



Volume 2

Issue : 2 (May - Aug 2025)

# WE CONNECT

The Official Publication of WPF

**Theme : Me Day**

You cannot pour from an empty cup

Taking care of yourself is a form of strength!



F. L. Y  
First Love Yourself

# Content

1. Our Team .....	3-4
2. Editorial .....	5-6
3. Message from the Chairperson .....	07
4. Theme-Based Articles .....	8-21
• Power of Positive Psychology : <a href="#">Dr. Anju Virmani</a>	
• Unlocking Wellness The power of Yoga : <a href="#">Dr. Dristi Kothary</a>	
• Me Day : <a href="#">Dr. Barnali Bhattacharya</a>	
• Thriving Inside Out as an Adolescent : <a href="#">Siddhiksha Ramani</a>	
• The Power Of Pink : <a href="#">Dr. Amog Shahane</a>	
5. Women & Research .....	22-31
• Milk Bank : <a href="#">Dr. Leena Das</a>	
• My Journey in Pediatric Gastroenterology and Hepatology : <a href="#">Dr. Rimjhim Shrivastava</a>	
6. Women of Substance .....	32-36
• Reflection of My Journey : <a href="#">Dr. Leena Christ</a>	
• Miniature Gardens, Mighty Impact : <a href="#">Mrs. Anju Parakh</a>	
7. He & She: Legends Who Nurtured Generations .....	37-41
• Dr. Y K Amdekar : <a href="#">Dr. Aarti Kinikar &amp; Dr. Sangeeta Chivale</a>	
• Dr. Swati Bhave : <a href="#">Dr. Sunita Manchanda</a>	
8. He for She .....	42-46
• My Long term mentor in my Professional life journey : <a href="#">Dr. Swati Bhave</a>	
• A guiding light in my IAP journey : <a href="#">Dr. Bela Verma</a>	
• To Sir, With Love : <a href="#">Dr. Vibha Bafna</a>	
• Finding My Path Through His Wisdom : <a href="#">Dr. Meghana Phadke Sultania</a>	
9. She for She .....	47-53
• Brilliant, Powerful and Graceful Orator : <a href="#">Dr. Himabindu Singh</a>	
• Dr. Swati Bhave, Shaping Futures, Inspiring Lives : <a href="#">Dr. Shaileja Maine</a>	
• Like the Swati Nakshatra, Gentle, Strong, and Ever-Inspiring : <a href="#">Dr. Sangita Lodha</a>	
• Guided by Wisdom, Grounded in Humanity : <a href="#">Dr. Latika Bhalla</a>	
• When I am asked to talk about a legendary teacher : <a href="#">Dr. Shreelekha Joshi</a>	
10. Pearls of Wisdom : <a href="#">Dr. Shubha Phadke</a> .....	54-59
11. Snippets .....	60-62
• Work-Life Balance: A Tightrope Walk : <a href="#">Dr. Jagruti Sanghvi</a>	
• Balancing stethoscope to storybooks - A Journey : <a href="#">Dr. Sikha Agarwal</a>	
12. Travelogue : A Pediatrician's Journey Through the Sahyadris : <a href="#">Dr. Sangeeta Chivale</a> ...	63-64
13. Fun With Creativity .....	65
14. Women At National & International Front .....	66
15. Activities of WPF .....	67-71
16. Canvas of Creativity: Cover Page Design Entries .....	73--74

# Women Peadiatricians Forum



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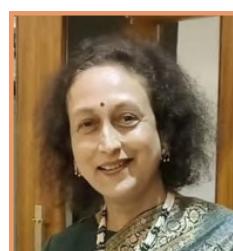
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# Editorial

## Theme: Me Day

Dear Readers,

### *Self-Care: The Strength Within*

As pediatricians and women, we naturally extend care to our patients, families, and communities—often at the expense of our own needs. This special issue of We Connect is dedicated to the vital yet often overlooked act of self-care—our “Me Day.” We are gently reminded that filling our own cup is essential, not selfish. As Katie Reed wisely said, “Self-care is giving the world the best of you, instead of what’s left of you.”

“Me Day” is more than a date; it is a mindset and a commitment to nurture ourselves—physically, emotionally, and spiritually. Our cover, artistically reflecting balance, is beautifully designed by Dr. Nisha Rajput, 2nd-year Pediatrics resident, under the guidance of Prof. Dr. Shweta Anand at LN Medical College, Bhopal.

We recognize that physician burnout is real, especially for women balancing many roles at home and at work. Self-care does not always require extravagance: even a few silent moments, slowly savoring a cup of tea, or setting firm boundaries can be powerful acts. These small choices replenish our energy and compassion, helping us return to our calling with renewed strength.

This issue is filled with inspiration and celebration. Our regular “Fun with Creativity” feature showcases the hidden talents of our community, reminding us that creative expression is a wonderful form of self-care. The Travelogue column offers enriching glimpses into journeys that broaden our outlook and revive our spirit. We proudly spotlight women from our fold who shine on national and international platforms, proving that excellence knows no boundaries.

Our monthly webinars continue to be a resounding success, thanks to rich scientific content and dynamic speakers. We are grateful for the unwavering strength and vision of our team, led by Dr. Sangita Lodha.

In this edition, we pay tribute to remarkable champions. Dr. Swati Bhave, in the spirit of “She for She,” exemplifies women uplifting women through her pioneering work in Adolescent Health. Equally inspiring is our “He for She” role model, Dr. Y.K. Amdekar, whose wisdom and mentorship empower doctors—both men and women—to reach new heights. We encourage you to explore these real-life stories shared by our own women pediatricians, whose lives have been shaped by our legends.

Our theme-based contributions offer practical tools to make “Me Day” a living reality. Joy, rest, positive psychology, and mindful yoga practices are explored by experts. A pediatric gastroenterologist shares her first-hand experience with children with GI problems, while Dr. Leena Das illuminates the quiet heroism of human milk donors.

In Pearls of Wisdom, Dr. Shubha Phadke’s words guide us with reflections born of experience. Stories of resilience, creative pursuits, and achievements fill these pages —each one a testament to women thriving at every level and locale.

This publication is a collective pause, a space where ideas, wisdom, and laughter meet—reminding us that our well-being matters, too. Investing in ourselves is not indulgence; it is a necessity—an essential act of self-respect and care.

As you read, may you feel seen, heard, and inspired—and, above all, at ease. Let this edition nudge you to care not only for the children entrusted to us, but also for the women we are, the professionals we strive to become, and the humans we must honor within.

“Me Day” is not just a date—it is a way of life and a strength we carry forward, together”.

*With strength and solidarity,*

## **Editorial Team**

**Prof. Dr. Aarti Kinikar**

**Dr. Poonam Bhatia**

**Dr. Paula Goel**

**Dr. Anita Patil**

# Chairperson's message

*For we connect publication*



While carrying the responsibility of leading this incredible organization. Life comes fast, but so often, it brings us exactly where we're meant to be. We begin with a clear message “Empowering each other” to “WE Connect”. It is a simple one but very powerful message inbuilt. W stand for women E stand for empowered Who are connected, united, devoted, determined, focused one. every member welcomed, respected, and given them

responsibilities which they are able to perform. And they do so. two things that matter most: friendship and trust. This is how we build strong Forum It is how we create meaningful Friendship and transform our problems into happy solution. It is also how we lead, not through titles or applause, but with humility, humanity, and heart. But let me be honest with you, this kind of leadership is not always easy. We're human and yes, we make mistakes.

We sometimes disagree even but understand each other with a brave heart as well. Together, we see a universe where people unite and take action to create lasting change, across the globe, in our communities, and in ourselves. The last part is essential, because transformation doesn't start with strategy. It starts with character and the way we treat one another. It starts with how we listen, how we support, and how we serve.

I humbly request you all to lead with that spirit. We build relation by heart and brain at the same time.. because we never think politically.. rather through healthy relationships. My tenure remained only for 4 months now, so open to new ideas. To think big, but also to think beyond these days month or years make a impact where ever we go, which must be lasting if we plan and act with continuity and vision.

Let us remember our key priorities: Every work / task / project / webinars / are a step toward happiness, empowerment, confidence. though I joined WPF in 2016/17.

I believe My fellow WPF FRIENDS believed in me and encouraged me to take on every new baby step to bold step so far and are always with me. Something comes in your life for purpose, that God decides for you.. my Convener to chairperson journey was not an easy task because it has changed my life by filling it with confidence, identity, courage and purpose, but above all, it gave me you: my friends, my life, my extended family around the country.

*Let's make next 4 months of my tenure more productive and thoughtful.*

Thanks

**Dr. Sangita Lodha**

*Chairperson Women Pediatricians Forum- 2024-25*

# Power of Positive Psychology – the importance of Connecting to Oneself



**Dr. Anju Virmani**

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Gautama Buddha said “The mind is everything. What you think, you become.” How we use this powerful tool is entirely up to us. For us lady pediatricians, wielding this power is particularly important, because we carry an enormous responsibility.

In a world that is not kind to women, we could not have come this far without the huge support of so many people - we have to pay this back.

Luckily our field makes it easy for us – we can positively influence and significantly change thousands of lives. A wise counsel for the parents (and grandparents) who accompany our patients; a guiding force for the children themselves; a role model for every young woman to be a strong, fearless, achiever; a sensible parent and grandparent in our own immediate and extended family; a sane, articulate voice for the wellbeing of children in our community.

How can we achieve all this? Only if we have deep inner resources: we can only give if we have something to give. Hindu, Jain and Buddhist philosophy has for centuries taught how to develop and maintain these inner resources. In the last few decades, scientific minds began attempting research in the study of human flourishing, focusing on what promotes wellness, happiness, optimal functioning.

In the spirit of the WHO dictum (1946) "Health is not merely the absence of disease..., but a state of complete ... well-being", the field of “Positive psychology” aims to move beyond the traditional focus on psychopathology, to prevent pathology and encourage and promote positive experiences and conditions in life.

The areas of research include positive emotions, character strengths, positive relationships, as well as the cautions needed.

Key to achieving the internal and external conditions that contribute to optimal functioning is the ability to “connect to oneself”: to listen with compassion and awareness to one’s own thoughts, emotions, and body signals. Self-connection comprises three interlocking capacities:

- Mindful awareness of inner experience in real time: the physical impact of this non-judgmental self-connection includes reduced cortisol, improved immune markers, and attenuated amygdala reactivity.
- Acceptance of the inner experience, whatever its valence, with self-compassion. Self-compassion activates the parasympathetic nervous system, replacing fear, anxiety and depression with a sense of calm which enables flexible problem-solving
- Alignment of action with deeply held personal values

A convergence of these capacities promote authenticity, which in turn, predicts higher life satisfaction, stronger relationships, and lower psychological distress. Several strategies can improve Self-Connection; these include:

- Mindfulness, i.e. awareness of the present moment, observing thoughts and feelings without over-identifying with them, worrying neither about the past nor the future. This is similar to Krishna's advice to focus on actions, not on the outcomes.
- Gratitude focuses on attention on assets - relationships, skills, opportunities - already present, thereby diminishing anxieties and feelings of deprivation.
- Optimism and hope promote energising behaviour aiming to improve the current status from what it is, to what it might be made.
- Character strengths enable recognising and deploying authentic qualities like curiosity, kindness, and perseverance in daily tasks. This has been shown to increase happiness and decrease depressive symptoms.

### **Going through literature and my own experience, some techniques to improve include :**

- Mindful breathing: Starting the day with Pranayam or even simple non-judgmental observation of one's own breathing for a few minutes, strengthens calmness and interoceptive awareness.
- Expressing gratitude and appreciation amplifies positive vibrations within oneself and those around. This is effective only if there is underlying sincerity and genuine gratitude for something which mattered, not saying something for the sake of it.
- Reflective journaling: Analysing and writing concretely in words, experiences and emotional triggers, helps in understanding them and how to improve responses. For example, we pediatric endocrinologists advise children with type 1 diabetes to monitor blood glucose and note them in columns along with diet and exercise variations. Once patterns emerge, making corrections becomes easier. So too, in the mental sphere.

- Compassion and hope: Journaling includes acceptance of situations as they are, along with the hope of improving them.
- Self-compassion: Acceptance should extend to oneself: and forgiving oneself for mistakes in order to strategize how to move forward. Change is not easy, but a positive attitude facilitates rather than blocks change.
- Identifying Strengths: along with identifying problems, makes it easier to handle challenges.
- Physical fitness: Exercising for minimum 60 minutes daily, even if it is 6 rounds of 10 minutes each, is essential. Harnessing Yogic practices can be very rewarding.
- Switching off: altering the micro-environment enables these techniques to work. Put limits on work-related stresses and screen time, especially at meal and sleep times: give oneself time to eat and sleep calmly, even with limited time. Allow the body and mind to soothe and heal, so they can function better.
- Nurturing Nature: caring for the world around us: protecting Mother Earth and all her children in whatever way we can, is healing. Growing, looking after, and surrounding oneself with plants; reducing environmental damage; having compassion towards all beings – creates positive vibrations which are reflected back.
- Benefiting from mantras: we Indians are fortunate to be surrounded by ancient wisdom in the form of extremely powerful texts and mantras. Sadly, we often just ignore them. Using even a small fraction of these resources can enhance our wellbeing and foster connectedness with the past, flowing into the future.

Harnessing these strategies together can create a virtuous cycle of optimized functioning. The “broaden-and-build” theory proposes that positive emotions (like joy, interest, contentment and love) broaden the mindset. This promotes creative actions, ideas and social bonds, and builds up physical, intellectual, social and psychological resources, which improve successful coping and survival. By contrast, narrowed mindsets are weighed down by negative emotions. For this reason, self-care is not selfishness, it's self-lessness.

Looking after one's physical, cognitive, social, emotional, and spiritual needs boosts physical and mental health and increases resilience. One can then handle challenges and build authentic relationships, while preventing burnout, and setting a positive example for others. Studies (including randomised controlled trials) of mindfulness programs and self-compassion training have shown psychological and biological benefits, which persisted on follow-up. Studies in the workplace showed that employees who practiced mindful self-reflection reported higher engagement, creativity, and ethical decision-making, with improved performance and less burnout.

There is no coin without two sides: effects always have the possibility of side-effects. One must take care to avoid excesses: obsessive self-absorption, and aiming for perfectionism can do harm rather than good. We are social beings, our lives embedded in group living: excessive self-introspection can create disharmony with family and society.

Working with, appreciating, and nurturing those around us can guard against this. The emphasis on acceptance and compassion is important as negativity and evil are real, and ups-and-downs are part of life. The downs and the dark side, of oneself and others, need to be acknowledged and accepted.

As pediatricians trained in modern science, we can benefit from the wonderful blend of scientific method with ancient wisdom offered by Positive Psychology, while being careful not to get side-tracked into pseudo-science and jargon. Emerging interdisciplinary research will enable further insights.

Now let us explore this combination of psychology with philosophy and neuroscience, to benefit ourselves and our patients, their families, and Society around us.

### **Suggested reading :**

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# Unlocking Wellness: The Power of Yoga for Women's Physical, Mental, and Emotional Health



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Yoga is a physical, mental, and spiritual practice that originated in ancient India over 5,000 years ago. The word "yoga" comes from the Sanskrit word "yuj" meaning "to unite" or "to join." It's a holistic practice that aims to unite the body, mind, and spirit, promoting overall well-being and balance.

## Benefits of Yoga:

- Physical Benefits:** Improves flexibility, balance, strength, and coordination.
- Mental Benefits:** Reduces stress, anxiety, and depression, while improving focus and concentration.
- Spiritual Benefits:** Cultivates mindfulness, self-awareness, and inner peace.
- The origin and history of yoga are rich and complex, spanning thousands of years.

## Ancient Roots:

- Indus Valley Civilization (3300-1300 BCE):** Early evidence of yoga-like practices and symbols.
- Vedic Period (1500-500 BCE):** Yoga mentioned in ancient Hindu scriptures, the Vedas.

## Development:

- Upanishads (800-400 BCE):** Philosophical texts exploring yoga's spiritual aspects.
- Bhagavad Gita (400 BCE):** A key Hindu scripture discussing yoga's role in spiritual growth.

## Classical Yoga:

**Patanjali's Yoga Sutras (400 CE):** A foundational text outlining yoga's eight limbs:

- Yamas (ethics)
- Niyamas (self-discipline)
- Asanas (postures)
- Pranayama (breathing techniques)
- Pratyahara (sense withdrawal)
- Dharana (concentration)
- Dhyana (meditation)
- Samadhi (absorption)

## Modern Yoga:

- 19th-20th centuries: Yoga's revival in India and introduction to the West.
- T. Krishnamacharya (1888-1989): An influential yoga teacher who developed modern yoga styles.

## Types of Yoga:

1. **Hatha Yoga:** Focuses on physical postures (asanas) and breathing techniques (pranayama).
2. **Vinyasa Yoga:** A flowing style of yoga that links movement with breath.
3. **Ashtanga Yoga:** A fast-paced, physically demanding style that builds internal heat.
4. **Yin Yoga:** A slow-paced, meditative style that targets deep tissue and joints.
5. **Restorative Yoga:** Uses props to support the body in relaxing postures.

## Key Components:

1. **Asanas (Postures):** Physical poses that promote flexibility, strength, and balance.
2. **Pranayama (Breathing Techniques):** Conscious breathing practices that calm the mind and energize the body.
3. **Meditation:** Focuses the mind, reduces stress, and cultivates inner peace.
4. **Relaxation:** Techniques to calm the mind and body, such as deep breathing and progressive muscle relaxation.

Yoga is a journey, not a destination. With patience, dedication, and an open mind, you can experience the many benefits of yoga and cultivate a deeper connection with your body, mind, and spirit.

**The Power of Yoga for Women:** Unlocking Physical, Mental, and Emotional Well-being

Yoga, an ancient practice originating from India, has become a global phenomenon, and its benefits for women are multifaceted. In today's fast-paced world, women often find themselves juggling multiple roles, and yoga can be a powerful tool to help them navigate the challenges of modern life.

## Physical Benefits

*Yoga offers numerous physical benefits for women, including:*

1. **Improved flexibility and balance:** Yoga helps increase flexibility, range of motion, and balance, reducing the risk of injuries and improving overall physical fitness.
2. **Reduced menstrual cramps and symptoms:** Certain yoga poses, such as Cobra, Cat-Cow, and Child's Pose, can help alleviate menstrual cramps, bloating, and other symptoms associated with PMS.
3. **Menopause relief:** Yoga can help reduce hot flashes, night sweats, and other symptoms associated with menopause, promoting a smoother transition.
4. **Improved bone density:** Yoga can help improve bone density, reducing the risk of osteoporosis and fractures, particularly important for postmenopausal women.

## Mental and Emotional Benefits

*Yoga also offers numerous mental and emotional benefits for women, including:*



- Reduced stress and anxiety: Yoga's calming effects can help reduce stress and anxiety, promoting relaxation and calmness.
- Improved mood and self-esteem: Yoga can help improve mood, reduce symptoms of depression, and enhance self-esteem and body image.
- Increased self-awareness: Yoga promotes self-awareness, helping women tune into their thoughts, emotions, and physical sensations.
- Better sleep: Regular yoga practice can help improve sleep quality, essential for overall physical and mental well-being.

## **Yoga for Specific Women's Health Issues**

- 1. Pregnancy and postpartum:** Yoga can help women navigate the physical and emotional changes associated with pregnancy and postpartum, promoting a healthier pregnancy and postpartum recovery.
- 2. PCOS and fertility:** Certain yoga poses, such as twists and forward bends, can help regulate menstrual cycles, improve fertility, and alleviate symptoms associated with PCOS.
- 3. Menstrual health:** Yoga can help regulate menstrual cycles, reduce menstrual cramps, and promote overall menstrual health.

## **Tips for Starting a Yoga Practice**

- 1. Find a qualified instructor:** Look for a yoga instructor who is experienced in teaching women's yoga or has knowledge of specific women's health issues.
- 2. Start slow:** Begin with gentle yoga practices and gradually increase intensity and duration as you become more comfortable.
- 3. Listen to your body:** Honor your body's limitations and take regular breaks to avoid injury or discomfort.
- 4. Make it a habit:** Aim to practice yoga regularly, ideally 2-3 times a week, to experience the full benefits.

## **Conclusion**

Yoga is a powerful tool for women, offering numerous physical, mental, and emotional benefits. By incorporating yoga into their lifestyle, women can improve their overall well-being, reduce stress and anxiety, and promote a healthier, happier life. Whether you're seeking to alleviate menstrual cramps, improve your mood, or simply feel more balanced, yoga can help. So, take the first step, find a qualified instructor, and start your yoga journey today!

## Me Day



### Dr. Barnali Bhattacharya

MD, DCH, FRSTM&H, DPSM, highly experienced pediatrician in Pune, specializing in pediatric asthma and sleep disorders. A Delhi University Gold Medalist in MD Paediatrics, she also has specialized training in Pediatric Asthma from the UK. With over 35 years of experience in general pediatrics and 25 years as an asthma specialist, she is a leading authority in managing children with allergic diseases.

Location : Pune

It was last Diwali. My clinic officially closes for three days to give the staff a festive break. I usually travel with family, but that year, everyone had different plans. So, I decided to celebrate Me-with Myself.

I booked three days at a retreat I had long thought was out of reach-Ananda in the Himalayas. It turned out to be one of the most memorable and fulfilling experiences of my life. On the way back, gazing at drifting clouds from my window seat, I recalled something many fellow guests had said: "You really value yourself. Wish we could do that." That got me thinking. Perhaps what I do intuitively, with consistency, has made all the difference.

People are often curious about my daily habits and routines. This seems like a good opportunity to share them with you, dear reader, as we walk a common path as paediatricians.

I wake up around 5:30 a.m., feeling restored after seven hours of sleep. My first thought is always: What a blessing to see a new day. I smile at myself in the mirror while brushing—an instant mood booster. Then comes a warm cup of water with ginger and lemon, which I sip as I greet my plants.

I drive ten minutes to the park, using the time to think about all I'm grateful for—it's surprising how long that list is once you start! At the park, I walk barefoot on the grass for earthing, and then lead a Qigong session for an hour. This ancient movement meditation, practiced under the open sky with the wind on my face and birdsong all around, brings deep joy and peace.

Teaching it has not only enhanced my own wellbeing, but also created a small, thriving community. Their gratitude keeps me going.

Back home, I brew an herbal tea and read the newspaper on my plant-filled balcony. Before my house help arrives, I squeeze in 30 minutes of dance. There was always a trapped dancer inside me—at 58, I set her free. Odissi is my chosen form. I'm still learning, but now also choreograph my own pieces.

Breakfast is a meal I cherish. It's a mix of cooked and raw: sprouted grains with a fistful of pomegranate and blueberries, something warm like poha, chila, or egg and toast. For over two decades, I've had a green smoothie daily-garden greens, curry leaves, tulsi, microgreens, basil, and even paan, blended with half an apple, lemon juice, cinnamon, rock salt, and pepper.

On my drive to work, I catch up with my children and sisters. Once I step into the clinic, my full attention turns to parents and children. Asthma care remains my life's mission, and helping children sleep better is another passion.

Between my two clinics, I squeeze in online sessions, lunch with friends, or the occasional salon visit. I've stopped colouring my hair-I now love the softness that grey brings to my face.

Evenings clinics are busy. The drive back long and quiet. The soft whoosh of the lift stopping at my floor signals a return to sanctuary. My many Buddhas seem to welcome me home. Dinner is light, and then it's time to wind down.

My night skincare routine-cleanse, tone, serum, and cream with a gentle face massage-feels like self-nurture. I always apply sunscreen during the day, and reapply when needed. At night, I lay out the next day's clothes, accessories and all-it's a calming ritual.

Before bed, I listen to music or a podcast, browse Facebook, and read some inspiring posts. At 10 p.m., my bedtime alarm gently reminds me: curtain call.

Looking back, I see how strong family bonds, deep friendships, and mentoring young colleagues have added richness to my life. Nature remains my greatest teacher. I travel often-it fills me with wonder. I enjoy café visits for a savoury treat and love watching films or concerts on weekends. I'm perfectly happy doing these alone too!

Life has taught me that everything is impermanent. My tattoo says, This too shall pass. I celebrate joys deeply but stay grounded. I float, not sink, during rough times.

Balancing physical, emotional, and spiritual wellbeing is essential. Let go of fear, doubt, and guilt. Embrace peace, joy, and hope. Each one of us is special. We must value ourselves, do meaningful things, and make a difference.

*The glow on our face? It comes from the contentment within.*

# Thriving Inside Out as an Adolescent



**Siddhiksha Ramani**

I'm a Liberal Arts student at Christ College, Bengaluru, with a focus on psychology and a passion for youth mental health. As India's Youth Ambassador for International Adolescent Health Week 2025, I engage in global conversations on well-being and emotional safety. Empathetic, observant, and a thoughtful listener, I strive to create spaces where adolescents feel truly heard and supported.

**Location : Bengaluru**

*"It's not selfish to love yourself, take care of yourself, and to make your happiness a priority. It's necessary."* - Mandy Hale

As adolescents, we are constantly struggling to find a balance between academics, extracurriculars, friendships, and other people's expectations of us, due to which we often end up neglecting ourselves. We are so caught up in overthinking about how others perceive us, that we try to reshape ourselves to fit in with our peers. In doing so, we risk losing our identity even before we've had the chance to truly understand ourselves.

Adolescence is a period of transition when hormones are at their peak and our bodies undergo rapid hormonal changes. For boys, this may mean having a deeper voice, growth spurts, muscle development, and the appearance of facial and body hair – all due to high levels of testosterone in their body. Similarly, for girls, it involves the beginning of their menstrual cycle, development of breasts, widening of hips, and the growth of armpit and pubic hair due to higher oestrogen levels.

These changes are natural, but they can feel extremely overwhelming and confusing, especially when they happen at different rates for different people and different body types. Apart from these physical changes, adolescents also undergo emotional changes. These changes are not overtly visible, but they are just as intense. They shape how we feel, socialize and connect with others. As hormones constantly fluctuate, mood swings become more and more common. One day we may feel like we're on cloud nine, and the next, we might feel overwhelmed or easily irritable. This can be very unclear, especially since we don't fully understand why it is happening. At these times, positive parental guidance can prove to be very helpful.

Adolescence also brings with it, a sense of self-awareness and independence. We start questioning who we are, what we desire and how we want to be seen by others in the world. Friendships and peers become significant and carry weight, usually influencing the way we speak, dress, behave or even the choices we make. On one hand, where supportive friendships can provide comfort, warmth and boost confidence, negative peer pressure can lead us to ignore our natural demeanour just to fit in. The dilemma between individuality and fitting in can leave adolescents feeling emotionally drained.

Along with this, many of us struggle with low self-esteem. With the physical changes taking place, it's easy to compare ourselves to others – be it in real life, or on social media. This gives rise to the feeling of “not being good enough”.

Influencers on their social media platforms like Instagram, YouTube, Snapchat, etc. glorify everything in a way that might immediately grasp the attention of the audience just to gain a few likes and views. They hide behind the curtains of filtered images, making us believe that ‘perfection’ is the norm when it barely exists in real life. When we mindlessly scroll through the pictures and reels of the supposedly “perfect” people on social media, we may develop the feeling of inadequacy. This comparison can lower self-esteem and give rise to bigger issues like body dysmorphia and create a pressure to conform to unrealistic standards.

Accepting the physical and emotional changes of adolescence is the first step towards self-care. Instead of suppressing our feelings, acknowledging them and being open to conversations with parents or experts along setting boundaries allows us to look after both our minds and bodies.

This empowers us and helps us navigate challenges with strength, confidence and resilience. Practicing self-care helps us feel stronger emotionally, be confident, stay balanced, and feel good about ourselves – even while dealing with peer pressure or low self-esteem. When we prioritize our well-being, we give ourselves the space to understand who we actually are and to thrive, inside and out. Self-care isn't selfish, it's essential.

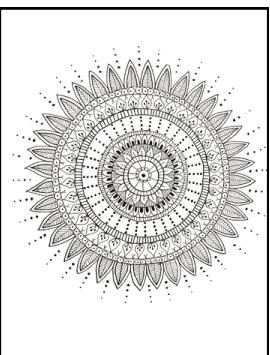
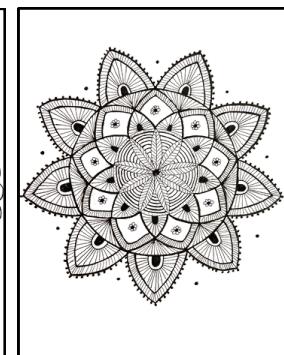
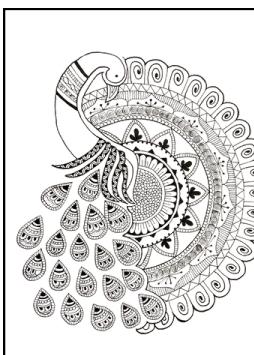
It helps us grow into bold and well-rounded individuals. Thriving isn't just surviving, it's about growing on the inside out. Start small, start now.

## — Fun with Creativity —

### Dr. Isha Singh



A practicing pediatrician from Indore, shares her one form of artwork. She loves doing various art and craft activities with her kids but some things she do for her own interests. She expresses that doing any kind pf creative activity is not only a way of presenting ones imagination as an artwork, it also helps us relax. It is her way to meditate (as she says she tried meditation a few times but can't really get a hold of it).



# THE POWER OF PINK: WOMEN & FITNESS



## Dr. Amog Shahane

Practising Paediatrician & Adolescent health expert

At Saanvi Children's hospital Kharghar Navi Mumbai

Consultant at Sri Satya Sai Sanjeevaani cardiac hospital Kharghar Navi Mumbai

Practising since the last 18 years. Keen interest in Adolescent medicine & community awareness programs for both kids & parents.

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*“If you want something said, ask a man; if you want something done, ask a woman.....”*  
Margaret Thatcher

And that's exactly what women are known to do; do everything possible to make the lives of others comfortable, family, friends, work colleagues, acquaintances, and the list goes on.... everyone but themselves.

Every year, we celebrate Woman's Day on the 8<sup>th</sup> of March, and this year was no different. It's the day when we women and the whole world celebrate the beautiful essence of a woman and reiterate what we all know about 'BEING WOMAN'. But, after all the shenanigans and celebrations, it makes one wonder if the women of today are actually celebrating themselves for the right things? What about self-care, their own emotional and physical well-being?

One of the most important, but much neglected aspect of a woman's being is their own fitness. It's alarming to know through studies that heart disease is the leading cause of death for the women of today and can affect women at any age and is responsible for one in five female deaths, but research has shown that only about half of today's women recognize that heart disease is their important killer after cervical cancer in India.

Regular physical activity has important health benefits for women. Sedentary women have an increased risk for cardiovascular disease, diabetes, hypertension, colon cancer and depression. Physical inactivity is more prevalent among women than men and participation in physical activity decreases as women age. So, what prevents women from pursuing their fitness seriously? Women report more barriers than men to exercise and reduced control over their decision to exercise. Normative female gender role responsibilities such as child care, housework and suffering from chronic illnesses makes it difficult for women to prioritize their own health until it becomes too late.

But the good news is that although almost everyone benefits from regular exercise, women may see bigger cardiovascular benefits than men- and in less time, too, according to a study published in the Journal of the American College of Cardiology.

They reported that women who exercised regularly were 24% less likely to die from any cause during the study period (as compared to men 15%) and had a 36% lower risk of fatal heart attack, stroke, or other cardiovascular event compared to women with a sedentary life style (as compared to men 14%), underscoring the importance of getting regular exercise for women's longevity and highlighting the potential for changing preconceived health outcomes!



So, how much exercise is enough exercise? It should always be a combination of strength training and aerobic activity to get the optimal health benefits. Women should aim for at least 150 minutes of moderate intensity (brisk walks, cycling, swimming, dancing) or 75 minutes of vigorous intensity aerobic activity (running, fast cycling, HIIT) per week along with muscle-strengthening activities at least two days a week.

The number of calories burned during exercise varies significantly depending on the type of activity, intensity and duration, as well as individual factors like body weight and metabolism. Generally, high intensity activities and those involving larger muscle groups tend to burn more calories.

For example, a 5 km run typically burns around 300-400 calories, but a 5 km bike ride can burn anywhere from around 47 to 70 calories, depending on the rider's weight and the intensity of the ride.

The intensity of the ride, whether it's a leisurely pace or a more vigorous workout, also plays a significant role in calorie burn. Swimming is a great full body workout where a vigorous swim burns around 680 calories per hour, while casual swimming burns around 476 calories per hour. Weightlifting can burn around 180-210 calories in 30 minutes, depending on weight. Other activities like calisthenics, low impact aerobics and stationary rowing also burn a significant number of calories.

But all this knowledge sometimes becomes so overwhelming that a person actually feels lost and doesn't know where to start from!!? This is a brief checklist of age-appropriate exercises for women, which will help in narrowing down the long list of suitable exercises and will help in kick-starting (literally) your fitness goals!

- Young women (20s – late 30s)), strength training & high intensity interval training (HIIT) are ideal for building muscle and improving cardiovascular health
- Middle-aged women (40s-late 50s) benefit from a mix of strength training, low-impact cardio, and activities like yoga to maintain flexibility and manage bone density
- Older women (60s and beyond) can benefit from exercises that focus on balance, mobility, and strength training such as chair exercises, walking and swimming.

But motivation and sustainability are the most common hindrances to accomplishing one's fitness goals, so here are a few tips to help you get going in your fitness yatra!!

- Start with small amounts of exercise and slowly add more as strength and endurance are built.
- Find a partner to exercise with to help you hold accountability and make it more enjoyable
- Try walking to do errands especially short distances
- Choose the stairs instead of the elevator
- Listen to music or fun podcasts during workouts
- Mix it up! Don't do the same workout every time. Switch between strength and endurance, and try different activities, such as walking, yoga, hiking, and others.



Living up to this year's Woman's Day theme as to 'Accelerate action', let's celebrate ourselves in the true sense by being fit, happy, healthy and spread & sprinkle our shine wherever we go. As someone truly said, "Confidence breeds beauty", let's become more confident & beautiful by becoming the fittest version of ourselves!!

# Milk Banking



## Prof Leena Das

Professor and HOD of Pediatrics, Vice-Principal (Development) at PGIMER & Capital Hospital, Bhubaneswar. Recipient of multiple honors including the FIAP Award 2020, Adarsh Doctor Award, and Sishu Visheshagyan Siromani Purbanchal Award. State master trainer for key child health programs like IMNCI, FIMNCI, and FBNC. Served in leadership roles across IAP and NNF, organizing national-level conferences and academic quizzes. Guided PG theses, contributed to WHO newborn projects, and actively advanced pediatric care and education.

Preterm babies are more prone to Necrotising enterocolitis and milk allergy if fed with non human milk or tin milk

Therefore, having a milk bank is cost effective and can provide pasteurised donor human milk which is essential for our newborns when mother's milk is not available for any reason. Donating milk helps a mother with engorged breast/inverted nipple and those mothers whose babies are sick and can not take direct feeding in SNCU & NICU. Also we can provide milk to a orphan child. The practice of donating milk is also there in our mythology. Krishna was fed with milk of Putana.

The first human milk bank was founded in 1909 in Vienna, Austria. Wet nursing was widely practiced in Europe during the 19th century in order to provide human milk for infants whose mothers were unable to provide milk for their infants. However, wet nurses were not always available or, when available, pursued unhealthy lifestyles or carried infections that could be transmitted through milk. An alternative to wet nursing was found in human milk banking. In India

The 1<sup>st</sup> Milk bank was established in India in 1989 at Sion Hospital Mumbai. At Present the number of milk bank is above 90. Human milk has a protective effect for premature infants who are at risk of necrotizing enterocolitis and sepsis - two medical conditions associated with high rates of mortality. Milk banks collect, screen, store, process, and distribute human milk when needed. The strict quality control procedures followed by milk banks ensure the safety of donor milk while retaining many of the beneficial effects of raw human milk.

The milk bank which collect and pools milk from mothers, pasteurises and stores milk are called Comprehensive Lactation Management Center (CLMC). Milk banks where mother comes, does expression and the milk is feed to their mother only are called Lactation Management Unit (LMU).

Human milk continues to be the only milk which is tailor-made and uniquely suited to the human infant. All lactating mothers should be encouraged to breast-feed their infants (Mothers own milk). If a mother unable to feed her infant directly, her breastmilk should be expressed and fed to the infant.

If mother's own milk is unavailable or insufficient, the next best option is to use pasteurized donor human milk (PDHM). In our country, the burden of low birth weight babies in various hospitals is about 20% with significant mortality and morbidities. Feeding these babies with breast milk can significantly reduce the risk of infections.

## **Need of milk banking,**

### **Absent or insufficient lactation:**

1. Mothers with multiple births, who can not secrete adequate breastmilk for their neonates initially.
2. For babies of non-lactating mothers, who adopt neonates and if induced lactation is not possible.
3. Abandoned neonates and sick neonates.
4. Temporary interruption of breastfeeding.
5. Infant at health risk from breastmilk of the biological mother.
6. Babies whose mother died in the immediate postpartum period.

## **Man Power**

One Incharge/nodal officer, 4-5 sisters/lactational counsellors, Data entry operator, attendants and sweepers round the clock or according the working hours of milk bank.

## **Who can donate?**

A lactating woman who:is in

- A.good health,
- B.good health-related behavior
- C.not regularly on medications or herbal supplements
- D.Who is willing to undergo blood testing for screening of Infections
- E.has enough milk after feeding her baby satisfactorily
- F.baby is thriving nicely.

## **Who cannot donate?**

### **donor is disqualified who:**

- A.uses illegal drugs, tobacco products or nicotine replacement therapy.
- B.regularly takes more than two ounces of alcohol or its equivalent or three caffeinated drinks per day.
- C.has a positive blood test result for HIV, HTLV, Hepatitis B or C or syphilis.
- D.is herself or has a sexual partner suffering from HBV, HIV, HCV and venereal diseases OR either one has high risk behavior for contracting them in last 12 months.
- E.has received organ or tissue transplant, any blood transfusion/blood product within the prior 12 months.
- F. is taking radioactive or other drugs or has chemical environmental exposure or over the counter prescriptions
- G.medicines which are known to be toxic to the neonate and excreted in breastmilk.has mastitis or fungal infection of the nipple or areola,
- H.active herpes simplex or varicella zoster infections in the mammary or thoracic region.

## Composition of donor milk

- Pooling of milk from multiple donors is then performed by the milk bank, with the result that the protein and fat content of pooled milk is quite stable and predictable
- Low variability is of particular advantage in the case of premature infants because low variability of composition of donor milk has the advantage that the infant's nutrient intake varies little from feeding to feeding and is essentially always known.
- On the other hand, some important protective components such as the oligosaccharides are essentially resistant to the effects of heat
- Given these effects of high-temperature processing, it would be expected that the protective effects of human milk might be diminished but not abolished altogether.
- Comparing formula with donor milk with regard to the incidence of necrotizing enterocolitis, the risk of necrotizing enterocolitis was non-significantly diminished in each trial.
- However, collectively, it showed a significant protective effect of donor milk compared to formula

**Table 3.** Effect of pasteurization on milk components (adapted from Arnold [1])

Component	Retention
Immune components	
C3 complement	0%
IgA	0–150%
IgG	0–82.8%
IgM	0%
Lactoferrin	0–123%
Lysozyme	0–393%
Cellular components	
Leukocytes	number decreased, 0% functionality
Lymphocytes	number decreased, 0% functionality
Enzymes, growth factors	
$\alpha$ 1-antitrypsin	61.8%
Lipoprotein lipase	completely destroyed
Bile salt stimulated lipase	completely destroyed
Esterase	completely destroyed
Transforming growth factor $\alpha$	93.9%
Transforming growth factor $\beta_2$	99%
Whey:casein ratio	whey decreased relative to fat
Nutrients	
Fatty acids	94–100%
Vitamin A	103%
Folic acid	65–95%
Vitamin B <sub>1</sub>	65–85%
Vitamin B <sub>2</sub>	77–94%
Biotin	102–110%
Niacin	100–106%
Pantothenic acid	93–98%
Vitamin B <sub>6</sub>	85–93%
Vitamin C	64–94%
Vitamin D	103%
Vitamin E	106%
Zinc	redistribution of zinc pattern

Some centers pool preterm and term babies mother's milk separately, so that it can be given to preterm or term babies respectively.



**Electric Breast Pump**



### **Collection of milk**

- Proper counselling
- Checking suitability for donation
- Getting written informed consent
- History taking
- Physical examination
- Sampling for laboratory tests
- Then donor is sent to designated breastmilk collection area:
- Breastmilk is collected by trained staff with hygienic precautions
- Method of breastmilk expression is chosen by the donor.
- Home collection of breastmilk is better avoided at present in our country due of the risk of contamination.

### **Method of collection**

- Washing the breast with water before expression is as good as washing with disinfectant
- There is no rationale in discarding foremilk.
- The breastmilk may be expressed manually (hand expression) or with breast pumps.
- Manual expression is a low cost and effective method of expression, and associated with less risk of contamination.
- Simultaneous breast expression in breastfeeding women is more efficacious than sequential breast expression
- Milk should be collected in properly labelled sterile container and kept in refrigerator

**Note: Drip milk (the milk that drips from the non feeding breast in some of lactating mothers) collected with the help of breast milk shells has been found to be nutritionally inferior with lower fat content and is not recommended for banking.**

## Refrigerators

- These are required to store the milk till the whole day's collection is over and the milk is ready to be mixed and pooled for further processing.
- It is also required for thawing the milk before being dispatched.
- Preferably two different units should be used for these purposes.
- If not possible, then strictly earmarked areas should be kept in one unit for each purpose.

## Pasteurizer

- It is essential to have a device to carry out heat treatment of donor milk at the recommended temperature of 62.5°C for a period of 30 minutes (Pretoria Holder pasteurization method) prior to its use.

## Deep freezer

- A deep freezer to store the milk at -20°C is essential in the milk bank.
- It is desirable to order a deep freezer with a digital display of the temperature inside it with an alarm setting.
- It is desirable to have two deep freezers for processed milk.
- First for storage of the milk till the post-pasteurization milk culture reports are available.
- The second deep freezer is used for storage of the pasteurized milk once the culture reports are negative and the milk is considered safe for disbursement.
- The first freezer should be locked at all times with access only to the technician, so that no milk is accidentally used till the culture reports are available.



Milk is Pooled under Lamellar flow and samples send for bacteriological investigation



For pasteurisation Arrow filter was used for water supply, so that there will not be any impurity.



A fixed number of bottles are pasteurised at one setting



### Container for expressed breast milk

- For collection and storing the milk, BPA free hard plastic containers made from poly propylene are to be used
- They are easily available, and are durable, easy to clean and autoclave.
- There is no significant decrease in nutrient composition on storage; however, cellular components are reduced.

**Table 2.** Effect of container type on milk constituents (adapted from Lawrence and Lawrence [18])

Constituent	Pyrex	Polypropylene	Polyethylene bags	Polyethylene (rigid)
Cells	stick to glass	maintain phagocytosis		
Fat-soluble vitamins	no effect	no effect	-	-
Micronutrients	no effect	no effect	-	-
Secretory IgA	-	-	lower	stable
Difficult to handle	-	-	very easy spill	
Recommended for milk	highly	no	no	yes

A hot air oven / autoclave in the milk bank or centralized sterile service department is essential for sterilizing the containers used for collection from donors, containers for pasteurization and the test tubes needed for sending milk culture samples to the microbiology laboratory.



Bottles are washed in luke warm soap water, so that fat does not stick to the container, then containers are boiled and then dried in dryer.

## Labeling and record keeping

- Human milk bank should have an operational objective of ensuring full traceability from individual donation to recipient,
- maintaining a record of all storage and processing conditions.
- Written standard operating procedures should be followed.
- Confidentiality of records should be maintained by the milk bank.

## Labelling

- Proper labelling at all levels is mandatory; from sterile container for collection of donation, pooling vessel and pasteurization container to storage containers.
- Labels should be water resistant and names and identifying details of donors, dates of pasteurization, batch numbers and expiry date should be clearly readable.
- Record keeping
- Record keeping at all levels should be meticulous for Donor Record File containing
- Consent form,
- donor's and her child's data,
- screening reports,
- pasteurization batch files.
- PDHM Disbursal Record File containing relevant data, including Recipient consent form.
- there seems to be no rationale for keeping records beyond five years(exception: where milk kinship issue is of paramount importance.



## Conclusion :

- It is clear that artificial formula will never provide the broad range of benefits of human milk.
- Given the high rate of preterm births in the country and level of malnutrition that ensues in the postnatal growth in such babies after birth, there is an urgent need to establish milk banks across the country, especially in the large neonatal units of all hospitals.

# My Journey in Pediatric Gastroenterology and Hepatology



## Dr. Rimjhim Shrivastava

Consultant – Pediatric Gastroenterology, Hepatology & Interventional Endoscopy Practicing across top pediatric hospitals in Raipur, Chhattisgarh. With 12+ years of experience, she is an expert in pediatric hepatology and endoscopy. She's an invited faculty, published author, and current Editor of Annals of Pediatric Gastroenterology and Hepatology.

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My journey into the field of Paediatric Gastroenterology and Hepatology has been one of passion, perseverance, and constant learning. From my early days in paediatrics at B J Medical College, Pune under the adept guidance of Dr. Aarti Kinikar, Dr. Prakash Gambhir, Dr. Anand Deshpande and Dr. V Venkatramani,

I was instilled with a passion for improving child health through compassionate care and evidence-based practice. Later, I was deeply drawn to the complexity of pediatric gastroenterology and hepatology, and the intriguing world of endoscopy.

This fascination led me to pursue specialized training at Post Graduate Institute of Medical Education and Research, Chandigarh under the expertise of Late Professor Dr. B R Thapa where I gained not only clinical acumen but also a deeper understanding of the emotional and social dimensions of caring for young patients and their families.

Over the years, I have had the privilege of diagnosing and managing a wide range of disorders, from neonatal cholestasis to inflammatory bowel disease often witnessing how timely intervention can transform a child's life trajectory. My involvement in academic research, case discussions, and multidisciplinary collaborations has further enriched my practice, enabling me to contribute to advancements in this evolving specialty.

The journey has been both humbling and inspiring, shaped by my mentors, colleagues, and most importantly, my patients, who teach resilience every day. As I continue, my focus remains on delivering compassionate, evidence-based care, advancing knowledge in the field, and inspiring the next generation of specialists in Paediatric Gastroenterology and Hepatology.

My emphasis in my practice has been endoscopic interventions for various diseases as portal hypertension, esophageal stricture dilatation and foreign body extractions (Fig 1). Also, I am focused towards research and publications.

Here are short summaries of my recent publications in the text book of pediatric gastroenterology and hepatology and Indian Society of Pediatric Gastroenterology Hepatology And Nutrition journal.

## 1. Disorders of the Stomach and Small Intestine ( *Shrivastava Rimjhim, Srikanth P. Disorders of stomach and Small Intestine. In: Sibal A, Gopalan S, editors. Textbook of pediatric gastroenterology, hepatology and nutrition. 2nd ed. New Delhi: Jaypee Brothers Medical Publishers; 2025. p. 33-54.* )

This chapter reviews congenital, infectious, neoplastic, and functional conditions affecting the pediatric gastrointestinal tract.

- **Stomach – Embryology & Congenital Anomalies:** The stomach originates from the distal foregut, undergoing rotation, curvature formation, and epithelial differentiation.

Rare anomalies include gastric atresia/stenosis, duplication cysts, volvulus, infantile hypertrophic pyloric stenosis (IHPS), and microgastria. Presentations range from neonatal nonbilious vomiting and failure to thrive to abdominal mass or obstruction. Diagnosis uses imaging (X-ray, ultrasound, contrast studies) and treatment is mostly surgical.

- **Gastritis & Peptic Ulcer Disease:** Gastritis is mucosal inflammation, while peptic ulcer disease (PUD) is deep mucosal injury. In children, *Helicobacter pylori* is the main cause of primary gastritis/PUD. It is acquired in early childhood and linked to chronic gastritis, ulcers, and, in adults, gastric malignancy. Diagnosis involves invasive (rapid urease test, histology) and noninvasive (urea breath test, stool antigen) methods. Standard eradication uses triple therapy (PPI + two antibiotics). *H. pylori*-negative gastritis may result from prior therapy, PPI use, autoimmune, or infectious causes; management is supportive.
- **Gastric Neoplasms:** Extremely rare in children (<0.1%), with lymphoma most common, followed by adenocarcinoma, gastrointestinal stromal tumors, teratomas, and polyps (sporadic or syndromic). Symptoms include pain, vomiting, bleeding, and abdominal mass. Management depends on tumor type and stage.
- **Small Intestine – Embryology & Anomalies:** Formed from midgut rotation and elongation, anomalies include duodenal atresia/stenosis (double-bubble sign), duplication cysts, malrotation/volvulus, jejunal/ileal atresia, and megacystis-microcolon-malrotation-intestinal hypoperistalsis syndrome (MMMIHS). Presentations vary from neonatal bilious vomiting to chronic abdominal discomfort; surgery is often required.
- **Small Intestinal Bacterial Overgrowth (SIBO):** SIBO is excess colon-type bacteria in the small bowel due to anatomical, motility, or immune defects, causing diarrhea, steatorrhea, malnutrition, and vitamin deficiencies. Diagnosis uses duodenal aspirate culture or breath tests; treatment includes antibiotics, probiotics, and nutritional support.

The chapter underscores early diagnosis, appropriate imaging, and timely surgical or medical management to improve pediatric outcomes

**2. Infantile Colic Revisited (Mohanty, NC & Shrivastava, Rimjhim. (2025). Infant Colic Revisited. Annals of Pediatric Gastroenterology and Hepatology ISPGHAN. 6. 58-62. )**

Infantile colic is a benign, self-limiting condition affecting 5–40% of infants, typically beginning at 2–3 weeks of age, peaking at 6 weeks, and resolving by 12–16 weeks. It is characterized by inconsolable, recurrent crying without an identifiable cause in otherwise healthy infants under 5 months, as per the Rome IV criteria. Colic episodes, often in the evening, are abrupt in onset, high-pitched, and associated with tense abdomen, knee flexion, and flatus, and are unrelieved by feeding or consoling.

Etiology is multifactorial, involving gastrointestinal factors (gut hypersensitivity, dysbiosis, immaturity, altered gut hormones, possible inflammation) and non-gastrointestinal factors (maternal stress, poor parent-infant bonding, smoking, antenatal stress). Conditions such as GERD, cow's milk protein allergy, and lactose intolerance can mimic colic and should be excluded.

- **Management** starts with a detailed history, physical examination, and exclusion of red flags (persistent vomiting, fever, poor weight gain, abnormal neurology, bloody stools). Behavioral management is the mainstay: parental education on the benign nature of colic, reassurance, and support to reduce fatigue and stress. Exclusive breastfeeding should be encouraged; proper feeding, burping, and upright positioning after feeds are advised. Creating a calm environment during episodes and avoiding overstimulation can help.
- **Dietary** changes may benefit some infants-maternal elimination of potential allergens for breastfed infants and use of hypoallergenic or hydrolyzed formula for formula-fed infants. Soy formula may help in selected cases but is not recommended under 6 months without strong indication.
- **Pharmacologic options** have limited roles: simethicone shows no benefit; dicyclomine is contraindicated in <6 months; PPIs should be reserved for proven GERD. Probiotics, particularly *Limosilobactillus reuteri* DSM 17938, show some benefit in breastfed infants, but evidence is insufficient for routine use.
- **Prognosis** is excellent, with spontaneous resolution by 5–6 months. Although no proven therapy exists, about 90% improve with counseling, behavioral strategies, and dietary adjustments, emphasizing reassurance and monitoring for warning signs.



Fig 1: Gastrointestinal foreign body extracted endoscopically in my practice

# More Than Medicine: A Reflection on My Journey as a Pediatrician in Abu Dhabi



## Dr. Leena Christ

A Pediatric doctor in Abu Dhabi with over 11 years of experience in the UAE and India. As a trusted child healthcare expert in Abu Dhabi, she provides comprehensive care for children of all ages. Known for her warm and professional approach, Dr. Leena is also a skilled baby and child doctor in Abu Dhabi, with a special focus on early intervention and developmental support as a child development specialist. Graduated in medicine (MBBS), Diploma in Child Health (DCH) in 2006. (DNB) Paediatrics training from Mumbai Port Trust Hospital. Obtained MRCPCH from the Royal College of Paediatrics and Child Health (UK) in 2015.

### A Decade in a White Coat

My formative years in India, during both medical school and postgraduate training, laid the groundwork for the doctor I am today. The clinical exposure I received, often in high-pressure, resource-limited environments, taught me to think critically, adapt quickly, and never take the patient-doctor relationship for granted. The influence of dedicated teachers, supportive mentors, and my fellow students played a crucial role in shaping not only my clinical skills but also my professional identity.

When I first arrived in Abu Dhabi in 2013, I carried a suitcase full of memories and a heart full of hope. As a pediatrician from India, the move was both exciting and daunting—a leap into unfamiliar systems, languages, and expectations. I was drawn by the chance to grow personally and professionally, and to contribute meaningfully to a diverse and dynamic healthcare landscape.

The city's skyline shimmered with promise, and beneath its modern façade lay a rich tapestry of culture, resilience, and community. I came to care for children, support families, and ultimately, to build something lasting. What followed was a decade filled with learning, reflection, and quiet perseverance.

### My Professional Journey: A System of Contrasts

My first job was at Burjeel Hospital, a busy multi-specialty facility. Due to local regulations, I was licensed only as a General Practitioner, despite my pediatric specialization. Though this restriction was frustrating, I used the time to observe, adapt, and understand the system. Two years later, I earned my specialist pediatric license and joined a clinic under NMC Healthcare, where I could finally practice in full scope.

During my few years of practice in India, the clinical landscape was markedly different from what I encounter in the UAE. Many of the cases I managed revolved around a wide range of infectious diseases, undernutrition, anemia, and many other chronic illnesses—conditions closely tied to poverty, limited access to healthcare, and systemic resource constraints. Treatment decisions were often shaped not just by medical guidelines but also by a family's financial situation. Despite these challenges, the work was deeply fulfilling, as each small recovery carried great meaning.

Above all, it was the patients themselves-resilient, trusting, and diverse- who truly honed my ability to listen, empathize, and make meaningful clinical decisions. That early training continues to guide me in Abu Dhabi, giving me confidence in my judgment and a deep-rooted trust in the values of compassionate care and lifelong learning.

In contrast, pediatric practice in Abu Dhabi involves a different set of clinical priorities. Patients here typically have better access to healthcare and are well-covered by insurance, enabling more comprehensive evaluations. However, the hot and humid climate limits outdoor activity for much of the year. Children tend to rely heavily on indoor play, and when this is coupled with excessive screen time and easy access to fast food, I've observed a concerning rise in childhood obesity, screen addiction, mental health concerns, and even autism. Additionally, cases of food allergy, asthma, allergic rhinitis, and atopic eczema are notably more prevalent in this region. These shifts reflect the broader lifestyle and environmental influences on child health in the Gulf, offering a very different, yet equally important, set of challenges for a pediatrician.

Working in the UAE brought many professional revelations. The healthcare system here is well-structured, evidence-based, and continuously evolving. Insurance coverage allows better access to diagnostics and referrals. The resilience of the system during COVID-19 was commendable, and the country's commitment to safety, innovation, and quality infrastructure is evident. Salaries are competitive, and the standard of living is high.

However, corporate healthcare has its limitations. Quantity often takes precedence over quality, and the emphasis on patient volume and rigid documentation can leave little room for holistic care.

As a physician guided by ethics and a deep commitment to patient-centered care, I often find myself navigating the delicate balance between institutional expectations and my personal values. While efficiency, protocols, and system-driven metrics are essential components of modern healthcare, I believe in preserving the human connection at the core of healing. Each child is more than a diagnosis-they are part of a broader story that includes the unique circumstances and emotional realities of their families. Within that context lies the true heart of pediatric care. Adding to this complexity is a quiet but persistent concern: job insecurity. Despite experience and dedication, working in the private healthcare sector-especially as an expatriate-can mean dealing with uncertainty due to licensing shifts, administrative changes, or economic restructuring. It is a subtle, ongoing pressure that shapes the professional lives of many. In such an environment, I often find myself having to strike a careful balance between maintaining productivity and upholding the quality of care that forms the essence of my principles-an effort made not just for professional integrity, but also to safeguard job stability.

### **Woman in Medicine: Struggles and Strengths**

Being a female pediatrician comes with both blessings and burdens. I've found that mothers are often more open and trusting with me-particularly when discussing sensitive concerns such as their struggle with postpartum emotions, breastfeeding, feeding difficulties of a toddler or even behavioral issues of a teenager. That connection is one of the most rewarding parts of my work.

Over the years, I've come to understand that effective communication is the cornerstone of meaningful pediatric care. Whether it's providing nutritional guidance, supporting a mother silently struggling with the demands of early parenthood, helping a teenager navigate obesity, or breaking difficult news to a family-how we communicate can deeply impact outcomes. Health education has naturally become a central part of my day-to-day practice, empowering parents to make informed decisions and feel supported. More recently, as an advocate for gentle parenting, I've begun introducing families to the concept of emotional intelligence-helping them understand how to raise emotionally aware, empathetic and resilient children. It's in these everyday conversations that I see the true power of guidance, trust, and connection in building healthier futures.

However, challenges remain. Pay disparity is real-female doctors continue to earn less than their male counterparts for equivalent roles. After I became a mother, I was still expected to take night calls, attend emergencies, and keep up with full-time duties-without adjustment. The system, while progressive in some ways, often overlooks the emotional and logistical load borne by working mothers.

Even so, I have chosen to hold fast to my values: patient dignity, clinical integrity, and a refusal to compromise quality for convenience. These are the pillars that guide me, no matter the setting.

### **My Personal Journey: Living Between Two Worlds**

While I've grown professionally, my personal journey as an expatriate mother has not been without sacrifice. Being far from extended family and close friends has been one of the deepest emotional challenges. The support system I once took for granted is now replaced by WhatsApp calls and brief family visits.

After the birth of my daughter, I struggled immensely to find balance. Managing a demanding job while raising a child without nearby family support was one of the most trying phases of my life. Like many expat mothers, I felt the stretch-pouring into both career and caregiving without reprieve. Thankfully, I've been fortunate to meet wonderful colleagues-some of whom became mentors and close friends. Their presence helped me navigate the loneliness and find strength during difficult times. Many of the families I care for face similar struggles-raising children in nuclear households, often without the traditional village to rely on. Behind every patient interaction is a deeper story of fatigue, hope, and resilience.

**A Quiet Conclusion :** Over the past ten years, Abu Dhabi has become more than just a workplace. It is home. The warmth of this community, the shared strength of fellow expats, and the joy of watching my young patients grow have all become part of my life's fabric. It's where I've matured as a doctor, a mother, and a woman. It's where I've faced contradictions, embraced growth, and found clarity in what truly matters.

To every young doctor, every working mother, and every expatriate professional charting uncertain waters-your journey is valid, and your story matters. Stay grounded in your values. Let compassion be your compass. And remember: even in a system that moves fast, you can still make a difference-one child, one family, one quiet act of care at a time.

# Miniature Gardens, Mighty Impact: The Green World of Anju Parakh



**Mrs. Anju Parakh**

State Women President – Mahavir International  
Skill Tutor  
Environmental Advocate  
Social Impact Leader

[Anjuparakh387@gmail.com](mailto:Anjuparakh387@gmail.com) | Location : Chhattisgarh



In a world where space is shrinking but dreams are expanding, Mrs. Anju Parakh has found a way to merge her passion, creativity, and purpose into something extraordinary. An educator, environmentalist, and social change maker, Anju has turned her life into a flourishing green journey-both literally and figuratively. Through her handcrafted miniature gardens, she brings nature into even the smallest urban corners, proving that passion, when nurtured, can grow into a living legacy.

Anju's journey is rooted in her childhood in Rajnandgaon, a modest town in Chhattisgarh. She was born into a family of farmers, where her father-an experimental and passionate agriculturist-fostered her love for nature. His hands-on teachings in soybean and floriculture, coupled with visits to art exhibitions, sparked Anju's lifelong interest in both farming and creativity. She grew up not just learning about soil and seeds, but also about color, composition, and creation.

That foundation blossomed over time into a unique hobby-turned-enterprise. For over seven years now, Anju has been crafting intricate miniature gardens-lush little worlds contained within a few inches to a foot of space. These aren't just tiny planters; they're themed green landscapes built with artistic precision and botanical knowledge. From indoor plants and cacti to medicinal greens, each miniature garden is a fusion of aesthetic beauty and ecological awareness.



What's more remarkable is that Anju has had no formal training in horticulture or design. Her skills were honed entirely through experimentation, patience and unrelenting curiosity. She has even managed to grow microscopic plants as small as one millimeter, nearly invisible to the naked eye.

By modifying stems and shaping leaves, she sculpts living art pieces that add serenity and greenery to small modern homes often deprived of natural beauty. These tiny gardens, priced between ₹500 and ₹5000 depending on size and materials are more than décor-they are a statement of sustainability, mindfulness, and innovation



Using quilling, craft techniques, and best-out-of-waste materials like walnut shells, Anju infuses each piece with character and care.

Her creations have found homes across the region and are admired for both their visual charm and their deeper message of ecological balance.



But Anju Parakh's impact doesn't stop at mini gardens. As the State Women President of Mahavir International, she has spearheaded numerous humanitarian initiatives-from organizing large-scale eye camps to distributing baby kits to new mothers in underserved communities. She is also a seasoned skill tutor, having empowered over 10,000 disabled children to earn a livelihood through art and creativity.

Her terrace garden, brimming with hundreds of plants, serves as both a sanctuary and a classroom.

Whether she's leading eco-awareness programs or nurturing a fresh crop of young learners, Anju's message is clear: sustainable living and social upliftment go hand in hand.

A woman of many talents and a heart rooted deeply in nature, Anju Parakh continues to redefine what it means to grow-not just plants, but lives, hope, and change.

## Dr. Y K Amdekar :

### A Torchbearer of Clinical Pediatrics in India

In the vast landscape of Indian pediatrics, very few names have created a legacy as enduring and inspiring as that of Dr. Y K Amdekar. A name synonymous with humility, excellence, and unwavering dedication, Dr. Y K Amdekar continues to shape the future of Indian pediatric medicine through his clinical acumen, teaching, leadership, and above all, his humanistic approach.

**Early Life and Academic Foundations :** Born before the dawn of independent India, Dr. Y K Amdekar's career spans a remarkable era of transformation in Indian healthcare. He completed his MBBS and MD in Paediatrics from the Bombay University as well as DCH from the College of Physicians and Surgeons. From the very beginning, his commitment to both academics and clinical pediatrics set him apart.

**The Professor and the Clinician :** Dr. Y K Amdekar began his academic career at the prestigious Grant Medical College, Mumbai, rising through the ranks from Lecturer to Honorary Professor. His teaching journey did not end with formal retirement. Instead, it took a new shape as he continued to guide DNB students, delivering sessions that were not only intellectually enriching but deeply practical. What made his teaching style unique was his insistence on a pure clinical approach. He emphasized the power of listening to patients, mastering the art of detailed history taking, and sharpening observation skills—an approach that has created generations of ethically grounded, critically thinking pediatricians.

**A Champion of Group Practice :** While many clinicians choose the path of individual practice, Dr. Y K Amdekar envisioned the benefits of group pediatric practice long before it became a norm. He pioneered and sustained the model successfully for over three decades, offering both academic and practicing pediatricians a structure that fosters collaboration, continuity, and shared learning.

**Leadership Beyond the Clinic :** Dr. Y K Amdekar's contribution to Indian Academy of Pediatrics (IAP) is nothing short of monumental. He has held several key positions including Honorary Secretary, Honorary Treasurer, and eventually President of IAP in 1995. His impact, however, goes far beyond titles. He has been a vital part of numerous IAP consensus statements and clinical guidelines, always promoting clarity, ethics, and relevance in pediatric care. His influence transcends national boundaries—he has served as Regional Advisor for Asia with the Royal College of Paediatrics and Child Health (RCPCH) and continues to be an examiner for MRCPCH, inspiring pediatricians across the continent.

**A Voice of Reason in the Pandemic Era :** When the world stood still during the COVID-19 pandemic, Dr. Y K Amdekar did not. He became a beacon of calm and wisdom during chaos. Through a series of online teaching sessions, he continued to guide postgraduate students across the country.

His ability to break down complex clinical cases into logical steps reassured young doctors navigating the uncertainty of the time. These online interactions were not just academic in nature—they were deeply therapeutic for the medical community dealing with stress and information overload.

**STEER and Awesome: Nurturing Minds** : Dr. Y K Amdekar played a pivotal role in STEER (Sensitizing to Think Enabling Excellence and Rationality), a program that instilled structured clinical reasoning among pediatric postgraduates. Similarly, his sessions in “AWESOME”—another academic initiative focused on reinforcing strong clinical foundations—stood out for their interactive, reflective nature. In a world increasingly dependent on investigations, his approach reminded students that the patient remains central to every diagnosis and decision.

Beyond his individual academic contributions, Amdekar sir is the first to acknowledge the strength of teamwork. For the past 25 years, he and his team have made the Thursday Clinics a hub of clinical learning. Along with his group of eight practicing pediatricians, he has also sustained an innovative YouTube channel, consistently uploading 10-minute academic videos every Tuesday and Friday without fail. Together, they have conducted over 200 interactive case-based programs across the country, introducing unique modules such as diagnosing purely from growth charts or by keen observation alone. *True to his humility, he emphasizes that “it has been a group activity, and I cannot take credit for it.”*

**Mentor to Many, Humble to All** : Despite his towering achievements, what makes Dr. Y K Amdekar truly remarkable is his humility. He remains approachable, grounded, and genuinely invested in the growth of every student and colleague. He does not shy away from spending hours guiding a young postgraduate through a difficult case or providing feedback on their clinical approach. His authored books, especially the Grand Rounds Series, are widely read and revered. But it is his spoken words, shared during bedside clinics, Zoom calls, or informal discussions, that leave an indelible mark on the listener's mind.

**Carrying the Torch Forward** : Today, when pediatric education is evolving with new technologies, apps, and AI tools, the wisdom of Dr. Y K Amdekar serves as a timeless foundation. He reminds us that amidst all advancements, the core of medicine lies in empathy, curiosity, and ethical responsibility.

As we celebrate inspirational figures in the WE Connect forum, Dr. Yeshwant Amdekar stands tall—not just as a legendary pediatrician, but as a mentor, philosopher, and guide. His life is not just a biography but a roadmap for anyone who wishes to combine clinical excellence with academic integrity and compassionate care.

*Let us salute the Master Teacher, the Clinical Luminary, and above all, the humble human being, who continues to inspire and ignite young minds.*

**Dr. Aarti Kinikar**  
**Dr. Sangeeta Chivale**

# Dr. Swati Bhave: A Visionary Mind, A Leader at Heart

*There are people who do not just walk the path of life,  
they create new roads for others to follow.*

Dr. Swati Bhave is one such shining star – a legend in adolescent health – a Visionary, A Pioneer, and A Tireless advocate for the well-being of young minds and bodies. She is not just an entrepreneur but a trailblazer who transformed adolescent health into a movement. She stands as a towering inspiration whose name is synonymous with dedication, excellence, and empowerment in Adolescent Health. Her journey continues to guide, mentor and inspire all of us.

**Highlights of Early life, Career and Achievements :** Dr. Swati Y. Bhave life journey is a legacy of excellence and Accomplishment. She is an Internationally renowned paediatrician and adolescent health expert with over 40 years of clinical and teaching experience across 4 medical colleges in Maharashtra and 4 corporate hospitals Mumbai, Delhi, and Pune. She has served as a Visiting Professor at Western Michigan State University (2008, 2018) and as a Research Scholar at Massachusetts General Hospital and Harvard Medical School in Medical Informatics (1989–1990). She holds fellowships from both the Indian and American Academies of Paediatrics and was awarded Honorary Professor by the Indian Medical Association (2017-2020). She has received extensive international training in medical informatics, intensive care, lactation management adolescent medicine and disaster management. Her work has earned her numerous national and international honours, including the Life time achievement awards by Maha AHA ( 2025 ) and IAP Research chapter (2019 ) IAP Shantilal C. Sheth Oration (2020), IMA Women Empowerment Award (2018), and IJCP Doctor of the Year for Adolescent Health (2011). She has delivered several prestigious orations and was recognized by the Indian Cancer Society as one of the 25 Women Achievers in Delhi (2004) and participated in a professional fashion show. With 19 research awards and multiple recognitions from AAP, IPA, and IAAH, Dr. Bhave remains a leading voice in adolescent health and paediatric care.

**Breaking New Ground in Paediatric Leadership :** A true pioneer in the Indian Academy of Paediatrics (IAP), she established several landmark initiatives. She was the **founding force behind the IAP Task Force on Adolescent Health(2000-05)** introduced the **IAP Postgraduate Pediatric Quiz** (1997) and as **General Secretary** made a bold move to make the **Undergraduate Quiz free from pharmaceutical sponsorship**. Earlier, she **initiated the IAP Computer Group (1992) and Disaster Management Group (2004) - both ahead of their time**. Over the years, she has served as Chairperson, National Coordinator, and Convener for numerous high-impact IAP activities, including Pulse polio, PALS,Jenners symposia for vaccines – co-editor of the first edition of IAP Guidebook of Immunisation in 1997, FinanceWebsite and conference guidelines. She also played a major editorial role in several key IAP publications – guidelines and training manuals in - Adolescent health, HIV AIDS, safe Injection practices, disaster management, to name a few. She has held central leadership positions in CIAP that **very few women have attained**.

She was the second and only woman **AAA -Academic Affairs Administrator (1992-93), the third woman Treasurer (1994-95), the third woman HSG (1996–1997), and the 7<sup>th</sup>woman President of CIAP in 2000** after a gap of 13 years and was awarded **the Lady Paediatrician of the millennium**. Her visionary leadership and commitment to integrity, inclusivity, and innovation have left an enduring legacy within IAP and beyond.

**Global Leadership - A voice for Adolescents :** She has contributed extensively to global child and adolescent health through her work with **WHO, UNICEF, UNFPA, & various international bodies**. She served on the **WHO Technical Steering Committee (Child & Adolescent Health-2009-10)** and the **HPV Vaccine Advisory Committee-(2010-11)**. She was faculty for WHO's adolescent orientation training programs OP. Her career reflects a legacy of firsts, global collaboration, and unwavering commitment to youth health and well-being. Her leadership extended to professional organizations such as the **International Pediatric Association (IPA)**, (2001-2013) where she was **Executive Officer and Program Coordinator** - the first from the Indian Academy of Pediatrics (IAP) to hold the position - and represented South East Asia at the **UNGASS Summit** at the United Nations in 2002. She also established Adolescent Health as a program area in IPA and was IPA representative for adolescent health to WHO in (2008-13) and developed an international adolescent training module for pediatricians working with WHO experts, which trained over 250 in IPA congress in Johannesburg in 2013.

She was also **Regional Vice President for SE Asia & Middle East with the International Association for Adolescent Health (IAAH- 2009-17)**. Her editorial and advisory roles include work with **ASPID** (first IAP member in the governing council), **APPA (regional advisor and coeditor 2000)**, many committees in **SAHM**, (where she contributed to position paper on e-cigarettes), She also received a **special certification from the American Academy of Pediatrics** for her leadership in organizing the first IAP-AAP CME in Mumbai-2000.

**Leading with Purpose: A Legacy of Social Impact :** Along with Medical Practice and teaching, Dr. Bhave has always made time to give back to society in meaningful ways through AACCI. For nearly two decades, the **Association for Adolescents and Child Care in India (AACCI)** has stood as a beacon of hope, healing, and empowerment because of her **(Executive Director)unwavering leadership**.

Since its inception in 2007, AACCI has transformed the landscape of adolescent and child care in India through innovative, inclusive, and deeply impactful programs. With a mission rooted in **public education, mental health advocacy, life skills training, and compassionate care for the specially challenged**, this NGO has touched countless lives across the nation - from **urban metropolises to the most underserved communities**.

The programs initiated under this leadership - **Parenting in the new era, Emotional regulation, Life Skills and Holistic Health for Youth** - have become guiding models for similar efforts across the country. The organization has also worked for **Juvenile Justice inmates in Delhi**, earning a letter of appreciation. Through appearances on **national television channels like, NDTV, and DD Bharati**, the message of child and adolescent

well-being was brought into the homes of millions - making mental health and parenting public conversations. What sets this work apart is not just the reach, but the depth of human connection - the ability to see potential in every child, dignity in every parent, and strength in every educator. From classrooms in Pune to slum schools, this social work journey is nothing short of legendary.

**A Heart That Leads with Humility and Strength :** She is a leader whose warmth and discipline go hand in hand-trusted like a guiding parent, yet firm as a professional beacon. She believes in **lifting juniors**, offering counsel with kindness, and stepping in with a nurturing touch when needed. Her empathy doesn't overshadow professionalism; she is **strict where necessary**, ensuring standards are upheld through respect, not fear. Her meticulous approach and exceptional **organizational skills** shine through in every initiative she leads. Her ability to communicate effectively, always created a motivated team environment. Whether providing clear guidance during time of uncertainty or empowering team members to excel, she always has set an example of a **leadership style that combines decisiveness and empathy**. She has not only imparted valuable skill but also helped to shape individuals to be capable leaders themselves. Her leadership is not just about achieving goals but also about nurturing growth, creating a lasting impact on both team and organisation. What sets her apart is a unique blend of innate honesty, discipline, and genuine authority along with her being a great leader.

Her ability to motivate-making everyone eager to work by her side-reflects the trust and admiration she inspires. This balance of compassion and discipline embodied **humble leadership**: acknowledging one's own limitations, actively listening, celebrating others' contributions, and always seeking the collective good over personal recognition

**Lighting the Path of Women Empowerment :** She had announced the formation of the IAP women's wing in her presidential address in 2000. But it took 16 yrs and the combined effort of many women in IAP to start this in the year 2016 and she worked as the **founder chair 2016-18**. She continues to be a Patron for this group, which has now become a strong body of WPF-Women Pediatricians Forum.

**Passing on the light of skills and service :** Present Pediatric and adolescent healthcare is evolving rapidly with new research and technology, yet Dr. Swati Y. Bhave's unwavering commitment to excellence in care and education remains timeless. She beautifully blended deep knowledge with genuine compassion, setting a benchmark for others to aspire to. As a mentor, teacher, organizer, and caring guide, she has left an indelible impact on all who knew her. Her legacy will continue to inspire us to carry forward the light of skills, service, and gratitude she instilled.

We honor Dr. Bhave not only for her remarkable achievements but for the integrity, passion, humanity, and heart she brings to everything she does.

*With a grateful heart and warm regards,*

**Dr. Sunita Manchanda**

## My Long term mentor in my Professional life journey



My first introduction to Dr. Amdekar was as an UG student in 1972 in our paediatric term. For both of us - our alma mater is the very old and prestigious Grant Medical College and J.J Group of Hospitals, Mumbai. The pediatrics Dept, founded by Dr. George Cohelo and Dr. PM Udani was one of the best in the country.

In addition to Dr. Udani, we were very fortunate to have stalwart teachers like Dr. MM Wagle, Dr. A.G Desai and Dr. PM Shah. Dr. Amdekar was the youngest honorary and an extremely popular teacher. Subsequently, I joined the Dept to do my MD Pediatrics from 1975-78 and throughout our residency, we enjoyed Dr. Amdekar's clinical teaching and astute diagnostic skills.

I was further fortunate to continue my academic and professional journey at the dept as I worked as an Associate Professor in Dr. Amdekar's Unit from 1981-to 1989 after which I left to go as Professor at B.J Medical College, Pune. Most of his mentoring me occurred during this time.

My role model of what a clinician and Medical teacher should be- was always my Late father Padmabhushan awardee, Dr. R.D. Lele, but under Dr. Amdekar I blossomed into a pediatrician. He taught me the art and science of dealing with children and even more important- having empathy for the parents. He was my role model for the way he talks to parents and explains in simple terms the medical issues of children – especially when the illness is serious, with a poor prognosis. He has the same respect for parents and gives time to explain be it a roadside parent of JJ Hospital or a parents coming to corporate hospitals.

In 1985 he encouraged me to compete for the 1986 IAP James Fleet award. Till then our Dept had not won IAP research awards and he was very keen that I should be the first person to do so. The age limit for this award is 35 yrs and at 34, I had only one chance to do so. I can never forget the time he spent in mentoring me and our unit registrar and houseman to jointly finish the research project and then making me practice the 7 minute presentation after the clinical rounds, in dept auditorium, literally every day for more than a month. I think more than aspiring for the award the fear of disappointing him drove me to give my best and win the award.

People often ask me how I never over-exceed my lecture time and give focussed points for the target audience. This is entirely due to the time he spent training me to give lectures with the ABC principal – Accurate Brief and Clearand took me along with him in various meetings of IAP branches where we travelled as a team.

He also taught me how the same topic, e.g measles should be delivered with a different focus depending on the target audience - UG, PG, Anganwadi workers, nurses and practicing pediatricians. I carry this legacy to teach the same to my students over years. We organized many IAP meets together which helped me to do many more independently over later years. We also worked together to make a film for pediatric nursing care which stimulated me to make more educational films in my later career.

I was very fortunate to have him mentoring me in private practice also. I left Govt service as Professor and Joined the corporate Bombay Hospital in 1991 as a clinician and medical teacher. At 39 yrs it was not easy to start private practice competing with renowned pediatricians with well-established practice and I often felt the need of second opinion in serious or dying patients. I was fortunate to have Dr. Udani as my head of unit for this but in addition Dr. Amdekar was always there to officially come when I requested him. I will always remain grateful to both of them for their handholding, in my initial two years till I developed confidence and got well established. The greatness of both these teachers was that they kept my prestige by saying – “Dr. Swati is my student and what she has done so far I exactly what I would have done. Since the child is not responding as expected, we will now jointly discuss and figure out what can be done to make him better. “ How many seniors have this large heart? Again this is a legacy that I have sincerely tried to practice when I was called for second opinion.

Many ask me specially being a woman – how I managed to hold so many posts in IAP ultimately reaching the post of President IAP. Again this is entirely due to the mentoring I received from Dr. Amdekar and Dr. RD Potdar who was his close friend. Both of them nurtured my entire IAP journey encouraging me to contest as CIAP West Zone EB member in 1986 and continuously working in IAP for many years, climbing the ladder as AAA, Treasurer, HSG and presidentship in the year 2000. They both and other senior paediatricians from Mumbai like Dr. M.R Lokeshwar and late Dr. GS Hathi, were my surksha kavach as one or all of them were always with me when I travelled out of Mumbai for any IAP activity and the frequent planning meetings for Asian congress in Delhi in 1994 ( where I was joint secretary) or ISPT congress at Jaipur in 1999( where I was West Zone EB member). So my family was very secure in the knowledge that I was never alone. I owe my IAP career to all of them.

Dr. Amdekar trained me and gave me important positions in a large number of IAP activities, be it IAP UG QUIZ, the initial days of IAP PALS. My personality blossomed under this mentorship, giving me administrative skills and leadership qualities which helped me to go higher in various International associations like IPA and IAAH in the years 2001 to 2017. He was the first to bring the concept of Pediatric group practice and I have followed that in my life even today. Dr. Amdekar's unique qualities as academician, clinician teacher par excellence, his efforts of awesome conferences, his books etc are known to all. I have focused on the main topic of He for She as a mentor – mentee and his unique role of mentoring me in my professional life journey for which I will always remain grateful to him.

*With a grateful heart and warm regards,*  
**Dr. Swati Bhave**

He For She

## A guiding light in my IAP journey: Dr. Y. K. Amdekar Sir



IAP is extremely blessed to have Dr. Y. K. Amdekar Sir, the '*the Bheeshma Pitamaha*' of Pediatrics and a living legend as one of our Seniors. Sir is a teacher par excellence, brilliant academician, and an excellent orator; has taught several generations of doctors undergraduates, post graduates, practicing pediatricians, and continues to teach passionately, enthusiastically even today. His talks are attended by doctors of all ages; with house full lecture halls and delegates sitting in aisles and floor.

I feel privileged to be a medical student from the same Institute, Sir J.J. Hospital and GGMC, Mumbai, where Sir was a faculty for many years. A past President of IAP, a senior member for us to seek his advice like a revered family member.



It was in year 2022, July to October, during the IAP Elections, when I got to know Sir more personally, for my CIAP EB member 2<sup>nd</sup> term campaign.

He coined the words for my election and campaign flyer and supported my candidature whole heartedly; imparting sound advice and strategy. It proves his impartial support for women candidates and respect for gender-neutral equality.

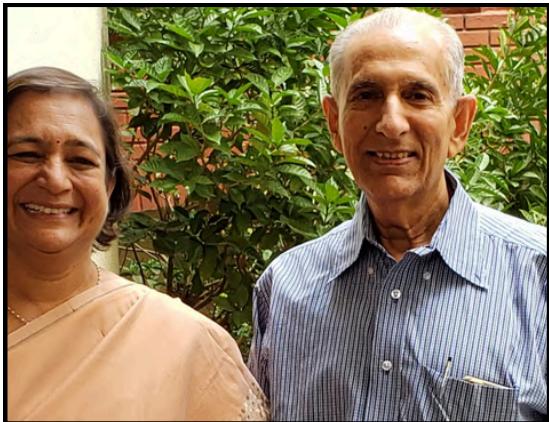
This has left an indelible memory in my mind and life. He is a father-figure in my life, the edifice of strength and courage. I am indeed blessed to have Sir as my guiding light. His guidance, support and blessings will be cherished by me forever! I thank profusely thank Sir and wish him good health and happiness always.

*With a grateful heart and warm regards,*  
**Dr. Bela Verma**

He For She

## To Sir, With Love...

*A tribute to Dr. Y.K. Amdekar, a teacher, mentor, and inspiration to generations of pediatricians.*



The year was 1990, and I was a fresh MBBS graduate aspiring to pursue Pediatrics. I got a seat in the Department of Pediatrics at J.J. Hospital, about which I knew very little, and hence I was undecided. Fortunately, I met a senior who told me, “If you get a chance to work under Dr. Y.K. Amdekar, it will be the best training you can ever wish for.” How true those words proved to be, for the three years I spent with Sir as my mentor were the best of my academic career.

It was not only about academics but also about Sir’s charisma and zeal, which pervaded the atmosphere and encompassed every resident. He is an astute clinician, with keen history-taking, meticulous examination, and the ability to blend knowledge into a rational interpretation that guides diagnosis and treatment.

We learned and imbibed, simply by observing him on his typical day at work, that medicine was not about rushing to conclusions, but about thoughtful, systematic care.

The residency years were difficult-many patients, too few hands, and long, arduous hours of work. Yet his presence made them lighter. We looked forward to his visits, which were clock-perfect; I don’t recall him ever missing a day or even arriving late.

His insightful interpretations of clinical presentations, always supported by solid knowledge of literature, were a joy to witness. He taught us how to think rather than what to think. So many students would travel long distances just to attend his rounds.

What stood out most was his human touch. He went out of his way to know us, put us at ease, and help solve our troubles. At the coffee table, we were all equals-chatting and laughing together-and those remain among my most cherished memories.

Another invaluable lesson was his humility. He treated not only colleagues and students but also nurses, ward helpers, and anxious parents with the same respect. He always had a patient ear and thoughtful advice for everyone who sought him out. His empathy and gentle counselling of sick children and their families have left an indelible mark on me.

*With a grateful heart and warm regards,*

**Dr. Vibha Bafna**

## Finding My Path Through His Wisdom

A diehard Mumbaikar girl chooses a different path. Now, my mission of being a learned pediatrician had another branch, a very happy one, of becoming a wife to my dear friend. Soon, I was in Delhi, and I also passed my theory exam, which was a great news.

The new lands of north were warm, but I had no clue how to proceed for preparation of Practical exams. Back in Mumbai, attending Thursday Practical Case Presentations at Sion Hospital, chaired by Dr. Y. K. Amdekar sir, was like a knowledge fiesta.

It was like visiting once in a week to Siddhi Vinayak. You go to temple and you seek knowledge, you seek the path, and you enlighten yourself every time.

Now, I was a little bit nervous about how do I go for my practical exam? It's tough than in theory exam. Somehow, I got a chance to attend a seminar at a prestigious GTB Hospital, where they would conduct lectures for DNB Practical and some guidance.

I reached there knowing no one, neither the students nor the teachers, but to my delight, the most familiar face was just in front of me.

Instantly, I felt what we call in Marathi, Chatr Chaya (savior umbrella) and I saw some light for my future. Instantly, I told him my dilemma. To my surprise, he identified my face, and he said, Yes, I have seen you in Thursday lectures.

Once he heard me, he said only two words, COME TO WADIA. You take cases, you see cases, you observe. Any time you feel you ask us and present a case to me. He said with usual very British English accent.

He said, of course you need to do something. You need to work hard, sit in a library full day and evening, make a group. We are always there. And just like that, I decided to go back to Mumbai for a month, and then my journey never stopped there.

Today also, whenever I see the case, I have his voice echoing in my mind to try to look for what you're missing & to think a little more laterally while presenting a case. The art of finding where is the lesion and what is the lesion was taught to me by him.

He is epitome of not just erudition but also support for survival of students who are yet to find their way.

*With a grateful heart and warm regards,  
Dr. Meghana Phadke Sultania*

## Brilliant, Powerful and Graceful Orator

**Dr. Swati Yashwant Bhave** is an internationally renowned pediatrician and adolescent health specialist whose pioneering work has been instrumental in shaping the field of Adolescent Medicine in India. As the **former National Chairperson of the Adolescent Health Academy (AHA)** and Past President of the **Indian Academy of Pediatrics (IAP)**, her visionary leadership laid a strong and lasting foundation for adolescent health advocacy across the country.

I feel truly privileged and honored to have been mentored by Dr. Bhave. We both share the distinction of being founder members of the Women's Wing in Pediatrics—an initiative that has brought together and empowered hundreds of Women Pediatricians across the country. This platform has fostered mentorship, collaboration and leadership among women in child and adolescent health and continues to grow stronger with time.

Dr. Bhave is not only a brilliant academician but also a powerful and graceful orator whose words inspire and motivate. Her ability to nurture young professionals is truly unique—she has taught many of us how to speak with clarity, connect meaningfully, and carry ourselves with confidence and compassion. Her influence has shaped my professional journey and left a deep personal imprint on me.

A multitasker par excellence, a beautiful soul, and a living legend, Dr. Bhave continues to inspire generations with her vision, strength, and unwavering dedication. I have often been fondly referred to as the “young Swati Bhave,” a comparison I cherish with humility and pride. Her legacy lives on in all of us who strive to carry forward the light she has lit in the world of adolescent and child health.

*Warm Regards*



**Dr. Himabindu Singh**

Chairperson IAP-AHA 2025.



## Dr. Swati Bhave: Shaping Futures, Inspiring Lives

I have been associated with Dr. Swati Bhave, Director of AACCI (Association of Adolescent and Child Care in India), for more than two decades, and it has been one of the most rewarding relationships of my professional life.

My admiration for her began long before we met in person. As a fresher just completing my post-graduate degree in pediatrics, I remember seeing her photograph in the Indian Pediatrics journal, where she appeared as the only lady on the page in her role as Secretary of the Indian Academy of Pediatrics. She looked dynamic, confident, smart, and adorable — a true role model who stood out in a male-dominated space.

I finally had the opportunity to connect with her in 2009 during the Life Skills Education TOT at Dr. D. Y. Patil Medical College, Pune. That experience gave me the chance to work closely with her, learn from her, and eventually be mentored by her. I feel very fortunate to have had her as a guide, mentor, and icon.

I still remember her openly telling everyone that she had found someone who matched her energy level and work style — that moment remains one of the greatest honors of my career.

Under her guidance, I learned not just academic skills but also essential life lessons — how to conduct workshops, communicate effectively, manage time, write abstracts, prepare presentations, present oral papers, and solve problems.

Beyond these, she unknowingly taught me how to dress appropriately, carry myself with dignity, maintain work-life balance, and even how to enjoy life.

Through her leadership at AACCI, Dr. Swati Bhave has organized impactful workshops across Pune and beyond, reaching diverse groups:

- Adolescent girls: Puberty, menstrual hygiene, and emotional well-being.
- Parents & teachers: Handling exam stress, effective parenting, cyber safety, physical and psychosocial health.

Her work always integrates life skills and public health awareness, making learning holistic and transformative.

Because of her encouragement, I had the opportunity to represent AACCI at various national and global forums, including the NCD Alliance, where we advocated that the prevention of non-communicable diseases must begin with adolescents. Every time I speak with her, I feel more confident, motivated, and inspired.

Despite her own health challenges, she continues to be a taskmaster, meticulous planner, multitasker, and a loving mentor. What makes her truly unique is the balance she maintains — excelling as an academician, community leader, mentor, friend, and also a warm mother and grandmother with childlike laughter and affection.

She considers me as her younger sister, and our families now share a close bond. That personal connection is a treasure I deeply cherish.



Dr. Swati Bhave is much more than a pediatrician — she is a social change agent, a force of transformation, and a symbol of compassion and strength. Her initiatives for adolescent health and empowerment reflect her unwavering dedication to the most vulnerable, especially women and girls, uplifting them with awareness, education, care, and advocacy.

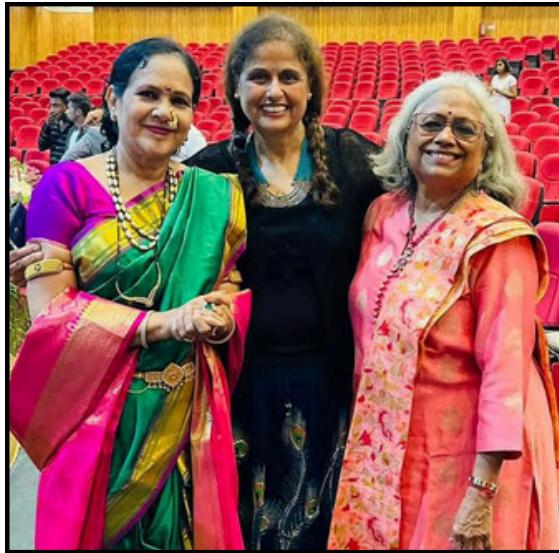
Swati madam for me is a mentor, guide, elder sister, philosopher, women with the substance and the legend to follow. I always thank God for having She is my life.

Like swati nakshatra, she is a unique person who guides and mentors many teens, colleagues and professionals.

I am very happy to tell that she is a strong pillar and lamplight for all women as She is a very special for She. In short, she is truly “A Force for Change, for the Betterment of Society.”

*With a grateful heart and warm regards,  
Dr. Shaileja Maine*

## Like the Swati Nakshatra: Gentle, Strong, and Ever-Inspiring



I have been entrusted with the responsibility to write SHE for SHE, and the star personality I have the honor of writing about is none other than **Dr. Swati Bhave**. I felt the best way to express my gratitude would be through a heartfelt letter to her.

**Respected Dr. Swati Bhave Madam,**

Thank you for being more than just a mentor - you have been a guiding light, nurturing me with care, wisdom, and purpose.

Your words of encouragement and the way you lead by example have deeply influenced the growth of everyone who has had the privilege of knowing you. You are an inspiration to all, always empowering others. You have created an emotional bond with me. You didn't just teach me - you shaped me. You nurtured me with strength, kindness, and vision.

Every step I take forward carries the imprint of your guidance. For that, I will always be grateful. You held my hand, corrected my path, and taught me to stand tall. You nurtured not only my skills but also my soul.

My heart will always be full of gratitude for you, and your influence will forever echo in my journey. You are a true depiction of your name, Swati. \*Yatha Naam Tatha Gun\* - like the Swati Nakshatra, symbol of Vayu (the God of Wind), you embody independence, adaptability, individuality, and grace. \*Swati\* signifies soft-spokenness, diplomacy, clarity, and calm persuasion- qualities you so beautifully reflect.

Your patience, dedication, and unwavering clarity have always inspired me to grow, not just professionally but also as a person. You have left an imprint that will last a lifetime. What makes you truly special is your rare ability to lead with both strength and kindness - a quality I deeply admire.

I still remember moments when I was unsure of myself, and you guided me calmly with such wisdom. Those moments will always stay with me. You are a role model in every sense. You led not through authority, but with compassion - and that made all the difference. You saw potential in me even before I could see it in myself. Thank you for lighting the path and walking beside me.

*With regards and deepest gratitude,*  
**Dr. Sangita Lodha**

## Guided by Wisdom, Grounded in Humanity



Dr. Swati Bhave Mam, You can not describe her in words, she has Excellent Leadership with Human values and Mentorship.

In year 2012, when I did my Post graduate course in Adolescent Paediatric, had no idea how to take it Further. Mam was in Apollo Hospital but she was shifting back to Bombay and somehow she finally settled in Pune.

She started School Health work as NCD CHILD Project from UNICEF and encouraged me to take it Forward and Internet addiction in Various School.

She taught me how to Research, planning and execution as we were so naive because of our Practice schedule.

First time at age of 50 plus she gave me strength to present paper and I won First Prize in Ludhiana Adolescon, she gave me direction, wings to Fly, courage to say your own words and be confident of your hard work in spite of so many other super specialities.

Because of Mam, interacted at National and International level. She knows your mind how quickly you answer, meticulous, extremely hard working, Loving Mother and Grandmother with child like Laughter and Affectionate to everyone. She has given me strength to live my life at my own terms but learn humility and Respect.

Her Credentials as well as AACCI group has been known International Community and she has created Core Group with Dil Se vibe and has been extremely positive.

May God Bless her with life full of good Health and Happiness.

You don't get Simple human beings with extraordinary credentials yet so grounded and down to Earth .

*With a grateful heart and warm regards,*  
**Dr. Latika Bhalla**

## When I am asked to talk about a legendary teacher.



When I am asked to talk about a legendary teacher, a visionary leader, an excellent social worker, and a great human being - Dr. Swati Bhave - I find myself short of words, for she is truly a bundle of good qualities and virtues.

Swati, as the name suggests - Swati meaning "very beneficent" - is like a heavenly breeze of independence and adaptability, symbolizing freedom, flexibility, and selfrealization. This stands a hundred percent true for Dr. Swati Bhave.

I met her for the first time in 1992 during my PG days, in an Asthma training module. In that very first meeting, I found her to be dedicated, determined, and disciplined. Her personality was so charismatic that all the PG students were deeply impressed and influenced. Her command over respiratory medicine was truly amazing. Later, I met her again in 2010 at the National Pedicon.

This time, she was equally empathetic, enthusiastic, and energetic - authoritatively speaking on the role of computers in medical science and pediatric practice. Everyone was astonished by her indepth knowledge of computer science and her command over the subject.

The third time, I came into very close contact with her at Pelican 2020 in Indore. On this occasion, she received the Lifetime Achievement Award, a true honor for her remarkable work, and delivered a talk on "Adolescent Problems." The same zeal, the same devotion, and the same mastery over the field of adolescent health were evident.

It was truly amazing that over a span of the last 25 to 40 years, one thing remained constant - her passion for the promotion and propagation of knowledge.

Her intense desire to light the lamp of learning and to continue the legacy of joy and happiness never diminished. Since January 2020, I have had frequent telephonic conversations with her, each lasting from a few minutes to an hour. Every time, I learned something new from her, and my basket of wisdom was filled with fresh pearls. They include:

1. How to maintain a balance between family and profession.
2. How to follow your passion with excellence.
3. How to pursue your dreams and attain your goals in life.
4. How to present yourself confidently in public and social life.
5. How to create harmony within a group by listening to each and every person with great patience and giving them due importance.
6. How to identify the qualities in a person and support and encourage them - just like a Paras Pathar (Philosopher's Stone) - to transform them from ordinary to extraordinary.
7. How to build genuine friendships with juniors, seniors, and peers of all age groups, with true love and affection.
8. How to enjoy every aspect and every moment of life to the fullest, because "Zindagi Na Milegi Dobara" (You Only Live Once).

I believe I could narrate hundreds of things I have learned from her, but I have mentioned only a few that are most important in life's journey. I wholeheartedly wish Dr. Swati Madam a long, happy, healthy, contented, peaceful, and accomplished life.

*With a grateful heart and warm regards,*

**Dr. Shreelekha Joshi**

# From Decoding DNA to Decoding Life: Life Lessons from a Senior Medical Geneticist



**Dr. Shubha Phadke**

M D [Pediatrics], DM [Medical Genetics]

Formerly Professor & Head, Department of Medical Genetics Sanjay Gandhi Postgraduate Institute of Medical Sciences, Lucknow, India

Current affiliation: Consultant, Jupiter Hospital, Baner, Pune

Her extensive research and clinical work focus on genetic disorders, counseling, and promoting genetic literacy in India.

- [shubharaopadke@gmail.com](mailto:shubharaopadke@gmail.com) | Location : Lucknow

I superannuated recently and wanted to address my past students who had gathered to relive & cherish memories of the student times and wish me for the future.

All of them have contributed so much to my growth and my department, the first department of medical genetics in India, that the words to thank them are not enough. Similarly, no words to thank the almighty for the wonderful life journey I got to live!

At that juncture, I wished to share my life experiences and what I learned through them. I am sharing the same string of thoughts in this article. I would not like to use the word 'advice', though age has probably given me the right to advise (which no one likes).

The first thought that came to my mind is the struggle of living multiple lives; life of a woman (a mother, a wife and more) and a doctor with a full time job and a lot of responsibilities.

This makes all women's lives different from those of men. There are two issues as a working woman; the first being issues related to sexual discrimination or harassment and the other is the constant conflict between home and family vs work.

Luckily, I did not have any experiences of suffering at workplace due to being woman but got glimpses of such issues while working as a chairman of the internal complaint committee of the institute.

Sometimes, not the boss, but subordinate male staff cause problems by showing resistance to a female boss. In both the situations, being tough and taking support of authorities is needed; especially in case of any harassment at work; make noise, register complaint.

The second struggle is balancing work and family by prioritising appropriately as the situation demands. This means sometimes gap in the career while children are young or pregnancy is difficult. Who can be a better mother than a pediatrician! Believe me, one- or two-years gaps once or twice in the career did me no harm.

I tell the resident doctors that after children grow up, there are decades for the career. There are no definite right ways of balancing family and work and one has to make their own decisions based on situation. The basis of decision should be responsibility to the family.

*This is not a burden but the power of being woman. I still have not understood what gender equality really means but to me, it is the right to decide for yourself though sometimes the priority is not yourself. Secondly, being woman means strength to trust yourself.*

Some more lessons from my experiences, I am sharing below. I knew these words of wisdom theoretically but they were not the reasons for my decisions. But as I look back they fit into my decisions and here, I endorse them.

I landed in medical genetics 35 years ago by chance. At that time the speciality was non-existent and future was fogged. But my decision to chose genetics to pediatrics did not need logical thinking.

*Message is, listen to your heart!*

The struggle of establishing a new speciality, a complex of more than 6000 genetic disorders from head to toe, diagnostic challenges, lack of support for laboratory diagnostics, learning genetic counseling, prenatal diagnosis was a taxing journey. Now after three and half decades while looking back I can laugh at failures and frustrations.

*Message is finding strength in the failures. Challenges and setbacks are hidden opportunities & steps for upward growth.*

A yearly short term introductory course in Medical Genetics & Genetic Counseling for clinicians which we started in the year 2000 was also a great challenge. There were hardly any takers. But the planning of the program, passionate teaching and commitment to provide an exciting learning experience by way of innovative interactive methods which will enthuse clinicians for this novel specialty made it a popular course and it could help medical genetics reach all corners of the country through the emissaries who attended the 21 courses held till date. The students in the department became teachers. They were taught to teach. Later they became excellent teachers and esteemed faculty for the courses held over years.

Similarly, my entry into the fetal medicine was by compulsion as the most important help needed for the families with genetic disorders, especially neural tube defects, thalassemia and Duchenne muscular dystrophy, was prevention by prenatal diagnosis. During 1990s, the community of fetal medicine specialists was non-existent. It was a matter of necessity to learn non-invasive and invasive prenatal diagnosis on my own. But in the long run, evaluation of a fetus for birth defects by a medical geneticist with pediatric background turned out to be a boon as I was evaluating children with malformations and was empowered with the knowledge of syndromes. It was a blessing in disguise for me as well as I liked the language of shapes and sizes and deciphering two dimensional images to three dimensional shapes in mind.

*Message is to try to grow laterally, beyond your domain. The time needs more interdisciplinary activities.*

An opportunity to be in a genetics lab in the University of Washington opened my eyes to how the labs in developed countries work. The system, meticulousness and high-end research were somethings which I was not exposed to, in India.

I listened to Prof Francis Collins, the key figure of Human Genome Project, explaining how he coined the word, 'Positional cloning' for directly identifying a causative gene for a disease and replaced the term, 'Reverse genetics'. Such opportunities to pursue science across the oceans fed the travel bug inside me.

*Message is seeing the world to gain knowledge & wisdom. Short term fellowships and observer-ships make a world of difference for a prepared mind. It helps personal growth and the growth of the department back in India.*

Three decades ago, the gap in what we were reading in journals and what we could do was enormous. But perseverance could take me from karyotype to cytogenetic microarray and exome sequencing. While working through these frustrating initial years, I continued to work in laboratory (a difficult task in the beginning) in addition to clinical responsibilities.

*Message is, work till you the work is done, you succeed! Things work! After getting degrees, every-day is an examination! Learn to nag yourself.*

*The persistence and patience were also very essential to get the things done by navigating the complex maze of government functioning. Of course, the advantage of working in a government institute was ability to do what is right and what you like without the money matters. The job became a hobby!*

During the journey, the most beautiful thing happened was getting intelligent, unusually bright, students who wanted to do different and joined me on the unchartered path. These young differently wired students cum friends got connected to my heart and the department. Teaching and learning are bi-directional. You learn more if you want to be a good teacher.

*The message is if you are focussed and passionate about your work, like minded persons will join your uphill walk. Also, one has to keep learning and respecting the teacher in the student, especially postgraduate students. Good students are up-to-date, teach you and keep you on toes!*

I had my plan of having a small clinic for children but, destiny made me professor of medical genetics. Hard work and determination were the keys to open the doors. I did what I thought was good, right and necessary without realising that those were high aims for the department.

*So, the message is, NOT failure but low aim is crime! If you don't go ahead, the world goes ahead of you. "Effort is the greatest strength, there is nothing greater than effort"*

**"उत्साहो बलवानार्थं नास्त्युत्साहात् परं बलम्"** *Lucky once in a while.... Don't wait for luck ... Work hard! In addition to hard work and perseverance, patience, positive thinking, planning and proactive actions help for success in the committed goals.*

At the beginning of my career, the main objective was to establish prenatal diagnosis for beta thalassemia, and eradicate beta thalassemia by population-based screening as was done in the Mediterranean countries.

Over years, the outcomes of thalassemia major have improved so much; thanks to the development of oral iron chelating agents, safe hematopoietic stem cell transplantation and government funding for treatment that one wonders if population-based prevention of thalassemia is necessary or not.

*Message is that the change needed in our perspective, guidelines, policies as situation changes.*

As genetics evolved, the genomic testing has made it possible to screen everyone for thousands of disorders. This has presented many dilemmas and ethical questions to the laypersons who are lured with the possibility of screening the baby in the womb for all disorders without understanding limitations of such tests. On one hand the genomic medicine has opened up many diagnostic and therapeutic options but it also is posing many ethics dilemmas.

*The message is that as the leaders of society, educated, knowledgeable doctors, medical geneticists we need to channelize the society in right direction, guide them to approach the fetal diagnosis with ethical angles.*

Patients contribute a lot to our learning. They teach us medicine, so document each rare case or medical experience. Learn to ask why, if you are not reaching the diagnosis or something is different or cannot be explained.

My obsession with reporting every novel case or findings, lead to more than 300 publications in my career. Ten of these are new syndromes and in seven out of the ten, the causative genes could be identified with next generation sequencing; in some cases a decade after reporting the new syndrome.

Message is that we learn from the patient. Listening patiently may give you an important diagnostic clue. Research and patient care are interwound, each enhancing the other. One should be perturbed if diagnosis is not reached. Unbiased approach towards patient diagnosis, application of latest knowledge and appropriate interpretation of results of investigations are basic requisites for a logical clinician.

Patients and their families teach us about life as well. Hundreds of thalassemia and hemophilia patients' strengths to fight with the disease, endurance, grit, resilience and success in their lives makes us humble.

Families with children with disabilities, childhood deaths teach us coping strategies. We celebrated Down syndrome day, hemophilia day, thalassemia day and rare disease day every year.

The happiness and inner peace brought by their dances, hugs and smiles on parents faces cannot be described. The experience is an eye opener for new students in the department.

*Message is to give eyes, ears and heart to the patients sitting in front of you. Work with patient support groups. Advocacy brings change in the society and policies. We can give and get strength from them.*

Genetic counseling is an integral part of the management of genetic disorders. Talking to the patients about scientific aspect of the disease, genetic aspects and implications for the family, available treatment, reproductive options improves communication, command over language and ability to simplify the information.

*Message is that do not consider talking to the patient as the easiest part, easier than diagnosis or a surgery. These are pillars of rapport with the patient on which the bridges of communication are built. Words can be healers; words can have adverse effects, hurt and block the communication.*

*Communication skills have to be improved by listening and practice. Talk to the patient in the language which he or she understands. Do not mix English to the local language. Experiences of genetic counseling help to improve communication with friends and family as well.*

Physical exercises and games were my weakest points. Somewhere around forty, I started exercises, swimming, jogging and kept on improving.

Of course still I can not play any game, but can compete with my self to improve stamina and endurance.

*Message is that it is never late to start physical exercises. What life journey is, nothing but to challenge oneself and stretch the limits!*

I still want the window seat in the flight to look at the clouds, rivers, dams, mountains, railway tracks, if lucky, the Lotus temple from the sky.

*Message is to keep the child in you alive! Also, it helps to remind oneself how minuscule dot one is on the earth!*

Look at bright and beautiful. Teaching job gave me an opportunity to be with young students. They kept me updated about science and fashion. I could get to peep in their minds, to know how the young generation thinks.

I loved genetics, lived genetics, breathed genetics – will continue to do so! But I love to paint sarees, draw a rangoli, design mementos for conferences, cook for family, friends and students. Remember, unlike research manuscript, a failed recipe does not come back from the reviewer.

*Message is, love your profession but don't forget your hobbies. Hobbies are stress relievers. Use your talent to keep your mind fresh and enhance the profession! Make your students and colleagues comfortable and friendly.*

If we stood still in time & we would not have aged but then we would have stuck still at karyotype and would not have reached genome sequencing!

*Time changes, accept the change.*

**Look for Art in the Science  
Don't forget the Science of Medicine  
Care for Human in the Patient  
& Never Ignore Your Conscience**

## Fun with Creativity

**Dr. Akhila Nagaraj (MBBS, MD IAP NDBP)**

- A developmental Paediatrician from Bangalore.
- Alumnus from St. John's Medical College and Bangalore Medical College.
- Fellowship in Developmental-Behavioural Paediatrics from Indian Academy of Paediatrics Chapter of Neuro developmental Paediatrics.
- Created a website [www.getchildgoing.com](http://www.getchildgoing.com) for free developmental resources.
- Visiting Consultant, Developmental Paediatrician- Shanthi Hospital & Research Center, Jayanagar & Ovum Hospital, Klayanagar.
- Awaz certified Augmentive and Alternative Communication Professional



# Work-Life Balance: A Tightrope Walk



**Dr. Jagruti Sanghvi**

Paediatrician with over 22 years of experience in child and adolescent healthcare. A gold medalist and certified expert in Global Adolescent Health (University of Melbourne), she combines clinical excellence with empathetic counseling. She practices at Nurture & Suture Clinic, Vile Parle, and is affiliated with Nanavati Max and Advanced Multispeciality Hospitals. Her special interests include vaccination across age groups, paediatric nutrition, adolescent care, and allergy management.

**Location : Mumbai, Maharashtra**

Picture me like this: a pediatrician in clinic/hospitals, a supportive spouse and loving mother of two "young adults" at home, a dutiful daughter and daughter-in-law and somewhere in between, a woman who has lots of hobbies like singing, dancing, trekking, spirituality and fitness. No wonder, work-life balance would feel less like a gentle seesaw and more like a circus act- walking a tightrope while juggling flaming torches, all while my conscience keeps shouting at me, "Hey there....don't drop the torches!"

So, how do I manage it all? My friends and relatives always ask me, "How do you get time for pursuing your hobbies and managing family relations amidst the unpredictable nature of your job?" I coolly answer that God guides me through it all. And yes, I believe that!

In medicine especially pediatrics, our days are filled with tears, fevers, laughter and wails. We give our energy to healing little bodies and reassuring parental anxieties. But when the stethoscope comes off, our second shift begins: school pick-ups, dinner preps, helping with homework, teen mood swings or simply trying to remember the last time we drank water or used the restroom without rushing.



So how do we survive- and more importantly- thrive? As Shonda Rhimes rightly said, "You can have it all. You just can't have it all at once."

Let's think of our life as a heart. It has four chambers- our work, our family, our self, and our community. All must be filled and emptied in rhythm. Ignore one chamber too long, and the entire system falters. So friends, how do I ensure the rhythm??

**Be in the Moment:** There are days when my little patients need me more and other days when my child's science project or a home gathering takes priority over everything. The key is being mindful in the moment!

**Set Boundaries:** Boundary-setting is not selfish; it's survival. Whether it's saying no to that extra committee and blocking time for a workout, I always remember: my "yes" is precious. So, I use it wisely.

**Delegate and Ditch the Guilt:** We often carry the invisible burden of doing it all. But trust me, the world won't end if someone else does the household chores. I try to outsource when I can (though I am still learning this "art") whether at work or home- and remind myself that asking for help is a strength, not a weakness. ou!!

**Find my Me-Time and a Me- Reason:** Even a car with the fullest gas tank needs regular maintenance. I always try to find time for my own joy- reading, singing, meditating, running, exercising, trekking- whatever refuels me. Of course, I cannot pour from an empty cup (especially not into a thousand little ones).

**Find Your Tribe:** I love to surround myself with those people who remind me of my worth outside my white coat.

So my dear friends, remember that some days, you'll rock the clinic. Other days, you'll forget to sign the discharge summary but make it to bedtime stories. Both are victories. Enjoy them both!

And yes, walk that tightrope, sister. Also know that - when your arms get tired, I'm here to cheer you on- from the ground and from the wire right next to you!!

## — Fun with Creativity —



**Dr. Madhumita Mishra**

A skilled pediatrician committed to nurturing the health and development of children across all stages of growth. With a patient-centered approach and a deep understanding of pediatric care, she blends clinical expertise with warmth and empathy to support families through every milestone.

*Her dedication to preventive medicine and child wellness has earned her the trust of parents and peers alike.*



# Balancing stethoscope to storybooks - A Journey



**Dr. Sikha Agarwal**

M.D. Pediatrics (PGI, Chandigarh) | Pediatric Rheumatology Specialist, Director of PREP Clinic, Mumbai, specializes in Pediatric Rheumatology and consults at leading hospitals including Hinduja, Nanavati Max, Surya, and Bai Jerbai. She serves as Secretary of IAP Mumbai (2024–25) and is an executive board member of the Pediatric Rheumatology Society of India.

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Work-life balance is often spoken about as an ideal, yet in reality it is a daily practice that requires conscious effort, flexibility, and resilience. For me, this balance is shaped by three significant roles: being a pediatric rheumatologist, a mother of twins, and currently, the Secretary of the Indian Academy of Pediatrics, Mumbai.

As a pediatric rheumatologist, my work demands both clinical precision and empathetic listening. Children with chronic rheumatological conditions require long- term care and their families need consistent guidance and reassurance.

This role brings immense professional satisfaction, but also emotional intensity. Setting boundaries, prioritizing tasks, and respecting my own downtime are essential to avoid burnout and to continue offering the best care to my patients.

At home, my twins are my greatest teachers. Motherhood brings joy, laughter, and boundless energy into my life, but also requires patience and constant juggling. Managing school projects, playtimes, and their endless curiosity alongside hospital duties often feels like living two parallel lives. Yet, I have learned that being fully present-whether in the clinic or at home-makes the biggest difference.

My children remind me daily of the importance of balance, unconditional love, and the value of slowing down.

Adding to this, my role as Secretary of IAP Mumbai has opened another dimension. It allows me to contribute to the pediatric fraternity beyond clinical practice- organizing academic sessions, community programs, and innovative initiatives.

This responsibility has strengthened my leadership skills, team spirit, and time management. At the same time, it has taught me that balance is not about doing everything alone, but about collaboration, delegation, and trusting your team.

For me, work-life balance is not about perfect schedules, but about harmony- accepting that some days tilt more towards work and others towards family. It is about small pauses, moments of gratitude, and the courage to say no when needed. Ultimately, the balance is less about equal division and more about wholehearted living in every role.

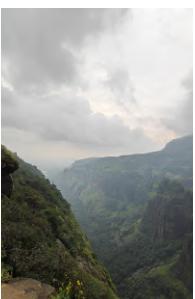
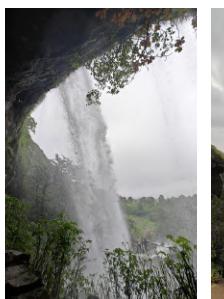
# Embracing the Heights: A Pediatrician's Journey Through the Sahyadris



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Trekking can be an unexpected yet transformative pursuit, especially for someone like me-a busy pediatrician who found her calling in both medicine and the mountains. My story begins in my first year of MBBS, a (Fresher's) college trek to Lohgad Fort. Little did I know that this initial foray into the Sahyadri ranges would spark a lifelong love affair with trekking.

**Discovering the Joy of Trekking** - Growing up a proud Puneri Maharashtrian, I was always surrounded by stories of forts and the rich history they hold. But it wasn't until that Lohgad trek during MBBS that I truly

discovered the beauty, challenge, and exhilaration of exploring these places firsthand. Trekking quickly became more than a hobby-it turned into a means of staying physically fit, mentally alert, and spiritually grounded.

## Physical Stamina & Endurance:

As a doctor, I have always known the importance of regular exercise. But trekking offers something beyond just staying active. It tests your limits, helping build not only muscle strength but also mental resilience. The steep climbs, uneven terrain, and unpredictable weather train you to adapt and persevere - qualities invaluable in both my personal and professional life.

## Nature's Healing Touch:

Working in pediatrics can be demanding. There's something immensely calming about the rustle of leaves, the soothing patter of rain, or a panoramic sunrise viewed from a fort's ramparts. Being in nature feels therapeutic, a reminder that our world is vast and filled with beauty.

## The Sahyadris: My Trekking Playground

Pune is blessed with numerous forts and trails that cater to all levels of trekkers-whether you're a beginner or a seasoned mountaineer. Over the years, I've braved the scorching summer sun, the refreshing monsoon showers, and the crisp winter air on countless trails. Some of my favorite treks include:

**Sinhgad Fort:** Close to Pune, a popular choice for weekend warriors looking for a quick yet scenic climb.

**Vasota Fort & Andharban Jungle Trek:** For those who love being amidst lush greenery and enjoy the thrill of exploring dense forests.

**Rajmachi & Rajgad:** These treks showcase the region's rich Maratha history while offering panoramic views of the Sahyadris.

**Visapur & Bhimashankar:** Each trek has its own charm-Visapur with its expansive plateau, and Bhimashankar with its renowned temple and wildlife sanctuary.

**Raigad, Malhargad & Madhe Ghat:** Perfect examples of how each location in the Sahyadris tells a unique story of nature, culture, and heritage.

The Sahyadris seem endless, and that's part of the magic-they always have more to offer.

## Encouragement for Fellow Women Trekkers

To my fellow women-whether you're juggling a medical career, caring for a family, or simply looking to challenge yourself-trekking can be an incredibly rewarding pursuit. Don't let doubts hold you back:

**Start Small:** Choose beginner-friendly trails and gradually progress to more challenging treks.

**Stay Informed:** Research the trail, check weather forecasts, and let someone know your itinerary.

**Stay Confident:** There is a certain joy in breaking barriers and proving that mountains can be conquered by anyone determined enough.

## Conclusion: It's Never Too Late to Begin

Each trek I undertake leaves me with a deeper appreciation for nature, a stronger sense of self, and renewed vigor to serve my young patients. If there's one thing my journey has taught me, it's that life is too short not to pursue what sets your soul on fire. For me, that means scaling new heights and exploring hidden trails.

Whether you're an experienced hiker or someone contemplating your very first trek, remember-it's never too late to start. The mountains are calling, and if you listen closely, you'll find they have plenty of lessons to teach.

So lace up your trekking shoes, gather your friends or family, and step into the wild. Your next adventure awaits!

# To the Boy Becoming a Man



## Dr. Shalini Bhasin

(MD Pediatrics, KGMU Lucknow) is a Senior Consultant Paediatrician with over 35 years of clinical experience at Sohang Clinic, Lucknow. She serves as President of the Lucknow Academy of Pediatrics (2025), has previously led the Adolescent Health Academy, and is actively involved as State Coordinator for IAP programs including Sankalp: Sampoorna Swasthya and the SSS initiative.

Dear boy with dreams tucked under your skin,  
You carry a storm, but calm lies within.  
Your feet may stumble on roads unknown,  
But love walks with you-you're never alone.

The world may whisper, "Be strong, don't cry,"  
But tears are not weakness-they water the sky.  
Let your heart feel, let your voice be heard,  
Your silence is brave, but so is your word.

You are not a mark sheet, not medals or scores,  
Not fists in the air, not slamming of doors.  
You are stories and songs and laughter and  
grace,  
A sunrise in motion, a soul with a face.

Be kind to your thoughts, they too need rest,  
You don't have to be perfect, just try your best.  
If anger knocks, ask what lies beneath-  
It could be pain wearing a jagged sheath.  
Hold your friendships with arms open wide,  
But walk away from cruelty and misplaced pride.  
Respect isn't earned by louder noise,  
It's built in the silence of gentler boys.

Seek guidance, not because you're weak,  
But because strong men too have mentors to seek.  
Your father's silence, your mother's eyes-  
Learn the language of love that never denies.

Learn to say "no," and also "I care,"  
Grow roots in your values, but wings in the air.  
Speak for the voiceless, stand for the right,  
Even when trembling-step into the light.

You are allowed to fall, and begin anew,  
Each scar on your soul makes you more true.  
So write your own story, paint it with truth,  
With courage, with kindness, with fire, with  
youth.

We do not ask you to be anyone else-  
Just be the best of your honest self.  
And as you grow-tall, wise, and free,  
Know this always: you are loved. You are seen.  
You are meant to be.



## WPF Members at National & International Front



Dr. Neelam Mohan  
President Elect



Dr. Preeti Galagali  
Vice President South  
Zone



Dr. Ruchira Gupta  
Joint Secretary Liason



Dr. Sushma Kirtani  
EB - Goa



Dr. Shreelekha Joshi  
EB - MP



Dr. Rashna Das  
EB - Assam



Dr. Kalpana Datta  
EB - West Bengal



Dr. Nehal Patel  
EB - Gujarat



Dr. Baljinder Kaur  
EB - Punjab



Dr. Deepa Phirke  
EB - Maharashtra

# Activities of WPF

28-29 April 2025

Women Pediatricians forum decided to donate school Bags at govt school **Srinagar** And taking teaching sessions for them as well. But due to **PAHALGAM INCIDENCE** REPLACE THE WHOLE PROGRAM.



Our WPF member from Jammu **Dr. Puja Kawate** took the lead to shoulder the responsibility to accomplish the task of School Bag distribution to 650 kids, which had been reached by currier already at **Pahalgam**.



Thanks a lot Dr. Puja Kawate you did a great job. The same legacy will be continued next year. and school Health education program will be continue For the whole year.

8<sup>th</sup> May 2025

**Topic:** Changing concepts in the management of sickle cell disease.



In enlightening session ongoing medical management of sickle cell disease was discussed along with preventive strategies for complications.

Stalwart faculty hidden gem of IAP **Dr. Pradeep Sihare** presented his thoughtful insight & guidance about Sickle Cell Disease in terms of its genetics, clinical presentation & newer treatments like hydroxyurea. He also enlightened about how better prognosis can be achieved. His dedicated work in sickle cell children has shown the real time burden of sickle cell disease in India.

This webinar was graced by Stalwart faculties as follows.

**Chief Guest :** Dr. Chandra Mohan (MD, IAP, PGDAP, MAMS, PGPN); Professor & Head Paediatrics AIIMS Patna.

**Guest of Honour :** Dr. K P Sarabhai ( CIAP, EB, CH AP ) Dr. Rakesh Kumar Pardal (President CGAP).

**Chairperson :** Dr. Madhushree Deshpande ( EB WPF CG state ).

The session was moderated by **Dr. Namita Shrivastava** with Co moderator **Dr. Poonam Aggrawal**

9th May 2025



1<sup>st</sup> annual conclave of "WE CONNECT" at Nashik under able guidance of **Dr. Sangita Bafna** (WPF Chairperson).

11th June 2025



- **Topic :** Adolescent Health Goals. Innovation & Integration for sustainable outcome.
- State Haryana WPF
- This wonderful informative session was conducted explaining complexities of Adolescence & why India needs to have comprehensive plan.
- Our stalwart faculty mentioned Adolescent Health Issues beyond infections like triple burden of nutrition, reproductive & sexual Health, mental health issues & very important burden of non-communicable diseases.

Adolescent boys also face social stigma & their issues need separate attention. She emphasized on multilateral partnership beyond Government policies to have sustainable outcomes. Many activities conducted in Haryana were shared & It showcased real life scenarios & work being done by WPF team Haryana.



- Stalwart faculty hidden gem of IAP Dr. Savita Chaudhary .
- This session was graced by our National President Elect as Chief Guest
- Dr. Neelam Mohan ( IAP President elect & B.C. Roy Awardee). Madam shared her vital viewpoints about the transition period of adolescence.

- Dr. Premlatha Krishnan was our guest of honour.
- While Dr. Archana Soni, Dr. Puneet Pooni were Chairpersons.
- This session was moderated by Moderator Dr. Reenu Bhatia

## 22nd June 2025

WOMEN PEDIATRICIANS FORUM  
2024-25

Founder Chair	WPF Chairperson	Chairperson Elect	Hon. Secretary	Vice Chairperson	Treasurer
Prof. Himabindu Singh	Dr Sangita Lodha	Dr Madhu Raturi	Dr Anuradha Sanadhy	Prof. Elizabeth KE	Dr Narmada Ashok

International Yoga Day Celebration  
in a unique way

Rejuvenating Session by Expertees

Dr Sushama Dugad  
MD (Respiratory Medicine)  
Prof. & HOD  
Dr Vasantrao Pawar Medical College, Adhao, Nashik  
Master trainer in laughter yoga

Mr. Sunil Nagre  
Vice President : Nityanand Hasya Club  
Founder - Neelkanth Samrat Hasya Club Nashik

**Laughter Yoga FUN**

- On the occasion of International Yoga Day 2025 fun filled Yoga Day celebration was organised. This year special Session on “Laughter Yoga” was conducted by Instructor Dr. Sushma Dugad. This is a unique exercise routine of unconditional laughter with Yogic breathing developed by Dr. Madan Kataria in 1995.
- It has lots of benefits for both body & mind in terms of reducing stress, boosting immune system, also positive mood elevation, uplifting overall wellbeing. Releasing beneficial endorphins brings harmony.

- This session was conducted by Stalwart faculty Dr. Sushma Dugad (Trained in Laughter Yoga). She is also practicing Pulmonologist MD (Respiratory Medicine).
- Our Chief Guest Mr. Sunil Nagre (Founder Chair of Nilkanth Samrat Hasya Club) Also shared his valuable inputs.
- Team WPF founder Chair & Central AHA chairperson **Prof Dr. Himabindu**
- **Prof Dr. Shailja Mane, WPF Chairperson Dr. Sangita Lodha** mam & all WPF stalwarts attended session in full zeal .

26th July 2025

**WPF MH STATE WEBINAR**

**WOMEN PEDIATRICIANS FORUM 2024-25**

3.30 pm - 5.00 pm  
26/07/2025 Saturday

**Topic-EQ Essentials: Taming Anger,Empowering Minds**

**Chief Guest** **GUEST OF HONOR** **Moderators**

**Panelist**



Founder Chair	WPF Chairperson	Chairperson Elect	Ms. Secretary	Vice Chairperson	Treasurer
Prof. Hemlata Singh	Dr. Sangita Lodha	Dr. Ravindra Sonawane	Dr. Anuradha Sanadhye	Prof. Elizabeth KE	Dr. Narmada Aroh

- **Topic :** Emotional Quotient Essentials
- EQ is social need in current era. Taming Anger Empowering minds exploring self-awareness & emotional regulation are essential parts of emotional intelligence.
- Explore the way EQ can handle anger both our own & our patients & families.
- This session was an exciting ride to understand what is EQ & application of the same in terms of regulating emotions. This empowers ability to change mood meter ways to curtail anger & utilising same energy for constructive purposes. It calls upon developing very important skill of intrinsic motivation.

- Techniques to stop amygdalahighjack were discussed like reasoning & mindfulness. Dr. Trupti Mahatme enlightened audience with thought provoking story of The Snake & Saw.
- This session was graced by - **Prof Dr. Shailja Mane**
- (HOD Pediatrics & Adolescent Health DYPMC, Pune). Madam is star faculty otherwise & has initiated Milk Bank YASHODA. She shared her valuable inputs.

**Our Guest of honour were**

- Dr. Ravindra Sonawane
- Dr. Deepa Phirke

#### **Moderator :**

- Dr. Reena Rathi
- Dr. Tripti Mahatme

#### **Panelist :**

- Dr. Shama Kulkarni
- Dr. Sangita Lodha
- Dr. Sudit Tamboli
- Dr. Sulbha Pawar
- Dr. Sudhachar Ujalata.

# WPF Social Media Accounts



WEBSITE  
[www.wpfindia.org](http://www.wpfindia.org)



OFFICIAL MAIL  
[womenpediatriciansforum@gmail.com](mailto:womenpediatriciansforum@gmail.com)



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YOUTUBE CHANNEL  
[www.youtube.com/@WomenPediatriciansforum](https://www.youtube.com/@WomenPediatriciansforum)



WHATSAPP GROUP LINK  
<https://chat.whatsapp.com/>

# Cover Page Design Entries

## WeConnect

Finance

 makes you more confident

Health

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Technology

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"Taking care of yourself is the most powerful investment."



Dr. Shweta Anand (Professor)

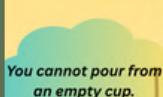
Self care is best investment.

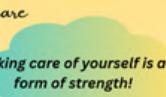


## WE CONNECT

The Official Publication Of WPF

Theme: Selfcare

 You cannot pour from an empty cup.

 Taking care of yourself is a form of strength!

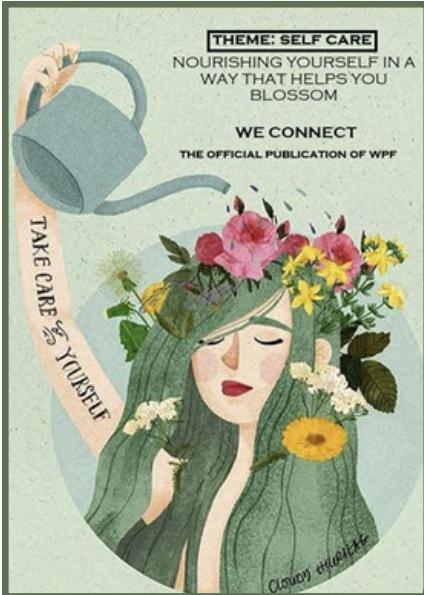


F . L . Y .  
First Love Yourself

Dr. Nisha Rajput.

2nd year resident  
Paediatrics





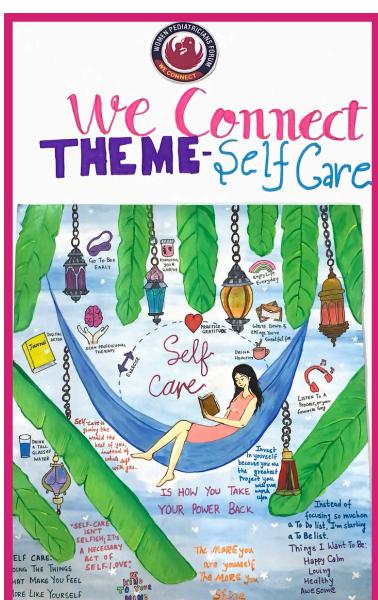
## Dr. Sabrina Joseph (PG 1st year)

An empty lantern provides no light. Self care is the fuel that allows your light to shine brightly.



## Dr. Soumya Jain (PG 3rd year)

Self-care is so important. When you take time to replenish your spirit, it allows you to serve others from the overflow. You cannot serve from an empty vessel.



## Dr. Mohini Malhotra (Assistant Professor )

LNMC medical college and hospital bhopal

