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Services:

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1. We select the right doctor and the right hospital.
2. We pick a doctor and select a hospital that is exceptional at treating your problem.
3. We get to choose from amongst the best that India has to offer.
4. We give you an informed medical opinion and a customized cost estimate.
5. We answer all your questions - with thought and care.
6. We are here to answer, normally within 24 hours
7. We help you get your visa for India.
8. We assist you with yourtravel.
9. We receive you at the final destination airport in India.
10. You will be received by our representative at the airport and escorted to the hospital. You can also ask for a wheelchair, stretcher, an ambulance etc. High risk patients are received by specially equipped cardiac ambulances staffed by a doctor trained in emergency medicine, a nurse and a medical attendant.
11. We will help you change money conveniently, without any hassles, be it travelers cheques or currency (USD, GBP, Euro).
12. We help you reach your doctors even after you are back home.

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1. Translation service
2. Servicing special menu requirement
3. Facilitating stay of escort
4. Travel and sightseeing tour
5. Shopping tour
6. Value additions for patient / escorts :
7. General medical checkups, dental treatment, eye checkups, cosmetic procedures, rapid weight loss, nature cures, ayurvedic treatments and rejuvenation packages

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Treatments Offered:

Cardiology

- Angiography
- Angioplasty
- CABG
- Mitral Valve Repair
- Pacemaker
- Radio Frequency Ablation

Neurology

- Burr-hole Cervical Decompression
- Lumbar laminectomy
- Spinal Fusion
- Spinal Tumours

Orthopaedic

- Total Knee Replacement
- Unicondylar knee replacement
- Total Hip Replacement
- Hip resurfacing
- Total Shoulder Joint Replacement
- Arthroscopy
- Cruciate Knee
- Ligament Repair

ENT

- Adenoidectomy Caldwell LUC
- Direct Laryngoscopy
- Fess (Functional Endoscopic Sinus Surgery)
- Laryngectomy Mastoidectomy
- Maxillectomy
- Microlaryngoscopy
- Myringotomy
- Oesophagoscopy
- Polypectomy
- Septoplasty
- Sub mucous diathermy
- Tonsillectomy
- Tracheostomy
- Tympanoplasty
- Young‘s operation

Opthalmology

- Cataract with IOL

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- Cataract without IOL
- Retina Detachment
- Squint correction (2 muscles)
- Glaucoma Lasik surgery

Dental

- Root canal treatment

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- Dental Implants
- Ceramic Crown
- Ceramic Inlay
- Ceramic Veneers
- Scaling & planing
- Flap Surgery Surgical Extraction Of Impacted Molar

Oncology

- Chemotherapy
- Radiation Therapy
- Cancer Surgery
- Types of Surgery

General Surgery

- Appendicitis
- Cholecystectomy
- Gastrectomy
- Hernia repair
- Splenectomy T
- hyroidectomy

Weight Loss / Obesity Surgery

- Gastric Banding
- Gastric Bypass

Gynaecology

- Dilation and curettage – D&C
- Lap Ectopic Gestation Lap Adhesiolysis
- Lap Ovarian Cystectomyr
- Mid termination of pregnancy (MTP)
- Normal Delivery
- LSCS LSCS with tubectomy
- Hysterectomy
- Tubectomy

Health Check

- Cardiac Risk Evaluation Consultations
- General Investigations
- Kidney Profile
- Lipid Profile
- Liver Function Tests

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Cosmetic Surgery

- Botox Breast Augmentation Breast Lift
- Brow Lift Chemical Peel Chin Surgery
- Face lift Gynecomastia Hair Transplant
- Injectable Fillers Labial Reduction Laser Skin Resurfacing
- Lip Augmentation Liposuction Microdermabrasion

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- Permanent Eyeliner Rhinoplasty Sex Reassignment Surgery
- Spider Veins Tummy tuck

Urology

- Cystoscopy
- Hydrocelectomy
- Lithotripsy
- Nephrectomy
- Orchidopexy
- PCNL
- Urethroplasty

Cardiology

We offer a complete range of investigations, medical procedures and surgeries at our hospitals. The treatment procedures listed below is a partial list only:

- Angiography Angioplasty CABG
- Implantable Cardiac Defibrillator Mitral Valve Repair Pacemaker
- Radio Frequency Ablation

Angiography

Coronary angiography is a procedure in which a contrast material which can be seen using specialised equipment, is injected into one of the arteries of the heart. This allows the observation of the blood flow through the heart to detect blockages in arteries. An intravenous line is inserted into one of the blood vessels in the arm or groin area. A catheter is then inserted through the IV which is carefully guided into the heart using an x-ray machine that produces real-time pictures. Once the catheter is in place, a contrast material is injected and images are taken giving the cardiologist a true picture of the region in which arterial blockages lie, the number of blockages and extent of damage.

Duration of stay

The procedure itself takes one to several hours. Duration of stay in the hospital after the procedure is normally one to two days.

Angioplasty

The arteries of the heart can become narrowed and blocked due to buildup of a material called plaque on their inner walls. This narrowing reduces the flow of blood through the artery and can lead, over time, to coronary artery disease and heart attack. In angioplasty, a thin tube with a balloon or other device on the end is first threaded through a blood vessel in the arm or groin region up to the site of a narrowing or blockage in a coronary artery. Once in place, the balloon is then inflated to push the plaque outward against the wall of the artery, widening the artery and restoring the flow of blood through it. A device called a stent is inserted in the area where the artery is narrowed to keep it open. Some stents are "coated" with medication to help prevent the artery from closing again. Stents are used in most angioplasties

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except when an artery is too small for a stent to fit.

CABG

Coronary Artery Bypass Graft surgery, also known as Bypass Surgery is advised for selected groups of patients with significant narrowings and blockages of the heart arteries (coronary artery disease). CABG surgery creates new routes around narrowed and blocked arteries by

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‗bypassing' them with arteries harvested from other healthy areas of the body, allowing sufficient blood flow to deliver oxygen and nutrients to the heart muscles.
Implantable Cardiac Defibrillator [ICD]
A device called a defibrillator is inserted into the patient's heart and chest to send out a small, controlled electrical pulse when needed to get the heart rhythm back to normal.:

Mitral Valve Repair
Mitral valve repair is an open heart procedure to treat narrowing or leakage of the mitral valve. The mitral valve is the inflow valve for the left side of the heart. Blood flows from the lungs, where it picks up oxygen, and into the heart through the mitral valve. When open, the mitral valve permits oxygenated blood to flow into the heart's main pumping chamber called the left ventricle. It then closes to keep blood from leaking back into the lungs when the ventricle contracts (squeezes) to push blood out to the body.

Pacemaker
A pacemaker is basically made up of two parts - a generator and the leads. The pacemaker generator constantly monitors your heart for the electrical signals, which keep the heart beating. If a signal is not found within the programmed amount of time (specified by your doctor) the pacemaker will send an electrical impulse to make your heart beat. The generator also houses the pacemaker's battery, which in normal circumstances needs to be replaced every 3-6 years. The leads connect the generator to the heart muscle, convey the heart's electrical signals to the generator, and (if necessary) deliver electrical shocks to the heart.

Radio Frequency Ablation
This is a procedure which uses radio waves to silence an abnormal area in the heart's electrical system, which is usually found during an electrophysiology study.

Neurology
We offer a complete range of investigations, medical procedures and surgeries at our hospitals. The treatment procedures listed below is a partial list only:

- Burr-hole Cervical Decompression Lumbar laminectomy
- Spinal Fusion Spinal Tumours

Burr-hole
A "burr-hole" is a small opening in the skull made with a surgical drill. A hole is drilled down to the dura or protective sheath around the brain. The dura is then cut to allow accumulated fluids to drain out through a catheter. The cavity in the head is washed out to remove any fluid remnants.

Cervical Decompression
Compression of nerves or spinal cord is usually caused by disc material or bony spurs.
In an anterior cervical decompression and fusion procedure the approach is from the front of the neck . The procedure involves removal of disc and/or bone mass. The resulting cavity is

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then filled with a bone graft from the hip. Sometimes screws and plates are used to hold the structure in place

Posterior cervical decompression is done if there is significant compression on the spinal cord from bone spurs from the joints in the back of the neck or because of thickening of ligaments that are found on the back of the spine. Normally, this procedure is combined with a fusion and/or an anterior approach.

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Lumbar laminectomy

Lumbar laminectomy is a surgical incision into the backbone to obtain access to the spinal cord. It is used to treat herniated intervertebral discs, or to relieve pressure on a spinal nerve, which occurs when spinal nerves are pinched by a narrowing of the spinal canal.

A small incision is made in the lower back in order for the surgeon to see the pinched spinal nerves and/or the compressed cauda equina. The lamina of the vertebra is removed or trimmed to widen the spinal canal and create more space for the spinal nerves. This procedure is also used to remove tumours.

Spinal Fusion

Spinal fusion is a procedure which joins or ‗fuses' one or more of the vertebrae of the spine in order to prevent any motion between them. Bone grafts are placed around the spine during the fusion procedure. The grafts, after several months of healing and growth in the surgery site, weld the vertebrae together.

Fusion is considered in the following situations:

fractured vertebra associated with spinal cord or nerve injury, deformities of the spine (scoliosis or spondylolisthesis), friction & pain caused by movement, cervical disc herniations and abnormal or excessive motion between two or more vertebrae

The Fusion Procedure

The objective is to fuse two or more vertebrae by the placement of a bone graft between the vertebrae. In some cases instrumentation such as plates, screws and cages are used primarily to secure the vertebral structure against misalignment while the bone grafts grow and reinforce the vertebrae.

During surgery, the spine may be approached and the graft placed either from the back (posterior approach), from the front (anterior approach) or by a combination of both. In the neck, the anterior approach is more common; lumbar and thoracic fusion is usually performed posteriorly. Minimally invasive surgical techniques may sometimes be used for this procedure.

Spinal Tumours

A spinal tumor is a cancerous or non-cancerous growth within or near the spinal cord or in the bones of the spine. The physical mass of the growth can impinge on nerves in the spinal region causing pain, neurological problems and even paralysis, in extreme cases.

Diagnosis is done on the basis of medical history and physical examination followed by MRI, CT , myelogram, positron emission tomography (PET scans) and nuclear medicine bone scans A biopsy will be done to determine if the growth is malignant and will also help in staging the cancer if the tumour is malignant.

Surgery is a good option in treating:

- Tumors that can be removed with a minimal risk of nerve damage.
- Intramedullary and intradural-extramedullary tumors
- Benign tumors in the vertebrae

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When a tumor has metastasized to the spine, radiation is usually the treatment of choice

Surgical stabilization of the spine may be required to correct any instability caused either by the tumor or by the surgery to remove it. The surgical approach may be the neck, chest or abdomen.

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Orthopaedic

We offer a complete range of investigations, medical procedures and surgeries at our hospitals. The treatment procedures listed below is a partial list only:

- Total Knee Replacement Unicondylar knee replacement Total Hip Replacement
- Hip resurfacing Total Shoulder Joint Replacement Arthroscopy
- Cruciate Knee Ligament Repair

Total Knee Replacement

Total Knee Replacement (TKR) surgery is a technique that removes a diseased knee joint and replaces it with a prosthesis (artificial joint). A surgeon cuts away damaged bone and cartilage from your thighbone, shinbone and kneecap, and replaces it with an artificial joint (prosthesis) made of metal alloys, high-grade plastics and polymers. Depending on the condition of the cartilage on the undersurface of the kneecap, this may also be replaced. The actual procedure takes about 1 ½ to 2 hours.

Knee replacement surgery is also known as total knee arthroplasty.

Essentially, there are two main types of artificial knee replacements that are in common use:

- Cemented Prosthesis
- Uncemented Prosthesis

Your age and lifestyle as well as the surgeon‘s experience will determine the choice between a cemented or uncemented prosthesis.

Studies show that knee replacement implants function well in 90-95% of patients, even 10 to15 years after surgery. In fact, most knee replacements last more than 20 years and many will last much longer.

Unicondylar knee replacement

A unicondylar knee replacement replaces only half of the knee joint. This procedure is performed if the damage is limited to just one side of the joint.

During surgery, only the damaged part of knee joint is replaced. Several surgeons prefer a total knee replacement to the half-knee (unicondylar) replacement even if the damage is restricted to one part only.

The unicondylar knee replacement is also ideal for patients in their forties or fifties with unicompartmental arthritis. The patient should weigh less than 100 kgs.

Total Hip Replacement

A total hip replacement (THR) - also called a hip arthroplasty- is a surgical procedure that re- forms the hip joint. Hip replacement surgery involves the replacement of the femoral head — the "ball" of the thighbone — with a metal ball and stem.

Hip implants come in a range of materials : a combination of durable, wear-resistant plastic and metals, including stainless steel and titanium. All these materials are designed to be accepted by the body. They are also resistant to corrosion, and wear & tear.

The most widely used implant features a metal stem and a metal cup, with a plastic spacer in

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between. These implants have a well documented success rate , with over 90% functioning well after 10 years and 80% after 20 years.

Hip resurfacing

Traditional hip replacement requires the removal of a significant quantum of bone mass - the head of the femur (the bone in the upper leg) to replace it with an artificial ball.

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Hip resurfacing is a more conservative surgical procedure which shields these worn ball-and- socket surfaces in the hip joint with smooth, durable metal components. By conserving more bone mass, younger patients retain the option of a traditional hip replacement procedure, if later needed.

The most popular hip resurfacing system is the Birmingham Hip Resurfacing system The Birmingham Hip has two main parts, both of which are made of metal, normally, high-carbide cobalt chrome.

A metal cap that is placed over the resurfaced femoral ball and the ball of the femur which is resurfaced before the metal cap is placed over it.

Total Shoulder Joint Replacement

In a total shoulder joint replacement, a metal ball is used to replace the humeral head while the glenoid socket is replaced by a polyethylene cup.
Total shoulder replacement is indicated when there is pain which will not respond to non-operative treatment. Pain may be the result of changes in the joint surfaces as a result of arthritis or injury.

The primary goal of total shoulder replacement surgery is to alleviate pain with secondary goals of improving motion, strength and function.

Surveys show that over ninety per cent of patients report good or excellent results and some patients have been functioning very well for 20 or more years.

Arthroscopy

Arthroscopy is a surgical procedure which is used to visualize, diagnose and treat problems within a joint. A small incision is made and a pencil-sized instrument, called the arthroscope, is inserted. The arthroscope contain a small lens and illumination system that magnifies the structures inside the joint. Thus the surgeon is able to see the interior of the joint through a small incision. He is also able to evaluate the type and extent of injury, and then correct the problem. The joints that are treated most frequently with this instrument are the knee, elbow, hip, shoulder, wrist and ankle
Some of the most commonly done procedures using arthroscopy:

- Repair of torn ligaments
- Reconstruction of anterior cruciate ligament in knee
- Repair or resection of torn cartilage (meniscus) from knee or shoulder
- Rotator cuff procedure
- Removal of inflamed lining (synovium) in knee, shoulder, elbow, wrist, ankle
- Release of carpal tunnel
- Removal of loose bone or cartilage in knee, shoulder, elbow, ankle, wrist

Cruciate Knee Ligament Repair

Ligaments are strong, non-elastic connective tissues that encase a joint. The anterior cruciate ligament (ACL) is a key stabilizing ligament in the knee. Injury is by way of a sprain or a tear.

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The posterior cruciate ligament (PCL) is located in the rear of the knee and connects the thighbone to the shinbone to prevent the shinbone from moving too far backward

A tear of the ligament can be partial or complete and can lead to destabilization of the knee. In some cases the ligaments and meniscii are damaged at the same time. The extent of injury depends on the direction and severity of the injuring force.

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Arthroscopic surgery, which is minimally invasive and uses pencil-sized instruments, is used to determine and repair damage to the cartilage in the knee.

The damaged ACL is replaced with strong, healthy tissue taken from another area near the knee. Tendon from under the kneecap (patellar tendon) or hamstring may be used. The tissue is wired through the inside of your knee joint and Is attached to the ends to the thighbone and shinbone.

If the PCL is completely torn, it may be reconstructed using a portion of the patellar tendon or some other autograph.

E N T

We offer a complete range of investigations, medical procedures and surgeries at our hospitals. The treatment procedures listed below is a partial list only:

- Adenoidectomy Caldwell LUC Direct Laryngoscopy
- Fess (Functional Endoscopic Sinus Surgery) Laryngectomy Mastoidectomy
- Maxillectomy Microlaryngoscopy Myringotomy
- Oesophagoscopy Polypectomy Septoplasty
- Sub mucous diathermy Tonsillectomy Tracheostomy
- Tympanoplasty Young‘s operation

Adenoidectomy

Adenoidectomy is the surgical procedure involving the surgical removal of the adenoids. Adenoids are lymphoid tissue located at the rear portion of the nose. Although the tissue composition of adenoids is the same as that of the tonsils, the diseases associated with infected adenoids differ from the diseases associated with infected tonsils, based on their location.

Caldwell LUC

The ear, nose, and throat specialist will prescribe many medications (antibiotics, decongestants, nasal steroid sprays, antihistamines) and procedures (flushing) for treating acute sinusitis. There are occasions when physician and patient find that the infections are recurrent and/or non-responsive to the medication. When this occurs, surgery to enlarge the openings that drain the sinuses is an option. The Caldwell LUC is a procedure which relieves chronic sinusitis by improving the drainage of the maxillary sinus, which is entered through the upper jaw above one of the second molar teeth. An opening is created to connect the maxillary sinus with the nose, thus improving drainage

Although infrequently performed and to a greater extent, replaced by endoscopic maxillary sinus surgery, the Caldwell-Luc procedure is still useful in gaining access to the maxillary sinus.

Direct Laryngoscopy

Direct laryngoscopy is a procedure in which the doctor uses a fiber-optic scope to see

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deeper into the throat than during indirect laryngoscopy. The laryngoscope is either flexible or rigid. Fiber-optic scopes provide better views and are better tolerated than older, rigid scopes. Laryngoscopy is used to examine and diagnose problems inside the throat. It is most often performed for the following reasons:

- To diagnose the cause of a persistent cough, hoarseness, or bad breath
- To visualize a mass in the throat or neck
- To evaluate reasons for difficulty swallowing
- To remove a foreign object

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- To diagnose suspected cancer
- To evaluate a possible cause for persistent earache

Fess (Functional Endoscopic Sinus Surgery)
Fess is a procedure wherein a thin rigid optical telescope, called an endoscope, is used through the nose to view the nasal cavity and sinuses. The procedure permits direct visualization of the maxillary, frontal, and sphenoid sinuses and diseased or obstructive tissue can be removed if necessary.

Laryngectomy
A laryngectomy is the partial or complete surgical removal of the voice box (larynx).

Mastoidectomy
Mastoid air cells are open, air-containing spaces in the skull, behind the ear. A mastoidectomy is the surgical removal of these mastoid air cells.

The surgery used to be a common way to treat an infection in the mastoid air cells, which usually came from an ear infection that spread to the nearby bone in the skull. Mastoidectomy is now seldom needed, as the infections are commonly treated with antibiotics. However, this surgery may be used to treat other problems such as cholesteatoma, complications of otitis media, or used as a surgical approach for cochlear implant insertion.

Microlaryngoscopy
Microlaryngoscopy is a procedure that enables the doctor to look into the vocal folds of the patient in great detail with magnification. The magnification may be with a microscope, endoscope or by video enlargement. It is often accompanied by some additional procedure such as removal of a mass, swelling or tumor. Long delicate instruments or a laser may be utilized.

Myringotomy
Myringotomy is the incision and drainage (I&D) procedure for acute otitis media. In this procedure, the tympanic membrane (TM) is incised with a knife, which allows a fluid-filled middle ear to drain to the ear canal and the exterior. Depending upon the size of the hole and the method used to create it, the TM usually returns to normal within days to a few weeks.

Polypectomy
Polypectomy is the surgical removal of a polyp.

Septoplasty
Septoplasty or septal reconstruction is an operation to correct a deformity of the nasal septum.

Sub mucous diathermy
Sub mucous diathermy is the therapeutic generation of local heat in tissues by high-frequency

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electromagnetic currents.

Tonsillectomy

Unfortunately, there may be a time when medical therapy (antibiotics) fails to resolve the chronic tonsillar infections that affect your child. In other cases, your child may have enlarged tonsils, causing loud snoring, upper airway obstruction, and other sleep disorders. The best recourse for both these conditions may be removal or reduction of the tonsils and adenoids.

Tracheostomy

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Tracheostomy is the surgical construction of an opening in the trachea for the insertion of a catheter or tube to facilitate breathing.

Tympanoplasty
Tympanoplasty is the surgical correction or repair of defects or injuries in the eardrum or the bones of the middle ear.

Young's operation
Closure of the nostrils in atrophic rhinitis is a procedure known as Young's operation.

Opthalmology

We offer a complete range of investigations, medical procedures and surgeries at our hospitals. The treatment procedures listed below is a partial list only:

- Cataract with IOL Cataract without IOL Retina Detachment
- Squint correction (2 muscles) Glaucoma Lasik surgery

Cataract with IOL
Cataract without IOL
Retina Detachment
Squint correction (2 muscles)
Glaucoma
Lasik surgery

LASIK is a surgical procedure that can eliminate a person's dependency on glasses or contact lenses by permanently changing the shape of the cornea of the eye. For clear vision, the eye's cornea and lens must bend (refract) light rays properly, so that images are focused on the retina. If the light rays aren't clearly focused on the retina, the images you see are blurry. This blurriness or refractive error is caused by an imperfectly shaped eyeball, cornea, or lens. LASIK uses an ultraviolet laser to precisely remove corneal tissue to correct the shape for better focusing.

Dental
We offer a complete range of investigations, medical procedures and surgeries at our hospitals. The treatment procedures listed below is a partial list only:

- Root canal treatment Dental Implants Ceramic Crown
- Ceramic Inlay Ceramic Veneers Scaling & planing
- Flap Surgery Surgical Extraction Of Impacted Molar

Root canal treatment
Root canal treatment is meant to correct disorders of the the soft tissue within the tooth that is known as dental pulp. Dental pulp contains connective tissue, nerves and blood vessels. Treatment involves removal of the tooth crown, or top. The affected pulpal tissue is exposed and the affected portion is removed. The affected and surrounding areas are sterilised, enlarged, and contoured to provide a bondable surface. A permanent filler is then put in to prevent any further infection and pain. A crown is then prepared and fitted on top of the

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natural tooth.

Dental Implants

Dental implants are small dental appliances that are inserted into the upper or lower jaws. Implants are an alternative to dentures and help to restore the mouth that has few or no non-restorable teeth. Dental implants are slowly replacing dentures, as they provide many advantages over traditional dentures.

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Most implants are made of metals such as titanium. There is no likelihood of an antigen-antibody response which could cause rejection of the implants.

Implants help facilitate proper chewing, reduce movement of dentures, bridges, and crowns. They support removable dentures or fixed bridge work and often improve speech and appearance

Ceramic Crown

A dental crown is a cap that is fitted over a tooth The crown fully covers the entire visible portion of a tooth that lies at and above the gum line. Crowns are available in a variety of materials : all ceramic, porcelain-metal, all resin, or all metal. While metal crowns resist wear and tear and are technically better in many ways, the lack of aesthetics in terms of the natural metal colour is a disadvantage . All -ceramic crowns offer good colour matches and are highly favoured, especially for front teeth.

Ceramic Inlay

Ceramic inlays are tooth-colored fillings that are used when there are large defects in the back teeth (molars and premolars).
They are made of glass-like porcelain-based and offer good aesthetics. Ceramic inlays are fixed in place using cement and are
strong and wear resistant.

Ceramic Veneers

Ceramic veneers are thin, custom-made shells which fit exactly on the faces of anterior teeth. They are designed to cover the front side of teeth and are made by a dental technician based on a model provided by your dentist.
Veneers help to conceal discoloration, cracks and chips, and irregularities in the shape or size of your teeth. Veneers are superior to bonding because they are more resilient and more resistant to stains and dulling.

Ceramic veneers are the preferred choice today for smile beautification.

Scaling & planing

Scaling is the removal of hardened particles from below the gumline by a hand device or by an ultrasonic cleaner. The objective is to remove irritants under a patient's gums, which cause inflammation and infection.
Scaling leaves a rough tooth texture which is smoothed out by planing. The removal of irritants and the even surface allows the gums to regenerate. Gum tissue normally shrinks and wraps around the teeth.

Scaling and planing is a non-surgical procedure that is effective in early stages of periodontal disease.

Flap Surgery

In advanced periodontal disease, when scaling and root planing have been unsuccessful, or

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when there has been bone loss that needs to be surgically corrected, it is important to be able to reach far under the gum. Flap surgery enables access to these areas.

Flap surgery involves the loosening of the gum from bone to expose and clean underlying tooth structures. Small incisions are made in the gum and it is raised to expose the tooth and bone. The affected area is carefully cleaned to remove tartar and infected granulation tissue. Periodontal disease often causes bone loss. As a result, the bone may need to be re-contoured to allow for proper healing of the gum.

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Surgical Extraction Of Impacted Molar

A wisdom tooth that lies underneath the gums and is embedded in the jawbone, requires surgery for the removal of the portion of bone that lies over the tooth. The procedure is done under local anaesthesia and the tooth is often extracted in small pieces rather than as a whole piece. This reduces the amount of bone mass that is lost while extracting the tooth.
The tooth and the surrounding tissue will be numbed with a local anesthetic to make the procedure comfortable. In addition, your dentist may also give you a sedative if needed.

Oncology

We offer a complete range of investigations, medical procedures and surgeries at our hospitals. The treatment procedures listed below is a partial list only:

- Chemotherapy
- Radiation Therapy
- Cancer Surgery
- Types of Surgery

Chemotherapy

Chemotherapy involves the treatment of cancer with drugs that can destroy cancerous (malignant) cells. Healthy cells grow and die in a controlled fashion. Cancer causes cells in the body to continuously divide and form more cells at an abnormal and rapid pace.. Anticancer drugs destroy cancer cells by retarding their growth and proliferation. As a side-effect, healthy cells may also be damaged. Healthy cells normally revive after chemotherapy is suspended or stopped.

Chemotherapy is used with the objective of curing the cancer, sometimes in combination with radiotherapy and surgery. A successful cure is achieved in some cases, in others control of the cancer and relief from symptoms is achieved. In advanced cases of cancer, the doctors may only be able to proved palliative medicine, to help the patient better tolerate the symptoms.

In neo-adjuvant therapy, drugs are used to shrink a tumor before surgery or radiation therapy. In adjuvant chemotherapy, drugs are used to destroy any cancer cells that may remain after surgery and/or radiation therapy. Chemotherapy also helps in controlling or destroying cancer if it recurs or spreads to other parts of the body from the original site

Radiation Therapy

Radiation therapy (also called radiotherapy, x-ray therapy, or irradiation) is a treatment approach that uses radiation to destroy cancer cells. The most commonly used radioactive substances are Cesium (137Cs),Cobalt (60Co) and Iodine (131I) .
Although radiation damages both cancer cells and normal cells, most normal cells can recover from the effects of radiation and function properly. The goal of radiation therapy is to

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damage as many cancer cells as possible, while limiting harm to nearby healthy tissue. Unfortunately, rapidly dividing healthy cells can also be killed by this process. Skin and hair are some of the tissues affected by radiation treatment, resulting in skin lesions, burning, hair loss,etc

Radiation can be from an external source (a machine outside the body), a radioactive source placed inside the body (internal radiation) or it might be systemic radiation therapy, which uses unsealed radioactive materials that go throughout the entire body.

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Radiation therapy is used to achieve varying objectives: to shrink a tumor before surgery to remove the cancer, to prevent the recurrence of cancer after surgery, etc..

Radiation is of different types and is delivered in different ways: for deep penetration, for wide area exposure, for focused exposure,etc.

Radiation therapy can be used to treat most solid tumours, including cancers of the brain, breast, cervix, larynx, lung, pancreas, prostate, spine, stomach, uterus, etc. Radiation can also be used to treat leukemia andlymphoma.

Stereotactic radiosurgery is a non-surgical procedure that is used to destroy tumor tissue in the brain. The patient‘s head is aligned in a special frame. The precise positioning allows high-dose radiation to be beamed directly at the tumor site in the patient‘s head. Precision dosing and targeting help conserve nearby tissues.

Stereotactic radiosurgery is mostly used in the treatment of small benign and malignant brain tumors, metastatic brain tumors,etc.

In Stereotactic radiotherapy multiple small fractions of radiation are used as opposed to one large dose. Smaller doses may improve outcomes and minimize side effects. Stereotactic radiotherapy is used to treat tumors in the brain as well as other parts of the body.

Cancer Surgery

Cancer surgery is used to achieve a number of goals: diagnosing cancer, treating it , relieving the symptoms it causes... Cancer surgery may be the prime course of treatment, or it may be used in conjunction with other treatments, such as radiation and chemotherapy.

Staging is the process by which a doctor determines how advanced the cancer is by evaluating the the size of the tumour, determining whether it's traveled to other parts of the body,etc.

For many tumors, which are localized, surgery offers the best chance for a cure by excising the affected area in full. When it's not possible to remove all of a cancerous tumour the surgeon may remove as much as possible to make chemotherapy or radiation more effective.

Surgery is sometimes used to relieve pain caused by a tumor that's pressing on a nerve or bone, or one that is obstructing other organs from functioning.

Types of cancer

- A B C
- Adrenal Cancer
- AIDS-related Lymphoma
- Anal Cancer
- Ataxia-Telangiectasia Bladder Cancer
- Brain Metastasis

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- Brain Tumors
- Brain Tumors (Childhood)
- Breast Cancer Carcinoma of Unknown Primary
- Cervical Cancer
- Chronic Lymphocytic Leukemia (CLL)
- Chronic Myelogenous Leukemia (CML)
- Colorectal Cancer

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- Craniopharyngioma
- Cutaneous T-Cell Lymphoma/Mycosis Fungoides
- E F G
- Endometrial and Uterine Cancer
- Esophageal Cancer
- Ewing's Sarcoma Fallopian Tube Cancer Gallbladder Cancer
- Gastric Cancer
- Gestational Trophoblastic Disease and Choriocarcinoma
- H K L
- Hairy Cell Leukemia
- Hodgkin's Disease
- Kaposi's Sarcoma
- Kidney Cancer
- Laryngeal Cancer
- Leukemia-- Acute Lymphocytic Leukemia (ALL)
- Leukemia-- Acute Myelogenous Leukemia (AML)
- Li-Fraumeni Syndrome
- Liver Cancer (Childhood)
- Liver Cancer (Hepatoma)
- Lung Cancer
- Lymphoma: Non-Hodgkin's Disease
- Lymphomas: Hodgkin's Lymphoma (Childhood)
- Lymphomas: Non-Hodgkin's Lymphoma (Childhood)
- M N O
- Medulloblastoma
- Melanoma
- Mesothelioma
- Metastases
- Myelomas
- Myeloproliferative Disorders Neuroblastoma
- Non-Hodgkin's Disease
- Non-Small Cell Lung Cancer Oropharyngeal Cancers
- Osteosarcoma
- Ovarian Cancer
- P R S
- Pancreatic Cancer
- Parathyroid Cancer
- Penile Cancer
- Pituitary Cancer
- Prostate Cancer Retinoblastoma
- Rhabdomyosarcoma and Other Soft-Tissue Sarcomas Sarcoma: Bone
- Sarcoma: Soft Tissue
- Sarcomas: Osteosarcoma
- Sarcomas: Rhabdomyosarcoma
- Small Intestine Cancers

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- Small-Cell Lung Cancer
- T U V
- Testicular Cancer
- Thymoma
- Thyroid Cancer Urethral Cancer Vaginal Cancer
- Veterinary Oncology
- Vulvar Cancer

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- W
- Wilms' Tumor

General Surgery

We offer a complete range of investigations, medical procedures and surgeries at our hospitals. The treatment procedures listed below is a partial list only:

- Appendicitis
- Cholecystectomy
- Gastrectomy
- Hernia repair
- Splenectomy T
- hyroidectomy

Appendicitis

Appendicitis is the inflammation and infection of the appendix, a small, finger-shaped pouch that is located at the junction of the large and small intestines

Appendectomy is the surgical procedure for removal of the appendix,. Surgery, normally complication free, is the standard treatment for appendicitis and patients usually recover from appendectomy without experiencing complications.

Cholecystectomy

The gallbladder is a small pear-shaped sac that is located beneath the liver in the upper right side of the abdomen.

Cholecystectomy is the surgical removal of the gallbladder when there are disorders such as gallstones (small, solid accumulations composed of cholesterol and bile salts). The gallbladder is not an essential organ although its function is important.

Gastrectomy

Gastrectomy is indicated for the treatment of bleeding gastric ulcer, stomach cancer and noncancerous polyps. This procedure involves the surgical removal of all or part of the stomach.

A large incision is made just below the breastbone to the navel. If the lower end of the stomach is diseased, clamps are placed on either end of the area and that portion of the stomach is removed. The upper part of the stomach is then attached to the small intestine.

If the upper end of the stomach is diseased, the affected portion is removed, and the lower part of the stomach is attached to the esophagus.

Total gastrectomy is done when most of the stomach is affected. The stomach is removed and the esophagus is joined to the intestine. Lymph nodes, a section of the pancreas, and the spleen may also need to be removed if there is cancer.

Hernia repair

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A hernia is caused by a weakening of the inner layers of the abdominal muscle. The lining of the abdomen projects out in the form of a small sac, which is sometimes penetrated by abdominal tissue and part of the intestine.

Hernias may occur in the groin, the navel, at the incision site of a previous surgery or when the lower part of the esophagus and a portion of the stomach slide up through the esophageal hiatus.

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Hernias are repaired by open surgery or by laparoscopic surgery. In either case, the hernia sac is opened and the intestine or other tissue are released into the abdomen. The abdominal muscle tissue is pulled back together using a synthetic mesh or a suture. The result is a reinforcement of the weakened area.

Splenectomy

The spleen is an important organ in fighting infection. It is found in the upper left-hand side of the abdomen, partly protected by the ribcage.

Splenectomy is the surgical removal of the spleen and is most commonly done to treat Hypersplenism which is not a specific disease but a group of symptoms, caused by several different disorders. For patients with primary cancers of the spleen and a blood disorder called hereditary spherocytosis (HS), splenectomy is the only course of treatment.

Complete splenectomy takes place when the entire spleen is removed. In partial splenectomy the surgeon removes only part of the spleen. This may be a useful compromise that reduces pain caused by an enlarged spleen while leaving intact some portion of the spleen function.

In Laparoscopic splenectomy the spleen is removed using a minimally invasive technique that involves the use of surgical instruments, with the assistance of a tiny camera and video monitor

Thyroidectomy

Thyroidectomy is the removal of all or part of the thyroid gland, which lies as two distinct lobes close to the voice box in the throat region. The most common indications for thyroidectomy include a large growth in the thyroid gland, difficulty in breathing or swallowing caused by a thyroid mass, suspected or proven cancer of the thyroid gland and hyperthyroidism (excess production of the thyroid hormone).

It is sometimes necessary for the surgeon to remove one or more of the parathyroid glands also while removing the thyroid gland.

The surgeon may decide on the extent of surgery (total or partial) in the course of surgery itself after examination of tissue samples removed during the surgery.

Weight Loss / Obesity Surgery

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- Gastric Banding
- Gastric Bypass

Gastric banding

Gastric banding is a technique in which a small pouch is created in the upper part of the stomach without stapling, thus limiting food intake.

A gastric band device is introduced through tiny (1cm) incisions in the abdomen and is placed around the upper part of the stomach. The resulting pouch (or the "new stomach") dramatically

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reduces the functional capacity of the stomach. The band has a balloon from the inside that is adjustable and can reduce stoma size, thus prolonging the period of fullness.
The operation is performed under general anesthesia and can last between 30 minutes and 1 hour. The Band is fitted around the uppermost part of the stomach, forming a 15cc small pouch. It is designed so that it can be inflated or deflated at any time after the operation. This helps the patient continually lose weight until they reach their targets.

Gynaecology
We offer a complete range of investigations, medical procedures and surgeries at our hospitals. The treatment procedures listed below is a partial list only:

- Dilation and curettage – D&C
- Lap Ectopic Gestation Lap Adhesiolysis
- Lap Ovarian Cystectomyr
- Mid termination of pregnancy (MTP)
- Normal Delivery
- LSCS LSCS with tubectomy
- Hysterectomy
- Tubectomy

Dilation and curettage - D&C
Curettage of the uterus (womb) is the scraping of the lining of the uterus – this procedure is commonly referred to as D&C or dilation and curettage.
There are two main reasons why a D&C is performed:
1) An evacuation D&C is performed in a recently pregnant woman to remove residual tissue in the womb
2) If a woman is experiencing heavy or irregular periods or vaginal bleeding after menopause, D&C forms part of the main investigation.

Lap Ectopic Gestation
Lap Adhesiolysis
Lap Ovarian Cystectomy
Mid termination of pregnancy (MTP)
Normal Delivery
LSCS
LSCS with tubectomy

Hysterectomy
Hysterectomy is the total or partial surgical removal of the uterus, normally done by a gynecologist. Hysterectomy may be total removing the body and cervix of the uterus or partial . In many cases, surgical removal of the ovaries is performed concurrent with a hysterectomy. The surgery is then called "total abdominal hysterectomy with bilateral salpingo-oophorectomy"

Abdominal Hysterectomy

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Tubectomy

Tubectomy litereally means cutting of tubes, which in this case are fallopian tubes which are situated in the lower part of the abdomen.These tubes are attached on one end to uterus and the other end opens in the abdomen. When the ova is released from the ovary, it is picked up by Fallopian tube and is transmitted to the uterus. If sperms are present in the Fallopian tubes, ova is fertilised and then that is embedded in the uterus. Hence, the fallopian tubes are responsible

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for transmitting ova from ovaries to uterus. In Tubectomy operation the tubes are divided by cutting the tubes so that ova are not transmitted to uterus.

Health Check
We offer a complete range of investigations, medical procedures and surgeries at our hospitals. The treatment procedures listed below is a partial list only:

- Cardiac Risk Evaluation Consultations
- General Investigations
- Kidney Profile
- Lipid Profile
- Liver Function Tests

Cardiac Risk Evaluation

- ECG
- Computerized Stress Test
- 2 D Echo

Consultations

- Physician
- Cardiologist
- Gynecologist (for women)
- Ophthalmic
- Dental Check

General Investigations

- Hbsag (marker for Hepatitis B)
- Serum Electrolytes
- Urine Routine
- Stool Routine
- Chest X ray (pa view)
- Spirometry (lung function study)
- Ultrasound Abdomen

TSH (Thyroid test)

- Stool for occult blood (for men and women 50 yrs and above)
- Audiometry (for men and women 50 yrs and above)
- PSA (for men)
- Pap Smear (for women)
- Breast and Pelvic examination (for women)
- Mammography (for women above 40 yrs.)

Kidney Profile

- Blood Urea Nitrogen (BUN)
- Serum Creatinine

Lipid Profile

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- Serum Cholestrol
- Serum Tryglycerides
- Serum HDL Cholesterol
- Serum LDL Cholesterol
- Serum VLDL Cholesterol
- Cholesterol / HDL Ratio
- Apolipoprotein A1

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- Apolipoprotein B
- Apo A1/Apo B Ratio

Liver Function Tests

- Serum Bilirubin
- SGPT
- SGOT
- GGT
- Serum Proteins (Alb, Glob, A/G Ratio)
- Sr. Alkaline Phosphate

Cosmetic Surgery

We offer a complete range of investigations, medical procedures and surgeries at our hospitals. The treatment procedures listed below is a partial list only:

- Botox Breast Augmentation Breast Lift
- Brow Lift Chemical Peel Chin Surgery
- Face lift Gynecomastia Hair Transplant
- Injectable Fillers Labial Reduction Laser Skin Resurfacing
- Lip Augmentation Liposuction Microdermabrasion
- Permanent Eyeliner Rhinoplasty Sex Reassignment Surgery
- Spider Veins Tummy tuck

Botox

Botox®, is a popular and widely accepted non-surgical toxin injection (a dilute form of botulism) which is injected into the facial muscles. The effects of Botox temporarily reduces frown lines, forehead creases, crows feet near the eyes and thick bands in the neck. The toxin blocks the nerve impulses, temporarily paralyzing the muscles that cause wrinkles while giving the skin a smoother, more refreshed appearance. Studies have also suggested that Botox works effectively in relieving migraines, excessive sweating and muscle spasms in the neck and eyes.

Breast Augmentation

Breast augmentation, is a surgical procedure to enhance the size and shape of a woman's breast This may be done for many reasons:

* To enhance the size and shape of the breast of a woman who feels her breast size is too small.
* To correct breast size after pregnancy.
* As a reconstructive technique following breast surgery.

By inserting an implant behind each breast, surgeons are able to increase a woman's bustline by one or more bra cup sizes.

Breast implants are used to make your breasts larger, firmer and fuller. Breast implants are available in a variety of shapes, types and sizes and are usually made of an outer layer of silicone, filled with either silicone gel or salt water (saline). One can see different types of breast implants and discuss the advantages and disadvantages of each with our highly qualified surgeons before you decide which one is best for you

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Matters to discuss with your surgeon:

- Breast Implant shape: round or teardrop
- Breast Implant surface: smooth or textured
- Breast Implant size and volume: cup size/210 ml-500 ml
- Breast Implant placement: above or below the muscle
- Breast Implant Incision site: armpit, areola, breast or belly button
- Am I a suitable candidate for breast augmentation?

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Breast Lift

Breast Lift - Mastopexy

Over time, factors such as pregnancy, breast-feeding, weight loss and gravity take their toll on a woman's breasts, affecting their shape and firmness. Breast lift, or mastopexy, is a surgical procedure to raise and reshape sagging breasts albeit, temporarily. Mastopexy can also change the size of the areola, the darker skin surrounding the nipple. If your breasts are small implants inserted in conjunction with mastopexy can enhance both their firmness and their size.

The Procedure

In most instances, mastopexy is performed under general anesthesia as an outpatient procedure, and lasts a few hours. For some women, breast lift can be performed under local anesthesia, while others, especially those with larger breasts that require more extensive surgery, require inpatient surgery with a hospital stay of one or two days. There are three basic techniques used for breast lift surgery: concentric mastopexy, vertical mastopexy, and anchor- shaped mastopexy.

Recovery / Post Op Expectations

After surgery patients are wrapped with gauze and elastic bandages or a surgical bra. Bruising, swelling, pain, and discomfort will be experienced for the first few days, but medication will be prescribed to help lessen the effects. Loss of sensation in the nipple and breast tissue is common, but usually returns as nerves begin to regenerate. Heavy lifting, excessive physical exertion, raising or lifting hands above your head, and sex should be avoided for at least a week or more, and patients should expect to be absent from work for approximately the same time.

Brow Lift

Brow lift (forehead lift) is a plastic surgery procedure which will raise your eyebrows to a higher and more aesthetic position. It will also improve lateral hoods (which are the droopy flaps of skin that hang over the outside corner of your eyes. Plastic surgery of your forehead will also soften your horizontal forehead wrinkles and the scowl lines between your eyebrows. As with any elective surgery, realistic expectations are important. When a surgeon tightens loose skin and removes the excess, forehead wrinkling and drooping brows are modified. The procedure is called a forehead lift or brow lift. If necessary, the surgeon removes part of the muscle that causes vertical frown lines between the brows. The result can be a smoother brow and a more youthful expression. To see what a forehead lift can do for your face, put your hands above your brows and outside the edges of your eyes and gently raise the skin upwards. Forehead lifts are an option if you have a sagging brow or deep furrows between the eyes. This procedure is usually done between age forty and sixty-five, although it may be necessary at an earlier age.

A brow lift is often performed in conjunction with a facelift to provide a smoother overall look to the face. Eyelid surgery (blepharoplasty) may also be performed concurrently especially if a patient has significant skin overhang in the upper eyelids. Sometimes, patients who believe they need upper-eyelid surgery find that a forehead lift better meets their surgical goals.

Patients who are bald, who have a receding hairline, or who have had previous upper-eyelid

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surgery may still be good candidates for forehead lift. The surgeon will simply alter the incision location or perform a more conservative operation.

Remember, a forehead lift can enhance your appearance and your self-confidence, but it won't necessarily change your looks to match your ideal or cause other people to treat you differently. You have to remember to have realistic expectations.

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Our experienced and competent surgeons will give you details on how to prepare for the surgery. There may be restrictions and guidelines on eating, drinking, smoking, and taking medications before the operation. It's usually a good idea to grow out some hair to help conceal the scars as they heal.

Post Surgery
Patients receiving the traditional brow lift will experience numbness and slight pain around the entiresite of the incision. Prescription drugs may be necessary to keep the discomfort level down. Swelling may be a significant problem which would subside within a few weeks.
Some patients notice an itching sensation as the swelling and numbness go away. This is a normal reaction as the nerves in the scalp heal. Hair loss and thinning can occur around the incision but return to normal in a month or so.

Chemical Peel
As we grow older, the accumulated effects of environmental elements damage our skin, making us look older than we actually are. Such skin damage can be treated with a chemical peel, a non- invasive procedure designed to promote cell growth and produce smoother, clearer skin.
Chemical peels are also used to treat melasma -a skin ailment characterized by irregularly shaped patches of brown skin commonly found on the face and neck. Chemical peels can be performed on the face, neck, chest, arms, hands, and legs.

What is Chemical Peeling?
Chemical peeling involves an application of a chemical solution to environmentally damaged, unevenly pigmented, and finely wrinkled facial areas. The procedure is meant to diminish imperfections by peeling away the skin‘s top layers. It has proven to be a very popular nonsurgical cosmetic procedure. Chemical peels would vary according to their specific ingredients. Depth of peeling action may also depend on factors such as sensitivity of the skin, how long solutions remain on the skin and the pressure with which they are applied.

What is the procedure?
The surgeon will select the chemical mix best suited for each individual patient. A solution is applied—using a sponge or brush—to the areas to be treated. In most cases, the most superficial peels are those using alpha hydroxy acids (AHA), such as glycolic, lactic or fruit acid. Various concentrations of an AHA may be applied weekly or at longer intervals to obtain the best result. Compared to AHA‘s, a trichloroacetic acid (TCA) peel is stronger, and has a greater depth of peel.

What is the recovery period?
After a chemical peel, most people experience some facial swelling and reddening. This is to be expected and, depending over the type of peel used, will diminish over a period of time.

Light peels: Alphahydroxy acids (AHAs): Some flaking, redness and dryness of skin will be felt. Over a period of time, natural healing will remove the outer layer of skin. Normal

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activity can be resumed one day after the peel procedure.

Medium peels: Trichloroacetic acids (TCA) In the case of TCA peels, the swelling and is significantly higher than that of light peels. Normal activity can be resumed within 10 days of the peel procedure

Deep peels: Phenol acid After a Phenol peel, your doctor may prescribe a mild pain medication to relieve any discomfort. The skin will be red at first but the color will lighten over a few weeks to a few months

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Sun block is strongly recommended, especially with TCA treatment. Skin pores may appear larger, and the skin may not tan evenly following a chemical peel.

Will I feel pain?
Most people feel a brief burning sensation during the procedure. The pain will vary depending on the level of sensitivity of the skin, the type of peel used as well as pain medications used. The BHA, AHA and TCA peels cause discomfort only during the application. The phenol peel may give discomfort to some after the procedure too.

Possible complications associated with chemical peels:
Possible complications associated with chemical peels may include but are not limited to the following:
• scarring
Chemical peels can cause scarring which can usually be treated effectively.
• change in skin color
For some people with extremely sensitive skin types, there is a risk of developing a temporary or permanent skin color change. Birth control pills, pregnancy or having a family history of brownish discoloration on the face are other factors which may increase the probabilities of developing abnormal pigmentation.
• cold sores and fever blisters
Those who are prone to cold sores, or herpes simplex infections, may have a reactivation of sores or blisters following a chemical peel.

Chin Surgery
Chin Surgery, also known as Genioplasty or Mentoplasty is a procedure which aims to correct a chin which is small, weak, recessed, jutting, vertically long or otherwise asymmetric. The consulting surgeon may sometimes recommend cervicoplasty (neck alteration) or a procedure of the nose known as Rhinoplasty to maintain the over all aesthetic look of your face.
The procedure is normally an outpatient one which can be carried out under intravenous sedation or GA. Incisions are placed beneath the chin for implants or inside the mouth for bone surgery. The implants are of various types of metal. Chin reduction normally necessitates reshaping of the jaw bone

You are normally asked to keep your head elevated, post surgery. Much of the swelling and discoloration disappears within a week in most cases.

Face lift
The face is the mirror to the soul and in many ways affects the way we react to situations, as well as the way people interact with us. Over age, facial muscles slacken, making the skin around the face and neck loose and saggy, giving an unbecoming look. What nature has done can be reversed by the plastic surgeon by ‗stretching' skin around the face and neck, giving you a younger and more confident look.
Face lifts come in a variety of flavors, but all of them pick up the slack in your face's skin and reduce fine lines and wrinkling. Face lifts can be done surgically, non-surgically and

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even through natural techniques. The traditional plastic surgery face lift is a medical procedure necessitating the use of local anesthetic and a scalpel. Incisions are made near the ear to allow the skin and underlying tissue to be reconstructed for firmer, more youthful-looking skin. This is a one-time procedure that can dramatically change the way you look. Usually a surgical technique is best for someone who has obvious signs of aging (slack, underlying layers of skin)

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Some non-surgical techniques have evolved in the recent past to provide an alternative to surgery. Gadgets like radio frequency emitters, lasers, and topical creams can all tighten the skin on your face without the need for incisions and tissue reconstruction. These methods have fewer complications, but also reduced results and are best suited for younger people who have shown the initial signs of aging.

Gynecomastia

Gynecomastia is a male affliction which when literally translated means _women-like breasts'. It is not an uncommon ailment, affecting about 40 to 50 percent of men

For men who are self conscious of the over development of their breasts, help is at hand by means of breast reduction surgery.

Gynecomastia can be caused due to many factors such as imbibing anabolic steroids (especially body builders), heredity, obesity etc. Persons who consume excessive alcohol or marijuana are dissuaded from undertaking surgery and are encouraged to try and lose weight by means of exercise before deciding on a course of surgery.

Gynecomastia can appear in two forms, genuine or 'real' and similar or 'pseudo.' In real Gynecomastia there is actual breast tissue present. In pseudo Gynecomastia there is no such breast tissue and the appearance is due to an accumulation of fat, part of a general overweight tendency. In this condition weight control and exercise reduce the problem

If excess glandular tissue is the primary cause of the breast enlargement, it will be excised with a scalpel. This may be done as a stand alone procedure, but at times, in conjunction with liposuction. In a regular procedure, an incision is made either on the edge of the areola or in the under arm area. Through this incision, the surgeon cuts away the excess glandular tissue, fat and skin from around the areola and from the sides and bottom of the breast. When liposuction is used to remove excess fat, the cannula is usually inserted through the existing incisions.

In very rare cases, where large amounts of fat or glandular tissue have been removed, the overlying skin may not adjust well to the new smaller breast contour. In these cases, excess skin may have to be removed to allow the removing skin to firmly re-adjust to the new breast shape and size.

Hair Transplant

For many men (and women), significant hair loss is experienced as age progresses. This may be due many factors, including heredity.

In a hair transplant, the doctor removes hair follicles from a different part of the body and grafts them onto the area of balding or thinning. Micrografts (grafts of 2-3 hairs) and minigrafts (grafts of 4 or more hairs) are frequently placed just behind the hairline to build up hair density.

Strips or patches of hair are taken from the back of the head. Hair from this area is less likely to thin, regardless of where it is transplanted. Hair removal from this area is also virtually

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undetectable. As much as half of the hair in this area can be taken without producing a noticeable difference.

The removed patches, or strips, are cut into smaller pieces, which are then ―planted‖ in the balding area. This transplanted hair continues to grow just as it did before. It will not thin or die unless hair in the region of the head from which it was taken also thins or dies.

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There are two common methods used for removing hair to be transplanted. Hair can be removed in small circular areas (plugs), each containing between eight and twelve hairs. Or, hair may also be removed in long strips along the sides or near the bottom of the hairline. The advantage of the second method is that it provides the physician with more hair to cut and mold into different-sized plugs and/or grafts. Thousands of grafts can be created from one strip of hair, each containing as few as 1-2hairs.

Next, incisions slightly smaller than the plugs are made in the balding area. For grafts, even smaller incisions are made with a tiny scalpel, or even a needle. Your doctor may use a laser to make these tiny cuts. The plugs/grafts are carefully spaced in order to allow adequate blood supply and produce a natural angle, growth direction and appearance.

Sutures are applied to close the area where the grafts or plugs were taken from. The skin will naturally stretch to cover a wider area. No sutures are required in the area where the plugs and grafts have been placed. The body‘s natural fluids will bond the plugs and grafts to the head.

Each transplanting session takes between two and four hours and are almost always performed as an outpatient procedure. The use of local anesthesia and a sedative make the procedure relatively painless.

Injectable Fillers

Soft-tissue fillers, most commonly injectable collagen or fat, can help fill facial lines and creases, caused by years of facial muscle movement, aging, sun exposure and gravity. Fillers temporarily restoring a smoother, more youthful-looking appearance. When injected beneath the skin, they plump up creased and sunken areas of the face. They can also add fullness to the lips and cheeks. Injectable fillers may be used alone or in conjunction with a resurfacing procedure, such as a laser treatment, or a recontouring procedure, such as a facelift

Although collagen is the best known filler, there are many other substances doctors can use to plump up your skin, including fat from your own body and synthetic materials. Here, we will try and explain to you how collagen works:

In young skin, the collagen framework is intact and the skin remains moisturized and elastic. It is resilient to the many facial expressions we adopt as well as everyday environmental exposure. But, over time, the support structure weakens and the skin loses its elasticity. The skin begins to lose its tone as the collagen support wears down. Every time you smile, frown or squint, you put stress on the collagen in your skin. The effect of these facial expressions is cumulative and facial lines begin to appear.

Injected collagen and fat are primarily used to improve the appearance of the skin's texture. They can help fill out deep facial wrinkles, creases and furrows, "sunken" cheeks, skin depressions and some types of scars. They can also be used to add a fuller, more sensuous look to the lips. Injectables are sometimes used in conjunction with facial surgery procedures; however, injectables such as collagen alone cannot change facial contour the way

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surgeries like dermabrasions, laser treatments and facial lifts can.

Labial Reduction

Every woman is constructed differently. It is common for a woman to feel dissatisfied with her labia minora (inner lips of the vagina), especially if they are particularly long or of uneven lengths (labial hypertrophy). A situation like this can cause great distress and can even lead to sexual dissatisfaction. Women who are faced with this situation can have their minora aesthetically reshaped. This process is known as labial reduction

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Labial hypertrophy may be congenital in nature and can affect young women in their late teens or early twenties, or develop later in women after pregnancy and/or vaginal childbirth. The labia may become elongated or stretched out due to hormonal changes or because of one or more vaginal deliveries because of which the elasticity and shape of the labia have changed.

A labial reduction surgical procedure reduces uneven or enlarged labia minora without leaving any visible scars. The procedure is minimally invasive. Labial reduction surgery results in a uniform, thinner appearance of the labia, which is typically more comfortable and appealing in size and shape. Most surgeons will not ‗cut' the labia but will ‗contour' and reduce the size o the labia without leaving a scar, making the surgery virtually undetectable later on, once healing has taken place.

Laser Skin Resurfacing

laser skin resurfacing is a procedure wherein a laser is used to remove areas of damaged / wrinkled skin, in layers so that new, smoother and vibrant looking skin can form. The procedure is used to minimize the appearance of fine lines, especially around the mouth and the eyes. However, laser skin resurfacing, as a technique is also effective in lessening facial scars or areas of uneven pigmentation. Often, the procedure is done in conjunction with another cosmetic operation, such as a facelift or eyelid surgery.

How is the procedure performed?

Brief, high intensity emissions of light from the laser remove layers of damaged or wrinkled skin at precisely controlled levels of penetration.

First, the doctor, or an assistant, will cleanse your face to remove oils from the skin. Antibiotic is then applied to kill bacteria. A beam of light from a microphone-shaped instrument is passed over the skin to vaporize the outer layers of damaged skin. The laser will be programmed for different levels of penetration. The doctor may choose to penetrate more deeply in some areas, in order to remove deep scars, stubborn spots, and wrinkles. Finally, your doctor, or a medical assistant, may apply a protective ointment or bandage to the treated area.

Two types of lasers are generally used. They vary according to their wavelength and pulse duration. These differences account for the depth at which they target the skin, the level of heat generated, and the likelihood of affecting surrounding tissues.

• Carbon Dioxide (CO_2) lasers – the most powerful laser, used for deep wrinkles. Note: CO_2 lasers may be unsafe for people who have had silicone injections, as the laser can burn and scar the skin over implanted areas.

• Erbium:YAG (Er:YAG) laser – gentler than the CO_2 laser and effective for mild wrinkles. It targets tissue more precisely than the CO_2 laser and causes less damage to surrounding tissue. Recovery after Er:YAG laser treatment is shorter than that after CO_2 laser treatment. When used at sufficient depth, some surgeons can remove deep wrinkles with the CO_2as effectively as the more powerful CO_2 laser, but with fewer side effects. The Variable Pulse YAG laser alternates between pulses that destroy tissue with pulses that heat the skin, and this process

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also resurfaces the skin as effectively as CO2 but with fewer side effects.

A combination of CO2 and Er:YAG laser treatments is now gaining popularity. In this treatment, the Er:YAG laser is first used to remove the epidermis, followed by use of the CO2 laser to achieve contraction of underlying collagen. This produces the collagen-tightening benefits of CO2 therapy but with minimal damage to surrounding tissues.

Lip Augmentation

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Lip augmentation is a procedure that creates fuller, plumper lips and reduces fine wrinkles around the mouth. Lips are injected with collagen or with fat transferred from another part of the patient‘s body. Both liquid collagen and fat are absorbed and repeat treatments are necessary to maintain results
The procedure is used to help persons of both sexes and of all ages. The upper or lower lip may be treated singly, or both lips may be augmented at the same time.

Lip augmentation can be performed on an outpatient basis under local anesthesia with light sedation, or local anesthesia and deep sedation. The procedure is normally an outpatient one and you can return home a few hours later.

Liposuction
Liposuction is a procedure that can help sculpt the body by removing unrequired fat from specific areas using thin suction tubes called cannulae that are placed into the body fat through small incisions. A vacuum is applied through a hose attached to the cannula. This draws fat out of the body. Areas of application are the hips, abdomen, thighs, buttocks, upper arms, chin, cheeks and neck. The best candidates for liposuction are people with normal weight, possessing firm, elastic skin but who have pockets of excess fat in certain areas. Liposuction is usually not intended as a weight-loss technique; however, the procedure is commonly used to remove stubborn, diet- and exercise-resistant fat deposits and to sculpt the body into a slimmer profile. The most frequently treated areas in women are the abdomen, hips, thighs, and knees. In men, the love handles, abdomen, and enlarged male breasts (gynecomastia) are most often treated. Other areas treated in men include the arms, neck, and face.

Tumescent Liposuction
Tumescent liposuction refers to a technique that uses large volumes of very dilute local anesthesia that is injected into the fat causing the targeted areas to be come tumescent, or swollen and firm. Local anesthesia is widely regarded as the safest form of anesthesia. Because local anesthesia persists for many hours there is no need for narcotic pain medications after surgery.

Modified Tumescent Liposuction
Modified tumescent liposuction refers to a combination of tumescent local anesthesia plus some form of systemic anesthesia (general anesthesia or heavy IV sedation). Because general anesthesia or heavy IV sedation can be dangerous, they must be administered by an anesthesiologist.

Liposuction can be accomplished painlessly either totally by local anesthesia or with general anesthesia.

The scars from liposuction are small and strategically placed to be hidden from view. However, imperfections in the final appearance are not uncommon after lipoplasty. The skin surface may be irregular, asymmetric or even "baggy," especially in the older patient. Numbness and pigmentation changes may occur.

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Microdermabrasion

Microdermabrasion is a recently adopted procedure which gently removes only the surface layers of damaged skin by sand blasting them with tiny crystals. The technique exfoliates the skin, aiding the formation of new smoother, clearer skin. Microdermabrasion is usually performed on the face and neck, but can be performed on any part of the body (such as the backs of the hands).

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Microdermabrasion aims to diminish the appearance of fine lines and wrinkles, open pores, reduce thickened areas of the skin, lighten age spots and minimise the appearance of acne scars. This technology offers the advantages of low risk and quicker recovery as compared to other traditional resurfacing modalities and has shown to be highly effective on suitable candidates.

Different methods include mechanical abrasion from jets of zinc or aluminum oxide crystals, or a roughened surface. Particles and removed material are usually suctioned off using a small vacuum

Microdermabrasion is a nonsurgical procedure and does not require any anaesthesia. Some redness may occur after the procedure, however, most patients can put on makeup and resume work on the same day, hence the procedure is sometimes called a ‗lunchtime peel'

Many dermatologists have noticed that Laser treatments or aggressive chemical peel have some advantages, but there is a loss of time due to a longer recovery period which can be a problem for some patients. Cosmetologists are seeing improved outcomes when they combine microdermabrasion treatments with other topical treatments.

Permanent Eyeliner

This procedure involves embedding a pigment just beneath the skin to add permanent color to that particular area. A hand-held device is used which punctures the skin hundreds of times per minute with a very fine needle and pushes the desired pigment into the location. In addition to defining the eyes, micropigmentation is used to enhance eyebrows and lips as well. The pigment is placed along the upper and lower eyelash margin (in between the eyelashes) giving you a 'fuller and darker lash' look.

Rhinoplasty

Rhinoplasty (also known as a nose job) is a type of plastic surgery that is used to improve the function or appearance of a person's nose.

Rhinoplasty can be performed under a general or local anesthetic, depending on the patient. Incisions are made inside the nostrils. Sometimes, tiny, inconspicuous incisions are also made on the columella, the bit of skin that separates the nostrils. The surgeon first separates soft tissues of the nose from the underlying structures, then reshapes the cartilage and bone.
In some cases, the surgeon may shape a small piece of the patient's own cartilage or bone to add to, the structure of the nose. Sometimes this is done to improve the shape of the nose or nasal tip or it may be done to improve breathing which may be obstructed.

Sex Reassignment Surgery

Sex Reassignment Surgery (SRS) is a procedure wherein a person‘s physical appearance including genitalia are changed to that of the other sex - (Male to female and female to male)
As a result of SRS, the person will have the external anatomical appearance and function typical of the new sex. They are unable to reproduce due to the lack of testes or ovaries except through prior sperm banking or embryonic freezing, which still require a genetic woman with a uterus

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to give birth.

Spider Veins

Spider veins are thread-like colored veins very often seen on the surface of the skin. They are not as painful as enlarged varicose veins but are still liable to bleed and worsen without treatment. Spider veins occur most commonly in the legs but are often seen in the face and elsewhere. Spider veins, medically referred to as telangectasias, do not worsen to the point

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where they ever become as large as bulging varicose veins. The condition is associated with increased pressure to the veins.
In this rather simple procedure, veins are injected with a sclerosing solution, which causes them to collapse and fade from view. The medicines used in sclerotherapy act upon the inner lining of the vein walls to gradually cause them to close shut and stop the flow of blood through them.

Tummy tuck
The abdomen or tummy comes in many different sizes and shapes. Time, gravity, and pregnancies take their toll on our abdominal region.
Some people have excess skin and fat in the abdominal area and sometimes find that even with exercise, they cannot achieve a flat stomach. This is particularly common after significant weight loss, which may result in loose skin, slack stomach muscles and stretch marks.

Help is at hand for such people in the form of a tummy tuck, known as abdominoplasty - a procedure which improves the appearance of your stomach.

Generally, a horizontal incision is placed just within or above the pubic area. The length of the incision, which extends toward the pelvic bones, depends largely on the amount of skin to be removed. The contour of this incision will vary with the structure of your abdomen. Stretch marks around the abdomen and surrounding area can also be flattened or lessened. An abdominoplasty operation will be performed under a general anaesthetic and if there are no complications, hospital stay is normally for two days.

Sometimes, liposuction is also used along with abdominoplasty.

Urology
We offer a complete range of investigations, medical procedures and surgeries at our hospitals. The treatment procedures listed below is a partial list only.

- Cystoscopy
- Hydrocelectomy
- Lithotripsy
- Nephrectomy
- Orchidopexy
- PCNL
- Urethroplasty

Cystoscopy
Cystoscopy is a diagnostic procedure performed by a Urologist that is used to look at the

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bladder (lower urinary tract), collect urine samples, and examine the prostate gland. The procedure is performed with the aid of a cystoscope, which guides in diagnosing urinary tract and prostate disease. Cystoscopies also enable biopsies to be performed and small stones to be removed

Hydrocelectomy

Hydrocelectomy is often performed to correct a hydrocele (a fluid-filled sack along the spermatic cord within the scrotum).

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The procedure may require a scrotal drainage tube or a large dressing to the scrotal area. You will be advised to wear a scrotal support for some time after surgery. Ice packs should be kept on the area for the first 24 hours after surgery to reduce the swelling.

Lithotripsy

Lithotripsy is a non invasive procedure which pulverises kidney stones or gallstones by means of an instrument called a lithotripter.

Nephrectomy

Nephrectomy is a surgical procedure for the removal of a kidney or part of a kidney. This procedure is performed on patients with severe kidney damage originating from disease, injury, or congenital conditions.

Orchidopexy

Orchidopexy is a procedure in which a surgeon fastens an undescended testicle inside the scrotum, usually with dissolvable sutures. The procedure is often performed in male infants to correct cryptorchidism (undescended testicles). This procedure is also occasionally performed in adolescents or adults, and may involve one or both testicles. In adults, orchidopexy is most often done to treat a urologic emergency resulting from the testicle's twisting around the spermatic cord and losing its blood supply.

Bilateral Orchidopexy (two testicles)

Unilateral Orchidopexy (one testicle)

PCNL

Percutaneous nephrolithotomy or PCNL is a minimally Invasive procedure performed on patients with renal, pelvic and calyceal Stones

Urethroplasty

Urethroplasty is a surgical operation dealing with the repair of an injury or a defect in the walls of the urethra.

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BUSINESS INTERVIEW

"Zambia Offers Lucrative Market Conditions"

...says CEO of Kamal International, Mr. Kamal Jhunjhunwala in a conversation with Shilpy Arora

Your Company, Kamal International is one of the leading Pharmaceutical exporters to Zambia. How will you describe the local market conditions in Zambia?

Mr. Kamal Jhunjhunwala
CEO, Kamal International

The local market conditions in Zambia are very lucrative for business. And due to the commendable efforts of the Zambian Government in formulating and imposing strict regulations on imports of drugs entering the Zambian market, the quality of medicines and medical equipment have drastically improved. But at the same time, competition has also increased and now we too are competing with global players to get a strong foothold on the Zambian market.

In terms of pricing, what kind of competition you face from the other pharmaceutical companies?

Competition is a part of the business and helps companies to innovate and deliver value to their customers. Though it leads to shrinking margins but we as an enterprise catering to the well-being of human life and believe in providing medicines at the most competitive and affordable prices. With the support of our local partners in Zambia, we are entrenched in the market and competition affects us positively.

What is your outlook on the Zambian manufacturing industry and how well is Kamal International placed in the Zambian market?

Manufacturing in Zambia is at a nascent stage consisting of small and medium enterprises. With initiatives of the Zambian

Due to commendable efforts of the Zambian Government in formulating and imposing strict regulations on imports of drugs entering the Zambian market, the quality of medicines and medical equipment has drastically improved

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The Kamal International meeting in progress

Government and improvements in the trade policies, there will be a huge potential to set-up manufacturing units in Zambia in the near future.

We also foresee steady growth in this sector. We, along with our local Zambian partners, plan to expand by participating in Government tenders/tenders for supply in copper mines etc.

Are Pharmaceutical products your main emphasis at this stage, or do you have any other areas currently being undertaken?

Currently we supply tablets, capsules, syrups, ointments, cotton gauze, cotton wool, paraffin gauze (hospital supplies). We plan to expand by enhancing our products range and also introducing more items in the hospital supplies category.

Apart from the above mentioned products, we see a good market for beauty and hair products, cosmetics, perfumes which we plan to enter as the next stage of expansion.

Are you supplying drugs to fight Yellow Fever and HIV?

The above drugs are bought in Zambia by tenders. We will shortly be participating in tenders to supply the same.

What are your plans for the expansion of business to the other African nations?

We are planning to have our company outlets in some of our existing markets, in partnership with local players. This would help us expand from contract-manufacturing to wholesale and retail. The growth in retail as seen in India today would be replicated soon in African nations in the coming years.

According to you, what initiatives should be taken to enhance the Indian exports to the Southern African nations, like Zambia?

While a lot of efforts are already undertaken, what can help further is - buyer-seller meets, creation of a common platform where businessmen from both countries can share their experiences and difficulties and find solutions, establishment of trade organizations to facilitate healthy interactions among the people of both countries.

Ambassador of Zambia to India, Mr.Keli Walubita and his staff is doing a commendable job of interacting with businessmen in India. They support and encourage all of us.

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COMPANY PROFILE

Indian Company in Pharmaceutical Exports to Zambia

Kamal International has stepped in Pharmaceutical Export business with Zambia

Zambian High Commissioner H.E. Mr. Keli Walubita and Mr. Kamal Jhunjhunwala of Kamal International with Asst. Editor Ms. Chetna Tiwary

Kamal International is a company which is serving the specialized importing needs of African importers by supplying them competitive and relevant technology products from India. It also exports a wide range of manufactured goods and serve end users as well as traders in African countries. Now Kamal International will export several items especially Pharmaceutical tools and medicines to Zambia.

In today's fast moving world, where trade dynamics are constantly changing, this company provides Product and Services in a complete package, which gives our customers a competitive edge over others.

K.International offers a complete package of services; including competitive Sea freight rates, client specific package design, and advice on financial matters, making the buying experience totally Hassle Free.

Keeping-up with global phenomena and technology upgrade; to steer our company into 21st century this company has introduced many IT-enable products and services. These services are very beneficial in social movements across African countries.

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Importer and Exporter
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