



# BRIDGING THE GAP

## MYTHS & FACTS IN MEDICINE





## ASSOCIATION OF MEDICAL CONSULTANTS, MUMBAI

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### **IN MEDICINE**



Association of Medical Consultants

## **Editor**

Dr. Sujata Rao  
Dr. Nitin Rao

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**2017-18**

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# MYTHS & FACTS

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## Editorial Note

*It is the historian's job not to ridicule myths, but to show the difference between myths and reality. -Norman Davies.*

Having marched into the 21<sup>st</sup> century with a communication boom and ability to access information at the click of a button, most of us, even today, carry certain baggage of the yesteryears, especially related to the health issues. In the course of our medical practice, we encounter patients who harbor deep rooted myths, steeped in tradition and culture, but without an iota of scientific truth in them. We have hence worn the historian's cap to dispel the widespread myths prevalent in society with respect to medicine.

We believe that this exercise of debunking the age-old myths and providing an authorised scientific explanation will go a long way to build a foundation of healthcare education of a common man. This will also enable them to take informed decisions regarding their medical problems.

For the ease of grasping the variety of myths prevalent in the population, we have categorized them by speciality. A tangential benefit is to try and bridge the wide chasm that exists today, between the medical practitioner and his patient, thus improving doctor-patient relationship.

The **Association of Medical Consultants, Mumbai**, a body of around 10000 Specialists in Mumbai has been in the forefront of several social initiatives towards the society like the Blood & Organ donation drives, the First Responder workshops, Anti-Noise Pollution activities, Road safety initiatives and the Nurses training programs etc. This booklet is one more endeavour in the same direction.

We thank the President Dr. Smita Sharma for her unstinted support as well as faith in us, to deliver this precious publication. We fail to find words to express our gratitude to the senior consultants of various Specialties who have provided their valuable contributions to create this wealth of information for you, our dear patients.

Friends, you will be happy to know that we plan to publish this booklet in Hindi and Marathi language too! We are indebted to Hon Secretary Dr Vivek Dwivedi and Managing Committee Member Dr Supriya Arwari for their tireless efforts to create the translations in Hindi and Marathi.

Last but not the least, we thank our office staff from the bottom of our heart for going beyond their hours of duty to bring the manuscript of this book to the final print in your hands.

Finally, we reiterate our healthy ties with the society with this gift from us, on the occasion of Doctors' Day 2017 and hope that this will be a useful tool for readers and patients and help them to deal with the myriad medical problems they encounter in their lives daily.

*Sharing knowledge is not about giving people something, or getting something from them. That is only valid for information sharing. Sharing knowledge occurs when people are genuinely interested in helping one another develop new capacities for action; it is about creating learning processes. -Peter Senge*

**Dr. Sujata Rao**  
**Dr. Nitin Rao**





## Foreword

Greetings to you from the Association of Medical Consultants, Mumbai!  
1st July, Doctor's day is a special day for us doctors to receive greetings from our patients. Association of Medical Consultants identifies this day as a day of devotional service towards our society. We have been organising massive blood donation, organ donation, anti noise pollution drives every year.

On the occasion of "Doctors Day" 2017, we expand our annual initiatives by launching public health exhibitions at vital centers in Mumbai to educate the common man on a majority of health issues.

It gives us immense satisfaction to give a double bonanza to the society by gifting our publication "Myths & Facts in Medicine - Bridging the Gap" on this day. We understand that you have many thoughts in your mind when you have a health complaint (what we in medical terms call symptoms). The authors have tried to address these doubts and questions that come to your mind and have put the medical facts in a simple language. We at AMC have our goals to "make a difference" to both, our colleagues and our patients. This booklet will be made available to you at the clinics of our Consultant doctors. I congratulate the Editors Dr Sujata Rao and Dr Nitin Rao for their tireless efforts to conceptualise and compile this priceless book which will serve as a ready reckoner for one and all.

The Association of Medical Consultants, Mumbai also take this opportunity to thank Hon'ble MLA Shri Ashish Shelar for sparing his valuable time for the formal release of this book on 1st July 2017.

We are happy and satisfied only when our patients are happy and satisfied and look forward to having healthy and positive bonding with the society at large.

***Warm regards***

***Dr. Smita Sharma***  
***President***  
***AMC***



## Pearls of Wisdom

The prime purpose of this publication is to dispel certain myths you may be harbouring as these could become impediments to your successful healthcare. At the same time, it aims to bridge the gaps in your understanding of medical matters and spells out certain Do's and Don'ts for you during a medical consultation so as to help you be an intelligent patient and thereby optimize the value of your visit to the doctor.

### **Do's & Don'ts to get the best out of your doctor:**

Whenever you go to a doctor, follow these instructions. This will only help the doctor to help you more effectively.

**1.** The first thing a doctor will do is to take your history. This is the most important part of the consultation as in many cases a diagnosis can be reached by the mere history. Hence, giving an accurate history to the doctor will help both you and the doctor. List out your complaints preferably in a chronological order.

**2.** After going into the details of your current complaint, the doctor will enquire into your past history. Do not think it is a waste of your time and resent it as a lot of it may have a bearing to your present illness. Carry with you, your previous investigation reports, records of previous operations or hospital admissions, if any.

**3.** Be truthful while giving your past history. Remember your conversation with the doctor is a 'privileged' communication and is confidential. Do not conceal any past medical history merely because you think it may not have relevance to your present illness, or because you perceive it as a social stigma e.g. History of tuberculosis, epilepsy etc. Many patients have suffered since vital past history was concealed by the patient. Thus, honesty is the best policy! Also do not fail to inform the doctor about your drug allergies when asked.

**4.** The doctor will also ask you your social or personal history such as history of smoking, alcohol, taking addictive drugs etc. Be honest. It will only help.

**5.** After examining you, the doctor will make a provisional clinical diagnosis which will be confirmed by doing appropriate investigations so as to reach the final diagnosis.

**6.** Do ask the doctor all the questions to clarify your doubts, including the question, "Doctor what do you think is wrong with me?"

7. If you don't understand the doctor's handwriting on his prescription, ask him to clarify.

8. Make follow-up visits as advised by the doctor.

There should be a collaborative effort between you and your doctor. This is crucial to the final outcome of treatment. Go to a doctor only if you trust him/her.

### **Some Myths & Facts:**

**Myth - 1:** I don't want to get my cut following injury sutured as it will leave a bad scar.

**Fact:** If you were to injure yourself and get a cut (called CLW or contused lacerated wound) refusing your doctor's advice to get it sutured (stitched) will result in a bad scar while stitching it will leave a fine scar.

**Myth - 2:** Following a drug reaction, patient remarks, "What kind of medicine did the doctor give? He is responsible for my suffering."

**Fact:** An allergic reaction to a drug administered to you by a doctor, can be caused by ANY drug, though some drugs are known to have a higher possibility. The allergy to the drug is related to your own system. The same drug given to another person in the same dose may cause no ill-effect whatsoever. The fact, however, is that there is no way for anyone to predict as to which drug will cause allergic reaction to which patient.

However, for certain drugs, known to cause reactions commonly, it is a common practice to do a sensitivity test before administering the drug. It is not practical or feasible to do this for all drugs and is not considered necessary as the possibility of a drug reaction is very remote. Hence the importance of mentioning specifically any drug allergy you may have suffered in the past.

Please remember, it is wrong to say: Drug reaction = Doctor's fault!

**Myth - 3:** Everyone is saying this treatment is not right. My son/husband/relative needs to be first given an injection urgently.

**Fact:** Who is everyone? They are non medico neighbours/ friends/ relatives who speak from their fears or through other's experience but without knowing complete facts. A doctor has gathered scientific knowledge for 10 yrs and then experience of treating scores of patients with his seniors before he starts his/her practice. Injections are not necessarily better than Oral medicines in all conditions. In fact they may cause certain complications. Hence, it will be wise to follow a doctor's advice than a half-baked or a quack's advice.

**Myth - 4:** This doctor (big consultant) has given costly medicines for 5 days. We see good results within two days and with no side effects so no need to over treat.

**Fact:** A specialist diagnoses and prescribes Antibiotics or other specific drugs for a specific infection or medical condition. These drugs have mandatory rules

for their use, based on scientific evidence to ensure complete removal of the infecting organism. If the rules are not followed, the organism will just be given a warning and it will get smarter to attack once again and hence the patient will suffer from drug resistance or recurrence of infection etc. The doctor has no control over these drug rule formation. He/she is applying principles of medicine while prescribing you medicines. Hence it will be unwise to self- treat and disregard a doctor's precise instructions.

**Myth - 5:** I don't feel it necessary to sign the consent form before any procedure or surgery.

**Fact:** A doctor is legally required to take patient's written consent (Permission to carry out the procedure) for any minor/major procedure or surgery. Do remember the doctor is only doing his legal and ethical responsibility and it is in your interest as well.

**Myth - 6:** There is no need to involve the Police for small accidents or attempt to suicide of my relative, since it will affect my family honor and will increase our stress.

**Fact:** By law it is mandatory for a doctor to inform the police in case of an accident or suicide attempt. In fact, it is safer for the relatives to do so to prevent any future complications in the case.

Trust and faith are important ingredients in the process of healing. A little effort on the part of the patient, as outlined above, can help him or her receive high quality health care.

***Dr. Lalit Kapoor***  
***President***  
***FAMCI***



## Ophthalmology (Eyes)

**Myth - 1:** Reading in dim light will worsen your vision.

**Fact:** It will not adversely affect your eye- sight but will tire your eyes more quickly. Light should be directly on the page.

**Myth - 2:** Regular Eye checkups are just for people with eye problems.

**Fact:** Regular Eye check up means thorough examination of your eyes. It can reveal other eye problems as well.

**Myth - 3:** Eye Sight gets worse with increasing age.

**Fact:** If one eats a healthy & balanced diet, gets regular eye checkups and avoids smoking, drinking and high sugar intake, eyes can remain healthy even in old age.

**Myth - 4:** Poor Eye health/ Vision Loss is genetic.

**Fact:** Some types of Glaucoma, Cataracts and other issues are inherited but there is no Guarantee either way. Get regular Checkups done.

**Myth - 5:** Staring at Computer for long hours affect eyes.

**Fact:** It doesn't, but eyes get tired, causes computer vision syndrome (Dry Eyes and gritty sensation).

**Myth - 6:** While staring at the sun it's ok if you squint or are wearing sunglasses.

**Fact:** It is never advisable to stare at the sun. Even the best Sun glasses cannot block UV rays 100%. UV rays can damage cornea, lens, Retina. Staring directly at Solar eclipse can cause blindness.

**Myth - 7:** Wearing someone else's glasses can damage your eyes.

**Fact:** It will not, but you may not see clearly, and will strain your eyes.

**Myth - 8:** Sitting close to TV damages your Eyes.

**Fact:** It will not, but it will strain your eyes. Get Eyes checked to rule out glasses number (Myopia).

**Myth - 9:** Crossing your eyes will make them stay as it is (Squint).

**Fact:** When you cross your Eyes for humour it will not cause permanent damage and will return to normal placement.

**Myth-10:** Cataracts can be treated by eye drops or medication.

**Fact:** Cataract once developed there is no proven medication or Eye drop that can remove cataract. The only treatment is surgery.



## Plastic Reconstructive & Aesthetic Surgery

**Myth - 1:** Plastic surgery involves plastics

**Fact:** The name comes from the Latin 'Plastikos' which means to mould. Implants of silicone have come into plastic surgery only in the last 60 years.

**Myth - 2:** There are no scars in Plastic Surgery.

**Fact:** All surgeries have scars. Plastic surgeons; place scars well, use minimal incisions and employ special closure techniques so as to minimise, hide or give minimal scars where possible. There is no scar less surgery.

**Myth - 3:** Congenital differences like cleft lip are caused by watching an eclipse, cutting vegetables or seeing a rabbit during pregnancy.

**Fact:** None of the above has any basis. Clefts are caused predominantly due to genetic factors on both sides of the family and may not be visible in the immediate preceding generation.

**Myth - 4:** Breast implant is a onetime solution for breast enhancement

**Fact:** Breast implants last several years but at some stage they degrade and need to be removed and replaced, at least with current technology.

**Myth - 5:** Plastic surgery deals mainly with burns.

**Fact:** Plastic Surgery has several aspects like; Hand and Nerve Surgery, Craniofacial Surgery, Reconstructive Surgery, Surgery for Clefts, Aesthetic Surgery and of course Burn care.

**Myth - 6:** Parents can donate fingers and toes to children with congenital hand differences:

**Fact:** Only the child's own tissues from elsewhere in his/ her body can be used. Parental tissues will lead to rejection due to immune differences and are unsuitable.

**Myth - 7:** Weight loss caused by liposuction is permanent;

**Fact:** The removal of that particular fat tissue is permanent. However not all fat from the body is removed and in any case ought not to be removed. If calorie input is not controlled, you can gain all that weight all over again in other fat deposits.



# Pregnancy

Motherhood is one of the most fulfilling and satisfying experience. But it can be a nightmare if one gets bogged down by the myths and misconceptions surrounding this basic and natural process.

**Myth - 1:** The shape of the stomach gives you a hint of the gender of the baby. If the bulge is higher, it is a girl and if it is lower, it is a boy.

**Fact:** The shape of a pregnant woman's abdomen depends upon her stature, her posture, the amount of fat, her muscle tone and the position of the baby and not on the gender of the baby.

**Myth - 2:** A pregnant woman must eat for two people.

**Fact:** This is not necessary. It is a fact that a pregnant woman should eat more than what she normally does, she need not eat double the quantity. Usually the requirement is about 350 calories per day extra. But more importantly it should be a balanced diet.

**Myth - 3:** Morning sickness will make the baby suffer nutritionally.

**Fact:** Morning sickness in early months of pregnancy is a very common symptom and does not affect the baby. If the symptoms are very severe, the doctor may sometimes advise admission and administration of intravenous glucose.

**Myth - 4:** Eating iron and calcium tablets will make my baby big and cause a difficult delivery.

**Fact:** Iron and calcium tablets do not have any effect on the weight of the baby, but are important for the wellbeing of the mother.

**Myth - 5:** Eating spicy or hot food can lead to an abortion or may induce labour pains.

**Fact:** Eating spicy or hot food will not cause any of these but in general is not a good idea because it can aggravate the acidity and worsen the woman's nausea and vomiting.

**Myth - 6:** Consumption of papaya in pregnancy is harmful and may lead to an abortion.

**Fact:** Papaya is a natural fruit and contains loads of Vitamin A. It is definitely not harmful. However, raw papaya contains chymopapain which can cause pain in the uterus and should not be consumed excessively.

**Myth - 7:** Consumption of saffron in pregnancy makes the complexion of the baby fairer.

**Fact:** Saffron is a spice which has lots of Vitamins and minerals. It improves the immunity of the pregnant woman and is also good for relaxation. But it certainly does not make the baby's complexion fairer. The colour of a baby's skin would depend on the complexion of the parents.

**Myth - 8:** Exercising in pregnancy is harmful.

**Fact:** Nothing is further from the truth. Exercise is positively beneficial to the woman and must be encouraged. Exercise helps to keep the muscles in good shape, prevents excessive weight gain, reduces depression and induces better sleep. It also shortens the labour process and helps the mother regain her pre pregnancy status faster. Some complicated pregnancies may require bed rest and your doctor will advise you about the same.

**Myth - 9:** Sexual intercourse is not permitted in pregnancy.

**Fact:** It is generally advised to abstain only during the first 3 months and from the 8th month onwards. If there has been a complication in a previous pregnancy or a problem in this pregnancy, your doctor will advise you accordingly.

**Myth - 10:** Computers, cell phones, microwave ovens are harmful.

**Fact:** Computers and cell phones are absolutely safe in pregnancy. Microwaves are safe too, unless there is a leakage. As a matter of precaution, one should keep a safe distance from a microwave oven.

**Myth - 11:** My mother had an easy pregnancy and delivery and so will I.

**Fact:** A smooth pregnancy and delivery is not hereditary. A woman should concentrate on a balanced diet and regular exercise in order to have an uneventful pregnancy and labour. Some events like high blood pressure are more likely if your mother suffered from the same during her pregnancy.

**Myth - 12:** Consuming a lot of ghee will lubricate the birth canal and ensure a normal delivery.

**Fact:** This statement is false and a normal delivery depends on several factors like the position of the baby, the roominess of the passage and presence or absence of pregnancy complications like high blood pressure and not on the consumption of ghee. In fact, ghee is difficult to digest and may lead to bloating and abdominal cramps.





# Menopause

Menopause is a difficult time in the reproductive career of a woman. Her body goes through tremendous changes in a short period of time with far reaching implications for various organ systems and has a profound psychological impact as well. There is a lot of information available online and offered as advice from well-meaning relatives and friends, but isn't really true. This article is an attempt to address some of the common myths and misconceptions regarding the female menopause.

**Myth - 1:** Menopause occurs at 50 years of age.

**Fact:** Like everything in medicine, there are no exact figures and usually there is a range for every parameter eg. haemoglobin, calcium levels, duration of a period, age of onset of menses etc. Similarly, menopause or cessation of menses occurs at an average age between 45 and 55 years. In some women, it may happen at an early age and there are a few women who will actually start the menopause quite a lot later. What is well known is that this age can be similar amongst members of a family eg. sisters, mother, grandmother etc. However, this is not always true. Diet, exercise, lifestyle, habits and disease can change the programmed age of menopause. Smoking can bring on an early menopause; it can occur in certain chronic health conditions and if you are overweight, that can trigger an early menopause as well.

**Myth - 2:** The first indication of menopause you will experience is a hot flush

**Fact:** While the vast majority of women do experience hot flushes, many do not have them at all. Many of the symptoms associated with fluctuating hormone levels during the menopause may occur when a woman is having regular periods as well eg. fatigue, joint pains, bloating, breast tenderness, hair loss, anxiety, depression, irritability and mood swings.

**Myth - 3:** If you started having periods early, your menopause will be early as well

**Fact:** Depending on how many eggs/follicles a woman is born with, the age of onset of menopause can vary. Therefore, if you had fewer eggs to begin with, your age of menopause may be earlier, irrespective of when you started having menses. Also, if you were born with more eggs/follicles, your menopause could be later than expected.

Again, the actual age when menopause occurs has a lot to do with your lifestyle in combination with your genetic make-up.

**Myth - 4:** You will only experience physical symptoms like hot flushes

**Fact:** Menopause places a lot of strain on the entire body and the symptoms you experience could be wide ranging and a combination of emotional, physical and psychological. Emotional symptoms caused by hormonal imbalance can

wreak just as much havoc in women during perimenopause as the physical symptoms can. If you feel tired, depressed, irritable or struggle with memory concerns, you are experiencing some of the emotional symptoms of hormonal imbalance.

**Myth - 5:** You will gain weight when you hit menopause

**Fact:** While this may happen, the body undergoes many changes during the menopause and this can affect your metabolism. A slowing metabolism is one of the commonest reasons for weight gain. Lack of exercise and an active lifestyle is another. When you realise that these happen around the same time as the menopause, it's easy to see why menopause is blamed for weight gain. Hence, the weight gain may be due to a combination of several factors including hormones, lifestyle and diet. To prevent the weight gain, you can cut down on the carbohydrates, go for less but go for really good quality wholegrains, increase your protein intake and increase your consumption of fruits and vegetables.

**Myth - 6:** Menopause is the most awful time you will go through and there is no escape

**Fact:** Many women will get through the menopause with minor symptoms and some have major issues to deal with. What is well known, however, is that the women who take care of themselves with a good combination of diet, exercise, rest and supplements tend to have an easier time through the menopause.

**Myth - 7:** Your sex drive is going to vanish almost overnight

**Fact:** While it seems straightforward that falling hormone levels during menopause can lower your sex drive, a lot depends on your lifestyle, exercise levels and how you spend your daily time. Fluctuating hormone levels combined with the stress of daily life cause fatigue. In addition, many women experience mood swings at this time. Balancing work, career and changes in the body makes a potent situation for a lower sex drive. There is a way around this, by making sure you have an active lifestyle with some amount of exercise worked in.



## Anaesthesia

**Myth - 1:** Spinal Anaesthesia (Injection in the Back) is the reason why patients get back pain.

**Fact:** Spinal Anaesthesia is a very safe method for operations and you should not refuse it for fear of backache. International studies have revealed that the incidence of backache after spinal anaesthesia is 0.8%. Spinal needles today are very thin and made of excellent materials and do not cause any problem. Discuss with your doctor about your backache.

**Myth - 2:** The anaesthetist is not a doctor

**Fact:** Your anaesthetist is a fully qualified doctor. He/ She undergoes three years post graduate training after MBBS to be allowed to give anaesthesia independently.

**Myth - 3:** The anaesthetist puts you to sleep and then goes away

**Fact:** The anaesthetist is the first person to be with you in the operation theatre, puts you to sleep and stays with you every minute. He / She stays with you until you are fully awake and safe to be left on your own. The anaesthetist spends maximum time by your side during an operation. The job of an anaesthetist is very much like a pilot. When everything is going well you do not bother who is the pilot and do not think that he has carried you safely. You only blame the pilot if something goes wrong.

**Myth - 4:** I am scared that I will wake up in the middle of the operation or that I will remember the operation

**Fact:** Modern anaesthesia drugs are very safe and short acting. You will be given a dose of anaesthetic that is absolutely correct for you. You will not wake up in the middle of the operation. You will also not remember the operation. You will wake up when the operation is over.

**Myth - 5:** Minor surgery=Minor anaesthesia

**Fact:** Risk of anaesthesia depends on the age and other conditions such as heart problems, asthma, blood pressure, diabetes, kidney and liver disease. Sometimes a small operation can be very risky. When you are planning to get operated if you wish you can ask your doctor to refer you to the anaesthetist for risk evaluation.

**Myth - 6:** Throat pain after anaesthesia is unacceptable.

**Fact:** Sore throat after general anaesthesia is a common problem when a breathing tube is put in your windpipe. This has to be done so that you are given oxygen properly throughout the operation. Do not worry about it. It will go away after 2 to 3 days. You will feel better if you drink lots of water and other fluids. Your doctor can prescribe appropriate medicine to ease your pain. One warning if your

throat pain continues for more than 4 or 5 days or you notice a change in voice you must inform your doctor.

**Myth - 7:** Nausea and vomiting is common after a surgery.

**Fact:** Prolonged fasting can cause acidity resulting in epigastric burning and nausea. Many anaesthetic drugs too may add to this. But now there are many drugs to prevent nausea and vomiting and you will be given these drugs throughout your immediate post operative period. So do put your mind at rest about this.



# Pain

There has been a lot of new research in understanding of pain and its treatment in the last decade. Patients who were told they had to live with pain can now know that pain that was once considered hopeless is now manageable.

**Myth - 1:** Complaining about pain shows that you are 'weak' and not 'strong'.

**Fact:** Putting up with chronic pain can impair functioning and quality of life. It can lead to depression, fatigue from loss of sleep, anxiety, inability to work and impaired relationships.

**Myth - 2:** I have to live with pain.

**Fact:** There are various options for pain relief like over-the-counter and prescription medications, relaxation techniques, exercise, physical therapy, nerve blocks, acupuncture and massage etc.

**Myth - 3:** My pain is not visible on X-rays, USG, etc – hence it is imaginary

**Fact:** Pain is often unrelated to investigations. Special scales are used to measure and quantify your pain.

**Myth - 4:** All doctors can treat pain.

**Fact:** Pain itself is a disease affecting the whole body. That is why there are specialists who treat Pain. Please search or ask your family doctor to refer you to a "Pain Management Specialist"

**Myth - 5:** All pain killers are bad/ affect my kidney and liver.

**Fact:** There are different pain killers for different pains. Some drugs called NSAIDs taken for long time or in some patients may damage the kidney. Medicine like Paracetamol (crocin) is a very safe pain killer drug

**Myth - 6:** Cancer patients will have a miserable and painful death.

**Fact:** There are many options to have good control of cancer pain even in advanced stages. In addition to strong medications like morphine, nerve blocks, implantable devices and patches can be used for good quality of life.

**Myth - 7:** If I take Morphine, it will cause addiction.

**Fact:** Morphine is the most powerful drug for pain relief. When used correctly, Morphine is a safe and useful medicine and cancer patients very rarely get addicted. It should be under observation of doctor & not self medication.

**Myth - 8:** Pain killers will reduce all pain.

**Fact:** There are different types of pain. Nerve pain is difficult to treat in late stages. Early treatment will give best results and hence meet your doctor early.

**Myth - 9:** When you have pain, bed rest is needed.

**Fact:** Bed rest is not advisable for long periods as it causes muscles to become stiff and weak. Gentle, graded exercises within limits of pain should be continued.



## Mental Health

**Myth - 1:** Crying/ weeping is a sign of weakness.

**Fact:** Crying/Weeping is liberating and as normal as laughing. But excessive crying may be a sign of depression and you need to seek professional help.

**Myth - 2:** My mood affects my work, but I am not depressed.

**Fact:** Fluctuation of mood is normal, but if it affects your work and friendship, and the bouts are severe, you may be in depression and you need to see a doctor.

**Myth - 3:** It is OK to ignore/suppress one's feelings.

**Fact:** Suppressing one's feelings can lead to anxiety or depression. Express and share it before it explodes.

**Myth - 4:** Anti psychotic drugs have serious side effects.

**Fact:** Every medication can have side effects, but if required, the benefits far outweigh the disadvantages. If you have a problem with any medicine, do not stop them on your own and discuss the same with your doctor.

**Myth - 5:** I have an illness because I keep talking to myself.

**Fact:** If it is a habit, it is very normal, but if one is responding to an imaginary voice, it may be a sign of illness.

**Myth - 6:** Those who talk about attempting suicide are less likely to act

**Fact:** People who threaten are more prone to attempt than those who do not. Hence do not challenge those who threaten to attempt.

**Myth - 7:** Those who have attempted suicide once learn from their mistakes and are less likely to attempt once again.

**Fact:** Those with previous unsuccessful attempts are more likely to attempt than others in the future

**Myth - 8:** Suicidal attempts in families will dissuade relatives from doing the same when in emotional turmoil.

**Fact:** Suicidal behavior can be seen in families across generations as Depression can run in families.

**Myth - 9:** Those who are mentally ill are only prone to suicide

**Fact:** The mentally ill are more prone to suicide but those not suffering from the same can attempt suicide in crisis for e.g. sudden financial loss, sudden discovery of a fatal illness, failure in exams.

**Myth - 10:** A suicide attempt is aimed at manipulating/threatening others and should be punished harshly

**Fact:** An act of self-harm can be a cry for help and should be tackled sensitively.

**Myth - 11:** A mild attempt of suicide should be treated at home and secretly maintained to preserve the self-esteem of the person

**Fact:** A medical doctor should treat all attempts at a hospital with the help of a psychiatrist/counselor. The details of the attempt need to be verified for appropriate treatment.

**Myth - 12:** Those who consume addictive substances share their pain and are less likely to attempt suicide.

**Fact:** Alcoholics are 100 times more likely to attempt suicide than others.

**Myth - 13:** Those who plan to attempt suicide never reveal

**Fact:** Many adults reveal it to their family doctor and children to their friends though all do not.

**Myth -14:** Educational institutes are always responsible for suicides of students

**Fact:** Educational institutes may not be responsible for all suicides but absence of counseling & mental health facilities is simply PSYCHOLOGICAL NEGLIGENCE.

**Myth - 15:** Suicides are a result of bad parenting and lack of adequate mental health care to high risk children:

**Fact:** Not always, though lack of awareness and refusal of mental health care may be a cause. COLLATERAL NEGLIGENCE is when parents refuse help inspite of advice from all quarters.

**Myth - 16:** Suicide is shameful and disgraceful unlike accidents and natural catastrophes

**Fact:** Suicide is an ACCIDENT OF THE MIND and can affect any family when anyone shares a suicidal thought he/she should be immediately screened by a counselor just as left sided chest pain needs to be screened by a doctor for heart illness.



## Ear, Nose, Throat

**Myth - 1:** There is no treatment for cold and sinusitis. Surgery is not the right option of treatment.

**Facts:** Common cold and Sinusitis may arise due to a number of allergic or non-allergic causes. Allergic cold affects the entire airway: from nose to the lung. It may or may not be accompanied with Asthma. In case your ENT Specialist has diagnosed nasal polyps or sinusitis or deviated nasal septum in addition to your allergic condition, a surgery to correct these abnormalities will reduce the severity and frequency of your allergic episodes. Allergy cannot be cured 100% but your ENT Specialist will advise surgical and medical treatment to control the condition to a major extent. A single modality of treatment will not cause a magical relief!

**Myth - 2:** Hearing Aid is a source of annoyance.

**Fact:** If you have purchased an over the counter or online Hearing Aid, it may not be programmed accurately to cover your hearing loss and may be a source of irritation than help. Please get your hearing aid from an authorised person only.

**Myth - 3 :** Regular use of hearing aid can reduce or stop the progress of hearing loss.

**Fact:** Not so! Hearing Aid is advised for patients with hearing loss, when there is no medical or surgical treatment possible to cure it. Hence it must be used and reprogrammed periodically to cover the gradual deterioration of hearing loss you are likely to face.

**Myth - 4:** Hearing loss or Ear discharge does not have a permanent cure.

**Fact:** Ear surgeries are advised for specific reasons: either to prevent further serious complications in unsafe ear infections or to improve hearing in safe ear infections. Ear is an important sense organ in your body. Surgeries done at the right time will prevent further loss of hearing and improve the quality of life.

**Myth - 5:** You need to clean your ears daily with soap / ear buds/ oil drops/ hydrogen peroxide/ roadside ear cleaners.

**Fact:** Wax is formed daily, like your nose snot. You may put wax dissolving drops periodically to keep the ear clean. Use of soap / ear buds/ oil drops/ hydrogen peroxide/ roadside ear cleaners will lead to ear infections or damage your ear drum and inner ear. Hence having a routine Ear check with your ENT Doctor is advisable.

**Myth - 6:** Head & Neck cancers are very often diagnosed only in late stages.

**Facts:** Head and Neck Cancers are best diagnosed in early stages by ENT specialist if you seek their opinion in your routine health check-up, since they



are trained to check the hidden areas of Head & Neck. In general, a common man either ignores small complaints related to oral, throat or neck areas or goes to different Specialist recommended by friends and relatives, and hence the cancer grows undetected.

**Myth - 7:** Snoring is an embarrassing habit and need not be shared with your doctor.

**Fact:** Snoring or Obstructive Sleep Disorder affects the entire airway and is related to our body metabolic condition too. It reduces our quality of life and hence a patient should take a Specialist opinion and get investigated thoroughly since it is treatable by medical and surgical modalities.

**Myth - 8:** Anosmia or Inability to smell is hereditary and patient has no option but tolerate it life- long.

**Fact:** Anosmia may be due to many causes, which can be treated. Patients are advised to get ENT consultation done. A number of conditions like foreign bodies, swellings, polyps, tumours in the olfactory area of nose and brain may be the cause and they can be treated with surgery.

**Myth - 9:** For a foreign body in the nose, inhaling snuff in the nostril will help to expel the foreign body.

**Fact:** Inhaling snuff requires taking a deep breath and this may result in pushing the foreign body deeper in the nose or trachea which can be dangerous. Hence it is not advisable to attempt these tactics.



## Neurosurgery

A myth is a widely held but false belief stemming from imagination rather than facts, and often perpetuated down several generations. Myths exist in all walks of life be it science or religion, and often regulate social life and psyche of those believing them. As doctors we are faced with patients from all strata, and myths exists as sworn beliefs in the minds of the highly educated to the most ignorant. The more complex the medical specialty the less understood it is, and is a fertile ground for proliferation of myths. Let me enumerate some of the common myths.

**Myth - 1:** If one has headache, the cause is always Migraine.

**Fact:** A sizeable population suffers from headache. There are hundreds of causes of headache, migraine being just one of them, and a very specific clinical entity. As a result of this belief, patients are not scanned and brain tumors, cysts and inflammatory conditions are missed until more symptoms appear. It is good to take advantage of the scanners available now everywhere to rule out surgical causes.

**Myth - 2:** Seizures appear because of the evil influence of an Ghost/Devi.

**Fact:** Epilepsy is another common phenomenon and still carries a considerable social stigma or taboo. The person, especially if it's a female is looked down upon or ostracised with no one willing to marry her. It is also feared that it may be hereditary or familial and the offspring also liable to suffer the same. This again is largely untrue. Epilepsy is usually a reflection of an irritative focus, which can be subdued by drugs in over 80% while the rest may be amendable to surgery.

**Myth - 3:** If one develops memory loss it is a sign of Senility

**Fact:** As you age, memory tends to suffer, especially short term. Alzheimer's is a specific type of dementia and should not be confused with an ageing brain. Moreover, memory can be affected by hydrocephalus, tumor and other active processes which can be diagnosed by a scan and treated. Memory loss due to senility is usually progressive and incurable. But if due to tumor or hydrocephalus, it can be reversed by surgical removal of the cause.

**Myth - 4:** All cases of Blindness or loss of vision is due to Cataract

**Fact:** Cataract is the commonest eye condition, and though affecting middle aged and elderly it may appear at any age. But visual loss can also occur due to brain tumors and other causes of high intracranial pressure including some extraocular/intra orbital conditions. An astute physician should be able to differentiate cataract from the rest, and brain scanning should be done, when in doubt, before eye surgery, and not later when such surgery fails to provide relief.

**Myth - 5:** Every Toothache/pain in jaw is due to dental caries

**Fact:** Most patients with such pain first report to a dentist, who by looking and examination will decide if it is a dental pain or Trigeminal Neuralgia (TN). The latter is a sharp, lancinating electric current-like, distressing pain appearing in one or more divisions of the nerve in the cheek or lower jaw, and brought on by movements of face and jaw or even spontaneously. MRI is essential for a proper diagnosis which in turn guides correct treatment.

**Myth - 6:** Tingling, numbness in one side of body is always a circulation disorder in the limb

**Fact:** Often this is transient and the patient rubs on the limb and in a few minutes or hours it disappears, often to return with the same symptoms or a devastating stroke. The cause is circulatory, not in the peripheral circulation but in the brain. These are warning symptoms of an impending stroke and must be regarded as an emergency like angina.

**Myth - 7:** Any Brain surgery has a high chance of developing complications like coma/paralysis/memory loss/death

**Fact:** This is what I was told when I decided to enroll for neurosurgery in late sixties. Though things have revolutionized, especially with the advent of microsurgery, technical gadgets and improved radiology, patients are still apprehensive about the consequences of surgery on this organ, the Master of life. Today almost every part of the brain can be operated upon. 'Awake' surgery has emboldened us to excise lesions from difficult areas governing motor, sensory and speech functions, and neuromonitoring devices guard us against impending danger to cranial nerves and spinal cord functions during surgery.

**Myth - 8:** Spine Surgery always results in Paralysis.

**Fact:** This too has been unfortunately regarded as the last resort as patients have been reported to lose function after such surgery. Improved instrumentation and training and gentle handling by the neurosurgeon has dispelled this myth. Even surgery of removal of tumors from within the substance of the spinal cord is now safe, and results of minimally invasive spine surgery are spectacular.



## Surgery

In India patients can have various modalities of treatment like Allopathy Homeopathy or Ayurveda for the same illness. This is further compromised by the existence of quacks in all these modalities. So patients are thoroughly confused about which treatment is genuine and which one he should follow for a particular illness. This along with half knowledge of medicine, easy available free advice from friends and relatives and freely available home remedies and herbal medicines has resulted in plenty of myths in surgery and some of them are hilarious!!!

**Myth - 1:** People usually feel more the skin sutures means bigger the operation and a small scar means good doctor, good scar means a better doctor and absorbable sutures means the best doctor!

**Fact:** Any surgical incision depends on the location of the disease and the decision also depends on whether the surgery is an elective or an emergency one! The size of the incision is directly proportional to the extent of the surgery too. These have been decided on sound principles thousands of years ago and are not decided by any individual surgeon on the spur of a moment. Hence trust your doctor for performing the most simplest or the most difficult surgery with appropriate number of sutures for the incision taken in order to give you an optimum scar.

**Myth - 2:** Patients always insist “humko bina take ka operation karvana hai”. Laser surgery for anything and everything is the best method.

**Fact:** Patients relate laser surgery with a scar less and painless surgery. But, that's untrue! There are open surgeries and there are endoscopic, laparoscopic, robotic surgery. Laser surgeries are indicated in certain specialities and for specific conditions only. Hence it is unwise to decide the worth of a surgery by the method of surgery.

**Myth - 3:** “Aapne hernia ka operation karne ke baad hi pet dard shuru hua hai....”

**Fact:** In the event of any medical illness following a surgery, people always relate it to the surgery. People come even few years after surgery and relate their present illness starting only after the surgery. It is not so! You may have illness of different nature at any point in your life and disease does not occur because of surgery in any part of the body.

**Myth - 4:** Any perianal problem is a piles problem.

**Fact:** A perianal discomfort or pain could be due to piles or fissure or fistula or malignancy. Hence proper history, PR examination and proctoscopy are always essential by a trained Surgeon.

**Myth - 5:** An acute pain in the abdomen or even chronic dull pain in the abdomen is an appendix problem.

**Fact:** For a Surgeon the abdomen is like the Pandora's box, but for the common man it's simple, blame the appendix....!! A surgeon is the best person to examine, diagnose the cause of the abdominal pain and treat you accordingly.

**Myth - 6:** For all the middle aged or elderly person, any upper abdominal pain and dyspepsia is due to acidity.

**Fact:** It is not so! It is a common habit to take home remedies for pain in abdomen and attribute it to gas problem. Because of this, many patients with other problems like gall stone, pancreatitis, peptic ulcer and upper abdominal malignancies reach doctors very late with inoperable lesions. Hence self-diagnosis should be avoided at all costs!

**Myth - 7:** Any complaint related to one's sexual organs is to be ashamed of and one must bear with it.

**Fact:** Phymosis is a very simple problem for any doctor to diagnose. But we have seen many people come running back from their honeymoon with Paraphymosis, which is an infection. Right Medical Consultation at the right time is better than facing complications of your problem.

**Myth - 8:** Drinking beer can get rid of a urinary stone.

**Fact:** No! Please do not treat yourself with common beliefs but take an expert opinion.

**Myth - 9:** Nocturnal ejaculation or even masturbation always causes generalized weakness or loss of vigor or even sterility in the future.

**Fact:** Not at all! Please educate yourself by talking to your doctor who can clear your doubts and fears.



## Orthopaedic /Bone & Joints

**Myth - 1:** Massage of painful and injured area will give us relief from pain.

**Fact:** It will not give relief from pain and in fact it will aggravate the pain. Massages should not be done when you have pain.

**Myth - 2:** If you take too much calcium tablets then you will develop stones in your body.

**Fact:** Stones in kidney and urinary tract are formed if we take too much calcium and don't take proper drinking water. Stones can also be formed if our calcium intake is very low. Stones can be formed even when we take adequate amount of calcium. So there is no direct correlation between stone formation in kidneys and calcium intake.

**Myth - 3:** After doing Knee Replacement the person will have problems and can't walk properly.

**Fact:** A properly performed Total Knee Replacement Surgery makes patient's life very comfortable and patient will be Pain free afterwards.

**Myth - 4:** If we eat sour food then my wound will get infected and will develop pus in it.

**Fact:** There is no effect of sour food on our wounds.

**Myth - 5:** Cracking knuckles can cause arthritis

**Fact:** It does not necessarily cause arthritis, but it is not good to do it very frequently.

**Myth - 6:** The only treatment for frozen shoulder is steroid injection.

**Fact:** This is not true, and in fact, exercises are a must and the best treatment.

**Myth - 7:** You should not use a pillow if you have neck pain.

**Fact:** You must use a small, firm pillow under your head, neck and shoulders.

**Myth - 8:** Every neck pain is spondylitis or spondylosis

**Fact:** Spondylitis is not the same as Spondylosis. The latter is degenerative and very prevalent, the former an inflammatory and highly painful condition, fortunately uncommonly seen.

**Myth - 9:** Surgery is a must for slipped disc.

**Fact:** 95 % of patients can be managed without surgery and very few require it.

**Myth - 10:** You must sleep on the floor if you have back pain.

**Fact:** You need not; a firm mattress can be used.

**Myth - 11:** After hip replacement surgery, you need to take rest for several weeks.

**Fact:** This is not true and you can be up and about in 3 to 4 days.

**Myth - 12:** After knee replacement, you cannot sit on the floor.

**Fact:** With the kind of knee replacements done today, you can even sit on the floor.

**Myth - 13:** Arthritis affects old people.

**Fact:** Though this may be generally true, arthritis can occur at any age.

**Myth - 14:** Apply hot fomentation immediately after a muscle sprain or injury.

**Fact:** No. You must apply ice immediately to stop the internal bleeding.

**Myth - 15:** Yoga exercises are not useful for orthopaedic problems.

**Fact:** Yoga is very useful in orthopaedics.

**Myth - 16:** Osteoarthritis can be reversed with drugs.

**Fact:** This is an effect of the aging process and cannot be reversed. But certainly, with a good lifestyle, one can delay the onset and reduce the progression.

**Myth - 17:** Fractures can heal by themselves.

**Fact:** This is true, but a proper alignment is required.

**Myth - 18:** My parents had back pain, and I am bound to get it.

**Fact:** Back pain is not hereditary. Common causes of backache are calcium and vitamin D3 deficiency, sudden injury, lifting heavy weights, poor posture, weakness in muscles and bones, arthritis and spondylitis.



## Radiology

**Myth - 1:** All scans are X-rays.

**Fact:** Plain X-rays and CT scans use X-ray radiation whereas other scans don't. Sonography uses sound waves and MRI uses magnetic fields.

**Myth - 2:** A scan will always show what is wrong with you.

**Fact:** There are many conditions that will not show up on any scan.

**Myth - 3:** Scan will always show relevant findings.

**Fact:** Scans can have irrelevant findings which might be incidental findings.

**Myth - 4:** X-Rays can cause radiation side effects

**Fact:** The small level of radiation that a patient is exposed to during X-Rays, MRIs and other radiology scans is not dangerous to their long- term health and will not cause side effects. When imaging equipment is used properly by highly trained radiologists, the radiation levels are low and targeted to only one area of the body.

**Myth - 5:** Traditional X-ray scans are outdated and have no place in today's diagnostic process.

**Fact:** The truth is that even in the 21<sup>st</sup> century X-ray scans are still 50% of all performed imaging tests. The X-ray scans provide a good and fast image of the chest and bones.

**Myth - 6:** Radiation affects fertility.

**Fact:** Very large doses of radiation can cause infertility. There are no documented medical cases that any women has not been able to have children due to damage from medical imaging with radiation.

**Myth - 7:** Getting mammograms can cause the cancer to spread

**Fact:** Compression used in mammography does not spread tumour. Radiation does not increase the chances of spread.

**Myth - 8:** A Sonogram is different than an Ultrasound.

**Fact:** Ultrasound is the actual exam or name of the procedure while Sonogram is the image produced from the Ultrasound procedure.

**Myth - 9:** Ultrasounds use radiation.

**Fact:** This is absolutely not true. X-Rays use radiation. Ultrasounds use high-frequency sound waves that causes images.

**Myth - 10:** Repeated sonography are bad for foetus.

**Fact:** Repeated sonographies is not at all harmful to the foetus.



**Myth - 11:** 3D and 4D scans are not safe for babies.

**Fact:** There has been no evidence found of physical harm done to a fetus due to ultrasound exposure. A 3D scan does not use stronger sound waves or produce more heat than a 2D scan, so it is considered just as safe for babies

**Myth - 12:** MRI uses radiation.

**Fact:** MRIs do not use X-ray radiation like a CT scan does. It uses magnetic fields and radio frequency signals to produce an image.



## Intensive Care Unit

**Myth - 1:** “Patient is admitted in ICU without any reason.”

**Fact:** Your patient may appear fully conscious and stable to you, but he/ she may be at the risk of developing organ damage or developing a repeat episode of a life threatening process like fits/ heart attack. So, ICU is a place for close monitoring of such patients and thus avoid complications as well as improve outcomes.

**Myth - 2:** “ If my patient is put on the ventilator, he has no hope of survival.”

**Fact:** Ventilators (machines which help deliver mechanical breath to the patient) are a support for respiration in patients who are not able to adequately breathe on their own. With the advances in critical care medicine, more than 80% of the patients requiring ventilator are weaned off and recover well with good long term survival.

**Myth - 3:** “My patient is dead and the doctor is ventilating him to make money.”

**Fact:** A ventilator cannot be used to keep the heart beating!!! Many a times, patients on ventilator are kept deeply sedated to help better delivery of ventilator breath. Or he/she may be comatose due to some brain damage, for which he/ she was put on the ventilator. It is not possible to keep a dead patient alive by using a ventilator.

**Myth - 4:** “Please stop the ventilator and other supports on my patient.”

**Fact:** In our country, the law does not allow disconnecting the ventilator or other life supports, for any reason, even after written permission from the family members. Euthanasia of any form is not yet legal in India.

**Myth - 5:** “Unnecessary bunch of investigations are being done daily.”

**Fact:** Patients requiring ICU admission are unstable and have a dynamic disease process. Hence, repeated investigations are carried out to detect minute abnormalities and to treat them at the earliest, because even a small delay may be catastrophic.

**Myth - 6:** “I am not allowed to see my patient more than 1 to 2 times in a day.”

**Fact:** ICU patients usually are highly susceptible to secondary infection. Hence it is for the patient’s benefit that visitors have restricted entry in the ICU.

**Myth - 7:** “It’s been a week since my patient recieved CPR, but he is still not conscious.”

**Fact:** Movies and television have made us believe that CPR always works and the patient will immediately be as normal as what he/she was before the arrest. But in reality, only about 10% of patients receiving CPR survive, depending upon how soon it was initiated after the cardiac arrest. Out of the ones who survive, many patients may suffer irreversible hypoxic brain damage, leaving them in a partially conscious or vegetative state.

# Skin

Skin being the most visible organ of body has always been subject of interest by one and all and has wrong notions/myths associated with it

Following myths are very common

**Myth - 1:** Skin is a dead organ as compared to internal organs like liver, kidney, heart or brain.

**Fact:** Skin is as much a living organ like the above organs and needs to be taken care of.

**Myth - 2:** Skin diseases are always contagious and that is why people with skin diseases are looked upon as somebody to be kept at a distance.

**Fact:** Most of the skin diseases are not contagious and persons having them should not be ostracised.

**Myth - 3:** Leucoderma (white patch skin disease) is contagious and related to leprosy (Kodh).

**Fact:** Leucoderma (Vitiligo) is a separate disease and not a contagious disease and people having Leucoderma should not be ostracised.

**Myth - 4:** One can become fair by using creams/soaps from medical stores (self medication)

**Fact:** No creams/soaps can make you fair but can cause harm to your face after temporarily making the skin colour lighter .

**Myth - 5:** Pimples are caused by oily food/indigestion.

**Fact:** Pimples (acne) is a skin condition that appears during young age due to hormonal factors and needs medical treatment to keep it under control till it resolves.

**Myth - 6:** Leprosy is an incurable disease

**Fact:** Leprosy (Kushta Rog) is a fully curable disease

**Myth - 7:** There is no treatment for Psoriasis

**Fact:** Psoriasis can be kept under control with modern medicines.

**Myth - 8:** Blood purifiers and stomach cleansers (pet saaf) will cure all skin ailments.

**Fact:** Many skin diseases are connected with internal system and qualified skin doctor will be required to diagnose and treat skin diseases.

**Myth - 9:** Hair disorders like hair fall, greying of hair , dandruff is treated by herbal medicines and skin specialist is not needed for these disorders.

**Fact:** Hair, nail and skin are part of dermatology and with advances in medical science we can treat hair fall, baldness, greying of hair with good success rate.

**Myth - 10:** Beauty products and parlours are the solution for blemishes on face.

**Fact:** Qualified skin specialist will help for all the blemishes on face and body.

## Children

**Myth - 1:** Parents feel that scaring the children with injection will make the child co-operate with the doctor in the clinic.

**Fact:** If the child is scared, he will cry continuously which will create great difficulty in talking to the parents as well as in examining the child. Child should be made comfortable with the doctor and explained in the way he/she understands as per age, about the role of the doctor in making him well and in treating his/her illness.

**Myth - 2:** Eating Spinach will prevent or treat anemia

**Fact:** Spinach (Palak) is not a high iron food item, though as a green leafy vegetable it has lot of other nutrients as well as fiber. The cartoon character Popeye is known for his bulging muscles because of eating spinach, but the fact is spinach doesn't cause muscle building. What's more, most of the iron in spinach isn't easy for your body to absorb. But the veggie is an excellent source of vitamins A and E, as well as several important antioxidants, along with half a day's serving of beta-carotene all good for growing body.

**Myth - 3:** Ice/Cold water baths are good when a young child has high fever

**Fact:** Cold water can be uncomfortable for the child and may lead to shivering, which could actually raise the child's body temperature. The correct way to give sponging is tepid water which is at room temperature along with medicines for bringing the fever down.

**Myth - 4:** When child has diarrhea, feeding should be stopped.

**Fact:** Diarrhea leads to loss of water from the body and causes dehydration in the child. The younger the child, more is the risk of dehydration. If there is no vomiting, child should be given lot of water, juices, fruits, curds and small quantity frequent diet. In children less than 1 year, breast-feeding is very good for the baby. Additional homemade ORS (1 glass water + pinch of salt + 1 tea spoon sugar) should be given repeatedly to prevent dehydration. If severe diarrhea, medicines as per doctor's advice must be given additionally.

**Myth - 5:** Child should be given cough medicines whenever he/she develops cough

**Fact:** All the cough medicines are not safe for the children. Also, they may not be needed at all. Other methods for removing or decreasing the cough like steam inhalation (with covered steamer) and even home remedies are more effective in children than cough medicines, unless the child has severe cough.

**Myth - 6:** Children don't develop cancer and if they do, there is no hope for them.

**Fact:** Cancer in children occurs in many forms. These cancers are different

than those which occur in the adult. Hence, the doctor who is specialized in treating cancer in children must take care of the child. The survival rates for childhood cancer is much higher than those in adults. Awareness and early detection of childhood cancer is necessary for good long-term happiness and health.

**Myth - 7:** Child is scolded for watching TV from close for fear of damage to eyes

**Fact:** It is the other way round. If child watches TV from close then it may indicate that he/she is nearsighted and needs corrective lenses. Child should be shown to eye doctor and correct spectacles should be made.

**Myth - 8:** To help babies walk faster, baby walkers must be used

**Fact:** Actually, walkers prevent good eye-hand-foot coordination during learning to walk. Therefore, walkers slow down the natural learning rate. Also, if children fall with the walker, the injuries are much more serious.

**Myth - 9:** It is okay for the child to pass stools once in 3-4 days.

**Fact:** Not passing stools regularly can cause many health problems in children. Problems such as pain in abdomen, not feeling hungry, poor nutrition, poor growth, and sometimes vomiting occur in children. If constipation continues many months or years, the large intestine becomes lax which leads to vicious cycle.

**Myth - 10:** Antibiotics should be given to all children with fever.

**Fact:** Most of the times, children develop viral cough and cold. Antibiotics are needed in only bacterial illnesses. In other cases, they are not only ineffective, but also cause side-effects and are harmful. Improper use of antibiotics leads to resistance to those antibiotics making them ineffective in the future.

**Myth -11:** Biscuits are good for health

**Fact:** Biscuits are made up of maida and have lot of fat and sugar. They are a major cause of constipation in children and also suppress appetite due to fat and sugar, while providing lot of calories. Instead, fruits, salads and homemade food items should be given to children for improving their health.

**Myth - 12:** It is ok for the child to have fever and diarrhea while teething.

**Fact:** Teething causes children to put their dirty hands and other dirty objects in the mouth because of irritation caused by new erupting teeth. So, the infection which they get causes fever, diarrhea, etc. Children should be given clean objects to chew upon rather than they pick up any object from the floor and put it in their mouth. They should also be given finger foods such as slice of carrot, Cucumber instead of they chewing their dirty fingers.



## Teeth and Gums

**Myth - 1:** One doesn't need to visit a dentist unless there is a dental problem

**Fact:** Dental problems can exist without any symptoms (complaints). Hence it is essential to get the teeth checked periodically, so that problems can be picked up at an early stage and the tooth is not lost.

**Myth - 2:** Kids do not need dental treatment because their teeth will eventually shed off.

**Fact:** Eruption of teeth in children both the deciduous (milk teeth) and permanent dentition has a definite time schedule. Any premature loss of deciduous teeth does not lead to the early eruption of succeeding permanent teeth. In such cases one has to maintain space for the underlying permanent tooth which would erupt at its normal scheduled eruption. In such circumstances visit to the dental practitioner is a must so that he can maintain the space in the arch by giving a space maintainer. If one visits in the early phase the dental surgeon would ensure to retain the tooth by doing necessary restorative procedures.

**Myth - 3:** Dental treatment is always painful. Extractions, especially cause headaches and impaired vision.

**Fact:** With the advent of high speed turbine drills and good local anesthetic agents, dental procedures can be done comfortably without any discomfort to the patients.

**Myth - 4:** Only sugar/ chocolates/sweets can cause dental decay.

**Fact:** Any food lodged in the mouth can promote the growth of bacteria and promote dental decay.

**Myth - 5:** Cleaning of teeth causes mobility of teeth.

**Fact:** Cleaning of teeth i.e scaling does not cause weakening of teeth. On the contrary retained calculus, results in weakening of supporting bone, which results in loss of support to the tooth and eventual loss of the tooth.

**Myth - 6:** Alignment of teeth (orthodontic treatment) is only possible in childhood.

**Fact:** Alignment of teeth can be done at any age subject to good periodontal health

**Myth - 7:** Pregnant women cannot undergo dental treatment.

**Fact:** It is imperative that pregnant women have good oral hygiene lest it leads to infective pathology though it mandates intake of medications such as antibiotics and anti-inflammatory drugs.

**Myth - 8:** By extraction of so called wisdom teeth one loses wisdom.

**Fact:** Extraction of so called wisdom tooth does not result in loss of wisdom. This tooth doesn't even come in role of mastication. This terminology is misleading.



## Cardiology

**Myth - 1:** Cholesterol is not a risk factor for heart disease.

**Fact:** Cholesterol is a type of fat in blood. Recently lot of debate was generated after controversial post in social media suggesting that it is not responsible for heart attack and a powerful western country has removed it from the list of risk factors causing heart attack. Same post also claimed that it is very important for manufacturing of some hormones and therefore should not be reduced by medicine even if it is elevated. This is absolutely wrong. Besides high Blood Pressure and Diabetes, elevated level of cholesterol is a very strong predictor of not only heart disease but also for paralysis (Stroke). Yes, small amount cholesterol is needed for formation of some hormones in body.

**Myth - 2:** Clot in the heart blood vessel which is responsible for causing heart attack can be sucked easily by simple syringe like suction mechanism at a very nominal cost and patient will recover immediately.

**Fact:** A video clip widely circulating in social media claims that one can easily suck out the clot from blood vessel and heart attack will be reversed. It is also claimed that a large teaching medical hospital in Mumbai is doing it at the fraction of cost of currently approved angioplasty procedure. Absolutely wrong! No such treatment exists and no hospital in world is performing such suction of blood clot. Clot is only part of blood vessel block. There is underlying atheromatous plaque (Cholesterol rich deposition) inside the blood vessel which is responsible for a major part of the block and that cannot be removed just by suction treatment.

**Myth - 3:** I am 59 year old without any complaints. My BP on routine checkup was found to be 150/90. My doctor says I am having high blood pressure and should take medicine. I feel it is not necessary as at my age this is normal blood pressure.

**Fact:** Above the age of 18 years, any Blood pressure in male or female, which is higher than 140/90 is abnormal and is associated with higher instances of heart attack, heart failure and paralysis (Stroke) if not adequately treated. It also cause kidney failure and blindness. In fact a latest research done on more than 9000 persons showed blood pressure level of 120/80 is better than 140/90 (Sprint trial)

**Myth - 4:** I had an heart attack but now my cholesterol values are normal. I feel my doctor is unnecessarily giving me high dose of cholesterol lowering medicines.

**Fact:** Cholesterol lowering medicines (Statins) not only reduces the bad cholesterol but also have other beneficial effects in form of prevention of second heart attack. They also reduce chances of death and paralysis (Stroke). The benefit is dose dependent and therefore higher dosage of cholesterol lowering

medicines must be taken sincerely regardless of normal cholesterol level, preferably for life.

**Myth - 5:** My coronary angiography is suggestive of multiple blocks. I have no resources for angioplasty procedure, as advised by my doctor. I am going to die soon.

**Fact:** With optimum medical therapy stable patients can live as long as a person who has undergone angioplasty. Most important thing is to take prescribed medicine in recommended dose and regular check up with heart specialist. A study done on 2287 patients showed that optimum medical therapy is as good as angioplasty in stable patients.

**Myth - 6:** Diabetic patients are unnecessarily prescribed cholesterol lowering medication despite having normal cholesterol values.

**Fact:** Diabetes patients have significantly higher risk of heart attack, heart failure, amputation of limb and paralysis (Stroke), despite having normal cholesterol. Several researches have shown that giving cholesterol lowering drugs to almost all diabetic patient can reduce these complications significantly regardless of their baseline cholesterol value.





# Cancer

**Myth - 1:** Cancer is caused by germs.

**Fact:** Cancer is not caused by germs or bacteria, but it is an uncontrolled cell growth of the body organs. This uncontrolled mechanism could be either due to increased number of cell proliferation (production) and also decreased programmed cell death (all cells naturally die within a stipulated period - called APOPTOSIS).

**Myth - 2:** If you do a biopsy or knife biopsy of the tumor it exponentially grows, so it should be avoided.

**Fact:** It is not true that biopsy increase the cell growth. It is absolutely essential to do a biopsy to know the type of cancer, the molecular profile of cancer and it also helps in finding out the origin of cancer & also helps us to find out the targets which are causes of cell mutations at the genome level. Knowledge of these targets helps us in deciding the target therapy for many common cancers. Thus we can decide the specific target therapy for treating such cancers without side effects & can cure many cancers.

**Myth - 3:** Cancer is a contagious disease.

**Fact:** It is not contagious at all, by eating together or in the same utensils of the cancer patients and or shaking hands or hugging them. That cancer will spread by such touch is totally untrue because it is not caused by germs.

**Myth - 4:** Cancer treatment is always dismembering the parts.

**Fact:** With modern awareness and early diagnosis, most of the times now we are able to save the organs and the functions of the body e.g. Breast cancer. Now with breast conservation in early cases we are able to save the life and the breast both and it is also true for other organs like limbs, mandible, lungs, liver etc.

**Myth - 5:** Cancer chemotherapy has severe side effects & mostly kills patients and make their body black.

**Fact:** It is a total myth. The reason is; Modern chemotherapy and newer drugs prevent the side effects including damage to the normal cell. Thus no side effects to the body takes place and other side effects noticed in the past have been minimized to near zero.



## Urology

**Myth - 1:** Burning while passing urine/Dysuria is due to Urinary Infection.

**Fact:** This is not always true. This could be seasonal especially in summer due to dehydration. One has to do a routine urine report. Take Antibiotics only under medical advice. It will settle down just by drinking plenty of water .

**Myth - 2:** If an ultrasound done on routine basis shows enlarged prostate then it needs urgent treatment.

**Fact:** Not necessarily, it can be normal enlargement which is age related. Unless one has symptoms of irritation or difficulty in passing urine do not take medication on friend's advice but see a Urologist.

**Myth - 3:** Renal stone with no pain needs NO treatment.

**Fact:** SILENT STONES can destroy the Kidney over a period of time without patient being aware of this happening. Stone can lead to Malignancy/Cancer if left untreated for many years. One needs to investigate and a follow up is required, majority of small stones will pass in due course of treatment.

**Myth - 4:** Urinary Infection/STD can be contracted from a Public toilet seat (In females).

**Fact:** Women do not pass urine for long hours when out of the house in fear of this, it is far better to pass urine in a dirty bathroom than not to do so. When one uses the toilet seat, the area of urine passage is not in direct contact with the seat and urine infection is not airborne from the dirty bathroom.

**Myth - 5:** If you have a Kidney Cancer the entire kidney needs to be removed and one is scared of loosing one Kidney.

**Fact:** If on early detection one has small Cancer, then only the cancerous part of the kidney is removed and rest of the kidney can be saved, but for the fear of loosing the kidney if you don't do anything it will grow in size over a period of time and then there is no other option but to remove the whole Kidney.

**Myth - 6:** Urinary Incontinence (Leakage) is age related and one has to bear it and feel embarrassed to tell the doctor.

**Fact:** This can be investigated and treated with medication or surgery at all ages and is very safe. Need to contact Gynecologist /Urologist.



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