



AHMEDABAD OBSTETRICS AND GYNAECOLOGICAL SOCIETY

# AOGS TIMES

## Nirvana

SEPTEMBER 2022 | VOLUME 6

Theme : Healthy Woman - Healthy Nation

Motto : Ethics Compassion Commitment

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*Laxmi Mata*

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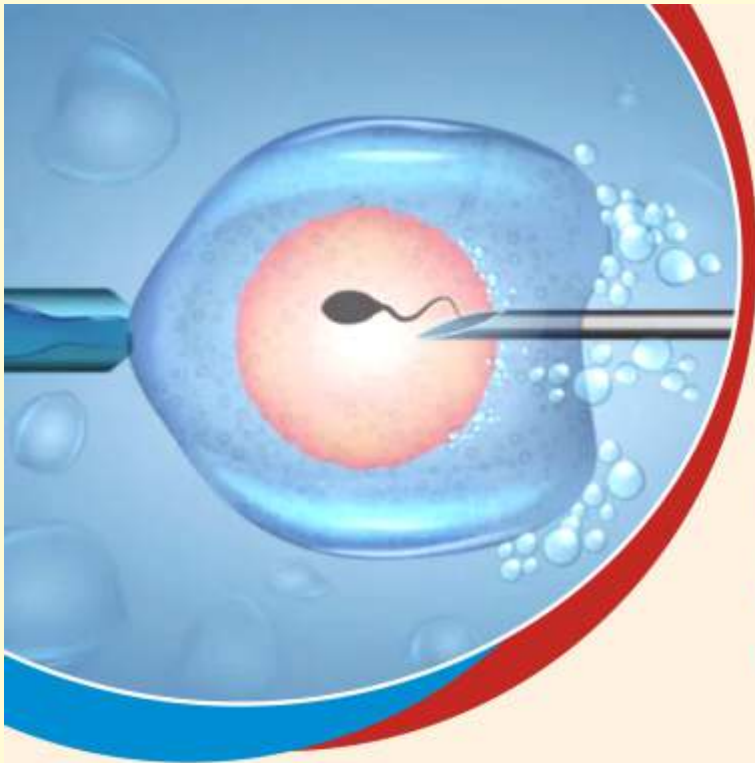
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**Dr. Kamini Patel**  
President

## TEAM AOGS MESSAGE



**Dr. Nita Thakre**  
Hon. Secretary

*“Life is neither in the past nor in the future.  
Life is in Present. Design your present in a way that your future blooms with colours”*

AOGS, as we know is the best example of the guidance given by Lord Krishna. We as an association always make sure that we have the best of the activities and programmes which help us to have a good work, academic and life balance. Living in the present and investing in the present will give us a good future – this has been very well accepted by **Dr. Munjal and Dr. Sujal**. Congratulations on your achievements.

Also, change is the constant factor in life. AOGS has also been trying to change and update its services where one of the things is the AOGS application. This will turn into a good adaption and change only if all the doctors, members of AOGS would help us and download the same for the future updates.

Lord Krishna says, if we lead our life with truth and with righteousness nothing can hinder our ways to success. Success here does not come by money or by fame. Success comes with the satisfaction of work and satisfaction of living a balanced life. In today’s generation this is being misunderstood a lot. This message is a small step towards bringing the enlightenment towards our association that fame and money might be a momentary happiness. But satisfaction in work while giving our fullest calibre to the patient and satisfaction that comes after spending time with family will be the true investment for a happy future.

*Always remember “Moment should be movement to gain momentum”*

PAST PROGRAMME

AOGS - RAS GARBA NIGHT - DATE : 01.10.2022



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PAST PROGRAMME



AHMEDABAD OBSTETRICS & GYNAECOLOGICAL SOCIETY

Date : 16th October, 2022 | Sunday

Time : 9.30 am

Venue : Radisson Blu, Panchvati, Ahmedabad.

CME



Dr. Kamini Patel  
President, AOGS



Dr. Akshay Shah  
Clinical Secretary, AOGS



Dr. Nita Thakre  
Hon. Secretary, AOGS

Programme Co-Ordinators



Dr. Aarti Gupte



Dr. Kunjan Shah



Dr. Ashish Verma

09.30 - 10.00 - Breakfast

SESSION 1

Chairpersons : Dr. Vijay Shah, Dr. Heena Maskaria, Dr. Snehal Kale

TIME	TOPIC	SPEAKER
10.00 - 10.20	Endometrial Priming in IVF	Dr. Kamini Patel
10.20 - 10.40	Semen Analysis : Clinical Interpretation	Dr. Phagun Shah
10.40 - 11.00	Dydrogesterone in Threatened Abortion	Dr. Mehul Damani

11.00 - 11.20 General Knowledge Quiz : Dr. Aarti Gupte, Dr. Hetal Patolia

SESSION 2

11.20 - 12.30	<p>Panel Discussion : Recurrent Pregnancy Loss</p> <p>Moderators : Dr. Jignesh Deliwala, Dr. Azadeh Patel</p> <p>Panelists : Dr. Suresh Kothari, Dr. Manoj Pandya Dr. Sneha Baxi, Dr. Ankita Jain, Dr. Navin Panchal, Dr. Shachi Joshi, Dr. Neha Patel, Dr. Aastha Maskaria</p>
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12.30 pm LUNCH

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## MEDICAL NEWS UPDATE

### Can zero-calorie sweeteners raise your risk for cardiovascular disease?

- A massive study involving French citizens that spanned more than a decade evaluated their use of artificial sweeteners.
- The observational study periodically checked the participants' food and drink intake and had the participants regularly report on their health.
- By the end of the study, the researchers learned that the participants who consumed higher levels of artificial sweeteners experienced cardiovascular disease events at a higher rate than participants who did not consume artificial sweeteners.

While artificial sweeteners may seem like a good alternative to sugar to reduce caloric intake, a study published in *The BMJ* suggests there may be a connection between such sweeteners and an increased risk for Cardiovascular disease, including stroke.

The research, conducted by the French National Institute for Health and Medical Research, is not the first study to suggest a connection between artificial sweeteners and increased risk for heart disease, however, it is the largest to date. The study included data from more than 100,000 participants. The chosen participants included people 18 years of age and older, as well as people who filled out questionnaires related to diet, health, anthropometric data, lifestyle and sociodemographic data, and physical activity. The average age of the included participants was 42 years, and the majority of the participants were females (79.8%).

Approximately 37% of the participants reported using artificial sweeteners, with the participants divided into non-consumers, lower consumers (artificial sweetener intake below the median), and higher consumers (artificial sweetener intake above the median). The participants consumed an average of 42.46 mg/day.

They consumed the following artificial sweetener types:

- aspartame
- acesulfame potassium
- sucralose
- cyclamates
- saccharin
- thaumatin
- neohesperidine dihydrochalcone
- steviol glycosides
- salt of aspartame-acesulfame potassium

### 3 particularly problematic sweeteners:

According to the authors, "Aspartame intake was associated with increased risk of cerebrovascular events, and acesulfame potassium and sucralose were associated with increased coronary heart disease risk."

### Expert speak:

"No calorie artificial sweeteners such as aspartame, saccharin, and sucralose are commonly added to many 'diet' and 'sugar-free' processed foods like pastries, pudding, candy, soft drinks, and more.

Considering that artificial sweeteners are typically found in highly processed foods, I recommend limiting your consumption of them altogether. Some safer alternatives include natural options such as allulose, monk fruit, and stevia which do not seem to carry the same concerns.

Research suggests that heavy use of artificial sweeteners may actually lead to weight gain and obesity, and according to some animal trials, consuming artificial sweeteners may alter the gut microbiota and potentially increase one's risk of certain cancers, although more research is needed to substantiate these claims."

— Dr. Jeff Gladd

Source: Erika Watts, Medical News Today

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Please also subscribe to our YouTube channel for complete recordings of talks and orations.



Respected Members, One Great news is : long awaited AOGS APP is now available on iStore!  
Please click on the link below to download and please share your feedback with us!  
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Thank you! Team AOGS!

## EVENTS CALENDAR

- SOGOG- 9th to 11th December- Kevadiya colony
- AICOG 2023- 4th to 8th January- Kolkata
- ACOG 2023- 19th to 21st May- Baltimore, Maryland

## CONGRATULATIONS



**Dr. Sujal Munshi**

for being installed as Chairman of the Healthcare Task Force, Gujarat Chamber of Commerce & Industry

## CONGRATULATIONS



**Dr. Munjal Pandya**

YUVA FOGSI ORATION at West Zone Yuva FOGSI 2022 at Jabalpur, on 9th October, 2022



## BRCA: The Breast Cancer Gene



### Dr. Arati Gupte

MD, MICOG, Reproductive medicine Specialist

#### Introduction:

Breast cancer is one of the most common types of cancer. About 1 in 8 women (12%) will be diagnosed with breast cancer during their lifetime. It has a worldwide incidence of 12%. In India, it constitutes 30% of all cancers in females. It is the most common cancer type among urban Indian women.

#### What is BRCA?

Full form: Breast Cancer gene

It is of 2 types: BRCA 1- discovered in 1994 and BRCA 2 – discovered in 1995. BRCA 1 and 2 genes are present in all individuals. They are tumour suppressor genes. They recruit proteins like ATM, CHK2 etc which are DNA repair proteins. BRCA mainly recruits proteins to repair double stranded DNA breaks.

#### What are BRCA mutations?

These are usually point mutations in the gene sequence. They can also have CNV's (copy number variations) – deletions or duplications. BRCA mutation is a germline mutation, which is why it is hereditary. It is found in both sexes and has an autosomal dominant transmission- The offspring of an individual with a BRCA1 or BRCA2 germline pathogenic variant have a 50% chance of inheriting it.

It is the mutations in the BRCA gene and not the gene itself, that causes carcinomas.

BRCA 1 mutation: is usually associated with high grade triple negative carcinomas. Lung and distant lymph node metastasis are frequently seen.

BRCA 2 mutation: carriers typically develop hormone receptor positive carcinomas. Bone metastases are frequently seen. CNS metastases are more often associated with BRCA 2

The presence of BRCA mutations increases the lifetime risk of breast cancer to about 80% and ovarian cancer to ~40%.

#### BRCA Testing:

Who qualifies?

- h/o Ca breast at less than 50 years of age
- h/o ovarian cancer at any age
- h/o family member who is BRCA positive
- Strong family h/o breast, prostate, ovarian, colon or pancreatic cancer
- Ca in both breasts
- Male Ca breast
- Triple negative breast cancer

#### Advantages of testing:

Increased screening: screening can be done more often, at a younger age, which leads to early detection and prompt treatment. Preventive medications like tamoxifen / OCP's can be prescribed. Preventive surgeries (oophorectomy/mastectomy) can be planned.

In case of diagnosed breast Ca, BRCA testing before surgery can help to decide how radical the surgery and further treatment needs to be.

In case of a germline mutation in a family, prenatal and preimplantation genetic testing can be offered to avoid further transmission.

#### BRCA result interpretation:

Negative: the fact that there is no mutation present does not rule out a patient's chance of getting breast cancer, or even the possibility of a hereditary cancer syndrome in the family.

Variant of Unknown significance: This shows that there is a defect in the gene but it is not known whether this is associated with cancer risk. It requires further classification into a polymorphism or a mutation.

Positive: It shows that there is a mutation associated with the BRCA genes which shows an increased predisposition to breast, ovarian, prostate, pancreatic and other related cancers

#### BRCA myths:

1. "You don't need testing if you already have had cancer."- The chances of recurrence of breast cancer as well as development of other associated cancers is very high in BRCA positive patients. So testing is highly recommended
2. "If the family history is related to the paternal side of the family, hereditary transmission is not possible" - This is an autosomal dominant mode of transmission. The father may be a carrier, passing the mutation down to his daughters.
3. "I am a man, so I can't get breast cancer" - The estimated lifetime risk of breast cancer is 1–5% in male BRCA1-mutation carriers and 5–10% in male BRCA2-mutation carriers versus 0.1% in the general population.
4. "I don't want to know because there is nothing I can do" –see Advantages of testing

#### BRCA mutations in men:

Around one in 260 men (~0.4%) inherits a cancer-predisposing BRCA variant that increases their risk of developing prostate, pancreatic, and breast cancer and may affect the health of their family. Men require to be made aware of the risks as well as screening methods available to avail timely treatment.

## Psychological aspects of Fertility Treatments



### **Mallika S. Iyer**

Counseling Psychologist  
M.A. Counseling Psychology  
Trained Infertility Counselor

At the onset, the dominant reason, but not the only one, for a majority of people who try fertility treatments is societal pressure. Seems like a simple statement, but, it is impregnated (pun intended) with an extremely complex and intrinsic web of various emotions. Every person is a unique being, a product of their unique genes and the environment they were brought up in. The effect of a variety of experiences through life, along with a profound effect of traumatic experiences ( Trauma comprises of a lot of life events which include, but are not restricted to ,being subject to crimes, as generally assumed by society) . To elaborate a little further, traumas survive in the body of a person, not just his/her/ others, mind.

So with the above introduction, we can safely assume that a patient getting treated for infertility is coming in, carrying all of his/her personality and experiences. Common psychological issues in such patients are , low self esteem, anxiety, and a sense of being subjected to prejudices. Many may also be suffering from severe anxiety as well as depression.

The mind and the body are interconnected, one invariably affects the other. Therefore, psychological counseling by trained psychological counselors for such patients would be highly beneficial not only for better treatment outcomes, but also in screening, which patients would first need to address psychological issues before beginning treatment. Therapy for all patients as part of the ongoing treatment cycles would definitely help the patient become more emotionally resilient and prepared to go through the medical procedures as well as have reasonable expectations. The gynaecologist may also be helped, by getting a more cooperative and prepared patient. A relatively relaxed patient is better than a tensed and anxious one. This is especially important in patients undergoing IVF, who should undergo counseling even before starting treatment. A few therapy sessions would go a long way in achieving emotional stability and a mindset more prepared to go through IVF cycles.

The role of a psychologist, especially trained to offer therapy to infertile couples is also vital in providing sexual counseling, pertaining to the treatment plan. The patients may also have developed a false, distorted view of oneself in terms of sexuality, given the stress associated with being infertile. Therapy provides such couples with a professional and safe environment to express their medical as well as emotional concerns, where they are met with empathy and empirical support.

Stress in general is known to cause physical ailments. Hence if doctors and psychologists could work together as a team, to help patients undergoing IVF/IUI and other fertility treatments, make informed choices, be reasonable and be as stress free as possible, we could conceive, ( pun intended again!) a more promising future for successful fertility treatment outcomes.

Organized by :



# 45<sup>th</sup> SOGOG 2022

9<sup>th</sup>

10<sup>th</sup>

11<sup>th</sup>

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TENTCITY 2**

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3. Valley of Flowers
4. Zoological park and Jungle safari
5. Geodesic aviary domes
6. Pet zone- especially recommended for kids
7. Unity Glow garden which includes the 7pm Projection Mapping Show
8. Riverfront cycling with cycles available on rent
9. Dino Trail to see the replica of the Rajasaurus Narmadensis
10. Sardar Sarovar Dam view points
11. Panchmuli lake
12. Children Nutrition park
13. Arogya Van (Herbal Garden)
14. Cactus garden
15. Butterfly garden
16. Zarvani waterfall
17. River Rafting at Khalwani

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<b>Royal Cottage River View (Closed)</b>	<b>At Tent City 1</b>	<b>22,302</b>	<b>23,541</b>	<b>24,780</b>
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### Dr. PRAKASH PATEL

IVF & Infertility Specialist  
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Diploma in Sonography (Croatia)



### Dr. AJAY PRAJAPATI

MS. Gynec (Infertility & Foetal Medicine Specialist)

### Dr. PURVI SHAH

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Dr. Ushma Patel | Dr. Shetal Deshmukh

Dr. Khushali Shah | Dr. Rushi Patel | Dr. Krunal Modi

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### AWARDS & ACHIEVEMENT OF SNEH HOSPITAL & DOCTOR TEAM

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- Gujarat Awarded as **NATIONAL QUALITY ACHIEVEMENT AWARDS 2021** for Best Ivf & Infertility Surrogacy Centre of Gujarat & Ahmedabad.
- Awarded as "Gujarat NU GAURAV" for work in Healthcare sector by the **CHIEF MINISTER of Gujarat Shri. Vijay Rupani**. The felicitation was done considering extensive work of SNEH HOSPITAL in field of Infertility & IVF Treatment across Gujarat we announce proudly that we are the part of "**JOURNEY OF GROWTH & PROSPERITY OF GUJARAT, INDIA**"
- National Healthcare excellence award 2019 held at Delhi in presence of Health Minister of India Best awarded as a best IVF hospital of Gujarat
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- International health care award 2017 & certificate of excellence presented to "**SNEH HOSPITAL & IVF CENTER**" for best upcoming IVF & Women infertility hospital of gujarat
- International health care award 2017 & certificate of excellence presented to most promising surgeon in OBST & Gynec
- The best male infertility specialist & IVF center of india awarded by india healthcare award
- The best women's hospital & IVF center in gujarat by the Golden star healthcare awards

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