>Primary Department</th>
</tr>
</thead>
<tbody>
<tr>
<td>7.</td>
<td>Microvascular Angina, the current concept. Manish Kapoor, Tony Ete, Dhanj Nath, Rinchin Dorjee. CSI update.</td>
<td>Cardiology</td>
</tr>
<tr>
<td>9.</td>
<td>CRT-P vs CRT-D : What the current guidelines say?Amit Malviya, Rinchin Dorjee, Gaurav Kavi, Pravin Kumar Jha, Animesh Mishra. CSI update.</td>
<td>Cardiology</td>
</tr>
<tr>
<td>13.</td>
<td>Bhattacharya PK. “Challenges in preventing acute rheumatic fever and rheumatic heart disease in India”. Conference Souvenir. 3&lt;sup&gt;rd&lt;/sup&gt; Annual Conference of ACVTSA 2015. 2&lt;sup&gt;nd&lt;/sup&gt; &amp; 3&lt;sup&gt;rd&lt;/sup&gt; October 2015. Pp 38-42.</td>
<td>General Medicine</td>
</tr>
</tbody>
</table>
Etiology Of Unilateral Sensorineural Hearing Loss

Authors: Abhijeet Bhatia, Pranjal Phukan, Mr Goutam Polley

Aims and objectives: To establish the causes of unilateral sensorineural hearing loss in a cohort of patients visiting NEIGRIHMS, Shillong.

Background: Diagnosis and appropriate management of USNHL is imperative because of its adverse impact on the quality of life of the patients. Hearing discrimination in a noisy environment is variably effected. Spatial hearing and sound localization are severely hampered.

Methods: All cases of unilateral sensorineural hearing loss presenting to the department of ENT were subjected to a battery of audiological, radiological, haematological and serological investigations in an attempt to quantify the handicap and to localise the lesion.

Results: A total of 47 patients were examined from Jan 2015 to Jan 2016. The cause was found to be ‘idiopathic’ in a vast majority of patients. Two patients were found to be suffering from Meniere’s disease and three had an aberrant anterior inferior cerebellar artery, forming the loop in the internal acoustic meatus. One patient each was diagnosed to have acoustic neuroma and typhoid. Twenty patients were still awaiting their reports.

Conclusion: In most of the patients, the cause of hearing loss is found to be idiopathic, as most of the literature. But in an endeavour to find out the cause, a battery of investigations is mandatory. Future study would concentrate on the minimization of handicap in such patients.

Authors affiliation: Assistant Professor, Department of ENT, NEIGRIHMS

Presenting author email: abhijeetbhatia77@gmail.com

Vaginal pH: A marker for menopause

Authors: Subrat Panda, Ananya Das, Ahanthem Santa Singh, Star Pala.

Introduction: Menopause is suspected with age, cessation of menstruation for more than a year and presence of symptoms. The diagnosis of menopause is confirmed by follicle stimulating hormone (FSH) levels >40 IU/L. Few studies have focused on vaginal pH for menopausal diagnosis. It is a simple, non-invasive and inexpensive method for this purpose.

Aim of the Study: The following study is to correlate the serum follicle stimulating hormone (FSH) level with vaginal pH estimation in menopause.

Materials and Methods: This is a cross-sectional descriptive study conducted in 173 women aged 31-60 years with menopausal symptoms who attended the Menopausal Clinic of our hospital from January 2012 to January 2013. Vaginal pH was measured using pH micro-meter strips and serum FSH levels were measured using immunoassay methods. The data obtained was then analyzed using Statistical Package for the Social Sciences software (version 17) and results were evaluated statistically by the Chi-square and Kappa tests. P d” 0.05 was considered to be statistically significant.

Results: According to our study of the 173 women studied, mean FSH level was 46.5 IU/L and mean vaginal pH was 5.3. If the menopausal hallmark is considered to be vaginal pH >4.5 and serum FSH e”40 IU/L, the sensitivity of vaginal pH for menopausal diagnosis was 84.9% and of serum FSH is 77.4%, respectively.

Conclusion: Vaginal pH is a simple, accurate and cost-effective tool that can be suggested as a suitable and better alternative to serum FSH estimation for the diagnosis of menopause.
Clinical effects of Adjuvant immune-modulation therapy using pulse Levamisole therapy in the management of difficult osteo-articular tuberculosis.

Author: BHASKAR BORGOHAIN, Tashi G. Khonglah, Asst. Professor, Cherrymikki Tariang, SRD
Authors affiliation: Assoc. Professor, Deptt. Of Orthopaedics, NEIGRIHMS
e-mail: bhaskarborg@gmail.com

Aims and objective: - Tuberculosis (TB) continues to be a major health problem with an estimated 88 million new cases every year. Although skeletal Tuberculosis is pauci-bacillary, the optimum therapy and treatment duration for osteo-articular TB is still unclear, despite availability of ATT (anti-tubercular therapy. TB is due to subtle deficiency of cell mediated immunity and therefore, if adjuvant immune-modulating drugs can be given along with ATT from very beginning, host immune response to infection may be more robust, helping control the disease early. Usually clinical response starts after 4-6 weeks and sinuses heal within 2-3 months of ATT. Levamisole, an anti-helminthic agent was subsequently studied in human for its potential to increase delayed hypersensitivity and/ or T-cell mediated immunity.

Aims: The aims of present study were to report the clinical and radiological effects of immune-modulation observed in three male adult non-responders, i.e. compliant patients with diagnosed osteoarticular tuberculosis not responding clinically after six months of ATT.

Methodology: - The primary diagnosis of tuberculosis was done on clinico-radiological grounds supplemented by histopathological or bacteriological investigations. The non-responders developed new lesions or continued to have discharging sinuses while still on ATT. Immuno-modulation using Levamisole in these non-responders was attempted as an adjunct to the standard ATT. Oral Levamisole 2 mg/kg body weight daily for 3 days, followed by an interval of 7 days: total six such cycles were repeated. After four weeks of completion of pulsed immunomodulation therapy clinico-radiological status was review.

Results and observation: - The mean age of the three difficult cases of osteoarticular tuberculosis was 27 years. All suffered from tubercular arthritis of the knees and the ankle. All three received immune-modulation using Levamisole pulse therapy. The sinuses healed in all patients on completion of immune-modulation with levamisole and ATT. There was no untoward reaction related to immune-modulation. All these three cases improved in terms of clinical and hematological and radiological parameters.

Conclusion: - Adjuvant immune-modulation has the potential to shorten clinical course of osteo-articular tuberculosis even in difficult cases. It is possible that the total duration of ATT be shortened using this strategy, besides inducing beneficial clinical and host immune responses. The emergence of drug resistant MDR & XDR strains is adding new challenges to treat TB effectively. Immune-modulations may be important for this group as well. A larger clinical trial is warranted.
**ABS004**

**Tattoo practices in North East India**  
- A hospital based cross sectional study

Authors: **Binod Kumar Thakur, Shikha Verma**  

Authors affiliation: Assistant Professor, Department of Dermatology and STD, NEIGRIHMS  
Presenting author email: binod.k.thakur@gmail.com

**Background:** Tattooing has become increasingly popular particularly among young people. But, little is known about tattoo practices in north east India.

**Objectives:** The primary objective of the study was to know the reasons and motivations of tattoo application and tattoo removal in individuals asking for tattoo removal. The secondary objective was to identify the demography, methods and safety of tattoo practices in these tattooed individuals.

**Methods:** A hospital based cross sectional study was carried out in 212 consecutive individuals seeking tattoo removal. Chi square and Fisher’s exact test was performed for intergroup comparisons.

**Results:** There were 178 (84%) males and 34 (16%) females. The mean ± SD age of individuals seeking tattoo removal was 21.8±4 years. The mean ±SD age of doing tattoo was 15.8±3 years. Most individuals possessed an amateur tattoo (94.3%), 4.2% a professional one and 1.4% had a combination. Sewing needle was the most common instrument used for making tattoos in 51.4%. The individuals made their tattoos in an unsterile manner in 49.1%. The most common reason for doing tattoo was for fashion in 87.7%. The participants wanted tattoo removal to qualify for jobs especially in armed forces in 49.5% and due to regret in 21.7%. Black was the most preferred colour in 37.3% followed by green colour in 28.3%. The fabric ink was the choice of ink in maximum number of individuals, 93.9%.

**Limitations:** It was a hospital based study done only on individuals seeking tattoo removal. It needs caution to generalise the findings in population. In addition, there may be recall bias in the participants.

**Conclusion:** The tattoo was done mostly below 18 years of age in a crude unsterile way. The individuals had poor risk perceptions about various infections and complications of tattooing. There is an urgent need to caution and educate the youngsters and school going children about safe tattooing and consequences of tattooing.

**ABS005**

**Single Atrium – A Rare Case Report**

Authors: Amitav Sarma, Goutam Ch. Das, Jyotiprasad Kalita, Monuj Kumar Saikia, **Bishwajeet Saikia**

Authors affiliation: Department of Anatomy, NEIGRIHMS, Shillong.  
Presenting author email: bishwajeetsaikia3@gmail.com

We have reported a rare case of an adolescent female patient with single atrium, also known as Cor triloculare biventriculare without any endocardial cushion defect and other variety of congenital heart disease. Clinically the patient presented with features of congestive heart failure. Surgical correction was done successfully.

**Keywords:** Single atrium, Cor triloculare biventriculare, Inter Atrial septal defect (IASD), Congenital heart disease, Interventricular septal defect (IV septal defect)
Aims and objective: Chronic osteomyelitis is difficult to treat and is characterized by frequent relapses. An imbalance between the virulence of the bacteria and host’s immunity is putative. The evolving concept of biofilm formation in such setting has greatly improved our understanding of its chronicity and the challenges thereof. The aim of our study was to document Clinico-radiological outcome after implantation of antibiotic impregnated PMMA beads after debridement for preventing relapse and inducing lasting remission or healing in such cases.

Methodology: We treated a group of chronic osteomyelitis patients with debridement and implantation of antibiotic impregnated bone cement beads to elute a high local antibiotic dose, without inducing systemic toxicity. All infections were chronic (Range: 1-18 years). This procedure is a modification of original Klemm’s procedure. A single thermo-stable antibiotic like Gentamicin, Cefuroxime or Vancomycin was added to the bone cement, according to culture sensitivity pattern. Antibiotic-PMMA beads act as local drug delivery system. About 20-30 PMMA beads of approximately 7 mm diameter were made manually, intra-operatively over an Ethibond suture (Polyethylene Terephthalate). Systemic factors like malnutrition, diabetes and smoking were addressed. Intravenous antibiotic was used briefly and changed early to oral, based on quantitative CRP values. Patients underwent one or two operations, with a minimum interval of 10 weeks. The cases were followed for 1–5 years.

Results & Observation: Complete healing or long-lasting containment of infection was achieved in nearly 90% patients, in 80% after a single operation. Thorough debridement is important but not easy. Healing was more difficult to achieve if the infection was old or when the origin of osteomyelitis was following surgery of the femur (nosocomial). Recurrences were noted due to incomplete sequestrectomy, nosocomial infection, urinary contamination and possible biofilm formation on implant.

Conclusion: Despite reported emergence of drug resistance strains, Antibiotic-PMMA bead treatment is still safe, affordable and quite effective for disease remission, without inducing systemic toxicity. It reduced the need of prolonged intravenous antibiotics and hospitalization; both traditionally required for Chronic Osteomyelitis. However, eradication of biofilm-producing bacteria, virulent nosocomial gram-negative-rod infections and polymicrobial infections remain a challenge. The majority requires a second procedure for removal of the cement beads and biodegradable beads hold promise in the future. Well-executed, prospective randomized studies are needed to settle the controversies involving Antibiotic-PMMA bead treatment.
AIMS and OBJECTIVES: The aim of the study is to identify the bacterial agents of urinary tract infection in children below 12 years of age and to study their antibiotic resistance profile.

METHODOLOGY: A total of 1499 urine samples, obtained from children under 12 yrs over a period of one and a half years were processed. Urine culture was performed using conventional microbiological techniques and identification was done using standard methods. Antibiotic susceptibility testing was performed by Kirby Bauer’s disc diffusion method.

RESULTS: Of the 1499 samples tested 513 samples showed significant growth of pathogens. Bimicrobial pattern was seen in 4.28% and in 3.9% cases yeast cells were isolated. *Escherichia coli* (41.7%) was the most common isolate followed by *Enterococcus spp* (16.8%), *Klebsiella spp* (15.5%), *Staphylococcus aureus* (9.9%), *Pseudomonas aeruginosa* (3.1%), member of tribe *Proteae* (1.74%), *Acinetobacter spp* (1.74%), *Citrobacter spp* (0.7%) and *Streptococcus spp* (0.5%). Among the Enterobacteriaceae group, 98.1% was resistant to Ampicillin followed by Amoxicillin clavulanic acid 85.6% and 64.6% resistance was seen to Quinolones. Among *Enterococcus spp*, 74.7% showed resistance to Quinolones, 47.1% to Amoxicillin clavulanic acid, 47.1% were High level Aminoglycoside Resistance (HLAR) *Enterococcus* and 5.7% were Vancomycin Resistant Enterococcus (VRE).

CONCLUSION: The study shows an increasing trend of resistance to frequently used antibiotics. Current data on the susceptibility pattern of urinary isolates should be considered while instituting treatment of urinary tract infections.

ABS007

**Urinary Tract Infection in Pediatric Population: Etiology and Resistance Pattern**

Authors: Lyngdoh CJ, Bora I, Lyngdoh WV, Khyriem AB, Dass R, Dutta V

Authors affiliation: Assistant Professor, Department of Microbiology NEIGRIHMS

Presenting author email: clarissa.jane@yahoo.co.in

**AIMS and OBJECTIVES:** The aim of the study is to identify the bacterial agents of urinary tract infection in children below 12 years of age and to study their antibiotic resistance profile.

**METHODOLOGY:** A total of 1499 urine samples, obtained from children under 12 yrs over a period of one and a half years were processed. Urine culture was performed using conventional microbiological techniques and identification was done using standard methods. Antibiotic susceptibility testing was performed by Kirby Bauer’s disc diffusion method.

**RESULTS:** Of the 1499 samples tested 513 samples showed significant growth of pathogens. Bimicrobial pattern was seen in 4.28% and in 3.9% cases yeast cells were isolated. *Escherichia coli* (41.7%) was the most common isolate followed by *Enterococcus spp* (16.8%), *Klebsiella spp* (15.5%), *Staphylococcus aureus* (9.9%), *Pseudomonas aeruginosa* (3.1%), member of tribe *Proteae* (1.74%), *Acinetobacter spp* (1.74%), *Citrobacter spp* (0.7%) and *Streptococcus spp* (0.5%). Among the Enterobacteriaceae group, 98.1% was resistant to Ampicillin followed by Amoxicillin clavulanic acid 85.6% and 64.6% resistance was seen to Quinolones. Among *Enterococcus spp*, 74.7% showed resistance to Quinolones, 47.1% to Amoxicillin clavulanic acid, 47.1% were High level Aminoglycoside Resistance (HLAR) *Enterococcus* and 5.7% were Vancomycin Resistant Enterococcus (VRE).

**CONCLUSION:** The study shows an increasing trend of resistance to frequently used antibiotics. Current data on the susceptibility pattern of urinary isolates should be considered while instituting treatment of urinary tract infections.

ABS008

**Pattern of Physical assault against women: a hospital perspective**


Authors affiliation: Assistant Professor, Department of Forensic Medicine, NEIGRIHMS.

Presenting author email: dauni.slong@yahoo.co.in

**Objective:** To determine the pattern of physical assault in female victims attending the Emergency Department of NEIGRIHMS.

**Methodology:** The study includes all women attending the Emergency department, NEIGRIHMS, following alleged physical assault. The data were extracted from the medicolegal register maintained in the Medical Record Department.

**Results:** A maximum of the victims were in the age group of 20 to 30 years (40%) and they were being attacked more frequently at home than outdoors. The perpetrators were mostly known to the victims, who assaulted them using either their body parts (hands and feet), sharp or blunt objects and the injuries are mainly localised on the head and neck region. Sixty percent of the victims were discharged. **Conclusion:** It may be concluded that the female victims of physical assault belong to young age group, usually being attacked at home by known perpetrators.
**ABS009**

**Repair of Uro-genital fistula: Experience over 8 years from North-East India**

**Author(s) name:** Stephen L.Sailo, Syed Wasim, Vakha, Mukut Debnath  
**Affiliations:** Associate Professor, Department of Urology, NEIGRIHMS, Shillong  
**Presenting Author email:** stephensailo@gmail.com

**Aims and objectives:** To find out the total number of uro-genital fistula treated in the department of Urology, North Eastern Indira Gandhi Regional Institute of Health and Medical Sciences (NEIGRIHMS), Shillong, India during the last 8 years, the type of fistula, treatment and results.

**Methods:** All the cases of uro-genital fistulae seen in the dept. of Urology between 2006 and 2013 were included in the study, the particulars of each patient, type of treatment and the results were noted.

**Results:** Fifty-two cases of uro-genital fistula were treated, majority (71%) of the fistulae were obstetric origin, 25% cases, gynaecologic origin and 4% cases due to carcinoma cervix. The most common type of fistula was vesico-vaginal fistula (78%) followed by uretero-vaginal (7%), combined VVF and recto-vaginal fistula (6%), urethro-vaginal fistula (4%) and vesico-uterine fistula (4%). The average size of the vesico-vaginal fistula was 2 x 2 cm. The average duration of symptoms for obstetric and gynaecologic fistulae were 5 years and 2 years respectively. Thirty-three (33) patients underwent operation. 19 patients were repaired by abdominal approach and 10 patients were repaired by vaginal approach and combined abdominal and vaginal approach was used in one patient and three patients underwent cystolithotomy only. 26 out of 30 (87%) operated patients were cured of the fistula and 2 had spontaneous closure during follow-up. In the post operative period, one patient had post operative bleeding, 2 developed stress incontinence and one developed bladder stone.

**Conclusions:** Majority of fistula (71%) were obstetric origin. There was high cure rate (87%) following repair and the patients presented very late for treatment.

**ABS010**

**Evolving A New Techniques For Cleaning Embalmed Cadaver Bones**

**Authors:** Biraj Bhuyan, Dr. Gautam Ch Das, Amitav Sarma  
**Authors affiliation:** Associate Prof. Deptt. Of Anatomy, NEIGRIHMS.  
**Presenting author email:** dramitav2007@rediffmail.com

**Objective:** The present study was conducted to find out a new technique for collecting the bone specimens from Cadavers after the dissection.

**Material and methods:** Long bones from embalmed cadaver after the completion of whole body dissection were taken and removed the fleshy tissue manually as far as possible. A new method was utilized for preparing bone specimens. To establish the new method for cleaning bones, all the collected long bones were divided into four groups (Gr I, Gr II, Gr.III & Gr IV.)

- **Gr.I:** The bones were immersed into bleaching powder solution of 50%, 70% & 90% serially for 10 days in each solution.
- **Gr. II:** The bones were immersed into bleaching powder solution of 90% for 30 days at 10 days interval
- **Gr. III:** Bones were directly immersed into tap water for 30 days at 10 days interval.
- **Gr. IV:** Bones were buried for one month under superficial surface of soil during rainy season.

**Observations:** The use of bleaching power solution was found to be one of the more effective methods for cleaning of long bones in terms of time and hygienic point of view. The bones of the Gr.I were cleaned properly without any erosion of ends of long bones. The bones of Gr. II were cleaned but the ends of the long bones were get eroded. The bones of the Gr. III were not cleaned at all while the bones of Gr. IV were partially cleaned.

**Conclusions:** The use of bleaching powder solution for cleaning the bones of dissected embalmed cadaver for the preparation of bone specimen has got of immense importance as it is less time consuming and more hygienic technique. By means of which medical institutes can collect the bone specimen from the dissected cadaver within a short period of time for the teaching as well as research purpose. There are many more things which have to be adapted or rediscovered in this field of research, which has been neglected so far.
Transformaminal Lumbar Interbody Fusion (TLIF): A single center experience.

Authors: DrArindomKakati.

Aims and objectives: Transforaminal lumbar interbody fusion (TLIF) is gradually becoming the preferred treatment for spinal arthrodesis in the treatment of mechanical back pain due to lumbar degenerative diseases like spondylolisthesis. The aim of this study is to evaluate the effectiveness of this modality in terms of pain relief and patient satisfaction in the treatment of degenerative lumbar spondylolisthesis.

Methodology: 11 consecutive patients having degenerative spondylolisthesis treated in the Department of Neurosurgery, NEIGRIHMS during the period March 2014 to November 2015 and having a follow up of more than 3 months were selected. They were evaluated for pre and post operative VAS scores, operative complications and fusion rates.

Results and observations: A total of 11 patients were operated of which 7 were female and 4 were male with a mean age of 50 years (Range- 35-68 years). 8 patients had L5/S1 and 3 had L4/L5 spondylolisthesis respectively. 7 patients had pain as the predominant symptom with 4 patients having additional neurological deficits. All patients underwent standard TLIF procedure except 1 who underwent additional spinal decompression. One patient had postoperative CSF leak and another had features of delayed postoperative infection both of which resolved with conservative treatment. All patients reported significant improvement in VAS scores at discharge as well as at 3 months follow up. All patients except one were fully ambulatory at follow up. The fusion rates of the 5 patients who had more than 6 months follow up were good.

Conclusions: Whenever feasible TLIF is a safe and effective procedure for the treatment of mechanical back pain due to degenerative diseases over all age groups.

Castleman’s disease with calcifying fibrous tumor like features and co-existing hepatitis B virus Infection.

Authors: Evarisalin Marbaniang¹, Yookarin khonglah¹, Neizekhotuo Brian Shunyu², Bidyut Gogoi¹

Authors affiliation: Department of Pathology¹ and Department of ENT² NEIGRIHMS,Shillong.

Presentation author email: evarisalinmarbaniang@yahoo.com

Background: Castleman’s disease is a an uncommon disorder presenting as unicentric or multicentric enlargement of the lymph node.It is usually of the hyaline vascular type , the plasma cell type, or mixed variant. Calcifying fibrous tumor is a benign tumor in which the etiology and pathogenesis is still not yet known and is characterised by large areas of hyalinised collagen with paucicellular areas along with dystrophic calcification and scattered lymphoplasmacytic infiltrates.

Case report: We report a case of a 38year old man with sero-positivity for hepatitis B virus presenting with a single right sided neck mass and on excision biopsy a histopathological diagnosis of Castleman’s disease (hyaline vascular ) with calcifying fibrous tumor like features was favoured.

Main lessons: Castleman’s disease in association with calcifying fibrous tumor has been reported, but these two along with co-existing hepatitis B infection has not been reported which leaves us with the theory that this virus might have played a role in the pathogenesis of castleman’s disease and needs to be further evaluated.

Keywords: Castleman’s disease, Calcifying fibrous tumor, hepatitis B.
Ear, Nose and Throat foreign bodies removed under general anaesthesia: A retrospective study.


Author’s affiliation: Department of ENT* and Anesthesiology**, NEIGRIHMS
Presenting author email: hanifaent@gmail.com

Introduction: For otorhinolaryngologist, removal of foreign body of ear, nose and throat is one of the common emergency procedures done. Most of the cases especially of ear and nose can be managed without General Anaesthesia. But in some cases General Anaesthesia may be needed. There are very few studies that address the scenario of ear, nose and throat foreign body that required general Anaesthesia for its removal and complications associated with it.

Aim: To study the patient’s profile, Foreign Bodies types with distribution removed under general anaesthesia, and the complications associated with foreign bodies and its removal.

Materials and methods: The present study is a hospital based retrospective, cross-sectional study conducted in the department of Otorhinolaryngology in association with department of Anaesthesiology and Critical Care in North Eastern Indira Gandhi Regional Institute of Health and Medical Sciences, India from year 2009 to 2014. Information was collected from indoor patient file and operation record book. Those patients where foreign body was not found after examination under General Anaesthesia were excluded.

Results and observations: A total of 112 cases of foreign body of ear, nose and throat removed under General Anaesthesia were selected. There was variation of age from youngest case being 11 months to 74 years with slight male predominance. Two third of the patients belonged to paediatric age group. Most of the foreign bodies were inanimate with high number of inorganic type found in majority. Foreign body of food passage was found in most cases. Coin and meat bone was the common foreign body in children and adults respectively. We found no complications related to removal of foreign body of food passage and nose. But some complications were seen in foreign body of ear and tracheo bronchial tree.

Conclusion: Ear, nose and throat foreign bodies that require General Anaesthesia are seen in all age groups. Foreign bodies of food passage constitute the majority. Type of foreign body varies between children and adults. In children most common types are related to toys and its part and food materials. In adults, food materials were most common.
ABS 014

Spectrum of childhood kidney diseases: 5 years experience

Authors: Himesh Barman*, Sourabh Gohain Duwarah

Authors affiliation: Department of Pediatrics, NEIGRIHMS, Shillong
Presenting author email: himeshbarman@gmail.com

Introduction: As the infectious diseases in the community is decreasing, non infectious diseases are becoming more and more important among children. Pediatric kidney diseases are important cause contributes significantly to Non-communicable disease (NCD) related morbidity and mortality. Currently there is dearth of data regarding what sort of kidney diseases we have in the region. As our department is trying to establish first organized pediatric nephrology services in the region, we attempt to document the spectrum of kidney diseases in our centre. This is likely to give insight into the scenario in north east India.

Objective: To document the spectrum of kidney diseases in children among inpatients in our centre.

Methodology: All cases with a diagnosis related to kidney were identified from the inpatient registers of Pediatric ICU and Pediatric general ward and from February 2011 to January 2016 and the relevant data extracted in an inpatient renal register. Data entry was done in excel sheet and was filtered for duplication.

Results: The characteristics of 359 consecutive cases of children with kidney disease were analyzed. Mean age of presentation was 9.9 ± 4.9 yrs. (range 0–17 years). There were similar number of boys and girls (male: female ratio of 1: 1.02). The most common diagnosis was Acute Post streptococcal glomerulonephritis (29.9%) closely followed by Nephrotic syndrome (29.5%). Other diagnosis in descending order were: Urinary tract infection (10.4%), chronic kidney disease (7.0%), lupus nephritis (3.9%), Henoch schonlein purpura nephritis (3.7%), Acute kidney injury (3.7%), Ig A nephropathy (2.6%), Nephro-urological problems (2.8%) and others (5.1%).

Conclusion: Glomerular diseases accounts for the most of the burden in kidney diseases in our centre. Tubular diseases are a rarity. A significant proportion of children with chronic kidney disease in backdrop of abundance of glomerular disease prompt towards scope of early detection, close follow up and prevention of progression to Chronic kidney disease.

ABS 015

Clinical profile of children diagnosed with Tuberculosis in Tertiary hospital - a retrospective analysis

Authors: Sourabh G Duwarah, Rosina Ksoo, Himesh Barman.

Authors affiliation: Assistant Professor, Department of Pediatric Medicine, NEIGRIHMS.
Presenting author email: sgd7@rediffmail.com

Introduction: Tuberculosis in India is a major public health problem. Pediatric Tb cases account for 8 % of all Tb cases in India. There is gross under reporting pediatric TB cases.

Objectives: To analyze the clinical, radiological and bacteriological profile of children diagnosed as Tuberculosis at NEIGRIHMS.

Material and Methods: Retrospective analysis of admitted children between 6 months to 18 years of age diagnosed as tuberculosis in the Department of Pediatrics, NEIGRIHMS. The study period was from 2012 to 2014.

Results and Observations: A total of 163 children were diagnosed as tuberculosis during the study period. Out of these 148 children were taken up for the final study. There were 78 boys and 70 girls with a M: F ratio of 1.1:1. Maximum number of cases (45) were seen between 11-15 years and under 5 years (44). Fever was the commonest presenting feature (70 % cases) followed by cough (44.6 % cases). The commonest form of Tuberculosis seen was CNS TB (47 children). Bacteriological diagnosis was made in 44 cases (29.7 % cases).

Conclusion: Tuberculosis in children is seen among all age groups. There is a significantly high incidence of extra pulmonary tuberculosis. Significant bacteriological yield could also be achieved in children.
Neurological sequelae in Carbon Monoxide poisoning-A Case Report

Author: Assistant Professor, Masaraf Hussain1, S.R. Sharma2, Hibu Habung3

Authors affiliation: Assistant Professor Department of Neurology, NEIGRIHMS. Presenting author email: masarafhussain@yahoo.co.in

Commonly related to indoor heating without adequate ventilation. Various neurological sequelae develop after Carbon Monoxide poisoning. Among them delayed neurological sequelae are more characteristic of anoxic encephalopathy after carbon monoxide poisoning.

Case: We report a case of an elderly lady from Shillong, who developed extrapyramidal symptoms after being exposed to burning charcoal, as indoor heating in the cold climate, with poor ventilation.

Main lesson: A high index of suspicion is required to diagnose these cases as they may be common during winter, because of the traditional method of using burning charcoal for indoor heating.

Background: Accidental carbon monoxide poisoning in places with cold climates is

Spectrum of Pulmonary and Extra-pulmonary Tuberculosis: A two year retrospective study

Authors: Md. Jamil, Monaliza Lyngdoh, P. K. Bhattacharya, Akash Roy

Authors affiliation: Department of General Medicine, NEIGRIHMS, Shillong. Presenting author email: mdjamil81@gmail.com

Background: Tuberculosis (TB) remains a global health problem. The challenges in TB are compounded by the limitations in diagnostics in resource limited settings and overall paucity of literature especially in cases of extra-pulmonary TB. In this background this study was undertaken to ascertain the basic demographic characteristics, clinical spectrum and methods of diagnosis of pulmonary and EPTB in patients registered for TB treatment in a tertiary care centre.

Materials and Methods: Hospital-based retrospective study in patients with TB registered for treatment in a DOTS centre during the time period of January 2013 to December 2014. Data was collected from the TB registers of DOTS centre and patient record sheets. All patients registered under DOTS centre with the diagnosis of TB were included. Patients found to have alternative diagnosis leading to discontinuation of anti-tubercular therapy were excluded.

Results: 1344 participants of which 718 (53.42%) were males with a male to female ratio of 1.15:1. The age group most commonly affected was 21-30 years (30.95%) with an overall mean age of 32.78±15.58 years. Majority of patients had EPTB (57.22%) compared to PTB (42.78%). More than 3/4th had newly detected TB (83.22% of EPTB and 77.21% of PTB). In cases of EPTB pleural effusion was the commonest (30.04%), followed by lymphadenitis (24.58%), abdominal TB (13.91%) and central nervous system TB (12.35%). Sputum for AFB was the commonest mode of diagnosis in 29.91% followed by fluid analysis (25.30%), FNAC (17.78%), radio-imaging (15.57%), CSF analysis (77%) and molecular methods (1.12%). Sputum and FNAC for AFB by ZN staining was positive in 38.76% and 19.39% of the cases respectively.

Conclusion: The spectrum of TB is wide with a progressively increasing number of cases of EPTB. In the absence of advanced diagnostics, traditional microscopy and ancillary investigations remain the cornerstones for diagnosis.
Aims and Objective:
Glomerular disease (GD) is one of the commonest forms of renal disease that may present clinically as varieties of syndromes. We hereby present a study to find out the clinical profile and pattern of GD prevalent in North Eastern India among adult population.

Methodology:
A retrospective observational study was carried out in a tertiary care institute in north-eastern India. The study included patients aged > 18 years of age with biopsy proven GD. Patients with inadequate biopsy sampling, incomplete medical data and biopsy of transplanted kidney were excluded. Renal biopsy was done under ultra-sonographic guidance and subjected to histopathological analysis by light microscopy and immunofluorescence study.

Results and Observations:
A total of 102 patients were included of which 25 (24.5%) were male and 77 (75.5%) were female with a M: F ratio of 0.32:1. The mean age of presentation was 30.6 years. Nephrotic syndrome (57.8%) was the commonest clinical diagnosis followed by acute nephritic syndrome (31.4%), unexplained AKI (5.9%), unexplained CKD with normal kidney size (2.9%) and asymptomatic urine abnormality (1.9%). On histo-pathological analysis primary GD and secondary GD was diagnosed in 46 (45.1%) and 53 (52.0%) respectively. Overall Lupus nephritis (LN) was found to be the commonest (41.2%) GD. Among the primary GD, MCD (11.8%) was the most frequent followed by MPGN (10.8%), Membranous Nephropathy, (5.8%), IgA nephropathy (5.8%) and Focal segmental glomerulosclerosis (5.8%). Three (2.9%) patients did not have any specific diagnosis and were labelled as chronic glomerulo-nephritis.

Conclusion:
Nephrotic syndrome remains the most common indication of renal biopsy in this region similar to the other parts of India. Unlike other studies this study show that females are more commonly involved with majority of them having

ABS 018

Spectrum of Glomerular Diseases in Adult : A study from North East India.

Authors affiliation: *Dept.of General Medicine, **Dept.of Pathology, NEIGRIHMS, Shillong.
Presenting author email: mdjamil81@gmail.com

Aim:
One year Prospective case study to study the vaccination status with adverse drug events based on cases treated in the ARV OPD at Pasteur Institute, Shillong, Meghalaya.

Materials And Methods:
One year Prospective case study. Daily registered cases from November 2012 to November 2013 were collected from the outpatient department of ARV clinic of Pasteur Institute, Shillong, Meghalaya, after obtaining due permission from the Government of Meghalaya, India. Out of all the animal bite cases, data on Dog bite cases treated in the ARV OPD at Pasteur Institute, Shillong, and Meghalaya were analysed.

Results:
Out of 3769 animal bites cases, 3587 accounted for dog bite. Category III type was highest amounting 3000 followed by 587 for Category II dog bites respectively. Total number of patients receiving TC-ARV and Antirabies serum is 3587 and 1008 respectively. Adverse events occuring during the course of treatment is 23.84% and 12.4% with TC-ARV and Antirabies serum respectively.

Conclusion:
Rabies is a global problem leading to 30,000 deaths per year. Vaccination induced ADR were mild to moderate and treated symptomatically. Patients recovered fully with no sequelae.

ABS 019

AntiRabies Vaccine and Adverse drug Events: An Experience In An Antirabies Clinic Of North-East India

Authors: Julie Birdie Wahlang, Maxilline.D.Marak, D.K.Brahma, Lalromawii, Joonmoni Lahon
Author'Affiliation: Assistant Professor, Department of Pharmacology, NEIGRIHMS
Presenting author email: Email: juliewahlang@gmail.com

Aim: One year Prospective case study to study the vaccination status with adverse drug events based on cases treated in the ARV OPD at Pasteur Institute, Shillong, Meghalaya.

Materials And Methods: One year Prospective case study. Daily registered cases from November 2012 to November 2013 were collected from the outpatient department of ARV clinic of Pasteur Institute, Shillong, Meghalaya, after obtaining due permission from the Government of Meghalaya, India. Out of all the animal bite cases, data on Dog bite cases treated in the ARV OPD at Pasteur Institute, Shillong, and Meghalaya were analysed.

Results: Out of 3769 animal bites cases, 3587 accounted for dog bite. Category III type was highest amounting 3000 followed by 587 for Category II dog bites respectively. Total number of patients receiving TC-ARV and Antirabies serum is 3587 and 1008 respectively. Adverse events occurring during the course of treatment is 23.84% and 12.4% with TC-ARV and Antirabies serum respectively.

Conclusion: Rabies is a global problem leading to 30,000 deaths per year. Vaccination induced ADR were mild to moderate and treated symptomatically. Patients recovered fully with no sequelae.
Objective: To highlight difficulties in finding microbiological proof of TB in patients with high clinical suspicion of TB, presenting with different symptoms.

Method: A prospective study.

Results: We present 4 cases. Case No1: A 22 year old woman presented with infertility with HSG showing B/L tubal block. Thyroid function test, prolactin, HSA were within normal limits. Endometrial biopsy was negative for TB by histopathology, AFB smear & DNA PCR for TB. However, laparoscopy showed encysted cysts, adhesions, caseous tubercles. Even caseous material sent for TB-DNA PCR was negative. However, patient was started on ATT. Case No2: A 22 year old G0 girl presented with amenorrhoea for year. She had prior history of genital Koch’s 4 year back and Mantoux of 25mmx30mm. So a D&C was done to confirm TB and HPE confirmed granulomatous endocervical TB. Case No 3: A 22 year old G0 woman with irregular periods (oligomenorrhoea) with features suggestive of ectopic pregnancy, underwent a laparotomy, salpingectomy was done for tubal pregnancy and caseous tubercle were found on mesoalpinx of opposite tube. Patient was put on ATT. Case No4: A young 25 year old girl married for 1 year presented to casualty with difficulty in respiration. She was febrile. PR was 140 bpm, BP was normal. On abdominal examination, abdomen was distended. Her Hb was 4 gm% and USG suggested mucinous tumour of ovary. Her fever subsided on starting antibiotics and blood transfusion was given to build Hb. However, on reviewing history a past history of abdominal Koch’s at the age of 13 years was elicited. She had been following in medicine OPD for complaints of fever and ascitis for last 2 months. CT chest showed consolidation of lungs. CT abdomen failed to show any definite lump and due to strong clinical suspicion, patient was put on ATT.

Conclusion: To detect TB, one needs to first suspect it & then prove it. Microbiological proof of disease is mandatory but often difficult. Empirical treatment in patients with strong clinical suspicion even in absence of positive diagnostic tests may be justified.

Genital TB- A hidden threat to fertility- A case series of 4 patients.

Authors: Dr. Manika Agarwal

Authors affiliation: Associate Professor, Dept. of OBS. & Gynae, NEIGRIHMS, Shillong.
Presenting author email: drmanika89@yahoo.com

Objectives: To study incidence, obstetrical and perinatal outcome in obstetric cholestasis. with active management.

Method and material: This prospective study included 48 cases diagnosed as Intrahepatic cholestasis of pregnancy. Medical treatment and active management (fetal surveillance and termination of pregnancy at 37-38 week) offered to all. Obstetric and perinatal outcome studied.

Results: Incidence of ICP was 2.4 %. More than 86 % patients presented with generalized pruritis mostly after 30 week. Incidence of Intrapartum abnormal cardiotocography (12.5 %) and thick meconium (8.33 %) were high. Cesarean section rate was high( 41.66 %). Most common indications were CDMR, foetal distress, Nonprogress of labour. Incidence of preterm labour, IUGR, <7 Apgar score, neonatal admission rate was not high. There were one still birth 36 week. Serum transaminases level tended to be higher in patients with still birth, fetal distress and meconium staining of amniotic fluid. Conclusion: Serum transaminases level tended to be higher in patients with poor perinatal outcome. Perinatal outcome is good with active management, at the cost of higher LSCS rate. Further randomized controlled trial of early versus spontaneous delivery may be justified.
Incisional Endometriosis – Can we prevent it?

Authors: Dr. Nalini Sharma, Dr. Megha Nandwani, Dr. J Lalnunnem Thiek, Dr. Santa Singh Ahanthem

Authors Affiliation: Department of Obstetrics and Gynaecology, NEIGRIHMS.
Presenting author email: megha.nandwani@gmail.com

**Background:** Incisional endometriosis is a rare extrapelvic endometriosis. It is a rare cause of painful surgical scar in women of reproductive age group. It usually present after obstetrical and gynecological surgeries. Scar Endometriosis presents clinically as a painful, palpable subcutaneous mass with exaggeration during menses.

**Case report:** A 37 years old P2L2 (once post caesarean section) came with the complaints of pain at the site of caesarean scar during menstruation associated with swelling at the same site since last 5 years. Ultrasonography showed right sided SOL. FNAC of the swelling revealed scar endometriosis. Mass was excised completely without any complication and sent for histopathological examination, which revealed scar endometriosis.

**Lesson:** Inadvertent implantation during surgery is most explainable theory for incisional endometriosis. Nowadays LSCS rate is increasing so one can expect increase in number of cases of scar endometriosis. Use of separate needle and mops for uterine cavity and other tissue, closure of visceral and parietal peritoneum and through cleaning and irrigation of abdominal wall wound before closure are recommended steps to prevent scar endometriosis.

Autologous Bone Marrow Progenitor Cell Transplantation for Therapeutic Angiogenesis in Critical Lower Limb Ischemia: A case report

Authors: Pranjal Phukan, Akash Handique, C. Daniala

Authors affiliation: Assistant Professor, Department Of Radiodiagnosis, NEIGRIHMS, Shillong
Presenting author email:

A 50 years lady presented with history of claudication of right lower limb for 2 months duration. ACD was <100 mts. Associated with rest pain and gangrene of 2nd toe. She also had Pain & ulcer right index finger. She was chronic smoker. Not h/o diabetes or hypertension. Angiography showed occlusion of right ulnar artery, the right radial artery supplying the 4th digits. Occlusion of ATA and distal PTA. A total 40 ml of bone BMA was be inject intra-arterially and 10ml will be injected intramuscularly. Clinical follow up after 1month showed improved symptomatically with healing of the ulcers. ACD was increased up to > 500mts. Angiography at 3months showed increased capillary neoangiogenesis.
Group formative feedback—relevance in professional development in preclinical years.

Authors affiliation: Associate Professor, Physiology, NEIGRIHMS
Presenting author email: drituparnabarooah@gmail.com

Aim: The professional attributes and skills in a medical graduate extend beyond the competencies of standard curricular and performance goals. In a bid to cultivate a learning goal orientation, effective feedback has been perceived to be the most powerful tool available to shape the professional behavior which needs to be nurtured from the initial preclinical years.

Objectives:
- Assessment driven learning and readiness to learn through facilitator aided self and peer assessment
- Establish and nurture feedback seeking behavior, self-directed and regulated lifelong learning
- Learning of leadership skills, team work, problem solving and goal setting with continuous self-evaluation.

Methodology: The study participants were fifty students (divided into ten groups for group activities) who were required to answer a set of formative and objective tests held at regular interval on different topics that have been taught in the curriculum. The answers were self-corrected as the answers were displayed at the end of the test followed by peer correction. In the same sitting, academic performance, group activities, assessment process were discussed and feedback provided followed by future goal setting and formulation of action plan by the groups.

Results and observation: Improvement in the academic performance in the summative assessment at the end of the year indicative of increased readiness to learn. Students' perception of the feedback practice demonstrated increase in learning of soft skills of professionalism. Facilitator perception noted gradual increase in feedback acceptance and feedback seeking behavior.

Conclusion: Effective and immediate group formative feedback is an effective tool for development of attributes, competencies and skills needed in a professional medical graduate as it leads to increased readiness to learn, better communication and coordination among team members, conflict management, self-evaluation and future goal setting and leadership qualities with learning goal orientation.

A Clinicopathological Study Of Subcutaneous Mycoses From North East India

Authors: Shikha B. Thakur, Binod Thakur

Introduction: Subcutaneous mycoses are chronic fungal infections caused by various fungi present in the natural environment. The common subcutaneous mycoses are chromoblastomycosis, sporotrichosis and mycetoma.

Objectives: To study clinical, pathological and mycological aspects of subcutaneous mycoses in north east India.

Methods: We did retrospective analysis of the clinicopathological and mycological aspects of 22 cases of subcutaneous mycoses from April, 2013 to August, 2014. The diagnosis was based on clinicopathological correlations, fungal culture and response to antifungal therapy.

Results: A total of 22 patients of subcutaneous mycoses were seen with male: female ratio 2.8. There were 8 culture positive patients of chromoblastomycosis and 5 culture positive patients of sporotrichosis. In another 9 patients (5 cases suspected chromoblastomycosis and 4 cases suspected sporotrichosis) whose culture was negative, improved with antifungal therapy. The most common site was lower limbs in 54.5% cases. Epidermal hyperplasia was seen in 95.4%, suppurative granulomas in 54.5%, tuberculoid granulomas in 4.5%, neutrophilic infiltrate in 100%, eosinophilic infiltrate in 86.4% and neutrophilic microabscesses in 72.7% cases. Copper penny bodies were noted in 30.7% cases of chromoblastomycosis. Mycological culture was positive in only 59.1% cases. Fonsacea was the commonest organism isolated in chromoblastomycosis.

Conclusions: Subcutaneous mycosis is endemic in north eastern part of India. The fungal culture was negative in 40.9% cases. All these patients improved with trial of oral itraconazole. We, therefore, suggest therapeutic trial of antifungals in culture negative, suspected cases of subcutaneous mycoses in endemic regions.
**ABS 026**

**Missed opportunity to diagnosed pulmonary tuberculosis at a tertiary care hospital**

Authors: Star Pala, H. Bhattacharya, KG Lynrah, S. Duwarah, AC Phukan, Adorinia, A Dkhar

**Author’s affiliation:** Associate Professor of Community Medicine, General medicine, Pediatrics, Microbiology, RTTC project, Dots center.

**Presenting author email:** starpala@gmail.com

**Aims and objectives:** TB programs aim to rapidly diagnose and treat all cases of tuberculosis. The aim of this study is to find the proportion of missed diagnosis of pulmonary TB after the patient reached hospital (was handed over sputum cups for sputum collection) from the DOTS center after referral from respective OPD at a tertiary care hospital. The objective is to find the proportion of patient who did not submit sputum sample for diagnosis of pulmonary tuberculosis.

**Methodology:** Recorded based data from Designated Microscopic Center (DMC), NEIGRIHMS regarding the number of patient who had been given sputum cup for sputum collection for diagnosis of pulmonary TB referred from different OPD January to October 2015.

**Results and Observation:** A total of 1260 patient suspect for pulmonary TB had visited DOTS center after referral from different OPD in the Institute for sputum examination during above period. Out of 1260 as high as 392 (31%) of the patient suspect for pulmonary TB had never submitted sputum, which was highest among those below 15 years of age (40%). This missed suspect patient is estimated to be about 39 Smear positive Pulmonary TB cases missed for diagnosis during above period (sputum positivity rate is 10% out of all suspect examined for sputum). The mean gap between sputum referral to submission of sputum was 2.68 days (95% CI 2.52-2.84) among those of submitted sputum for diagnosis.

**Conclusion:** Approximately one third of patient suspect for pulmonary TB had missed for diagnosis even after consulting a doctor at a tertiary care hospital. There is a need to address this gap in the diagnosis of pulmonary tuberculosis in this region.

**ABS 027**

**Impact of Low Level of HDL-Cholesterol on Clinical Outcomes in ACS Patients Undergoing PCI**

Authors: Dhanjit Nath*, Swapan Kumar Saha*, Happy Chutia**, Amit Malviya*, Manish Kapoor*

**Author’s affiliation:** Assistant Professor, *Department of Cardiology and **Biochemistry, NEIGRIHMS, Shillong

**Presenting author email:** drswapans@gmail.com

**Background:** Although low plasma level of high-density lipoprotein cholesterol (HDL-C) is known to be a risk factor of coronary artery disease, there is limited data regarding the impact of low HDL on the clinical outcomes of acute coronary syndrome (ACS) patients undergoing percutaneous coronary intervention (PCI).

**Aims and Objectives:** This study was performed to assess the impact of low level of HDL-cholesterol on clinical outcomes in patients with ACS undergoing PCI.

**Materials and Methods:** 76 patients with ACS (defined by typical chest pain, electrocardiogram changes, elevated serum biomarkers- creatine kinase, creatine kinase- MB and/or troponin I and echocardiographic evidence of regional wall motion abnormality) were enrolled. After initial evaluation, patients were divided into two groups on the basis of serum HDL level. Low HDL cholesterol group was defined by HDL-C <40 for male and HDL-C <50 for female patients. Low and the normal HDL group (control) were compared to evaluate the impact of low level of HDL-cholesterol on the clinical outcomes (MACE) in the forms of re-infarction, stroke, revascularization, heart failure and death at 6 months.

**Results:** 50 patients were in the low HDL cholesterol group and 26 patients had HDL cholesterol level within normal range (control group). The mean age of the study population was 57.7±10.1 years. 65.8% of the patients were male. Most of the patients (53.9%) presented with ST segment elevated myocardial infarction (STEMI). 59.2% of the study population was in ACS Killip class II on admission. Hypertension was present in 64.5% whereas Diabetes Mellitus was present in 50% of the patients. History of smoking was present in 56.6% of the patients. Binary Logistic Regression study showed that low level of HDL cholesterol had a significant impact on clinical outcomes of ACS patients who underwent PCI (OR 0.39, 95% CI 0.19-0.80). One unit (=10 mg/dl) increase of HDL-cholesterol decreases approximately 61% of MACE. (p value = 0.004). Survival analysis showed that high HDL-C group had a greater probability of surviving as compared to low HDL-c group at 180 days. **Conclusion:** Low HDL level was associated with higher incidence of MACE and lower probability of disease free survival.
Sutureless, Glue-less Conjunctival Autograft versus Conjunctival Autograft with Sutures in surgeries for Primary, Advanced Pterygium: A Comparative Study.

Authors: Dr. Tanie Natung

Aim: To compare and evaluate the outcome of sutureless, glue-less conjunctival autograft with autologous in situ blood coagulum versus conjunctival autograft with sutures for primary, advanced pterygium.

Methods: Thirty eyes of 30 patients with primary, nasal, grade 3 pterigia (as per Tan et al.’s classification) were randomized into group 1 (n=15) (sutureless, glue-less conjunctival autograft with autologous in situ blood coagulum) and group 2 (n=15) (conjunctival autograft with 8-0 vicryl sutures). The outcome parameters evaluated were graft stability and symptoms of pain, foreign body sensation and watering at day 1, day 7, day 14, 1 month, 3 months and 6 months and recurrence at 6 months.

Results: The mean age in the study was 44.77±13.74 years. Overall, group 1 had better scores in symptom parameters than group 2 (P<0.05%). Graft stability was better in group 2 (P<0.05%). In group 1, 3 (20%) patients had one side displacement and 3 (20%) patients had full displacement of graft. At 6 months, 4 (26.6%) patients in group 1 had recurrence whereas in group 2, 5 patients (33.3%) had recurrence (P=0.456).

Conclusions: Sutureless, glue-less pterygium surgery with autologous in situ blood coagulum was better in symptom scores but graft stability was better in the suture group. Sutureless, glue-less pterygium surgery with autologous in situ blood coagulum was unpredictable in graft stability. There was no statistically significant difference in the recurrence rate between the two groups.

A rare localization of an Osteochondroma involving the Scapula: a case report

Authors: Tashi G. Khonglah, Assistant Professor, Bhaskar Borgohain, Cherrymiki Tariang

Introduction: Osteochondromas are commonly found benign tumours (35–46%) of the bone. The most common sites of occurrence are the long bones of the lower extremity (50%), usually the lower end of the femur and upper end of the tibia. However, involvement of the small bones of the hand and other bones occurs in 10% of cases. An incidence of 5% in the pelvis and 4% in scapula has been reported.

Case Report: A 15 years old female patient presented to us with the swelling dorsolateral aspect of left scapular region of 2-year duration with history of progressive increase in size. On examination swelling was oval, lobulated, 4 x 6 cm, and bony hard consistency, fixed to underlying scapula from the dorsolateral aspect. The movement at the shoulder joint was normal with intact neurovascular status. X-ray examination showed a large sessile bony tumor arising from the dorsolateral aspect. CT scan showed a mushroom shaped exostosis measuring 4x6x3 cm from the infero-lateral aspect of left scapula. Histology confirmed the diagnosis of osteochondroma with no evidence of malignancy. After follow up of one year we did not find any signs of recurrence.

Discussion: These tumors are usually painless, but symptoms may result from complications such as mass effects that produce mechanical pressure, fracture of the bony stalk, nerve impingement, malignant transformation and bursa formation. The scapula being the uncommon site and there are few articles in the literature reporting such lesion. The growing potential of osteochondromas usually ends by the time of closure of growth plate (physis), and if the growth continues into adulthood, it should alarm the surgeon for possible malignancy. Treatment for sympotmatic osteochondromas of the scapula is surgical excision of the mass. The prognosis is mostly good following excision; recurrence may, however, occur, if the excision is incomplete.
Early experience with NPWT in management of difficult wounds at NEIGRIHMS

Authors: Tashi G. Khonglah, Bhaskar Borgohain, Cherrymiki Tariang

Authors affiliation - Dept. of Orthopaedics & Trauma
Presenting author email - dr.tashi@yahoo.com

Aims and objective: In India there are very few studies available on the use of Negative Pressure Wound Therapy (NPWT) for the management of high-grade open fractures and decubitus ulcers in both general and the orthopaedic setting in particular. The aim of our study was to gain more experience of its potential benefits and limitations.

Methodology: We employed NPWT on a group of Orthopaedic Patients with difficult wounds – high-grade bedsores and high-grade open fractures. Following wound debridement, 2 to 3 dressings using NPWT were used.

Results and Observations: There was a significant learning curve in proper management of wound with NPWT initially. Unfamiliarity with this modality of wound management by patients, family members and nursing staff including wound discomfort by patient were issues that had to be sorted out. Certain shortcomings like NPWT device malfunctioning, blockage of tubes, air-leaks and false reading of parameters in the device monitor were various problems encountered. These issues required human interface and intervention making it more labour-intensive than conventional wound therapy. In over 80% of our cases the wound healing was satisfactory after 2-3 NPWT dressing. The formation of granulation tissue and other signs of healing were faster than otherwise clinically anticipated with conventional wound management. Overall, the device and the process was safe and patient friendly.

Conclusion: Despite an initial learning curve and some preventable or minor limitations, better and faster wound healing was seen in majority of our cases and patient compliance was high. NPWT has high potential to be an important weapon in the armamentarium of difficult wound management therapy. Local modifications or innovations may replace disposable parts to cut down the overall higher cost of therapy. Large randomized controlled trial in Indian patients will benefit by identifying its precise place, ideal indications in establishing evidence based surgical wound management guidelines.

Association of thyroid disorders in females with primary infertility attending a tertiary-care hospital in northeast India

Authors: Chandan Nath*, Happy Chutia*, Alice Abraham Ruram*, Akash Handique**, Ananya Das***

Authors affiliation: *Department Of Biochemistry, **Radiology and ***Obs and Gynae ; NEIGRIHMS
Presenting author email: chandankn01@rediffmail.com

Background: A close interconnection is present between hypothyroidism and hyperprolactinemia. Failure to ovulate regularly in women of the reproductive age group may occur owing to hypothyroidism. Objective: To look for thyroid disorders among the primary infertile group of female patients and to see the association of serum prolactin level and thyroid-stimulating hormone (TSH) level, if any.

Materials and Methods: In this study, we investigated 53 diagnosed female subjects of primary infertility who were sent to the Department of Biochemistry for hormonal investigation. Fifty-three fertile age-matched females were enrolled for the study as control subjects. Serum prolactin and the TSH levels were measured by using chemiluminiscence method (Access 2, Beckman Coulter).

Result: Significantly higher prolactin and TSH levels were found among cases when compared with control subjects. A positive association was found between TSH and prolactin levels among the primary infertile female subjects.

Conclusion: This study showed significantly higher prolactin and TSH levels among the primary infertile female patients. Therefore, for proper management of infertile cases, it may be necessary to look for thyroid dysfunction and treat it accordingly.
Association of Serum Magnesium Deficiency with Insulin Resistance in Type 2 Diabetes Mellitus.

Authors: **Happy Chutia**, KG Lynrah, Alice Ruram, Chandan Nath

Authors affiliation: *Dept. of Biochemistry*, **Dept. of General Medicine, NEIGRIHMS

Presenting author email: happy.chutia@gmail.com

**Aim & Objectives:** Insulin resistance (IR) is the key pathophysiological defect that leads to the development of type 2 diabetes mellitus. The purpose of this study was to estimate serum magnesium level and insulin sensitivity indices among type 2 diabetes mellitus patients and to see the association between them, if any.

**Methodology:** This study was carried out among 38 type 2 diabetic patients and forty age and sex matched controls. Serum fasting glucose, magnesium, insulin, urea, and creatinine levels were estimated. Insulin sensitivity indices, homeostasis model assessment for insulin resistance (HOMA-IR) and quantitative insulin sensitivity check index (QUICKI) levels were calculated as per formulae.

**Results:** A highly significant low serum magnesium level was found in diabetic subjects as compared to the controls. Statistically significant high HOMA levels (>2.6) and low QUICKI levels (<0.33) were found among the case group. An inverse, statistically significant correlation was found between serum magnesium and fasting insulin level. A highly statistically significant inverse correlation was found between serum magnesium and HOMA level, and a positive correlation was found between serum magnesium and QUICKI level, that is, serum magnesium level decreases with increase in IR. A strong association was also found between fasting serum insulin level and insulin sensitivity indices.

**Conclusion:** This study showed a lower serum magnesium level in diabetic patients compared to control. A strong association was also found between serum magnesium level and insulin sensitivity indices. For proper management of type 2 diabetes mellitus, it may, therefore, be necessary to treat hypomagnesaemia well in these patients.

ABS 033

‘A Survey Study on the Emerging Role of Virtual Dissection Technology in Integrated Medical Teaching’

Authors: **Dr. Sarah Ralte**, Prof. (Dr.) Asima Bhattacharyya

Authors affiliation: Associate Professor, Anatomy, NEIGRIHMS

Presenting author email: sarahzoremi@gmail.com

**Introduction:** Imparting Anatomy education to medical students and surgical trainees would be incomplete without the mandatory cadaveric dissection where the students and trainees are encouraged to dissect, explore and feel the textures of the tissues and organs of a cadaver with a skilled approach. To combat the paucity of cadavers in medical schools worldwide without compromising on Anatomy curriculum, most of the medical schools have now combined routine cadaveric dissection with virtual dissection technology.

**Methodology:** This paper describes a survey study, conducted among the students, resident doctors and faculty of the Institute, comparing the perceived effectiveness of “real” and “virtual” dissections in a first-year human anatomy course, based on a workshop conducted recently by the Department of Anatomy, NEIGRIHMS.

**Results:** The survey findings suggested that both the dissection methodology techniques complemented each other in an excellent manner in terms of learning the structure and function of organs of the human body. All the students who undertook the survey (100%), were in favour of combining virtual dissection technology as a complement to other anatomical educational devices along with routine cadaveric dissection, as it gives the added benefit of allowing users to easily explore hard-to-reach parts of the human body; something more of a ‘reusable cadaver’. These findings reinforce the need to offer a variety of learning experiences that target different styles of learning.

**Conclusion:** To conclude, with the increasing scarcity of getting cadavers for dissection these days, the virtual dissection technology should be incorporated as a supplementary educational 3-D tool to the conventional cadaveric dissection, as the virtual dissection does not give the real life texture and feel of the tissues in the cadaver.
Comparison of Intraocular Pressure and Central Corneal Thickness in Non-Glaucomatous North-East Indian Tribals versus General Indians

Authors affiliation: Ophthalmology, NEIGRIHMS
Presenting author email: keditsuavonuo@yahoo.com

Purpose: To compare the intraocular pressure (IOP) and central corneal thickness (CCT) of non-glaucomatous North-East (NE) Indian Tribals with the non-glaucomatous general Indians.

Materials and Methods: In a prospective, cross-sectional study, the IOP and CCT of non-glaucomatous NE Indian tribals (n=50) and non-glaucomatous general Indians (n=50) were compared. Glaucoma was ruled out by history, detailed ocular examinations and investigations.

Results: There was very good correlation between the CCT and IOP values of right and left eyes (p=0.940 and 0.847 respectively). The difference in the IOP values in the two groups was not statistically significant [p=0.312 for Oculus Dexter (OD), p=0.400 for Oculus Sinister (OS)]. Similarly, the difference in the CCT values in the two groups was not statistically significant (p=0.736 for OD and 0.613 for OS). The mean CCT and IOP OD of the whole population was 530.50±35.42 µm and 13.80±2.760 mmHg respectively. By linear regression analysis, the IOP OD of the whole population had good correlation with CCT OD of the whole population (adjusted \(r^2=0.084, p=0.002\)) but not with age (adjusted \(r^2=0.000, p=0.314\)) and sex (adjusted \(r^2=0.010, p=0.163\)). Similarly, CCT OD of whole population did not have good correlation with age and sex (adjusted \(r^2=-0.009, p=0.762\)) and sex (adjusted \(r^2=-0.007, p=0.603\)).

Conclusions: In this study, persons with normal cornea and without glaucoma, no racial variation was found in the CCT and IOP values of the two groups. The IOP OD of whole population had good correlation with CCT but not with age and sex. There was good correlation between OD and OS values of IOP and CCT.

A cross-sectional study to determine Prevalence of TB in Urban Slums of Shillong

Authors: Sarkar Amrita, Talukdar Kaushik, Bora Madhur, Bhattacharyya Himashree, Pala Star, Medhi G.K.

Authors affiliation: Department of Community Medicine, NEIGRIHMS
Presenting author email: 2amritasarkar@gmail.com

Background: The present survey was carried out to fill up the lagging information on prevalence of TB in Meghalaya.

Aim and Objective: To study Prevalence of tuberculosis in urban slums of Shillong.

Methodology: The present community-based cross sectional study was conducted during January 2016. Two slum areas of Shillong were selected by convenient sampling. The study was carried out by house to house visit. Inclusion criteria: All residents in each selected slums present at the time of the visit were included. Exclusion criteria: People unwilling/incapable of participating. Informed verbal consent was taken. A detailed history and physical examination was carried out (general examination including recording of weight and systemic examination of respiratory system). Information was collected on pretested, semi-structured proforma. Data entry and analysis was done using Microsoft Office Excel version 2007.

Results: Out of 330 persons interviewed, 8 had TB during the past 5 yrs making the period prevalence to be 18/1000 population. Overall point prevalence of tuberculosis was found to be 15/1000 population. Overall prevalence of pulmonary TB was found to be 15/1000 population and that of extra-pulmonary TB was 9/1000 population. Higher prevalence was observed among females (28.57/1000 females) in comparison to males (16.67/1000 males). The highest TB load (15%) was found in the most productive age group of 20-29 yrs.

Conclusion: We found a high prevalence of TB in the present study. However, the results may not be generalized due to expected higher burden in slums and also due to less sample size.
ABS 036

CLINICAL PROFILE OF HSP IN CHILDREN ATTENDING TERTIARY CARE CENTRE.

Authors: R. Ksoo, Barman H, Saurabh D

Authors affiliation: Pediatric Medicine, NEIGRIHMS

Presenting author email: Rksoo.91@gmail.com

Objective: To determine the clinical profile of children with henoch-schonlein purpura (HSP) in NEIGRIHMS, Shillong.

Design: Hospital-based descriptive retrospective study.

Subjects: 20 Children requiring admission with a clinical diagnosis of HSP over the last 5 years.

Results: Purpuric rash was a common presentation seen in 15 of our patients (75%). Abdominal pain was the second most common presenting complaints that was seen in 11 patients (55%) and 10 children had edema or anasarca on presentation (50%). 8 children presented with joint pain and 8 were found to have hematuria on urine examination (40%). 2 children also had oliguria at the time of presentation (10%) and one child had lower GI bleed (5%). 5 children were positive when tested for stool for occult blood (25%). Complications in the form of acute glomerulonephritis was seen in 7 children (35% of the total cases). On follow up 3 cases had persistent hypertension (15%). 2 needed immunosuppressants therapy with cyclophosphamide and/or azathioprine but majority of the patients responded to 2 weeks of oral steroid therapy (n=15, 75%), one patient had spontaneous resolution without treatment and 2 required treatment upto 4 weeks.

Conclusion: Rash is the most common presentation in children with HSP, and gastro-intestinal and renal involvement is very common (55%). 75% of our cases responded well to steroid except those with renal involvement who developed complications and need further evaluation and treatment regime.

ABS 037

Challenges in the surgical management of oral cavity carcinoma- our experience

Authors: Deepanava Das, N.B. Shunyu, Hanifa Akhtar, A. Bhatia, Emanuel Momin

Authors affiliation: Department of ENT and Head and Neck surgery, NEIGRIHMS

Presenting author email: deepanava_das@rediffmail.com

In India, 20 to 40% of all cancer arises in the head and neck region with high incidence in the eastern and southern regions of our country. In north eastern India, cancer of oral cavity ranks highest among head and neck cancer due to ethnic and regional variation. Cancer of oral cavity impairs deglutition, speech and airway. And surgical management is challenging due to the large soft and bone tissue defect created and the requirement of reconstruction to maintain and rehabilitate the normal functions.

Aims And Objectives: a) To study the profile of operated oral cancer patients. b) To study different reconstruction methods used.

Materials And Methods: A retrospective study conducted in the department of Otorhinolaryngology and head and neck surgery in North Eastern Indira Gandhi Regional Institute of Health and Medical Sciences, India year 2009 to January 2016. Information was collected from indoor patient file and operation record book.

Results And Observations: In our study a total no 183 patients were selected with female predominance. Most patients belonged to 4th to 6th decade. Cancers of buccal mucosa and lower alveolus and floor of mouth were seen in majority. Soft tissue and bony defect reconstruction were done with variety of flaps varying from pedicled flaps to free microvascular flaps. Conclusion: Cancer of buccal mucosa and floor of the mouth were most common. Female predominance were seen. Earlier reconstruction was done with pectoralis major myocutaneous flap with or without rib in majority. Nowadays reconstruction is done with free flaps like radial forearm free flap, fibula free flaps and anterolateral thigh flap.
A prospective study on antimicrobial resistance in Neisseria gonorrhoeae: a re-emerging pathogen

Authors: Elantamilan D, Khyriem AB, Lyngdoh WV, Dutta V

Authors affiliation: Department of Microbiology, NEIGRIHMS, Shillong.

Presenting author email: dentamilan@gmail.com

Introduction: Gonorrhea is one of the oldest known human illnesses. Despite the highly effective antimicrobial therapy available, it remains as a common sexually transmitted disease. Complicating this situation, new multi-drug resistant strains are emerging, making it a re-emerging public health threat. Initially, gonococci were almost uniformly susceptible to the sulfonamides, penicillin, tetracyclines, macrolides and fluoroquinolones, but none of these is now suitable for routine therapy for uncomplicated gonorrhea. Presently, cephalosporins are the drug of choice and cephalosporin resistant strains are getting reported increasingly worldwide.

Methodology: This was a hospital-based prospective study conducted over 2 years to study the drug resistance profile of Neisseria gonorrhoeae strains prevalent in our population. All the urethral discharge samples obtained from patients with a suspected gonorrhea were processed according to standard guidelines. Antimicrobial susceptibility testing was performed using disc-diffusion method described by CLSI standard. Drug resistance profile was studied for the following agents: Penicillin(10U), Tetracycline(30 ìg), Ciprofloxacin(5 ìg), Ceftriaxone(30ìg) and Cefixime(5 ìg).

Results: Eighteen clinical samples were obtained and Neisseria gonorrhoeae was isolated from 10 samples. All isolates were obtained from male patients (Mean-age:25.4(±2.06)). Direct smear examination was positive in 9 cases (90%). The following pattern of drug resistance was detected: All the ten isolates (100%) showed non-susceptibility to penicillin and tetracycline; Eight isolates (80%) showed non-susceptibility to ciprofloxacin; and all the ten isolates (100%) were susceptible to ceftriaxone. Eighty percent of the isolates exhibited resistance to three of the four drug classes currently approved for treatment.

Conclusion: Unrestricted, inappropriate selection and overuse of antibiotics, suboptimal quality of antibiotics and inherent genetic mutations within the organism have contributed to the development of this pattern of resistance in N. gonorrhoeae. The resistance will render it untreatable, increasing the reproductive morbidities. Furthermore, it facilitates the transmission of HIV by increasing the risk five-fold. Only an effective surveillance of the resistance profile and appropriate management regulations can curb the rise of this re-emerging threat.
Detection Of New Delhi Metallo-β-Lactamase-1 (Ndm-1) Producing Enterobacteriaceae In Intensive Care Unit, Neigrihms

Authors: Jyotismita Rajbongshi*, Wihiwot Valarie Lyngdoh*, Prithwis Bhattacharyya**, Annie Bakorlin Khyriem*, Elantamilan Durairaj*

Authors affiliation: Department of Microbiology,* Department of Anaesthesiology,** North Eastern Indira Gandhi Regional Institute of Health and Medical Sciences, Shillong.

Presenting author email: drjyotismita@gmail.com

Introduction: Resistance is increasingly reported due to unrestricted sale and misuse of antibiotics. Carbapenems are the last resort against multidrug resistant gram-negative bacteria especially in high risk wards. This study was undertaken as a hospital based prospective study conducted over 12 months to determine the prevalence of carbapenem resistant Enterobacteriaceae and New Delhi Metallo-β-lactamase-1 gene amongst the isolates received from the intensive care unit of North Eastern Indira Gandhi Regional Institute of Health and Medical Sciences (NEIGRIHMS).

Materials and Methods: Various samples like blood, urine, peritoneal fluid etc. from patients admitted in ICU were cultured on appropriate routine bacteriological media. The biochemical identification and antibiotic susceptibility testing of the bacterial isolates were performed. The isolates belonging to Enterobacteriaceae family which showed intermediate or resistant zone size to any of the carbapenems tested (either imipenem or meropenem) were included. Identification of all the screened isolates was confirmed by VITEK-2 identification system and the antimicrobial susceptibility testing was performed using AST-N280 cards for determination of resistance patterns and MICs. The bla\text{NDM-1} gene was detected by Real time Polymerase Chain Reaction.

Results: Amongst 828 Enterobacteriaceae isolates 184 (22.22%) showed resistance to carbapenems. The prevalence of Enterobacteriaceae isolates harbouring bla\text{NDM-1} in ICU was 6.3%.

Conclusion: Multi drug resistance infections due to metallo-β-lactamases like New Delhi Metallo-β-lactamase is a worldwide health problem. The present study highlights an increasing prevalence of carbapenem resistance amongst Enterobacteriaceae isolates in Intensive Care Unit. This mandates routine screening for carbapenemase to prevent therapeutic failure and implementation of prompt infection control measures.
**Audit Of Neonatal Services Of Neighrims: Analysis Of 2years Secondary Data**

**Authors:** Jeevan Silwal*, Himesh Barman, Saurabh Gohain Duwarah

**Authors Affiliation:** Department of paediatrics, NEIGRIHMS, Shillong

**Presenting author email:** drn_secry5@yahoo.com

**Introduction:** The quality improvement in neonatal services is a national priority. There is a system in place for quarterly reporting of data from all Sick newborn care units (SNCU) to State National Health Mission (NHM), Meghalaya. This study analyzed secondary data from NEIGRIHMS Neonatal Intensive care unit (NICU) for assessment of performance and self improvement.

**Aims & Objectives:** To perform an audit of neonatal services at NEIGRHIMS with special reference to spectrum of disease and its outcome.

**Method & Materials:** The data from report sent to NHM over last 8 quarters (Jan2014 to Dec 2015) were collected from departmental records and constituted the material for the study.

**Results:** There were total 3030 live births and 69 still births in last 2 years. There were total 885 admissions [Male=507(57.2%), Female=378(42.8%)]. Out of this 524 (59.2%) were inborn babies. Rate of admission in Inborn was 173 admissions /1000 live births. There were 27 inborn deaths resulting in Neonatal mortality rate of 9 per 1000 institutional live birth. Out of the admitted babies 44.5% had low birth weight and 45.8% were premature. The commonest reason for admission was Phototherapy (42.3%) followed by Respiratory distress syndrome (10.05%) and Prematurity (7.9%). Prematurity was the commonest cause of death (23.7%) followed by HIE (20.3%) and respiratory distress syndrome (16.9%). Out of the total death 60.2% of the babies were low birth weight 51% were premature. Among extremely low birth weight (ELBW) babies 36.8 % expired while 10.3 % Very low birth weight babies (VLBW) babies expired. Premature babies had the highest risk of death with case fatality rate of 20% followed by sepsis (16.2%). Most of the admitted babies stayed between 1-3 days (38.6%) while a large proportion of babies who expired (37.8%) had NICU stay of <24 hours.

**Conclusion:** Prematurity was the commonest cause of death in both inborn babies and out born babies followed by sepsis. Therefore, Strategies for prevention of prematurity, improvement in care of premature and prevention of neonatal sepsis should be areas of priority in our centre.

---

**ABS 041**

**Intra-Articular Injection Of Platelet-Rich Plasma In The Management Of Chronic Low Back Pain Due To Facet Arthropathy: A Case Report With 12 Months Follow-Up**

**Authors:** SAMARJIT DEY

**Authors affiliation:** Assisstant Professor, Department of Anesthesiology & Critical Care, NEIGRIHMS

**Presenting author email:** drsamar0002@gmail.com

Intra-articular Injection of Platelet-rich Plasma in the Management of Chronic Low Back Pain due to Facet Arthropathy: A Case Report with 12 Months Follow-up.

Platelet-rich plasma prolotherapy (PRPP) helps to heal the injured tissue. Connective tissue repair is the platelet function that PRPP operates on. Platelet concentrations, when increased in a specific area, stimulate rapid healing. The main focus of PRPP is on the alpha granules, as these structures house all of the growth factors essential to PRPP in inactivated forms. Here, we report a case of lumbar facet arthropathy, which was successfully treated with intra-articular PRP injection. Patient was pain free after 12 months follow-up. We want to highlight that intra-articular PRP injection may be a future potential alternative therapy for facet arthropathy.
**ABS 043**

**Pediatric lupus nephritis: an experience from north east India**

Authors: *Ripan Debbarma*, Himesh Barman, Saurabh Gohain Duwarah

**Authors affiliation:** Department of Pediatrics, NEIGRIHMS, Shillong

**Presenting author email:** ddbripan@gmail.com

**Introduction:** Systematic lupus erythematosus (SLE) is an autoimmune disease characterized by multisystem inflammation. Compared with adults, children and adolescents with SLE have more severe disease.

**Aims & Objectives:** To study the clinical presentation and outcome of children and adolescent with SLE in our centre.

**Material & Methods:** The inpatient data were used to identify the children with SLE. The data of individual child was collected from inpatient and patient follow-up record.

**Results:** Thirteen children were identified with a male female ratio of 1:12. Two children were less than 10 year old and rest more than 10 year old. Commonest presenting features were hypertension (76.9%), fever (53.8%), pallor (30.7%), edema, malar rash and arthralgias (23.7% each). Renal involvement was seen in 11 (84.6%) children, cytopenias in 5 (38.4%) and CNS in 2. Two had class III and 9 had class IV lupus nephritis. Out of the Children with class IV nephritis, two were treated with MMF and 7 were treated with cyclophosphamide for induction phase. Mycophenolate mofetyl was used in maintenance phase. One child was lost to follow up and one child expired during the acute phase. Rest of the 11 children had at least 1 year of follow up and all had normal renal function at last follow up. During the course, 3 children had amenorrhoea which spontaneously resolved, 3 had infections and 2 had AVN femoral head.

**Conclusion:** Though the course in lupus in children may be stormy with proper follow up long term outcome can be good.
Natural Killer Cell Lymphoma: A Case With Classification Dilemma

Authors: Ankit Kumar Jitani, Yookarin Khonglah, Vandana Raphael, Ritesh Kumar*, Bidyut Bikash Gogoi

Authors affiliation: Departments of Pathology and *Oncology; North Eastern Indira Gandhi Regional Institute of Health and Medical Sciences, Shillong, India

Presenting author email: ankitjitani@gmail.com

Background: Non-Hodgkins lymphoma of the Natural Killer (NK) cell type is rare. WHO recognises 3 NK-cell entities, Chronic lymphoproliferative disorders of NK cell, Aggressive NK cell leukemia and Extranodal NK/T cell lymphoma, nasal type. Though specific clinical, morphological and immunophenotypic criteria have been laid down there may however, be considerable variations in the clinical presentation making diagnosis difficult. We present a case with contrasting clinical and hematopathological findings posing difficulty in its diagnosis and classification and highlight the treatment and prognostic differences of the case, in comparison to other lymphomas, especially the 3 known NK-cell entities.

Case report: A 30 year old gentleman was admitted with 1 month history of fever, weakness, weight loss, generalised lymphadenopathy, hepatosplenomegaly and thyroid enlargement. He had received 2 cycles of CHOP chemotherapy in a private hospital, without response. FNA from palpable lesions and cervical LN biopsy were consistent with the diagnosis of non-Hodgkins lymphoma. Flowcytometry on the cervical aspirate showed CD16+/CD56+, negative for all B, T and myeloid cell markers. IHC supported flowcytometry findings. EBV was negative. Bone marrow aspiration showed infiltration, however peripheral blood failed to reveal lymphoma cells. A diagnosis of Non-Hodgkins lymphoma of NK-cell phenotype, Ann-Arbor stage IVB was made. However, we were unable to sub classify it into any of the WHO entities. Patient received VIPD chemotherapy regimen and is under partial remission after six months of diagnosis.

Main lesson from the case report: Immunophenotyping should be mandatory before initiation of treatment in NHL. Also, inclusion of wider clinical presentations and diagnostic markers maybe necessary to increase the diagnostic accuracy and reproducibility of NK-cell lymphoma and this might have a profound impact on survival and disease prognostication.

Miliary Tuberculosis Complicated By Left Sided Pleural Effusion And Acute Respiratory Distress Syndrome

Authors: Dr Iadarilang Tiewsoh, Dr Bhupen Barman, Dr K G Lynrah, Dr Tasho Beyong, Dr Neel Kanth Issar

Authors affiliation: Senior Resident, Department of Medicine, NEIGRIHMS

Presenting author’s email: itiewsoh@gmail.com

Miliary tuberculosis includes extrapulmonary and pulmonary features which results from the lymphohematogenous spread of the tubercle bacilli to the vascular beds in the lungs and other organs. Diagnosis is made by clinical judgement and chest xray showingmiliary mottling of the lung fields. Other imaging study like CT imaging of the lungs and abdomen can also be supportive in diagnosing miliary tuberculosis. We present a case of miliary tuberculosis in an immunocompetant young male who presented for the first time along with atypical manifestation of a left sided pleural effusion and a life threatening complication of acute respiratory distress syndrome during hospital stay which required non invasive mechanical ventilation and steroids therapy, along with antitubercular medication. Patient responded well to therapy following initiation of steroids with continuation of antitubercular medications and patient was followed up on regular basis showing a good outcome.
Varied Presentations Of Myeloid Sarcoma: A Report Of 3 Cases
Authors: Nabanita Das, Vandana Raphael, Yookarin Khonglah, Jaya Mishra, Ekta Jajodia, Ankit Kumar Jitani
Authors affiliation: Department of Pathology, North Eastern Indira Gandhi Regional Institute of Health and Medical Sciences, Shillong
Presenting author email: jilmiljoy@yahoo.co.in

Background: Myeloid sarcoma (MS) is a rare tumour mass consisting of myeloid blast, with or without maturation, effacing the normal architecture of the tissue and occurring at extramedullary site. WHO classifies MS as an acute myeloid leukemia (AML). Numerous sites of MS have been described in literature, most common locations includes the soft tissue, bone, periosteum, and lymph nodes. We report a case series of MS consisting of 3 cases.

Case report: We present a report of 3 cases of MS; age ranging from 3-25 years, 1 female patient and 2 male patients with varied presentations. One case was associated with haematological malignancy while 2 cases were isolated MS.

Main lesson from the case report: Myeloid sarcoma is a rare presentation of AML and is reported in 2.5% - 9.1% of patients with AML. Occurring mostly concomitantly, it may follow, or, rarely, antedate the onset of leukemic involvement of the bone marrow. Thus myeloid sarcoma should be considered in the differential diagnosis of a mass lesion, especially in patients with leukemia.

Plasmodium Vivax Malaria with Severe Thrombocytopenia and Varied Skin Manifestations: A Case Report
Authors: Tony Ete, Akash Roy, Prasanta Kumar Bhattacharya, Preeti Jane Picardo, Md Jamil, Ibandalin M Shangpliang, Chobin, Hage Nobin
Authors affiliation: SRD, Department of General Medicine, NEIGRIHMS
Presenting author email: gyatlyncho@gmail.com

Background: Plasmodium vivax malaria is an endemic infection in India and is commonly associated with mild haematological abnormalities. Severe thrombocytopenia as well as purpuric skin manifestation are common in isolated falciparum and mixed falciparum/vivax malaria, but is very rare in isolated P vivax infection.

Case Report: We hereby report a case of severe thrombocytopenia in a case of vivax malaria along with skin lesions presenting as purpura, ecchymosis and urticaria. Vivax malaria can no longer be considered as benign and atypical presentations with severe complications should be borne in the minds of physicians especially in a malaria endemic country like India.
Apocrine Hydrocystoma: Case reports of A Rare Benign Tumor.

Author’s name: Hage Nobin, Vandana Raphael, Pranoy Paul, Bidyut Bikas Gogoi, Ekta Jadoja.

Author Affiliation: SRD, Pathology, North Eastern Indira Gandhi Regional Institute For Health & Medical Sciences, Shillong, Meghalaya, India.

Presenting author Email Id: nobinhage@gmail.com

Background: Hidrocystoma is a rare benign tumor which commonly is present in head and neck and can be either apocrine or eccrine variant.

Case 1: A 7 year old female presented with complain of a pigmented lesion just inside left side of introitus, observed since 2 weeks. She had no itching, irritation nor gave a history of increase in size. On examination, the lesion is small, about 2X2 mm with sharp outline and black in color. A diagnosis of melanocytic nevus was made and lesion was excised and sent for histopathological examination. Grossly the specimen was blackish and weighed 0.1 gms. The histopathological examination(HPE) showed ulcerated mucosa with well circumscribed tumor consisting of tubules and cystically dilated glands consisting of two layers of epithelium and inner columnar with apocrine change and outer cuboidal cells. Dilated cysts were seen in mucosa and submucosa. The lumen shows pigmented secretions and most of the cells showed pigmentation. There was dense lympho-plasmacytic infiltration with scattered eosinophils. The features were consistent with benign adnexal tumor in favor of pigmented apocrine hidrocystoma.

Case 2: A 26 year old male came with a papule in his prepuce since 3 months, which measured 3X3mm. No other associated symptoms were noted. A clinical diagnosis of inclusion cyst was made and excisional biopsy was done and sent for histopathological examination. Grossly the specimen weighed 0.1 gms. HPE of prepuce showed epidermis and dermis. Epidermis had hyperplastic stratified squamous epithelium with hyperkeratosis, parakeratosis and papillomatosis. Dermis showed a cyst lined by bi-layered cuboidal epithelium. The luminal cell layer showed prominent apical snouting. The cyst was filled with basophilic fluid like material. These features favored a diagnosis of apocrine hidrocystoma.

Main Lesson: Both the cases had lower age and uncommon site of presentation with resemblance to other benign tumor. Further assessment of the case needs to be done to understand the disease.

Post-ictal psychosis with self amputation of foot in a patient with epilepsy: a case report

Authors: Shri Ram Sharma, Arvind Nonpiur, Masaraf Hussain, HIBU HABUNG

Authors affiliation: SRD, Dept of neurology* Dept of psychiatry**Dept of neurology***NEIGRIHMS

Presenting author email: hibuhabung20@gmail.com

Background: Post-ictal psychosis occurs in 6-10% particularly in temporal lobe epilepsy, typically after a cluster of complex partial seizures with or without secondary generalisation. Self-injurious behavior in epilepsy is uncommon but can occur with seizure activity in the frontal and temporal lobes. Here we report a case of epilepsy, who had post-ictal psychosis and who self-amputated his left foot following a seizure.

Case report: A 25 year old male presented with history of fits for the last 7 years. There was history of abnormal behavior lasting up to 24-48 hours after an episode of seizure and hearing voices of people during that period. Last year, after an episode of fit, he accidentally burnt his left leg and post-ictally he started running about in a nearby jungle. On reaching home he severed his left foot completely with a knife and threw the amputated foot towards his mother. Following day, he had no recollection of the event. Clinically guilt feelings and remorse were present but no depressive cognitions or psychotic symptoms on mental status examination. He had amputated stump at left ankle joint with exposed bones and burn marks over the overlying skin (figure 1). His blood investigations, ECG and CXR PAV were normal. MRI brain showed old calcified granuloma at left middle frontal gyrus suggestive of neurocysticercosis. EEG showed left focal temporal discharges with generalization.

Main lesson from the case report: Keeping in view of the grievous nature of self-injurious behaviour, there is a need for better psychoeducation of patients and relatives of the post-ictal phenomenon so that continuous observation, at least for a few hours is necessary after a seizure to prevent such occurrences.
**ABS 050**

**Von Hippel-Lindau Syndrome (A Rare Multi-systemic Disease) ~ A NEIGRIHMS Experience.**

**Authors:** Arindom Kakati; Joy L. Miller

**Authors affiliation:** SRD, Dept. of Neurosurgery NEIGRIHMS.

**Presenting author’s email:** jmiller.gensurg@gmail.com

**Background:** Von Hippel-Lindau syndrome is a multi-systemic neoplastic disorder characterized by the development of hemangioblastomas in the cerebellum, retina, brainstem & spinal cord; and tumors such as renal clear cell carcinoma, pheochromocytomas, pancreatic tumors, endolymphatic sac tumors, cystic lesions in the pancreas and kidneys, cystadenomas of the broad ligament or epididymis, among others. It has an autosomal dominant pattern of inheritance with an incidence of 1 in 31,000-36,000. The gene responsible is a tumor suppressor gene located on 3p25 which undergoes bi-allelic inactivation that causes this condition.

**Case Report:** Two cases of Von Hippel-Lindau Syndrome presented to our department with features of raised intracranial pressure and positive family histories. One was an 18-year-old boy with associated retinal involvement (vitreo-retinal detachment: right eye). The other was a 26-year-old lady who, in addition, had diabetes mellitus secondary to cystic changes in the entire pancreas and multiple renal cysts. Both patients underwent posterior fossa surgery for the cerebellar hemangioblastomas.

**Lesson:** Diagnosis of the VHL syndrome, in the setting of multi-systemic presentations as described above (ref. background) should be high in the index of suspicion so that appropriate early treatment for the individual, screening of other family members and genetic counselling can be given.

**ABS 051**

**Adverse Drug Reactions (Adr) Due To Cancer Chemotherapy In A Tertiary Care Teaching Hospital**

**Author’s name:** Jb Wahlang, L Purnima Devi, C. Sarkar, R Kumar, D. k Brahma, Banylla S Nongkynrih, J Lahon

**Author’s affiliation:** Department Of Pharmacology *Oncology** NEIGRIHMS

**Presenting author email:** banyllashishan2@gmail.com

**Background:** An adverse drug reaction (ADR) is defined by World Health Organization (WHO) as “Any response to a drug which is noxious, unintended and occurs at doses used in man for prophylaxis, diagnosis or therapy. There is paucity of data regarding the safety profile of cancer chemotherapy in North-eastern India. So, the objective of the present study was to evaluate the pattern of ADRs occurring in cancer patients treated with chemotherapy in a tertiary care hospital in North-east India.

**Results:** Total of 141 cases had received chemotherapy at tertiary teaching Institute, NEIGRIHMS and only 119 cases were analysed after due valid consent has been obtained from the concerned patient. The most common ADRs were constipation, nausea and vomiting, alopecia, haematological changes, anorexia and giddiness. The suspected anti-cancer drugs were Cisplatin, Paclitaxel, docetaxel, 5-FU, Etopside, Cyclophosphamide, Doxorubicin, Vincristine, Gemcitabine, Methotrexate, Carboplatin, Capacitabine, Melphalan, Actinomycin – D. Premedication drugs were Injection Ranitidine, Dexamethasone and Granisetron.

**Learning Message:** Cancer chemotherapy is always associated with ADRs which are preventable and non-preventable. Less nausea and vomiting cases in our patients owing to successful premedication and good diet. On the other hand uncommon ADRs like constipation have been seen in our patients which need further evaluation.
Nimesulide Induced Leukocytoclastic Vasculitis And Hepatitis: A Case Report

Authors: Prasanta Kumar Bhattacharya*, Obang Perme*, Bhupen Barman*, Aakash Roy*, Md Jamil*, Monaliza Lyngdoh* and Jaya Mishra**

Authors affiliation: Department of Medicine*, Department of Pathology** NEIGRIHMS Shillong

Presenting author email: oobang2003@gmail.com

Background: Nimesulide is a non-steroidal anti-inflammatory drug with antipyretic and analgesic properties, which is still used in many countries despite its known hepatotoxicity. Along with hepatotoxicity it has also been associated with several other Adverse Drug Reactions (ADRs) including leukocytoclastic vasculitis (LCV).

Case Report: A 38 year-old female presented with history of acute onset fever for which she took tablet nimesulide and paracetamol combination (100 mg nimesulide + 500 mg paracetamol tablet), 1 tab three times daily for 4 days, following which she developed rash all over the body. She also had clinical and biochemical evidence of acute hepatitis. Histopathological examination of the skin rash documented the presence of LCV. She was managed symptomatically with anti-inflammatory and supportive therapy, and was not further exposed to nimesulide.

Conclusions: To the best of our knowledge there is no previous published report of LCV and hepatitis occurring concurrently in the same patient following nimesulide intake. Under such evidence of serious ADRs the scientific community should consider ensuring strict pharmacovigilance with respect to its use especially in the developing countries.

Glycogen storage disease type 1a presenting as gouty arthritis in a young female without hypoglycaemia

Authors: Tony Ete, Preeti Jane Picardo, Prasanta K. Bhattacharya, Animesh Mishra, Yookarin Khonglah, Jaya Mishra, Rinchin Dorjee, Monaliza Lyngdoh

Authors affiliation: Senior Resident, Department of General Medicine, NEIGRIHMS, Shillong

Presenting author email: preetijanepicardo@yahoo.co.in

Background: Glycogen storage disease type I (GSD I) is a rare inherited metabolic disorder caused by deficient glucose-6-phosphatase (G6Pase) activity with a tendency to develop hypoglycaemia with secondary metabolic derangements including hyperlactacidemia, hyperlipidemia band hyperuricemia.

Case Report: We hereby report a rare case of a 23 year old female presenting with features of gouty arthritis attributed to be due to GSD I. The duration of arthritis was 3 years. Abdominal ultrasonography showed an enlarged liver measuring 20.64 cm with increased echo texture. Intravenous pyelogram showed multiple renal calculi on both kidneys. Fine needle aspiration cytology (FNAC) from the right metatarsophalangeal joint swelling showed abundant needle shaped birefringent crystals. With suspicion of a metabolic abnormality a liver biopsy was performed which showed a picture consistent with GSD. A glucagon stimulation (tolerance) test was performed raising the suggestion of a GSD.

Main Lesson: Primary gout is relatively rare among young females so secondary gout may be possible and the search for primary underlying disease should be pursued. Furthermore atypical presentations of GSD-1 without apparent hypoglycaemia should also be borne in mind.
**ABS 054**

**Posterior Reversible Encephalopathy Syndrome In Hemophagocytic Lymphohistiocytosis**

**Authors:** Ripan Debbarma*, Himesh Barman*, Pranjal Phukan**, Sriparna Dhar**

**Authors affiliation:** Department of Pediatrics*, Deptt of Radiology,** NEIGRIHMS

**Presenting author email:** ddbripan@gmail.com

**Background:** Hemophagocytic lymphohistiocytosis (HLH) is a rare syndrome characterised by reactive, systemic proliferation of benign histiocytes throughout the reticuloendothelial system. Posterior reversible encephalopathy in HLH is a rare condition.

**Case Description:** 6 years girl presented with fever and abdominal distension for 6 months. On examination child had massive splenomegaly and moderate hepatomegaly. Investigations shows pancytopenia, serum ferritin- 4393ng/ml, triglycerides- 317 mg/dl. Diagnosed as HLH based on HLH- 2004 guidelines. Started chemotherapy with dexamethasone, cyclosporine and etoposide. After 19 days of chemotherapy child had 1 episode of convulsion followed by encephalopathy for 48 hours. CSF study was normal, MRI brain shows PRES.

**Conclusion:** In acute neurological deterioration of HLH patient, PRES should be considered as a possible cause.

**ABS 055**

**Early experience with MIPO for difficult fractures at NEIGRIHMS**

**Authors:** Bhaskar Borgohain, Cherrymiki Tariang

**Authors affiliation:** Deptt of Orthopedics & Trauma, NEIGRIHMS

**Presenting author email:** cmtariang@gmail.com

Open reduction and internal fixation of fracture has limitations and it disturbs the fracture haematoma. Closed nailing is a good technique but nailing cannot be done in all types of cases. The recent advancement called minimally invasive plate osteosynthesis (MIPO), which is developed under the guidance of biological osteosynthesis (BO) rules, can achieve faster and better rehabilitation as the fracture can be fixed with a small incision and fracture haematoma or the fracture site is not at all exposed. It is indeed an internally place external fixator and MIPO provides mechanical stability at the fracture site (Right Biomechanics) and congenial fracture healing environment (Right fracture healing Biology). MIPO is mainly used in long bone fractures such as tibia, humerus, and femur, but the technique is distinctive in each fracture site. The operative method, clinical outcome and comparison with other internal fixation methods will be discussed to determine whether MIPO is the best method or alternative method in fracture treatment. We want to share our early experience with MIPO for difficult fractures at NEIGRIHMS
Minimally Invasive Spine Surgery (MISS): A revolution in spinal surgery

Authors: Dr Dibyojyoti Bora, Dr Arindom Kakoti, Dr Frankie S Siangshai, Dr Joy L Miller

MISS can be defined as a type of muscle sparing approach to the spine by use of small incisions, tubes or small retractors through carefully planned surgical corridors; in an attempt to minimise the volume of collateral damage to surrounding bony and soft tissue while providing adequate exposure and access to target pathology. It offers tangible benefits to the patients and is gaining acceptance supported by good quality scientific data. The modernisation of tools and techniques for MISS has recently enabled spine surgeons to expand the patient selection and candidacy to include a growing array of spinal disorders such as degenerative disc herniation, spinal fractures, instability, tumours, infection and spinal deformities. With time various techniques have evolved in this field like use of a tubular retractor for gaining access, percutaneous placement of screws and rods, direct lateral access routes and the thoracoscopic access route. MISS has all the advantages of other minimally invasive procedures being used in the various fields of surgery. However, increased radiation exposure, diminished surface area of exposed bone for fixation, difficult repair in case of spinal leak and the learning curve for surgeons are some of the constraints when MISS is compared to open surgery. MISS was initiated in NEIGRIHMS in the month of May 2015 and so far three cases of spinal fracture have been operated with this technique with encouraging outcomes. As we take the first steps in this new direction we would like to share our experience so far in this rapidly expanding dimension of spinal surgery.

Neural Tube Defects: A single centre experience

Authors: Dr Frankie Shadap Siangshai, Dr. Arindom Kakoti, Dr Joy Miller, Dr Dibyajyoti Borah

Introduction: Neural tube defect is a constellation of congenital abnormalities due to neurulation defects primarily affecting brain and spinal cord. These can be be grouped as either open or closed defects. The open defects include anencephaly, encephaloceles, hydranencephaly, iniencephaly, schizencephaly, and spina bifida and the close defects include lipomyelomeningocele, lipomeningocele, and tethered cord. Here we present a single center experience with Open Neural Tube defects spanning from 2013 - 2016.

Methodology: All the cases that presented were below 1 year of age and the management undertaken was mainly surgical excision and repair. Results: Of the 8 patients we have operated, 2 patients had post operative wound dehiscence, 1 patient developed post operative hydrocephalus and 1 patient developed csf leakage. The rest of the patients recovered well without any post operative complications and are still under follow up.

Conclusion: Neural Tube defect is an easily preventable congenital anomaly but unfortunately the only possible treatment for children who are born with these defects is a surgical one and the outcomes although are associated with complications, proper surgical technique and post op care can go a long way in giving children born with these anomalies a semblance of normal life.
Damage control orthopedics (DCO): the NEIGRIHMS experience

Authors: Bhaskar Borgohain, Dukhum Magu

Authors affiliation: Orthopedics, NEIGRIHMS
Presenting author email: drdakhum@gmail.com

Damage control orthopaedics (DCO) refers to limited early surgical intervention for stabilization of musculoskeletal injuries in the unstable poly-trauma patient. The goals of damage control orthopaedics are to limit ongoing hemorrhage and soft-tissue injury through efficient fracture stabilization while minimizing additional physiologic insult. Specifically, care is taken to avoid development of the lethal triad (hypothermia, coagulopathy, and acidosis) and to limit secondary injury to vital organ systems, such as the brain and lungs. Early total care approach where all fractures are fixed early can be dangerous approach in certain group of poly-trauma cases with chest and head injuries, since this may precipitate apoptosis, microcirculatory disturbances, multi organ dysfunction and multi organ failure (including ARDS) and death. These may be avoided by DCO. Application of External fixation for long bone and pelvic injuries, in addition to débridement of open fracture wounds, removal of devitalized tissue, surgical management of hemorrhage, and fasciotomies etc are the examples of DCO. As our understanding of the impact of fracture care on the body’s systemic inflammatory response to trauma continues to evolve, the current criteria to determine which patients are best treated with a damage control approach (and not with early total care) remain a source of much debate and investigation. We want to present our early clinical experience with the strategy of DCO at NEIGRIHMS.

Lupus Pneumonitis mimicking Pulmonary Tuberculosis: A masquerade

Authors: Prasanta Kumar Bhattacharya, Akash Roy, Md Jamil, Monaliza Lyngdoh, Kishore Kumar Talukdar

Authors affiliation: Post Graduate Trainee, Department of General Medicine, NEIGRIHMS, Shillong
Presenting author email: royakash12@gmail.com

Background: Systemic Lupus erythematosus (SLE) is characterized by production of antibodies against various cellular antigens derived from nucleus, cytoplasm and cell membrane. Pulmonary manifestations of SLE can include a wide spectrum of diseases such as pleuritis, pneumonia, pulmonary embolism, pneumothorax and pulmonary haemorrhage. Acute lupus pneumonitis may mimic tuberculosis or other acute infectious pneumonia and the incidence varies from 0.9% to 11.7%.

Case Report: An 18 year old girl presented with history of cough with expectoration with occasional haemoptysis. She also had history of fever, swelling of hands and feet along with hair loss. On examination she was febrile and dyspneic, with moderate to severe anaemia, tachycardia, tachypnoea, and coarse crepitations over the chest. Sputum for acid fast bacilli, bacterial culture and fungal stains were negative. She was initially treated with broad spectrum antibiotics and then empirically with anti-tubercular therapy (ATT). However, as she failed to respond to ATT, further evaluation was done. Anti-nuclear antibodies and ds DNA were strongly positive. Urine analysis showed nephrotic range proteinuria. High resolution computed tomogram of the chest showed bilateral ground glassing suggestive of lupus pneumonitis (LP). A diagnosis of SLE with LP was made and the patient was put on corticosteroids which led to a dramatic response.

Main Lesson: SLE has a wide facade of presentations. Keeping this in mind, even in countries where tuberculosis is endemic, the differential diagnosis of SLE and LP should always be considered even where the clinical features and chest X-rays findings are suggestive of pulmonary tuberculosis.
ABS 060

A Retrospective study of papillary carcinoma Thyroid in a tertiary care centre

Authors: Aman M M A*, Mishra J*, Raphael V*, Khonglah Y*, Shunyu N B**

Authors affiliation: Department of Pathology* and ENT**, NEIGRIHMS, Shillong
Presenting author email: dr98642@gmail.com

Aims and objective: This is a retrospective study to evaluate the efficacy of FNAC in diagnosis, staging and surgical treatment of papillary carcinoma thyroid. It is also an attempt to establish an etiological link between associated background pathologies in all histopathologically proven case of papillary carcinoma thyroid.

Methodology: Thyroidectomy specimens from 2009 to 2015 diagnosed as papillary carcinoma on histopathology were studied. In all the cases background pathologies and FNAC reports and slides were reviewed and a retrospective comment was made to as to whether based on FNAC reports, the staging and treatment received was satisfactory as per the existing guidelines.

Results and Observation: Fifty three cases of histopathologically proven cases of papillary carcinoma thyroid were found. Out of these, FNAC was done for 48 patients with inadequate aspirates in 5 cases. In 29 out of 43 cases FNAC correlated with histopathology. Another 6 cases were suspicious for papillary carcinoma on FNAC. Twenty four cases had background pathology of multinodular goitre. A guided FNAC was certainly better in non palpable lesions, however in palpable lesion even an unguided FNAC could yield equally comparable result. Apart from the long standing immunological insult leading to papillary carcinoma; it was also noted in various cases that recurrent minor episodes of subclinical inflammation in long standing goitre could also progress to papillary carcinoma.

Conclusion: FNA cytology is a sensitive, specific, and accurate initial diagnostic test for evaluation & management of patients with thyroid swellings. Cytodiagnostic errors can be avoided by taking multiple aspirates from different areas and taking USG guided FNAC in case of cystic and non palpable lesion. Due to the risk of antecedent malignancy, all the patients with multi-nodular goitres and Hashimoto’s thyroiditis who are treated conservatively need a close follow up for malignancy.

ABS 061

Comparison of Extravascular Lung Water and chest X ray scores in ICU patients with APACHE II > 20

Authors: A. Bhattacharjee*, P. Bhattacharyya*, Md Yunus*, C. Daniala**, A. Handique**

Authors affiliation: Department of Anesthesiology* and Radiodiagnosis**, NEIGRIHMS, Shillong
Presenting author email: onir.bhatt@gmail.com

Background: In many critically ill patients, it is a primary goal of treatment to restore and maintain organ perfusion. In achieving this, those patients are put at high risk of acquiring pulmonary edema due to potentially leaky capillaries, so fluid management in these patients is often a balancing act between avoiding pulmonary edema, while maintaining sufficient intravascular volume. Hence, a simple and reliable method to assess the EVLW might provide important clinical information for guiding the therapeutic strategies in critically ill patients. EVLW is measured by transpulmonary thermodilution which is an invasive procedure involving central line and a femoral arterial catheter, and non-invasively with chest x-rays. Through this study, we seek to find out whether a chest radiographic score correlates with the EVLW measured by TPTD.

Method: After obtaining clearance from the Ethics committee, 20 critically ill patients above 18 years of age with APACHE II > 20, who were intubated and mechanically ventilated were included in this study. After informed consent from the family members, EVLWI were measured within one hour of each chest x-ray done for the patients. Each of the 64 X rays obtained from 20 patients was scored by two radiologists independently, blinded to EVLWI results.

Results: CXR scores correlated positively with EVLWI readings (r=0.7104 for radiologist 1~ r= 0.6787 for radiologist 2). The correlations are extremely significant (p< 0.00001 for both correlation coefficients).

Conclusion: Chest X ray scores correlate significantly with EVLWI.
ANALYSIS OF LYMPHOCYTE SUBSETS IN ALCOHOLIC LIVER DISEASE


Authors affiliation: Department of Pathology*, General Medicine**, Radiodiagnosis*** and General surgery, NEIGRIHMS, Shillong

Presenting author email: dr.gogoibidyut@gmail.com

Objectives: The pathology of alcoholic liver disease (ALD) consists of three major lesions: (1) fatty liver, (2) alcoholic hepatitis and (3) cirrhosis. Lymphopenia and altered ratio of lymphocyte subsets in patients of ALD was described in few studies but the results were not uniform. This study was undertaken to compare the CD4, CD8 and Th17 (IL17) lymphocyte subsets between ALD patients and controls and to correlate these findings with biochemical and radiology findings.

Methods: From April 2014 to July 2015, 40 cases of ALD at various stages of presentation were included in the study. Ultrasound abdomen and liver function test were done in all cases. Peripheral blood was collected and subjected to flow cytometric analysis of CD4, CD8 and Th17 cells.

Results: All the patients included in the study were male patients with a mean age of 43.4 years. Radiologically, 13, 19 and 8 cases were fatty liver, chronic hepatitis and cirrhosis respectively. The difference in absolute lymphocyte count (ALC), CD4, CD8 and Th17 cells were measured using ANOVA. Significant decrease in ALC, CD4 and CD8 with advanced stage of ALD and increased Th17 with advanced ALD was seen. ROC curves were made for Th17% cut-off as a marker for ALD and Th17% of 2.44 was found to be the optimum level for predicting progression to chronic hepatitis and 6.07 for cirrhosis.

Conclusion: Th17 levels increases while ALC, CD4 and CD8 cells decrease with advancing stage of liver disease. These may be used as potential markers for staging and prognostication of alcoholic liver disease.

Acknowledgement: Department of Biotechnology (DBT), Government of India for funding the project.

Endovascular management of intracranial aneurysm in an infant

Authors: C. Baruah, P. Phukan, A. Handique, C. Daniala.

Authors affiliation: Department of Radiodiagnosis, NEIGRIHMS, Shillong

Presenting author email: dr.chandra.baruah@gmail.com

Case: A 2month infant presented with intracranial aneurysm, managed with endovascular embolization. To our best knowledge, this is the youngest reported case in india where endovascular treatment was successfully performed.
Rheumatic Heart Disease Presenting with Quadrivalvular involvement: A case report

Authors: Das KC, Mishra A, Kapoor M, Malviya A, Saha S

Involvement of all four valves is extremely uncommon feature of rheumatic heart disease. There are few reports in the literature of patients with rheumatic lesions affecting all four heart valves. Echocardiography is useful for confirming clinical findings and allows assessment of the severity of valvular stenosis and regurgitation. Here we report a case of rheumatic heart disease with involvement of all four valves with history of acute rheumatic fever in the childhood.

Assessment of Neutrophils/Lymphocytes ratio in suspected patients of acute coronary syndrome

Authors: Dhanjit Nath*, Jaya Mishra**, Amit Malviya*, Animesh Mishra*

Background: Leukocytes total count is an independent risk marker for cardiovascular events. The ratio between neutrophils and lymphocytes (N/L) count has been investigated as a new predictor for cardiovascular risk, although its diagnostic role when assessing patients suspected of an acute coronary syndrome (ACS) condition is not yet known.

Objective: To evaluate the diagnostic power of N/L ratio in patients who have been admitted with chest pain and under the suspicion of ACS.

Methods: Evaluation was conducted in 76 patients admitted with chest pain. Diagnostic flowchart including clinical, electrocardiographic, and laboratory data. Diagnosis obtained was: acute myocardial infarction (AMI) with (AMI-STE) and with no segment T elevation (AMI-NSTE), unstable angina (UA) and non-cardiac pain (NC). Total and differential leukocyte count was conducted in peripheral blood sample collected at admission.

Results: Patients diagnosed with non-cardiac pain reported the lowest N/L ratio (n=18; 2.1 ± 0.6), followed by UA (n=18; 3.2 ± 1.4), AMI-NSTE (n=15; 4.2 ± 1.3) and AMI-STE (n=25; 7.7 ± 1.9); p < 0.0001. N/L ratio above 6.5 (highest quartile) reported specificity 90%(CI 95%; 68-99), OR was 3.73 (CI 95% 0.77-17.18) for the final diagnosis of ACS when compared to the groups at lower quartiles.

Conclusion: The N/L Ratio is a low cost, good reproducibility test which can provide relevant information for the final diagnosis of patients with suspicion of ACS presenting with chest pain. New studies should elucidate whether the ratio may be of relevance for diagnosis flowcharts currently in use.
ABS 066

Candida tropicalis – A study of virulence factors and antifungal susceptibility profile of the clinical isolates of an emerging non-albicans Candida spp.

Authors: Elantamilan D, W Valerie Lyngdoh, Sneha Gupta, Diptanu Paul

Authors affiliation: Department of Microbiology, NEIGRIHMS, Shillong

Presenting author email: dr.dip.dp@gmail.com

Introduction: Non-albicans Candida spp. (NAC) accounts for more than half of the cases of non-superficial Candida infections. Over the past two decades, there is a significant shift, showing increased isolation of non albicans Candida and Candida tropicalis one of the commonest among NAC. In few studies, Candida tropicalis has superseded Candida albicans as the commonest cause of invasive Candidial infections. In this study we determined the virulence factors and antifungal susceptibility profile of the Candida tropicalis isolates obtained from clinical specimens.

Methods and results: All the Candidatropicalis isolates were identified based on Corn-meal agar morphology, sugar assimilation test and CHROMagar. Biofilm formation (Tube method/48hr/2% safranin staining) was seen in 33.34% of the isolates. All the isolates (100%) elaborated esterase enzyme (Tween 80 hydrolysis test), hemolysin (Blood agar plate assay) and showed pseudohyphae formation. Hemolytic activity (Hz), Proteinase (Prz) and Phospholipase (Pz) activity of all the isolates were studied. The antifungal susceptibility of these isolates were determined using VITEK 2 system. The activity of fluconazole, voriconazole, caspofungin, micafungin, amphotericin B and flucytosine against the study isolates has been noted. Though all the studied isolates were susceptible to the above mentioned agents, the minimum inhibitory concentration of amphotericin B has been found to be increased (0.5ìg/ml) in 44.44% of the isolates.

Conclusion: The identification of virulence attributes and antifungal susceptibility profile of these isolates will aid in the understanding of the pathogenesis and better management of the infections caused by these organisms.

ABS 067

Incidence of Gastrointestinal Malignancies In Tertiary Care Hospital

Authors: Neel Kanth Issar*, K.G Lynrah*, B.Barman*, Yookarin Khonglah**

Authors affiliation: Department of General* and Pathology**, NEIGRIHMS, Shillong

Presenting author email: neelissar7@gmail.com

Objective: In spite of good advancements for diagnosis and treatment, cancer is still a big problem to our society. This is the second most common disease after cardiovascular disorders accounting for maximum deaths in the world. North-East region of India has different customs, food habits, life-style, diverse ethnic groups, and type & pattern of tobacco use in as compared to the rest of the country. Hence we conducted a hospital based study for one year to know about the incidence and spectrum of anatomical distribution of gastrointestinal malignancies in NEIGRIHMS.

Methodology: Hospital based prospective study carried for the duration of one year from January 2015-December 2015. All patients with evidence of gastrointestinal malignancy on endoscopy were included. Samples were sent for histopathological analysis.

Results and Observations: Out of above 3,000 endoscopies, 112 patients were found to have malignancy. The incidence of Esophageal and Pharyngo-Laryngeal cancers came out to be moderately high. Following the diagnosis they were advised for oncology opinion and further management.

Conclusion: Upper and Lower G.I. endoscopy is standard for diagnosis of structural disease in a patient with clinical features suggestive of malignancy. Endoscopy helps in early detection of carcinoma. So by early detection and treatment, the outcome of patient may be better.
Study of viruses infecting upper respiratory tract with special reference to Respiratory Syncytial Virus in paediatrics patients attending NEIGRIHMS, Shillong

Authors: Papia Chakraborty*, A.C. Phukan*, S.G. Duwarah**

Authors affiliation: Department of Microbiology* and Pediatrics**, NEIGRIHMS, Shillong
Presenting author email: paul23011979@gmail.com

Introduction: Upper Respiratory Tract Infection is a major public health problem in both developing and developed countries. Viral causes are implicated in more than 90% of cases.

Objective: Understanding the prevalence of Upper Respiratory Tract Infection of viral origin among paediatric patients attending NEIGRIHMS along with the prevalence of Respiratory Syncytial Virus (RSV) associated RTI amongst these patients and the factors which govern occurrence of RSV associated URTI.

Materials and Methods: The study was conducted for a period of 1 year (Jan, 2014-Dec, 2014) in the Dept. of Microbiology. 50 children fulfilling the inclusion criteria were selected as the study population and throat swab, nasopharyngeal swab and nasopharyngeal aspirate were collected as per protocol on VTM. The samples were aliquoted into 4 storage vials, 1 each for viral isolation, PCR, 2 for storage at -80°C. The aliquots for PCR were initially subjected to RNA extraction following which RT-PCR was run for RhinoVirus/EnteroVirus & HumanMetapneumoVirus/Respiratory Syncytial Virus. 2 numbers of representative samples from the aliquoted samples were passaged onto Vero cell lines and observed for CPE.

Results: The study population patient suffering from ARI presented with features of URTI (44.88%), followed by bronchiolitis (10%), and pneumonia (2%). RVI was detected in 31 (62%) patients among the population studied and RSV associated disease was seen in 4 (12.9%) patients, rhinovirus (51.61%), hMPV(9.6%). RSV infection was associated with LRTI in 4 (80%) patients while Rhinovirus showed more predilection to cause URTI (51.61%). 74.19% suffered from infection due to a single virus while 25.8% were positive for dual infection. In co-infection Rhinovirus and RSV were seen in 12.9% of the affected children, Rhinovirus and hMPV in 9.6%, while RSV and hMPV dual infection was seen in 3.22%. Assessment of risk factors associated with RSV URTI indicated at a close liaison between high birth order, lower socio-economic status, illiteracy of the mother, low weight at birth.

Conclusion: The present study highlights the importance of viral etiology in URTI, and also at the need to study it at a larger scale.
ABS 069

Paragonimus & Paragonimiasis In Meghalaya – Invasion Of Greener Pastures?


Authors affiliation: Department of Microbiology* and Pediatrics**, NEIGRIHMS, Shillong
Presenting author email: angeleys.runjhun@gmail.com

Background: Paragonimus infestation has been reported from the North- Eastern part of India, predominantly from the state of Manipur since 1981 and more recently from Nagaland. Pulmonary paragonimiasis, mimicking Pulmonary tuberculosis has been the most common presentation.

Case Report: We report here the first indigenous case of Pulmonary Paragonimiasis from the state of Meghalaya. The patient is a child (6 yrs/male) of Sohkwai village, Ribhoi district, with no history of travel outside Meghalaya and a habitual history of ingestion of raw crabs in the form of a local delicacy. The child presented with a history of cough, hemoptysis, anorexia, weight loss and anaemia, not cured by conventional treatment protocols.

Methodology: Sputum samples of the patient were collected on each hospital visit and wet mount preparations were made and observed under microscope.

Results: On microscopic examination of the uncentrifuged sputum samples, operculated ova, yellow in colour with typical flattening of one end were observed. The sputum samples were heavily infested (6-8 ova/hpf). Morphologically the shape and size of the ova resembled Paragonimus spp. and were identified as such.

Main Lesson: The present case report highlights that Paragonimus which was initially thought to be endemic only in Manipur and Nagaland may also be present in Meghalaya. This case emphasizes the need for a prompt and immediate population based study to correctly diagnose such cases and initiate appropriate therapy to decrease the morbidity and mortality in such patients.

ABS 070

Comparative evaluation of hemodynamic response, efficacy & safety of Levosimendan, Milrinone and Dobutamine in patients with low cardiac output syndrome following cardiopulmonary bypass for valve replacement surgeries.

Authors: Sunny Aggarawal, MD Yunus, Prithwis Bhattacharyya, Manuj Saikia

Authors affiliation: Department of Microbiology* and Pediatrics**, NEIGRIHMS, Shillong
Presenting author email: aggarwalsunny87@gmail.com

Background: Paragonimus infestation has been reported from the North- Eastern part of India, predominantly from the state of Manipur since 1981 and more recently from Nagaland. Pulmonary paragonimiasis, mimicking Pulmonary tuberculosis has been the most common presentation.

Case Report: We report here the first indigenous case of Pulmonary Paragonimiasis from the state of Meghalaya. The patient is a child (6 yrs/male) of Sohkwai village, Ribhoi district, with no history of travel outside Meghalaya and a habitual history of ingestion of raw crabs in the form of a local delicacy. The child presented with a history of cough, hemoptysis, anorexia, weight loss and anaemia, not cured by conventional treatment protocols.

Methodology: Sputum samples of the patient were collected on each hospital visit and wet mount preparations were made and observed under microscope. RESULTS: On microscopic examination of the uncentrifuged sputum samples, operculated ova, yellow in colour with typical flattening of one end were observed. The sputum samples were heavily infested (6-8 ova/hpf). Morphologically the shape and size of the ova resembled Paragonimus spp. and were identified as such.

Main Lesson: The present case report highlights that Paragonimus which was initially thought to be endemic only in Manipur and Nagaland may also be present in Meghalaya. This case emphasizes the need for a prompt and immediate population based study to correctly diagnose such cases and initiate appropriate therapy to decrease the morbidity and mortality in such patients.
ABS 071

Role of brush cytology and AgNOR in diagnosis of oral premalignant and malignant lesions

Authors: Ekta Jajodia*, Vandana Raphael*, N. Brian Shunyu**, Star Pala***, Sarah Ralte****, Ankit Jitani*

Authors affiliation: Department of Pathology*, ENT*, Community Medicine***, and Anatomy****, NEIGRIHMS, Shillong

Presenting author email: ekta.jajodia5@gmail.com

Aims and objective: Oral squamous cell carcinoma may be preceded by some premalignant lesions. These lesions should be detected early to prevent malignant transformation. Brush cytology is a non-invasive tool in their identification. AgNOR count, when combined with cytology may improve the diagnostic yield. This study was undertaken to compare the diagnostic ability of brush cytology by conventional cytology (CC), liquid based cytology (LBC) and AgNOR and compare them with histopathology in diagnosing oral premalignant and malignant lesions.

Methodology: Forty-eight consecutive cases with oral lesions were subjected to brush cytology for CC, LBC and AgNOR along with punch biopsy for HPE. The result was analyzed by multiple statistical tool.

Results and observation: Two cases were normal, 13 premalignant and 33 malignant, as confirmed by histopathology. The sensitivity, specificity, PPV and NPV of LBC and CC in diagnosing OSCC were 75%, 100%, 100%, 66.67% and 84.85%, 100%, 100% and 72.22% respectively. Statistically significant difference between LBC and CC with clear background and cellularity was seen. Presence of round cells correlated with OSCC in both techniques and presence of dirty background correlated in CC. A cutoff of >6.5 for AgNOR was found to differentiate malignant from non-malignant cases. An intergroup comparison between normal, dysplastic, and malignant cases for AgNOR showed significant difference between normal and OSCC groups.

Conclusion: Brush cytology is a non-invasive, reliable and technically easy diagnostic tool in identifying oral lesions. Combining brush cytology with AgNOR further increases its diagnostic accuracy and reliability.

Acknowledgement: This study was funded by Department of Biotechnology, Government of India.

ABS 072

Microalbuminuria as predictor of severity of coronary artery disease in non-diabetic patients

Authors: Pravin Kumar Jha*, Manish Kapoor*, Amit Malviya*, Happy Chutia**

Authors affiliation: Department of Cardiology*, Biochemistry**, NEIGRIHMS, Shillong

Presenting author email: drpravinjha@gmail.com

Background: Previous studies have shown that microalbuminuria (MAU) is an independent risk factor for cardiovascular diseases in diabetics, hypertensive patients and in the general population. However, few data has addressed the correlation of MAU with the severity of coronary artery disease (CAD) in non-diabetic patients.

Aim: This study aims to investigate the relation between MAU and severity of angiographically confirmed CAD in non-diabetic patients.

Methods: This was a cross-sectional study, which included 90 non-diabetic patients with documented CAD by coronary angiography. The ratio of urine albumin to creatinine was used to define microalbuminuria and severity of CAD was estimated using Syntax score. Patients were divided into two groups, the group 1 that included patients without MAU and group 2 that included patients with MAU.

Results: Out of 90 non-diabetic CAD patients, 62 (68.9%) were in group I (MAU –ve) and 28 (31.1%) were in group II (MAU +ve). There was statistically significant difference in the median Syntax score between the groups (21 vs. 28, p < 0.001). The prevalence of double vessel CAD and triple vessel CAD was significantly higher in MAU positive group. There was a strong relationship between the presence of MAU and the extent and complexity of CAD (r = 0.894; P <0.001).

Conclusion: Thus we conclude that, patients with MAU have more severe angiographically detected CAD than those without MAU, and MAU exhibits a significant association with the presence and severity of CAD.
**ABS 073**

**Choledochal cyst with Factor XI deficiency: the devil and the deep sea**

Authors: Girish Sharma, R Hajong, A.J. Baruah, M Anand.

**Authors affiliation:** Department of General Surgery, NEIGRIHMS, Shillong

**Presenting author email:** drgirish.87@gmail.com

**Abstract:** Factor XI (FXI) deficiency is a rare, autosomal recessive disorder present in 1:1,000,000 individuals. Spontaneous bleeding is rare; however, patients with severe FXI deficiency can present with tissue-specific bleeding following surgery or injury. Perioperative management of these bleeding disorders is a challenging and a nice learning experience for the treating physicians, surgeons and intensivists, and requires a detailed knowledge of the coagulation cascade and judicious use of blood products. We present a case of factor XI deficiency in a young male patient presenting to us with pancreatitis and ultimately diagnosed as type 1 choledochal cyst, who was operated for a Roux-en-Y hepaticojejunostomy, and was managed uneventfully.

---

**ABS 074**

**Fetal Kidney Length and Transverse Diameter of Fetal Heart Measurement for Estimation of Gestational Age in Comparison to Conventional Parameters**

Authors: Gouri Sankar Rudrapal, S. Panda, A.S. Singh, P. Phukan, N. Sharma, A. Das.

**Authors affiliation:** Obstetrics and Gynaecology

**Presenting author email:** gourisankar.dr@gmail.com

**Aims and objectives:** To determine a correlation between the fetal kidney length, transverse diameter of heart and the gestational age.

**Usefulness of the above two parameters in predicting gestational age in mothers with IUGR babies.**

**Materials and methods:** A total number of 224 women who attended Antenatal clinic in the outpatient department (OPD) of Obstetrics and Gynaecology were evaluated. Each woman underwent minimum three ultrasonographic measurements – at the first visit – first trimester for ascertaining gestational age by measuring Crown rump length, secondly at second trimester along with fetal anomaly scan, fetal biometry with Fetal kidney length and fetal transverse diameter of heart measurements, thirdly at third trimester along with fetal biometric measurements (Bi Parietal diameter, head circumference, Abdominal Circumference, Femur Length) transverse diameter of heart and kidney length were taken.

**Observation & Result:** In third trimester of pregnancy foetal Bi Parietal Diameter, Head Circumference, Abdominal Circumference and Femur length could predict the gestational age accurately within ± 11.3 days, ± 11.3 days, ± 11.8 days and ± 12.66 days respectively, but had poor correlation with gestational age (R square 0.4819, 0.5070, 0.5175 and 0.5243 respectively). Foetal kidney length measured in the second trimester could predict the gestational age accurately within ± 1.4 weeks in the second trimester and ± 1 week in third trimester of pregnancy, correlation coefficient being 0.8357 and 0.8356 respectively. Transverse diameter of the foetal heart could predict the gestational age accurately within ± 1.9 weeks in the second trimester and ± 1.1 weeks in the third trimester of pregnancy, correlation coefficient being 0.8354 and 0.8795 respectively. In IUGR fetuses also I showed similar results.

**Conclusion:** Kidney length and transverse diameter of heart were better predictors of gestational age than the conventional ones in third trimester of pregnancy.
Paraganglioma of the Cauda Equina region. A case report

Authors: Gupta A (post graduate trainee), Mishra J, Raphael V, Khonglah Y, Marbaniang E, Kakati A*

Authors affiliation: Department of Pathology and Neuro Surgery
Presenting author email: akguptamb090005@gmail.com

Background: Cauda Equina Paragangliomas (CEP) are rare neuroendocrine tumors. The rarity of the diagnosis in comparison to the more common tumors of this region may be misleading for surgical planning and prognostic expectations. Incidence of spinal paraganglioma is 0.07/100000.

Case Report: A 22 yr old male presented with complains of chronic lower backache with radiating pain to the right thigh for 9 months which was slow in onset and gradually progressing with time and aggravated on prolonged walking. Patient also complained of hesitancy and incomplete urination with irregular bowel habits on and off. On clinical examination, motor and sensory systems were within normal limits. All the reflexes were present. The spine showed no deformity. MRI (L.S): Hyper on T1 and T2 homogenously enhancing mass intrathecal in location at L2 level (possibility of Ependymoma). L2 laminectomy with L1 and L3 partial laminectomy with excision of mass under GA was performed. MRI (DL spine): Complete excision of tumor. No residual tumor seen. Patient became asymptomatic postoperatively.

Conclusion: All the usual and uncommon tumors described in this area along with metastasis and clinically suspected differentials were ruled out on morphology and Immunohistochemistry. A rare diagnosis of neuroendocrine tumor in favor of Paraganglioma was finalized. Though, the tumor reported is also benign but in this case according to literature, prolonged post operative observation is mandatory because of the local recurrence even upto 30 years after surgery.

Multimodality Imaging In Diagnosis Of Non-Specific Aortoarteritis: Mri With Contrast Enhanced Mr Angiography And Multi-Detector Ct Angiography To Determine Extent Of Involvement & Correlation With Disease Activity

Authors: Sarma K*, Handique A*, Daniala C*, Phukan P*, Saikia M**, Kapoor M***, Lynrah K G****
Authors affiliation: Department of Radiodiagnosis*, CTVS**, Cardiology***, General Medicine****
Presenting author email: sarmakalyan@gmail.com

Introduction: Non specific aortoarteritis (NSAA) is a chronic, idiopathic, inflammatory disease that primarily affects large vessels, such as the aorta and its major branches, pulmonary and coronary arteries. The disease has a worldwide distribution.

Aim And Objectives: To study the clinical presentations, spectrum of imaging findings, angiographic types, extent and severity of vessel involvement on the basis of MRI along with CONTRAST ENHANCED MR ANGIOGRAPHY & MULTIDETECTOR CT ANGIOGRAPHY in patients with Non-Specific Aortoarteritis and correlate with disease activity of cases attending NEIGRIHMS, a tertiary care hospital in North-east India.

Material And Methods: 36 patients who fulfilled the modified diagnostic criteria for NSAA by Sharma et al. underwent MRI, CE-MRA and MDCT Angiography.

Results: Hypertension was the most common clinical presentation accounting to 77.8%. Type V was the most common angiographic type (41.6%) followed by type III (25%). 12 patients had active lesions on CT/MR imaging. In all these 12 patients ESR was elevated. 11 of them showed positive CRP and one showed negative CRP. Rest of the 24 patients who had inactive lesions on CT/MR imaging, 22 showed negative CRP and 2 showed positive CRP. Disease activity on the basis of CT/MR imaging showed significant statistical correlation with elevated ESR and positive CRP (p<0.0001). 21 patients showed mediastinal lymphadenopathy out of which 11 had active disease based on CT/MR imaging. However no significant correlation between mediastinal lymphadenopathy and disease activity based on CT/MR imaging seen.
Spontaneous enterocutaneous fistula following inguinal hernia: a rare case report

K. Lenish singh, R. Hajong, A. J. Baruah

Background: spontaneous enterocutaneous fistulae following direct inguinal hernia is an extremely rare condition. No case report could be found by extensive literature search in the print and electronic media. We report a case of spontaneous enterocutaneous fistula following an indirect inguinal hernia in a 70 yrs old lady.

Case presentation: A 70 years old lady from Nagaland presented to us with complaint of discharge of feculent material from the left groin which was preceded by severe generalised pain and distension of abdomen and inability to pass stool and flatus. A diagnosis of spontaneous enterocutaneous fistula was made and management started accordingly. Fistulogram showed communication with jejunal loops. MR contrast fistulogram showed left side direct inguinal hernia with cutaneous opening and significant inflammation in the surrounding soft tissues. Patient responded well to the conservative management with decline in the output from fistula and was discharged home after a 3 weeks hospital stay.

Conclusion: Spontaneous enterocutaneous fistula in inguinal region is more common following rupture of strangulated Richter’s hernia but no case report was ever reported earlier regarding strangulated direct inguinal hernia resulting in spontaneous enterocutaneous fistula. The delay in presentation usually results in this complication which otherwise can be managed satisfactorily.

Type 1 Gall Bladder Perforation As A Rare Complication Of Cholangitis Causing Diagnostic Dilemma

Madhur Anand, R. Hajong, A. J. Baruah

Background: Perforation of the gall bladder due to choledocholithiasis is a rare cause of peritonitis. We present a case of gallbladder perforation and biliary peritonitis due to choledocholithiasis.

Case report: A 50 years old male, without any known medical co-morbidity, presented with a 5-day history of abdominal pain and distension. On abdominal examination, distension with rebound tenderness was present. Abdominal x-ray showed no air fluid levels or pneumoperitoneum. The patient was taken up for an emergency exploratory laparotomy which showed biliary peritonitis, perforation of gallbladder at the fundus and choledocholithiasis. Cholecystectomy and choledocholithotomy done with T-tube placement. The patient’s hospital course was uneventful except for the initial part when he required ventilator support and dialysis.

Conclusion: Gallbladder perforation is an unusual initial presentation of gallbladder disease. Early diagnosis of gallbladder perforation and immediate surgical intervention are of prime importance in decreasing morbidity and mortality associated with this condition.
Squamous cell carcinoma in mature cystic teratoma of the ovary: a rare case report

Authors: Das.A, Nandwani.M, Khan.D, Singh.A

Authors affiliation: Department of Obstetrics & Gynaecology, NEIGRIHMS

Presenting author email: megha.nandwani@gmail.com

Background: The most frequent ovarian germ cell tumors are mature cystic teratomas (MCTs). MCTs have the potential of undergoing malignant transformation, typically in postmenopausal women, with squamous cell carcinoma being the most common malignant tumor arising from MCT.

Case Report: An eighty three year old para10 live 4 (P10L4) female from Arunachal Pradesh was referred to our hospital with history of mild lower pain abdomen, urinary incontinence and inability to walk since one year. Obstetric history was P10L4, last child born 25 years back; all normal vaginal deliveries. She was menopausal since 17 years. Patient was also put on ATT since 3-4 months. But there was no conclusive evidence of tuberculosis. There was no significant past medical or surgical or family history. On examination, patient’s vitals were stable. Per abdomen examination showed; abdominal distension, suprapubic mass of about 14cm x16 cm, irregular but firm in consistency, mobility was restricted, lower margin could not be appreciated. On per speculum examination, vagina was atrophied and cervix could not be visualized. Per vagina examination showed bilateral fornices full with stony hard lump of around 14 to 16 weeks. Patient was taken up for surgery. TAH +BSO was done under general anaesthesia. Intraoperatively ; uterus was atrophied. Right side of the ovary showed dermoid cyst of 8*9 cms that was adherent to POD. Left side showed a solid cystic teratoma of about 3*2cms. Histopathology report showed Right ovarian teratoma with malignant transformation of epithelial component into squamous cell carcinoma with Left ovarian mature cystic teratoma. . No signs of metastasis was seen. Patient was advised a short course of postoperative chemotherapy.

Conclusion: Malignant transformation is rare in a case of mature cystic teratoma of the ovary. Timely diagnosis and treatment can help in improving the prognosis of the patient.

Evaluation & screening for pre-invasive lesions of cervix by Visual Inspection with Acetic Acid (VIA) & Visual Inspection with Lugol’s Iodine (VILI) in comparison with Pap smear

Authors: Shweta Mishra, Manika Agarwal, A. S. Singh

Authors affiliation: Department of Obstetrics & Gynaecology, NEIGRIHMS

Presenting author email: dr.mishra.shweta@gmail.com

Aims & objectives: Majority of cases of cervical cancer are diagnosed at an advanced stage as cytology based screening programmes are ineffective in developing countries. The present comparative study was done to look for carcinoma cervix and its precursors by visual inspection with Lugol’s iodine (VILI), visual inspection with acetic acid (VIA) and Papanicolaou smear, and to analyse their sensitivity, specificity and predictive values using colposcopic directed biopsy as reference.

Methodology: In this cross-sectional study, 300 women were subjected to Pap smear, VIA, VILI and colposcopy. Cervical biopsy and endocervical curettage was taken from patients positive on any of these tests and in negative cases with suspicious clinical features.

Results and Observations: The Pap smear was abnormal in 13.33 per cent, including (2.33%) low grade (LSIL) and (1.67%) high grade squamous intraepithelial lesions (HSIL). 10.67 per cent of the patients were found to be positive by VIA and 12.33 per cent were positive on VILI. Sensitivity for VIA, VILI and Pap smear was 80.77, 80.77 and 76.92 per cent, respectively, while the specificity for VIA, VILI and Pap smear was 87.30, 82.54 and 77.78 per cent, respectively.

Conclusions: In low resource settings, cervical cancer screening by Pap smear can be replaced by visual methods like VIA/VILI, which has the high sensitivity to detect any grade of dysplasia, and a good specificity.
Sarcoidosis- A Diagnostic approach


Authors affiliation: Department of Pathology*, General Medicine**, ENT***, NEIGRIHMS
Presenting author email: drpranoypaul@gmail.com

Background: Sarcoidosis is an autoimmune multi-systemic disorder of unknown etiology affecting predominantly females. It is a diagnosis of exclusion both clinically and morphologically. The organ system involved in Sarcoidosis are- Lungs, lymph nodes, kidney, liver and spleen, skin, salivary glands, eye, CNS, connective tissue and joints etc.

Case Report-
- **Case 1**: 35yr/M patient was admitted with complaints of shortness of breath and dry eyes who had a history of treatment with ATT. Imaging findings were suspicious of Sarcoidosis. Biopsy from Axillary L/N
- **Case 2**: 43yr/F patient presented with m/l cervical lymphadenopathy since 15 years and bilateral parotid enlargement. Biopsy done from cervical L/N.
- **Case 3**: 52yr/F diagnosed with myasthenia gravis, underwent thymectomy. Imaging findings revealed mediastinal lymph nodes. Biopsy from Mediastinal L/N.
- **Case 4**: 40 yr/F patient diagnosed with chronic cholecystitis and had breathing difficulties. Operative findings revealed two periportal lymph nodes. Biopsy from periportal L/N.

Main Lesson: Due to the high incidence of TB in our country the diagnosis of Sarcoidosis is often overlooked leading to unjustified treatment by ATT. Therefore a high index of suspicion should be maintained whenever confluent non-caseating granulomas are encountered in FNAC/Biopsy. However, as the two conditions may also coexist, diagnosis of one doesn’t necessarily exclude the other. The diagnosis is established most securely when clinico-radiologic findings are supported by histologic evidence and the exclusion of all other possible causes. Histology is still the gold standard for diagnosis of sarcoidosis.

Prevalence of Non-albicans Candidemia in a tertiary care hospital in North East India

Authors: Bora I, Prasad A, LyngdohWV , Khyriem AB, Lyngdoh CJ

Authors affiliation: Department of Microbiology, NEIGRIHMS
Presenting author email: docabhij@yahoo.com

Introduction: Candidiasis is gaining significance worldwide and it ranks the fourth most common cause of blood stream infections (BSI) with mortality ranging from 5 to 71%. Although earlier, Candida albicans was the most common fungal isolate from candidemia, but during the recent decades, there is a shift towards Non-albicans Candida (NAC) species.

Aims and Objectives: To see the prevalence and characterize the Non-albicans Candida causing BSI.

Materials and Methods: Blood samples were cultured in a biphasic media of Brain Heart Infusion Broth with Agar slant and regular subcultures were done in Sabouraud’s Dextrose Agar and Sabouraud’s Chloramphenicol Cyclohexamide Agar. The isolates were identified by Gram Stain, Germ Tube Test, Corn meal agar, Chrom agar Morphology, Sugar fermentation test, Sugar assimilation test and automated identification system.(Vitek 2 Compact). The antifungal susceptibility was done by disc diffusion method according to Clinical Laboratory Standards Institute (CLSI) M44-A.

Results: Out of the 131 Blood samples received for fungal culture Candida was isolated among 47 (35.8%) and among these 33 (70%) were NAC. C.tropicalis 32% was the most commonest NAC species isolated followed by C.glabrata. The NAC species were more resistant to Fluconazole than C albicans.

Conclusion: The study highlights the change in epidemiology in the species distribution of Candida and a rise in infections by NAC species as compared to those by C albicans. Early and regular species identification and antifungal testing is necessary to decrease the mortality associated with it.
Mean Signal Intensity Curve Analysis Of Brain Tumours
By Dsc Mr Perfusion Imaging

Authors: Ranjit Meher*, C. Daniala*, P.Phukan*, A. Kakati**, M Hussain***, Y. Khonglah****

Authors affiliation: Department of Radiodiagnosis*, Neurosurgery**, Neurology***, Pathology****, NEIGRIHMS
Presenting author email: ranjit.scb@gmail.com

Background: Neoangiogenesis is an important marker determining degree of malignancy in brain tumours. In addition to this, hyper permeable blood-brain barrier in tumour milieu allows the contrast agent to extravasate into extravascular space and hence the basis of vascular permeability measurements.

Aims and Objectives: To study the usefulness of DSC MR mean signal intensity curve parameters in differentiation of brain tumours.

Materials and methods: We performed preoperative DSC MR perfusion (TR/TE/Flip angle: 2200ms/40ms/30°) in thirty brain tumour patients (age 6months to 65years; 15 males and 15 females) in Radiology department, NEIGRIHMS, Shillong by 1.5 Tesla Siemens Avanto MRI Scanner using gadolinium dimeglumine (0.2mMol/kg body weight).After final histopathological diagnosis, the mean signal curve was analyzed in workstation with perfusion & mean curve analysis softwares to study its usefulness.

Results and observations: We have seen five types of mean signal recovery curves which are type I (0-24%), II (25-49%), III (50-74%), IV (75-99%) and V (>100%). The parameters noted in different brain tumours are in the terms of signal drop in degree and percentage signal recovery (mean ± SD) are as follows: seven meningiomas (6.01 ± 2.09; 75.74 ± 22.74), two hemangiopericytomas (8.37 ± 0.37; 54.85 ± 9.16), two schwannomas (7.41 ± 2.78; 64.79 ± 11.07), four high grade gliomas (7.43 ± 1.46; 58.94 ± 31.05), one low grade diffuse astrocytomas (6.3 ± 0; 81.57 ± 0), three oligodendrogliomas (5.53 ± 0.47; 74.99 ± 21.60), three pilocytic astrocytomas (7.69 ± 0.48; 18.15 ± 87.15), two haemangioblastomas (7.33 ± 2.45; 53.10 ± 1.05), two medulloblastomas (4.65 ± 0.05; 65.71 ± 0.45),one central neurocytoma (5.99 ± 0; 71.89 ± 0), one anaplastic supratentorial ependymoma (5.53 ± 0; 71.17 ± 0) and two metastases from lungs(8.28 ± 1.78; 81.19 ± 9.27).
We have seen differences in these parameters among similar looking brain tumours on conventional MR imaging.

Conclusions: The mean signal intensity curve parameters obtained from DSC perfusion MRI may aid routine MR imaging in the differentiation of brain tumours.
Aetiology and Prognosis of Acute Kidney Injury – A Hospital based study in northeast India

Authors: Bhattacharya PK, Roy A, Md jamil, Lyngdoh M, Talukdar K

Authors affiliation: Department of General Medicine, NEIGRIHMS
Presenting author email: royakash12@gmail.com

Objective: Acute Kidney Injury (AKI) is a commonly encountered, potentially fatal disorder of multiple aetiologies which is often reversible with early diagnosis and treatment. However its aetiology and outcome has not been well documented in this part of the country. The present study analyzes the aetiology and short term outcome of patients with Acute Kidney Injury.

Methodology: This prospective observational study was carried out in AKI patients admitted to a tertiary care hospital in north east India between July 2014 and June 2015. AKI was defined by the Acute Kidney Injury Network (AKIN) criteria. All patients with AKI, aged e”18 years were included. Patients with Chronic Kidney Disease were excluded.

Results and Observations: 56 AKI patients were included in the study showing a hospital incidence of 3.2%. The mean age at presentation was 38±14 years. The male to female ratio was 1.8:1. The commonest aetiology of AKI was sepsis (35.7%), followed by acute diarrheal diseases (17.8%), scrub typhus (14.3%), hepatorenal syndrome (14.3%), severe malaria (10.7%), primary glomerular disease (4.6%) and poisoning (2.6%). The mean serum creatinine and urea at presentation were 3.2±1.5mg/dl and 101.2±36mg/dl respectively. The mean time for normalization of serum creatinine was 7.8 days. Majority of the cases (91.1%) recovered with conservative management and only 8.9% cases required hemodialysis. The overall in-hospital mortality was 3.57% and the cause of mortality was sepsis in all the cases. Multivariate logistic regression analysis showed sepsis, age (>45years), oliguria, metabolic acidosis were significantly associated with increased mortality (p<0.05).

Conclusion: Sepsis was the commonest aetiology for AKI, followed by infections like acute diarrhaea, scrub typhus and malaria and was least with primary glomerular disease and poisoning. Majority of patients recovered with conservative management without hemodialysis. Sepsis was the commonest cause for mortality. Advanced age, oliguria and metabolic acidosis were poor indicators for survival.

Diagnostic dilemma: lupus related hepatitis versus autoimmune hepatitis in systemic lupus erythematosus

Authors: Samir Joshi, Bhupen Barman, K G Lynrah

Authors affiliation: Department of General Medicine, NEIGRIHMS
Presenting author email: samshrijoshi@gmail.com

Introduction: Systemic lupus erythematosus (SLE) is an autoimmune disease in which organs and cells undergo damage mediated by tissue-binding autoantibodies and immune complexes. Though liver involvement is very uncommon in SLE, Patients with SLE have 25–50% chance of developing abnormal liver tests in their lifetime. Lupus associated hepatitis may mimic with autoimmune hepatitis clinically and biochemically. We report case of lupus associated hepatitis closely mimicking autoimmune hepatitis with histopathological evidences.

Case: 24 yrs old female presented with history of low grade fever, recurrent vomiting, loss of apetite and generalised weakness. She also had history of polyarthaliga, myalgia and photosensitivity in past. On examination, she was febrile, pale and icteric with mild hepatomegaly. She was further evaluated, ANA and Anti ds DNA was found to be positive and autoimmune hepatitis markers were sent, but found to be negative. Liver biopsy was planned to look for any histopathological evidences of AIH. A diagnosis of lupus associated hepatitis was made and patient was put on steroids which led to dramatic response.

Conclusion: It is the diagnostic and therapeutic dilemma for physician to distinguish SLE associated hepatitis (lupus hepatitis) from AIH associated with SLE since the course of the disease is different in both the entities. Most of the biochemical parameters are inconclusive in differentiating the two entities. However Liver biopsy is diagnostic.
Effect Of Topical Phenytoin On Wound Healing

Authors: Sandeep Ghosh, R Hajong

Aims & Objectives: Diabetic foot ulcers entail a lot of financial burden both to the patients and also to the treating hospitals. These are estimated to affect 15% of all diabetic individuals during their lifetime. These precede almost 85% of amputations. Phenytoin has been used by some workers and have found encouraging results. The aim of this study was to evaluate the effect of topical phenytoin in healing of grade I and II diabetic foot ulcers.

Methods: A total of fifty patients with diabetic foot ulcers grade I and II were enrolled for the study after obtaining due clearance from the Institute Ethics Committee. Written informed consent was taken from every patient with adherence to the Principles of the Declaration of Helsinki. In group 1, twenty five patients were dressed using crushed phenytoin tablets and in group 2, twenty five patients were dressed with normal saline. Patients were randomly allocated to a particular group by using computer generated random numbers. Statistical analysis was done using the SPSS version 22 for Windows, Inc Chicago II.

Results: A total of fifty patients- 17 female and 33 males were included in the study. Descriptive statistics was used to find the mean± standard deviation. Mann- Whitney test was done to find the difference between the various variables in the two groups. It showed significant difference in the rate of healing between the two groups (P value <0.05) with the patients in group 1 healing much earlier than those in group 2.

Conclusion: Topical phenytoin application in the form of powder helps in early healing of diabetic ulcers without any associated adverse effects.

Isolated Tubercular Subcapsular Liver Abscess: A Rare Manifestation of Extrapulmonary Tuberculosis

Authors: Prasanta Kumar Bhattacharya*, Aakash Roy*, Md Jamil*, Kishore Kumar Talukdar*, Yookarin Khonglah**, KalyanSarma***

Background: Isolated tubercular liver abscess without any other foci of infection is an extremely rare presentation of tuberculosis with a prevalence of only 0.34%. The diagnosis can be extremely challenging on account of the non-specific presentation and is frequently confused with hepatoma, pyogenic liver abscess or amoebic liver abscess.

Case report: A 44 year old man presented with non-specific complaints of low grade fever, weight loss and vague abdominal pain. Ultrasonography of the abdomen revealed a collection in the liver with few adhesions in the bowel loop. A contrast enhanced CT scan of the abdomen proved it to be a loculated subcapsular abscess of the liver. A CT guided fine needle aspiration from the collection showed suppurative material with acid fast bacilli, singly and in clumps. Except for a mild derangement of liver function tests, all other blood tests were normal. The patient was started on anti-tubercular therapy with the diagnosis of a tubercular subcapsular abscess of the liver.

Main lesson from case report: Although tubercular liver abscess is very rare, it should be included in differential diagnosis of liver abscess and undiagnosed hepatic mass lesions. Appropriate investigations should be done to establish a definitive diagnosis to initiate appropriate therapy.
Comparative evaluation of conventional (manual) blood culture system and BacT/ALERT 3D (automated) blood culture system in a Tertiary care hospital

Authors: Elantamilan *, T S Devi*, Lyngdoh WV*, Banik A, Khyriem AB*, Bhattacharyya P**, Barman H***, Phukan AC*

Authors affiliation: Department of Microbiology*, Anesthesiology** & Pediatrics***, NEIGRIHMS
Presenting author email: surbalatchingujam_4@yahoo.com

Introduction: Bloodstream infection (BSI) is a major cause of mortality in critical care units. Rapid diagnosis plays a crucial role in the final outcome of the blood stream infections. The prompt detection of bacteremia is a critical function of the clinical microbiology laboratory and blood culture remains the “gold standard” for the detection of bacteremia. Manual culture techniques usually take a longer duration for detection these infections and they are labor intensive. Automated continuous-monitoring blood culture systems have detected growth sooner than the manual systems and they have greatly improved the efficiency of blood cultures. Here, in this study, we intended to compare the conventional blood culture system with the automated blood culture system— BacT/ALERT 3D with reference to yield, sensitivity and differential time to positivity.

Materials and Methods: This was a hospital based prospective study conducted for 7 months. Blood samples were collected and adequate equal volumes were inoculated into manual blood culture bottles and BacT/ALERT 3D culture bottles. Processing was done appropriately and results were compared between matched pairs.

Results: A total of 498 matched pairs of blood culture specimens were compared. Bacterial growth was identified in 183 (36.74%) cultures by automated system and 146 (29.31%) cultures by manual system (p=0.0153). The BacT/ALERT 3D system showed better sensitivity and specificity than manual culture system. The median time to positivity with the automated system was 15.83 hr, compared with 66.95 hr for the manual system (p<0.0001). Both systems were comparable for the recovery of majority of clinically significant isolates. The BacT/ALERT 3D automated system was very much superior to the manual culture system in the rapid detection of the organisms.

Conclusion: Prompt and appropriate detection of the blood stream infections is a vital function of a clinical microbiology laboratory, which in turn influences the outcome of health care in these critical conditions. The BacT/ALERT 3D automated microbial detection system evaluated in our study showed a marginally higher recovery rate than the conventional (manual) blood culture system used in our laboratory. However, the exceptionally faster detection rates shown by the automated system can significantly change the outcome in life threatening blood stream infections.

An Uncommon Case Of Filum Terminale Paraganglioma: A Case Report

Authors: Taraprasad Tripathy*, Ranjit Meher*, Pranjali Phukan*, Arindom Kakati**, Jaya Mishra***.

Authors affiliation: Department of Radiodiagnosis*, Neurosurgery** & Pathology***, NEIGRIHMS
Presenting author email: taraprasad.mkcg@gmail.com

Paraganglioma is a rare benign neuroendocrine tumour of autonomic nervous system which is extremely uncommon at filum terminale. In this case report, we have discussed the clinic-patho-radiological features of a paraganglioma in a 29 year old male patient presented with low backache and lower limbs radicular symptoms.
A Menace of Candida biofilms: Prospective study among the intensive care unit patients in tertiary health care centre in North east India

Authors: V Singh, I Bora, W V Lyngdoh, A B Khyriem, C J Lyngdoh

Authors affiliation: Department of Microbiology, NEIGRIHMS
Presenting author email: taraprasad.mkcg@gmail.com

Introduction: Biofilms are microbial communities encased within polysaccharide-rich extracellular matrix, where they protect themselves from antibiotic treatment, creating a source of persistent infection. Device-related infections in most nosocomial diseases can be traced to the formation of biofilms by pathogens on surfaces of these devices. Candida species are the most common fungi isolated from these infections, and biofilms formed by these fungal organisms are associated with drastically enhanced resistance against most antifungal agents. Objective of this study is to know the incidence of biofilm formation among the intensive care unit patients and to identify the relationship between various Candida species with their antifungal susceptibility at North Eastern Indira Gandhi Regional Institute of Health and Medical Sciences (NEIGRIHMS), Shillong.

Methods: A prospective case study conducted at NEIGRIHMS, among patients admitted to the ICU during the period between January 1st and December 30th 2015. The demographic data, associated risk factors and laboratory data including KOH mount, culture results, biofilm formation and antifungal susceptibility were studied. Different samples like endotracheal secretion, urine etc were collected under sterile conditions and standard fungal tests were performed for identification and appropriate statistical methods were employed to look for association between biofilm and Candida species.

Results: Out of the 396 samples included in the study from ICU, 117 samples showed evidence of Candida infections yielding an infection rate of 29.5%. 60 Candida albicans and 111 Non albicans Candida were isolated. Among the 171 isolates subjected for biofilm production, 72 (42%) were positive. Out of total candidal isolates 6.2% were multidrug resistant.

Conclusion: The incidence of Non albicans Candida infection is on rise and biofilm production as well as for increasing antifungal resistance. The changing epidemiology of Candida spp infections highlights the need for close monitoring on the distribution, sensitivity and biofilm production of Candida species in order to optimise therapy and outcome.
A comparative study to assess the knowledge regarding the ill-effects of tobacco consumption among boys and girls studying in selected higher secondary schools in Meghalaya

Authors: Ms. C. E. Myrthong (Guide), Ms. Hima Das (Co-guide), Banylashisha Kharbithai, A. Manizhiia Kayina, Aitimary Sangriang, Badasukshisha Nongbri, Barsha Sensua, Bawanpli Myrsing, Dakernaki Shadap, Gayatri Buragohain, Heimonmi Pohlong, Ibahunlang Nongsiej, Kh. Roji Devi, Khwiramsa Boro, M. Kimdingdii, Pisa Yama, Rosylene Shangpliang, Sophia S. Suchiang, Sibani Mazumdar, Sweata Moirangthem, Ts Rican, Tngenlang Buhphang

Authors affiliation: 3rd Year B.Sc Nursing, College of Nursing, NEIGRIHMS, Shillong.
Author's email: sweatamoirangthem@gmail.com

Introduction: Tobacco consumption is the leading cause of preventable deaths. It kills nearly 6 million people each year according to the WHO 2011 Global status report on Non-communicable diseases.

Objectives:
- To assess the knowledge of the boys and girls studying in selected Higher Secondary Schools of Shillong regarding the ill-effects of tobacco consumption.
- To compare the knowledge regarding the ill-effects of tobacco consumption between boys and girls studying in selected Higher Secondary Schools of Shillong.
- To determine the association between the knowledge of boys and girls studying in Higher Secondary Schools of Shillong regarding the ill effects of tobacco consumption with selected demographic variables.

Methods: A non-experimental cross sectional research design was used to compare the knowledge and determine the association with demographic variables regarding ill-effects of tobacco consumption among Class XI to XII students from selected schools of Meghalaya using purposive sampling method.

Results:
- The mean knowledge score of boys and girls were 8.75 and 8.50 respectively indicating that girls are having higher knowledge as compared to boys regarding ill-effects of tobacco consumption.
- Tobacco users among boys were 27.65% and 6.4% among girls. Cigarette smoking was the most common form of tobacco use among boys (19.69%), whereas Gutkha (Talab/5000/Shikhar) was the most common form of tobacco use among girls (3.66%).
- Regarding the influencing factor for tobacco consumption, among boys — friends (39.16%) were the most influencing factor and among girls — friends, pleasure, addiction and family members (40.05%) together were most influencing factor.
- The participants (49.88% girls and 49.55% boys) opinioned that minimizing the quantity of tobacco day by day was the best tip for quitting tobacco consumption.
- There was significant association between knowledge of the students and course of study (Science stream). Conclusion: The study revealed that boys have less knowledge on ill-effects of tobacco consumption as compared to girls.
A Study to Assess the Level of Stress and Coping Strategies among Nursing Students Studying in Selected Nursing Institutes in Shillong, Meghalaya


Authors affiliation: B.Sc, Nursing 4th yr. College of Nursing, NEIGRIHMS, Shillong.

Author's email: khongsai_kimneijou@gmail.com.

Introduction: Amongst all the professional courses, Nursing Education is one of the most stressful and demanding one. Common sources of stress include: adjusting to new academic environment, hospital environment for clinical practice, hostel life, securing good grades, competition, time management and long distance relationships with family members. Hence, this study aims to assess the level of stress and different coping techniques used by nursing students in selected Nursing Institutes in Shillong, Meghalaya.

Objectives: To assess the level of stress and coping strategies used by Nursing students in selected nursing institutes in Shillong, Meghalaya.

Methodology: The research design was descriptive cross-sectional design. A total of 362 participants were recruited using Total Enumeration sampling technique. Self-administered questionnaire consisting of Part-"A"- socio demographic data, Part-"B"- PSS-14 (Perceived Stress Scale) on level of stress and Part-"C"- Modified ACOPE scale (Adolescence Coping Orientation for Problem Experience) for coping strategies was used.

Findings: In the present study, it was found that among the 362 participants, 278 (76.79%) were found to have no or mild stress, whereas 84 (23.2%) have moderate/severe stress, it was found that most of the students cope better by using more of positive coping strategies like sleep (49.1%), listening to music (46.9%), talking to friends about their feelings (40.3%) and praying (58%). It was also found that nursing students rarely use negative coping strategies like smoking (89.5%) and blaming others for what is going on (50.8%).

Conclusions: Thus we conclude that most of the nursing students experience stress in one way or the other and to intervene with stress they use more of positive coping strategies. It is recommended that to have stress reduction among students, nurse educators should find out the most stressful areas and give a serious thought to encourage the use of healthy coping strategies to improve the productivity of students in nursing.
A study to assess the knowledge and attitude regarding HIV/AIDS and its prevention among class IX-XII students of selected Higher Secondary schools in the urban area of Shillong.


Authors affiliation: 4th year B.Sc Nursing, College of Nursing, NEIGRIHMS, Shillong.

Author e-mail: kalpanalei22@gmail.com

Introduction: HIV is the world’s leading infectious killer disease, where the cure is not yet found. Adolescents are vulnerable because they often do not know how serious the problem of HIV/AIDS is, how it is cause or what they can do to protect themselves.

Objectives: To assess the knowledge and attitude regarding HIV/AIDS among class IX-XII, find the association between knowledge and selected demographic variables among class IX-XII students of selected higher secondary schools in the urban area of Shillong.

Methodology: Non experimental cross sectional design was used. Convenient sampling technique was used to recruit 448 participants. Self-administered questionnaire which consists of Part-‘A’- Socio-Demographic data which has 5 items, Part-‘B’- knowledge regarding HIV/AIDS which has 19 items and Part-‘C’ on attitude which has 10 items.

Results: Among the 448 participants, 35.27% had good knowledge, 62.28% had average knowledge where as 2.45% had poor knowledge. 84.59% of the participant had positive attitude where as only 15.41% had negative attitude. The study found out that there was a significant association between the knowledge of the participants and age, educational status and religion and there was no significant association between gender and the knowledge level of the participants regarding HIV/AIDS.

Conclusion: Epidemic of HIV/AIDS infections still presents a serious challenge to societies around the world including India. Global surveillance and research has identified adolescents as an emerging high risk group. Number of studies, including the current study on Knowledge and attitudes of students regarding HIV/AIDS, found out that most of the students had average knowledge only. Thus we conclude that the knowledge gap of the students can be reduced by providing education so that they are able to identify the risk factors and bring about a positive change in their behaviour in the near future.
ABS 094

Comparing the corneal astigmatism in leprosy patients as compared to their age-matched normal population

Authors: Benjamin Nongrum, Shirley Chacko, Priya Thomas Mathew, Paulson.

Authors affiliation: Assistant Professor Ophthalmology, Neighrihms
Presenting author email: benjaminnongrum@yahoo.com

Aims and Objective: To compare the corneal astigmatism in leprosy patients as compared to their age-matched normal population.

Methods: A retrospective study was done, taking the charts of all the 138 Hansen’s patients (138 eyes) and the 138 eyes of the age-matched from 104 non leprosy patients, who had undergone cataract surgeries from the year 2009 – 2013. The pre-existing astigmatism of these patients as according to the preoperative keratometry readings were noted and the astigmatism graded as grade 1 – mild or no astigmatism (< 2.0D), grade 2 as moderate astigmatism (2-<4D), grade -3 as severe astigmatism (4-<6D) and grade-4 as very severe astigmatism (≥6.0 D). The grades of astigmatism in both the groups were noted and compared and the statistical significance analysed.

Results: The statistical significance was determined using chi-square test and it was found that the distribution of astigmatism significantly differs between leprosy and non-leprosy patients (c²=21.68 p=0.0001) using the software medcalc version 16.2. Severe and very severe astigmatism was higher in the leprosy group.

Conclusion: Our study shows that the pre-existing corneal astigmatism is significantly more in the Hansen’s patients and helped us to give a realistic visual prognosis to these patients who have very bad pre-existing corneal astigmatism. Also we realized that cataract surgery in these patients need to be customized with modifications like perop radial keratotomies, changing the site of external wound, tight suturing of the scleral wound, toric IOL implantations etc.

ABS 095

Psychiatric Complications In Chronic Kidney Disease (Ckd) Patients In North East India: Exploratory Study

Authors: Arvind Nongpiur, Debjit Roy, Monaliza Lyngdoh, Asst. Prof., Medicine

Authors affiliation: SRD, Department Of Psychiatry* Department Of Medicine**, NEIGRIHMS
Presenting author email: debjitraj@gmail.com

Background: Studies have shown the prevalence of CKD ranges from 0.78% to as high as 17.4% in India (Mani, 2005; Agarwal et al, 2005; Singh AK, 2013). Although advanced progressive uremia is now rarely seen owing to the widespread availability of dialysis, an association remains between earlier stages of CKD and cognitive impairment, depression and susceptibility to acute confusional states (Rakowski et al, 2006; Hedayati et al, 2009). Neuropsychiatric disturbances have been shown to be associated with increased patient mortality, increased rates of hospitalization and poor adherence with treatments. However, studies on the psychiatric complications of CKD patients are still lacking. This study is aimed at studying the correlation of psychiatric comorbidities in patients with CKD.

Methods: It is a hospital based cross sectional study. CKD patients as diagnosed by the Kidney Disease Outcomes Quality Initiative (KDOQI) and above 18 years of age were included in the study. Those having comorbid substance dependence were excluded as they may have psychiatric disorders independent of CKD which will confound the results. Forty consecutive patients attending the outpatient or inpatient services of Medicine department fulfilling inclusion and exclusion criteria were taken up for the study. They will be first rated on CAM and HMSE for presence of delirium and cognitive impairment. Patients without delirium or cognitive impairment will then be rated on BPRS and HADS accordingly and assessed for presence of psychiatric symptoms.

Results and Conclusion: The Results and conclusion will be presented at the time of presentation.
Serum Lipid profile in Malaria: A diagnostic clue.

Authors: Dr Bhupen Barman, Dr Tony Ete, Dr Synrang B Warjri, Dr K G Lynrah

Authors affiliation: Assistant Professor, Department of Medicine, NEIGRIHMS
Presenting author email: drbhupenb@gmail.com

Aims and Objectives: Changes in lipid profile are seen in many patients infected with malaria parasite. The malaria parasite causes hepatocellular damage and disturbs lipid handling by the liver. Inside hepatocytes and erythrocytes the parasite replicates rapidly scavenging cholesterol and lipids required for its growth and metabolism from the host. It also requires host lipids for detoxification of free heme to form the malarial pigment, haemozoin. The important question is whether these changes are characteristic for malaria infection or are they simply part of an acute phase reaction? This study analyzes the correlation between malaria infection and derangements in lipid profiles.

Methodology: This study included 29 confirmed malaria cases and 29 controls. Malaria cases were confirmed using rapid antibody-based diagnostic card tests that detect histidine-rich protein 2 (HRP2) or lactate dehydrogenase antigens in finger-prick blood samples followed by microscopic confirmation of malaria parasite. A 12 hours fasting lipid profile was estimated by enzymatic methods on day 2. Data obtained were statistically analyzed using Student t test, assuming p<0.05 as significant.

Results and Observation: As compared to controls, patient with malaria showed low HDL (16.48±6.490mg/dl versus 41.38±15.110mg/dl), low LDL (70.45±22.720mg/dl versus 104.46±27.353mg/dl), low cholesterol (103.52±35.331mg/dl versus 169.45±34.040mg/dl) and elevated triglycerides (214.24±109.365mg/dl versus 131.15±30.813mg/dl). The observations show a statistically significant difference in HDL, LDL, cholesterol and triglycerides between malaria patients and controls (p<0.05).

Conclusion: These results show a characteristic pattern of derangements of lipid profile in malaria. Further studies are required to understand the diagnostic, prognostic and therapeutic implications of these derangements.
A descriptive study to assess the knowledge regarding weaning practice of infants among mothers having children below one year of age in a selected area of Meghalaya


Authors affiliation: 4th year B.Sc Nursing, College of Nursing, NEIGRIHMS, Shillong.

Author's email: suzzanegoswami02@gmail.com

Introduction: Over half of all childhood deaths are directly or indirectly caused by malnutrition. From six months of age, when breast milk alone is no longer sufficient to meet all nutritional requirements, weaning needs to be started. Infants and young children need responsible primary care givers (e.g. mothers) to have appropriate knowledge regarding weaning practices.

Objectives:

* To assess the knowledge regarding weaning practice of infant among mothers having children below one year of age in a selected area of Meghalaya.
* To find the association between the knowledge of the mother and the selected demographic variable.

Methodology:

One hundred fifty two mothers having children below 1 year of age residing in the three localities of Nongmynsong, Meghalaya were recruited through Convenience Sampling Method. Data collection was done using self administered knowledge questionnaire which contains 30 items and data were analyzed by using descriptive statistics like frequency, percentage, mean and inferential statistics like chi square.

Results:

The study result revealed that out of 152 mothers, 54.60% had good knowledge, 44.73% had fair knowledge, 0.65% had very good knowledge and none had poor knowledge regarding weaning practice. The mean knowledge score was 15.79. There was no significant association found between knowledge and age of the mother, age of the infants, occupation of the mother, educational level of the mother, sex of the child, number of children, monthly income of the family and the religion of the mother.

Conclusion:

Thus, we conclude that most of the mothers had good knowledge about weaning practices. The study also showed that still there were mothers who were unaware about the healthy weaning practices or techniques and thus educational program is needed to improve weaning practices.
Myocardial Infarction In Coronary Artery Fistula: An Uncommon Presentation

Authors: Animesh Mishra, Manish Kapoor, Tony Ete, Rinchin Dorjee Megeji, Dr Pravin Kumar Jha, Dr Gaurav Kavi

Authors affiliation: Department of Cardiology, NEIGRIHMS

Presenting author email: renchindorjee@gmail.com

Coronary artery Fistula is an abnormal communication between coronary artery and cardiac chamber, great vessels or any other vascular structure. It may be congenital or acquired. The clinical presentation may vary from myocardial ischemia, Infarction, congestive cardiac failure and sudden cardiac death. Mode of treatment includes both medical, transcatheter and surgical treatment. We are presenting a case of coronary artery fistula that presented to us with features of myocardial infarction.

Perioperative Myocardial Infarction- A Tough Challenge

Authors: Manish Kapoor, Tony Ete, Dr Pravin Jha, Dr Rinchin Dorjee Megeji

Authors affiliation: Department of Cardiology, NEIGRIHMS

Presenting author email: tonyete14@gmail.com

Peptic ulcer perforation is a common condition seen in surgical emergency. However, only rarely it is associated with myocardial infarction in the acute phase of the disease. Perioperative myocardial infarction management has always been a challenge for cardiologist due to the multiple comorbidities and mortality associated with it. Revascularisation to save the myocardium from further damage and also controlling the heart rate and blood pressure with beta blocker has significant role to play in the management of perioperative myocardial infarction. However, the choice of treatment varies from case to case. We are presenting a case who was brought to emergency as a classic case of peptic perforation, developed anteroseptal acute myocardial infarction later managed with percutaneous old balloon angioplasty (POBA).

Thyroid Hormone Profile In Acute Coronary Syndrome Patients

Authors: Pravin Kumar Jha, Manish Kapoor, Amit Malviya, Happy Chutia, Chandra Kumar Das

Authors affiliation: Department of Cardiology, NEIGRIHMS

Presenting author email: chandradas1984@gmail.com

Background: Concomitant thyroid and heart disease are frequently encountered in clinical practice. There are many studies evaluating thyroid function in acute and critical conditions. Information on thyroid dysfunction in ACS is limited.

Objective: The aim of the study was define thyroid hormone profile in acute coronary syndrome (ACS) patients and to investigate the prognostic significance of euthyroid sick syndrome (ESS) in these patients.

Methods: This was a prospective observational study, involving 84 patients consecutively admitted to the coronary care unit of NEIGRIHMS, Shillong, Meghalaya from January 2014 to August 2015. Exclusion criteria included patients using corticosteroids, amiodarone, or thyroid disease drugs, patients with established diseases, such as neoplasias, chronic renal failure, liver cirrhosis, active infection, and endocrine diseases other than diabetes mellitus. Venous blood samples were collected for the evaluation of thyroid function and other biochemical analysis. All patients were monitored for in-hospital death due to cardiovascular cause.

Results: Of the 84 patients, admitted with acute coronary syndrome, 52 (61.9%) had ST-segment elevation acute myocardial infarction (STEMI) and 14 (16.7%) had non-ST-segment elevation myocardial infarction (NSTEMI), and 18 (21.4%) had unstable angina (UA). Majority of the patients had normal thyroid profile (55.9%). Euthyroid sick syndrome was reported in 26 (30.1%) patients. Median plasma levels of thyroid hormones were in normal range. In-hospital mortality was observed in 5(5.6%) patients, all of them belonging to STEMI group. Out of these 5 patients, 4 patients had ESS and 1 patient had normal thyroid profile. In multiple logistic regression analysis, ESS was found to be independently associated with in-hospital mortality.

Conclusion: The present study shows the importance of recognising ESS in ACS patients, suggesting an association with adverse prognosis in patients with ACS.
Ordinary large B cell lymphoma in a Pediatric patient: A rare case report

Authors: Thangkhiew L, Nongrum B, Shullai W, Goswami PK

Authors affiliation: Assistant Professor Department of Ophthalmology, NEIGRIHMS
Presenting author Email: lanalyn@gmail.com

Background: Accidental carbon monoxide poisoning in places with cold climates is commonly related to indoor heating without adequate ventilation. Various neurological sequelae develop after Carbon Monoxide poisoning. Among them delayed neurological sequelae are more characteristic of anoxic encephalopathy after carbon monoxide poisoning.

Case: We report a case of an elderly lady from Shillong, who developed extrapyramidal symptoms after being exposed to burning charcoal, as indoor heating in the cold climate, with poor ventilation.

Main lesson: A high index of suspicion is required to diagnose these cases as they may be common during winter because of the traditional method of using burning charcoal for indoor heating.

Opioid Overdose: Knowledge and Practices among Health Care Providers in Meghalaya

Authors: Dr. Himashree

Authors affiliation: Asst. Prof., Community Medicine, NEIGRIHMS
Presenting author email: bhimashre@yahoo.co.in

Introduction: Opioid overdose occurs when a person takes opioid or opioid in combination with other drugs, in quantities that body cannot handle. Overdose is one of the commonest causes of death among opioid users. With the rising number of drug users in our state, incidences of drug overdose is bound to increase.

Objectives: 1. To find out the number and profile of overdose cases presenting to different Health Care institutions under this study. 2. To find out the knowledge and practices of Health Care Providers on overdose management.

Methodology: The present study is a cross sectional study conducted in selected districts of Meghalaya for a period of one year. A total of 20 centres were taken up for data collection. Doctors, nurses and para medical staff were the study respondent. Pre-designed questionnaire was used for data collection.

Results: From the 20 centers, a total number of 114 respondents were enrolled for questionnaire section. Regarding the knowledge on overdose 101 (88.59%) could properly define the meaning of overdose. Only 41 (36%) of the respondent had treated overdose cases. Only 66 (58%) respondents were aware about the correct dosage of naloxone Regarding the drug used to revive an overdose case most of the respondents 61 (53%) replied that they would use Naloxone. However Only 21 (18%) of respondents had undergone any training on overdose management. There are about 80 reported cases of overdose with the mean age of 28 years. Out of the 80 overdose cases 17 (21%) cases were fatal. Only 25 (31%) overdose cases were reported to the police.

Conclusion: There seems to be a high demand for training on Overdose management among the respondents from all the sectors as most of them had expressed their willingness to undertake such a training so as to increase their knowledge and skills on overdose management. These issues need to be addressed. Naloxone must be made available at the Health Care Centres. Moreover, All the Heath Centres should maintain proper records for drug overdose cases so as to obtain a baseline data on the prevalence of overdose cases in this region.
A Comparative Study to Assess the Effectiveness of Poster Method on the Wall and Pictorial Method on Bins on Knowledge and Practice of Students and Health Care Workers Regarding Segregation of Bio-Medical Waste in NEIGRIHMS Hospital.


Authors affiliation: 3rd year B.Sc Nursing Student, College of Nursing, NEIGRIHMS, Shillong.
Authors email: devidipomala@gmail.com.

Introduction: Proper handling and disposal of biomedical waste is very essential. It has been observed that there was poor practice among health care workers in segregating waste in different colour-coded bins despite of adequate knowledge about it.

Objective: To compare the effectiveness of picture method and poster method on Knowledge and practice regarding segregating of biomedical waste among students and health care workers.

Methods: A quasi-experimental and post-test only design was adopted to conduct study in selected wards of NEIGRIHMS Hospital. Wards were randomly selected, of which 63 and 78 participants were exposed to picture and poster method respectively. The subjects were recruited by using convenient sampling method. The study group included 141 health care personnel which comprises of PGs, JRDs, Interns, Staff Nurses, B.Sc Nursing students and Grade IV workers. Practice was assessed by using checklist tool through direct observation and knowledge was assessed by using self-administered questionnaire.

Results: The mean score of participants in terms of practice and knowledge in picture method was 9.52±0.61 and 11.38±2.2 respectively whereas in poster method it was found to be 7.59±1.46 and 8.45±2.16 respectively. The calculated ‘t’ value between participants who were exposed to picture and poster method in terms of practice and knowledge score was 9.57 and 7.85 respectively at 0.05 level of significance (p<0.05). The correlation-coefficient in terms of practice and knowledge score among the participants who were exposed to picture and poster method was 0.46 and 0.32 respectively. Findings from this study revealed that picture method improves the practice than poster method in segregation of bio-medical waste.

Conclusion: Picture method can be one of the alternative means for proper disposal of waste as supported by its high significance over poster method from this study finding.
A Cross-Sectional Study to Assess the Knowledge Regarding First-Aid Management of Selected Minor Injuries among Teachers of Selected School of Meghalaya


**Authors affiliation:** 3rd B.Sc Nursing Student, College of Nursing, NEIGRIHMS, Shillong

**Author’s e-mail:** shabana.parveen.2011@gmail.com

**Introduction:** Children are having a higher risk of getting injuries than any other age group of people. Basic knowledge for every teacher is important to meet the urgent needs of the school children during minor injuries leading to fractures, wounds and many other health problems that need to be handled quickly before emergency services providers arrives.

**Aims and Objectives:** To assess the knowledge regarding First-aid Management of Selected Minor Injuries among Teachers of Selected Schools in Meghalaya. To determine association between the knowledge regarding First-aid Management of Selected Minor Injuries with selected Demographic Variables among Teachers of Selected Schools in Meghalaya.

**Methodology:** A Cross-Sectional Non-Experimental study was conducted among 90 school teachers of selected schools of Meghalaya on 1st December, 2015 using Stratified Random Sampling technique. Data was collected by using Self-Administered Knowledge Questionnaire and was analyzed by descriptive and inferential statistics.

**Result:** The findings revealed that school teachers scored maximum in First Aid on Falls and Allergy (93.4% each), followed by first aid on Eye Injury (90%), Chemical Burns (85.6%), Electric Shock (81%), Ear injury (69%), Fractures (67%) and Nose injury (62.3%). First Aid Knowledge on Fingers and toes injuries, Fainting and Seizures were found to be average whereas they had minimum knowledge on First Aid on Wounds and Bleeding (16.7%), Insect Sting (24%) and Choking (27.8%).

**Conclusion:** The knowledge of School Teachers on First-aid was found to be average. It was also found that there is no Significant Association between Knowledge and the Selected Demographic Variables.

---

**Title** Delayed Hemolytic Transfusion Reaction (DHTR) due to Anti c (small) & Anti N: A case report.

**Authors:** Sharma B.S, Lyngdoh L N*, Marbaniang E., Bhattacharyya D., Kshiar S. L., Das K.R.,

**Authors affiliation:** Junior Resident Doctor, Department of Blood Bank, NEIGRIHMS.

**Presenting author email:** bhumiaka sipani@gmail.com

Delayed Hemolytic Transfusion Reaction (DHTR) is most often the result of an anamnestic response in a patient who has previously been sensitized by transfusion, pregnancy, or transplant and in whom antibody is not detectable by standard pre transfusion methods.

A 42 Yr old multiparous female patient with Auto Immune Hemolytic Anemia (AIHA) and history of transfusion of three units of Whole Blood two and a half months back. After this the patient received three more units of Whole Blood and the patient was discharged with hemoglobin of 9.0 gm% fifteen days prior to the present referral. Following this the patient’s hemoglobin deteriorated further to 3.2 gm% and no more compatible units could be found and thus was referred to our Blood Bank.

In the pre transfusion work up, antibodies developed were identified as Anti c (small) & Anti N. Adsorption & elution also showed the presence of Anti c (small) & Anti N. Extended phenotyping showed that the patient lacked the antigens c (small) and N which confirmed that the patient had developed Anti c (small) & Anti N.

In this patient, as she received 6 units of whole blood, there was probably volume overload which caused her to go into failure. This was further aggravated by the transfusion of mismatched blood which caused the DHTR as indicated by the drastic fall in hemoglobin concentration from 9 gm% to 3.2 gm% with rise in bilirubin. Many clinicians are well aware of the Immediate Transfusion Reactions like allergic reactions, IHTR, FNHTR, etc. but DHTR usually go unnoticed or are misdiagnosed and the line of treatment of such a condition goes in a different direction. Thus, it is very important for the Blood Bank & the clinicians to coordinate and established DHTR so that only phenotype matched blood is transfused.
The South Asian Games, a multi-sport event, is the regional Games of the Olympic Council of Asia. Since it was first hosted by Kathmandu, Nepal in the year 1984, except for few occasions the event is taking place every alternate year. This mega multinational sports event is held among the athletes of the South Asian countries in various locations across the region. The event was joined by the eight South Asian countries namely Afghanistan, Bangladesh, Bhutan, India, Maldives, Nepal, Pakistan and Sri Lanka. 12th South Asians Games started on 5th February 2016. Honourable Prime Minister of India Shri Narendra Modi declared the Games open. After twelve days of sporting activities in the spirit of friendship, togetherness and much more, curtains came down on 16th evening on the 12th South Asian Games 2016, held in Guwahati and Shillong.

It was a proud moment for NEIGRIHMS to be the part of 12th South Asian Games. NEIGRIHMS hosted the event Taekwondo on 13th, 14th and 15th February 2016. Other than being a host venue the medical Team at NEIGHRIMS also provided the Medical & Dope Testing Service for conduction of Games. Honourable Director NEIGRIHMS Prof A. G. Ahangar provided the needed leadership for preparedness and conduction of the events at NEIGRIHMS in coordination with Deputy Director (Administration) Mr. David Teirylang Umdor.
Patient safety, patient satisfaction, patient flow and instrument preparation are all important elements of operational efficiency in the perioperative setting.

Opportunities exist to improve patient safety, the coordination of care, minimize delays and waste, increase operating room (OR) use, and enhance the perioperative experience for the patient and family, as well as for the perioperative team members.

The perioperative arena is a unique environment that includes many challenging variables: complex clinical care performed by teams; high cost, a large array of supplies, instruments, and implants that are difficult to manage.

These variables create an environment of massive complexity and, unfortunately, are a source of a significant percentage of patient safety-related adverse events.

Compared to the environment of a primary care or specialty medical practice, patients in the operating room (OR) environment are subject to infrequent but high-intensity visits. During the perioperative process of care, clinicians from several different disciplines care for patients in a simultaneous, real-
time fashion. A single patient might be treated by five or more nurses, two or more physicians, associated pharmacists, radiology technicians, and blood bank staff. Many other types of support personnel also directly affect a surgical case and, therefore, the safety outcomes. These include patient transporters, sterile supply staff, janitors, schedulers, and others. With the exception of the attending surgeon, all other clinical and support perioperative staff does not typically meet their patients until the time of surgery and have, at best, very limited postoperative follow up.

The five rights defined for medication management (right drug, right dose, right route, right time, right patient), in perioperative care, an amazing number of tasks, data, and technologies must come together correctly for patient safety and good clinical outcomes. Not only must the five rights of medication administration be done correctly, since highly sophisticated medications are administrated during and after surgical cases, but 15 additional items also must be precisely managed.

People, equipment, and technologies that must be right for perioperative case safety and optimization

1. Patient  
2. Time  
3. Nurses  
4. Surgeons  
5. Anesthesiologists  
6. Surgical support staff  
7. Instrument case carts  
8. Surgical equipment  
9. Supplies  
10. Medication  
11. Medication dosing  
12. Medication route  
13. Surgical pathology  
14. Medical gases  
15. OR suite  
16. OR suite cleaning  
17. OR suite configuration and preparation  
18. Patient data from medical record  
19. Clinical images  
20. Surgical schedule

With the guidance and leadership of Prof. P. Bhattacharyya, Head of the department of Anesthesiology & critical care, the perioperative team & surgical team completed 13 operations in a day out of which three were major plus operations each lasted on average around 5hrs.

A total of eight operation theatres worked simultaneously with 33 hours and 25 minutes of total surgical time.

All posted operations of the day got operated.

Total anesthesia time (Induction) was 120 minutes for these 13 patients to provide them to surgical team ready to be operated. On an average it is less than 10 minutes for each patient in the eight operation theatres.
Post operatively four patients were shifted to Critical care unit / high dependency unit for optimization and further management of the patients.

All operations were completed without any complication. One case was found inoperable during surgery.

The entire patient recovered well and 9 out of 13 patients were discharged from hospital within 7 post operative days.

**Anesthesiology Team**

**Consultant**
Dr. Md. Yunus

**Senior Residents**
1. Dr. Stevie J N Sangma
2. Dr. Newstar Syiemiong

**Junior Residents (Academic)**
1. Dr. Anirban Bhattacharjee
2. Dr. Sunny
3. Dr. Jithin J Illickal
4. Dr. Raju Shakya
5. Dr. Sourav Nandy
6. Dr. Mukul Garg

<table>
<thead>
<tr>
<th>S.N O.</th>
<th>Diagnos is</th>
<th>Procedure</th>
<th>Anesthesia time &amp; procedure</th>
<th>Surgey time</th>
<th>Remarks</th>
<th>Outcome of the patient in 7days</th>
</tr>
</thead>
<tbody>
<tr>
<td>Case Alveolus</td>
<td>Hemimandibul ectomy+ reconstruction</td>
<td>Preop tracheostomy GA; 3 min</td>
<td><strong>6hrs 45 min</strong></td>
<td>Haemodynamically stable; shifted to ccu</td>
<td>Patient haemodynamically stable, wound healthy, on RT feed, on insulin sliding scale</td>
<td></td>
</tr>
</tbody>
</table>

**1. ENT**

**Case posted- 1**
**Case operated- 1**

**Surgical Team:** Dr. Brian N Shunyu, Dr. Hanifa Akhtar
## 2. Ophthalmology

<table>
<thead>
<tr>
<th>S. No.</th>
<th>Diagnosis</th>
<th>Procedure</th>
<th>Anesthesia time &amp; procedure</th>
<th>Surgery time</th>
<th>Remarks</th>
<th>Outcome of the patient in 7 days</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>B/L congenital Cataract</td>
<td>Lens extraction+ post capsulotomy + vitrectomy</td>
<td>GA; 10 min</td>
<td>2 hours</td>
<td>Patient stable; shifted to ward</td>
<td>Stable; discharged</td>
</tr>
<tr>
<td>2</td>
<td>B/L congenital Glaucoma</td>
<td>Trabeculectomy</td>
<td>GA; 8 min</td>
<td>2 hours 20 min</td>
<td>Patient stable; shifted to ward</td>
<td>Stable; discharged</td>
</tr>
</tbody>
</table>

Case posted: 2  
Case operated: 2

Surgical Team: Dr. Benjamin, Dr. Lanalyn Thangkhiew, Dr. Avonuo
<table>
<thead>
<tr>
<th>S. No.</th>
<th>Diagnosis</th>
<th>Procedure</th>
<th>Anesthesia time &amp; procedure</th>
<th>Surgery time</th>
<th>Remarks</th>
<th>Outcome of the patient in 7 days</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Cancer Recto</td>
<td>Abdomino-perineal resection</td>
<td>GA+epidural 20 min</td>
<td>5hrs 20 min</td>
<td>Haemodynamically stable; shifted to ccu</td>
<td>stable, wound healthy, on oral feeds, biopsy report withheld, planned for chemo-Radiotherapy</td>
</tr>
<tr>
<td></td>
<td>Rigid region</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Cancer Stomach</td>
<td>Gastrojejunostomy</td>
<td>GA; 17 min</td>
<td>3hrs</td>
<td>Extubated &amp; shifted to ward</td>
<td>Stable, on oral feeds, planned for chemo-Radiotherapy</td>
</tr>
</tbody>
</table>

Case posted: 2  Case operated: 2

Surgical Team: Dr. Noor Topno, Dr. DonKupar, Dr. Dathia, Dr. Kappa, Dr. Lenish,
## 4. G. SURGERY-II

<table>
<thead>
<tr>
<th>S. No.</th>
<th>Diagnosis</th>
<th>Procedure</th>
<th>Anaesthesia time &amp; procedure</th>
<th>Surgery time</th>
<th>Remarks</th>
<th>Outcome of the patient in 7days</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Cholelithiasis</td>
<td>Lap cholecystectomy</td>
<td>GA; <strong>6 min</strong></td>
<td><strong>2 hours</strong></td>
<td>Stable; shifted to ward</td>
<td>Pre op symptoms improved; discharged</td>
</tr>
</tbody>
</table>

**Case posted: 1  Case operated: 1**

Surgical Team: Dr. Noor Topno, Dr. DonKupar, Dr. Dathia, Dr. Kappa, Dr. Lenish,
5. INTERVENTIONAL RADIOLOGY

<table>
<thead>
<tr>
<th>S. No.</th>
<th>Diagnosis</th>
<th>Procedure</th>
<th>Anaesthesia time &amp; procedure</th>
<th>Surgery time</th>
<th>Remarks</th>
<th>Outcome of the patient in 7 days</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>SAH Emergency</td>
<td>Coiling of aneurysm</td>
<td>GA; 5 min</td>
<td>2 hours</td>
<td>Shifted to Critical care Unit and extubated in CCU haemodynamically stable</td>
<td>Post op- no improvement in GCS:E4V4M6; took discharge on request</td>
</tr>
</tbody>
</table>

Case posted: 1  
Case operated: 1

Interventional Radiologist: Dr. Akash Handique
## 6. UROLOGY

<table>
<thead>
<tr>
<th>S. No.</th>
<th>Diagnosis</th>
<th>Procedure</th>
<th>Anaesthesia time &amp; procedure</th>
<th>Surgery time</th>
<th>Remarks</th>
<th>Outcome of the patient in 7 days</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>CKD</td>
<td>(L) Radiocephalic AV fistula construction</td>
<td>Under MAC</td>
<td>1hr 30 min</td>
<td>Patient stable; shifted to ward</td>
<td>Stable, discharged</td>
</tr>
</tbody>
</table>

Case posted: 1  
Case operated: 1

Surgical Team: Dr. S. L. Sailo, Dr. Alwyn
## 7. OBSTETRICS & GYNECOLOGY

<table>
<thead>
<tr>
<th>S. No.</th>
<th>Diagnosis</th>
<th>Procedure</th>
<th>Anaesthesia time &amp; procedure</th>
<th>Surgery time</th>
<th>Remarks</th>
<th>Outcome of the patient in 7 days</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Secondary infertility</td>
<td>DHL</td>
<td>GA; 7 min</td>
<td>1.5 hr</td>
<td>Patient stable; shifted ward</td>
<td>Stable; discharged</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Planned for IVF</td>
</tr>
<tr>
<td>2</td>
<td>Ovarian complex cyst</td>
<td>Laparoscopic Cystectomy</td>
<td>GA; 6 min</td>
<td>1.5 hr</td>
<td>Patient stable; shifted ward</td>
<td>Stable; symptoms improved</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>discharged</td>
</tr>
<tr>
<td>3</td>
<td>Primary infertility for IVF</td>
<td>Hysteroscopy</td>
<td>SAB; 10 min</td>
<td>1 hrs</td>
<td>Patient stable; shifted ward</td>
<td>discharged</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Planned for IVF</td>
</tr>
<tr>
<td>4</td>
<td>Uterine fibroid</td>
<td>Total abdominal Hysterectomy</td>
<td>GA+ epidural; 17min</td>
<td>2 hr</td>
<td>Patient stable; shifted ward</td>
<td>stable; on oral feeds; planned for discharge tomorrow</td>
</tr>
</tbody>
</table>

**Case posted:** 4  **Case operated:** 4

Surgical team: Dr. S. Panda, Dr. Nalini Sharma, Dr. Ananya Das, Dr. Sukalyan, Dr. Rituparna
8.CTVS

<table>
<thead>
<tr>
<th>S. No.</th>
<th>Diagnosis</th>
<th>Procedure</th>
<th>Anesthesia time &amp; procedure</th>
<th>Surgery time</th>
<th>Remarks</th>
<th>Outcome of the patient in 7 days</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Bronchiectasis</td>
<td>(R) lobectomy</td>
<td>GA+thoracic epidural+ central venous+arterial catheterisation; 30 min</td>
<td>2 hours 30 min</td>
<td>Intra op haemodynamically stable; shifted to CTVS ICU</td>
<td>Shifted to ward from CTVS ICU, haemodynamically stable; on oral feeds; still drain (+)</td>
</tr>
</tbody>
</table>

Case posted: 1  Case operated: 1

Surgeon: Dr. J.P. Kalita

It is Team work many others to helps specifically OT Nurses, Anesthesia Technician & cleaner to laundry person etc. of the perioperative area, must get credit of this success story.

Corresponding Author:
Dr. Md. Yunus
Additional Professor
Anesthesiology & Critical Care NEIGRIHMS, Shillong
drmdyunus@hotmail.com / www.neigrihms.gov.nic
Department of Medical Education has conducted **13 (Thirteen)** Workshop/CME/Training programme over the year.

Total number of participants were trained by different programme is **1,069 (One Thousand Sixty nine)**

Apart from its regular activities, Department of Medical Education supported as a backbone for the conduction of “**Annual Day programme-2015 of NEIGRIHMS**” on 4th & 5th March 2015.

Department has presented ‘CGR’ on Taxonomy of Educational Objectives on **11th April 2015**.

Department also published two articles:

i) International peer review index journal

ii) National peer review index journal.

Two books have been published by the Department of Medical Education:

i) Handbook of Basics of Medical Education

ii) Handbook on Practice of Research Methodology

**List of Workshop/CME/Training programme conducted:**

1. **26th – 28th March 2015**, Department of Medical Education has organized the “**3 days MCI Basic course workshop on Medical Education Technology**” under Supervision of Medical Council of India & with the Guidance of King George’s Medical University, U.P., Lucknow from 26th – 28th March 2015(Thus, Fri & Sat) at Clinical Teaching Room-1, NEIGRIHMS. **Number of participants is 26.**

2. **24th – 29th April 2015**, Department of Medical Education, NEIGRIHMS has organized Training programme for BLS (Basic Life Support), ACLS (Advanced Cardiac Life Support), ALSO (Advanced Life Support in Obstetrics) at NEIGRIHMS in LT- 2 & 3. **Number of participants is 127.**

3. **1st – 6th June 2015**, Department of Medical Education, NEIGRIHMS has organized 2nd Phase of Training programme for BLS (Basic Life Support), ACLS (Advanced Cardiac Life Support) at NEIGRIHMS in LT- 2 & 3. **Number of participants is 166.**

4. **12th, 13th, 15th, 16th June 2015**, Department of Medical Education, NEIGRIHMS has organized Extension of 2nd Phase of Training programme for BLS (Basic Life Support) at NEIGRIHMS in LT- 2 & 3. **Number of participants is 143.**
5. **22nd – 23rd July 2015**, Department of Medical Education has organized the 2 days *Basic course workshop on Medical Education Technology for Resident Doctors* at Clinical Teaching Room-1, NEIGRIHMS. *Number of participants is 33.*

6. **29th July 2015**, Department of Medical Education has conducted *One day “Orientation Programme”* for newly joined Post Graduate & Post Doctoral students 2015 at Clinical Teaching Room-1, NEIGRIHMS. *Number of participants is 20.*

7. **18th, 19th, 20th, 21st August 2015**, Department of Medical Education, NEIGRIHMS has organized 3rd Phase of Training programme for BLS (*Basic Life Support*) at NEIGRIHMS in LT-2. *Number of participants is 101.*

8. **29th August 2015**, The Department of Medical Education, NEIGRIHMS has conducted “International workshop on Harmonization-Good clinical practice & Ethical prospective of Biomedical Research” for Faculty members, Senior Resident Doctors & Post Graduate Scholars. *Number of participants is 71.*

9. **21st – 24th September 2015**, Department of Medical Education NEIGRIHMS has organized “Workshop on Research Methodology” at NEIGRIHMS conducted by National Institute of Epidemiology (NIE), ICMR, Chennai. *Number of participants is 56.*

10. **26th October 2015**, Department of Medical Education, NEIGRIHMS has organized 4th Phase of Training programme for BLS (*Basic Life Support*) at NEIGRIHMS in LT-2. *Number of participants is 34.*

11. **27th October 2015**, Department of Medical Education, NEIGRIHMS has conducted One day “Orientation Programme” for newly joined MBBS students 2015 at Lecture Theatre-1, NEIGRIHMS. *Number of participants is 50.*

12. **31st October 2015**, Department of Medical Education, NEIGRIHMS has organized *CME on Emerging trend of EM care at NE & India* conducted by Health care worker trained from INDUSEM, New Delhi held at Lecture Theatre-1. *Number of participants is 200.*

13. **24th February 2016**, Department of Medical Education, NEIGRIHMS has conducted *One day “Orientation Programme”* for newly joined MBBS Interns at Lecture Theatre-2, NEIGRIHMS. *Number of participants is 42.*
Organizing Committee for 6th Convocation, Annual Day, NEIGRIHMS
(Research Presentation Programme)

Patron
Prof. A. G. Ahangar (Director & CEO, NEIGRIHMS)

Co-Patron
Prof. Vandana Rapheal (Dean)

Organising Chairperson
Prof. Manuj Kr Saikia

Organising Secretary
Prof. Md Yunus

Co-Organising Secretaries
Dr. Yookarin Khonglah
Dr. W. V. Lyngdoh

Academic and Research Committee:
Prof. P. K. Bhattacharya (Chairman)
Secretary - Dr. R. Hajong
Joint Secretary - Dr. Himesh Barman
Members - Dr. Akash Handique
          Dr. Binod Thakur
          Dr. Massaraf Husaain
          Dr. Biswajeet Saikia

Scientific publication Committee:
Prof. G. K. Medhi (Chairman)
Secretary - Prof. P.K. Goswami
Joint Secretary - Dr. Annie B. Khyriem
Members - Dr. Arup Jyoti Baruah
          Dr. Julie Wahlang
          Dr. Abhijeet Bhatia
          Dr. Mohammad Jamil

Reception / Inauguration Committee:
Prof. Vandana Raphael (Chairperson)
Prof. P. Bhattacharya (Member)
Prof. Santa Singh (Member)
Prof. A. C. Phukan (Member)
Prof. Noor Topno (Member)
Prof. C. Daniala (Member)
Prof. Animesh Mishra (Member)
Prof. P. K. Bhattacharya (Member)
Prof. Chayna Sarkar (Member)
Prof. Manuj Saikia (Member)
Prof. G. K. Medhi (Member)
Er. David T Umdor (Member)
Ms. Catherine C Myrthong (Member)
Ms. Eliza J. Bathew (Member)
Ms. Wanda Dkhar (Member)

Hospitality and Protocol Committee:
Prof. A. C. Phukan (Chairman)
Dr. KG Lynrah (Secretary)
Dr. Alice Abraham Ruram (Member)
Dr. Lanlyn Thangkhiew (Member)
Dr. Jyoti Prasad Kalita (Member)

Liasoning Committee:
Prof P. Bhattacharya (Chairman)
Prof. Animesh Mishra (Secretary)
Dr. S. L. Sailo (Member)
Dr. Bhaskar Borgohain (Member)
Dr. Chandan Kr Nath (Member)
Dr. Seema Konwar (Member)

Invitation Committee:
Prof. Asima Bhattacharya (Chairperson)
Er. David Umdor (DDA) (Co-Chairman)
Dr. K. G. Lynrah (Member)
Dr. Arvind Nongpiur (Member)
Dr. Donkupar khongwar (Member)
Ms. Catherine C Myrthong (Member)
Mr. Shanboklang Kharbhiih (Member)
Ms. Badarilyne Rytathiang (Member)
Mr. Ruban Sarma (Member)

Hall Management and Decoration Committee:
Prof. Noor Topno (Chairman)
Er. David Umdor (Co-Chairman)
Dr. Sriram Sharma (Secretary)
Dr. Manika Agawal (Member)
Dr. Bhupen Barman (Member)
Dr. Tashi Khonglah (Member)
Dr. D. Tongper (Member)
Ms. Elisa J Bathew (Member)
Ms. Wanda Dkhar (Member)
Mr. Ferdinand Jarain (Member)
Mr. Mayborn Kharpuri (Member)

**Transport Committee:**
**Dr. Arvind Nongpiur (Chairman)**
Dr. Daunipaia Slong (Member)
Ms. Hema das (Member)
Mr. Umesh Sarma (Member)

**Accommodation Committee:**
**Dr. D K Brahma (Chairman)**
Dr. A. Dona Ropmay (Member)
Dr. Benjamin Nongrum (Member)
Mr. Rajiv Pradhan (Member)

**Cultural Programme Committee:**
**Prof. C. Daniala (Chairman)**
Dr. R. Hajong (Member)
Dr. Sarah Ralte (Member)
Dr. Himashree Bhattacharya (Member)
Ms. Soma Das (Member)
Mr. Debal Das (Member)

**Certificate and Award Committee:**
**Dr. Animesh Mishra (Chairman)**
Dr. S. L. Sailo (Member)
Dr. Amit Malvya (Member)
Dr. Samajjit Dey (Member)
Ms. Rakhi Roy (Member)

**Mementos & Souvenir Committee:**
**Er. David Umdor (Chairman)**
**Dr. Nari Lyngdoh (Secretary)**
Dr. Annie B. Khyriem (Member)
Dr. Jaya Mishra (Member)
Dr. Arindom Kakoti (Member)
Dr. Clarissa J Lyngdoh (Member)
Ms. Wanda Dkhar (Member)

**Print Media and Publicity:**
**Prof. A Santa Singh (Chairman)**
Dr. Star Pala (Secretary)
Dr. Brian Shunyu (Member)
Dr. B Wankhar (Member)
Dr. Jyotima Handique (Member)
Mr. Sudhansh (Member)

**Master of Ceremony:**
**Prof. Chayna Sarkar (Chairperson)**
Dr. Manish Kapoor (Member)
Dr. Monaliza Lyngdoh (Member)
Dr. Sikha Thakur (Member)
Dr. E Marbaniang (Member)
Dr. Happy Chutia (Member)
Dr. Amrita Sarkar (Member)

**Finance Committee:**
**Dr. Sharat Agarwal (Chairman)**
Dr. Chandan Kr Nath (Secretary)
Dr. Amitav Sarma (Member)
Dr. Sourabgh G Duwarah (Member)
Dr. Tashi G Khonglah (Member)
Dr. Lomtu Rongrang (Member)
Ms. Soma Das (Member)
Mr. Thwet Syngkon (Member)