

Positive NEWS articles

11 tumours, part of spine taken out of 18-month-old

Somita Pal

A history of constipation in a one-and-a-half-year-old girl led to doctors at Sion Hospital diagnosing a rare condition (anterior meningocele), which affects one in 50,000 children.

Akruti Swamy, a resident of Andheri, had tumour formations on the anterior side of the spinal canal, normally found on the posterior side.

"With great difficulty, she would pass stools once in two days. We found hard stool presence in the anal canal and swelling," said Dr Paras Kothari, head of the paediatric surgery department, Sion Hospital.

An MRI and a CT scan revealed that Akruti suffered from a rare condition where the cystic mass arising from anterior sacral and coccygeal defect lies in the retrorectal space between the rectum and sacrum.

"In her case, some pieces of the spine were missing and the tailbone was not formed. There was a huge mass between the anal canal and the missing tailbone that led to prob-

CHANCE DISCOVERY

Some pieces of Akruti's spine were missing and the tailbone was not formed, which led to problems in passing stool

Tests revealed that she had tumour formations on the anterior side of the spinal canal

lems in passing stool," said Dr Kothari.

"We operated her from the posterior side and removed a part of the spine bone and tumours attached to the spinal canal."

The doctors removed 11 tumours in all. They later tied the dural sac – the membranous sac encasing the spinal cord within the bony structure of the vertebral column.

"We have kept an opening in the stomach for her to pass stool. This is to ensure there is no contamination. We also brought the anal canal to the original position. Once she recovers from the surgery, we will stitch the stomach," said Dr Kothari.



**Lokmanya Tilak Municipal General Hospital
and Lokmanya Tilak Municipal Medical College, Sion Mumbai**

Anterior meningocele

'Of the twins, only one may survive'

TIMES NEWS NETWORK

Mumbai: The rare conjoined twins born with a single heart in Sion Hospital last week underwent several diagnostic tests on Monday, said doctors. The tests will help doctors decide whether it's possible to carry out a separation surgery on the twins who were born to a cobbler's family living in the Sion-Mahim area.

"We are carrying out tests now, and aren't going to take a decision in a hurry," said Dr Paras Kothari, head of paediatric surgery department, Sion Hospital. He had already mentioned that the separation surgery of twins wo-

uldn't be a simple matter, and any decision on that would have to be taken by the children's parents and the hospital's ethics committee. As the twins have one heart, a separation surgery would also mean that only one boy might survive.

Meanwhile, efforts are on to get a 3-D model of the twins' body. Sion Hospital dean Dr Suleman Merchant had said that the hospital would try to get a model of their entire body so that doctors can get a view of the internal system before operating. If an entire body scan isn't possible then efforts will be made to at least get models of certain organs or parts of the body.



Conjoint dicephalicparapagus

Lokmanya Tilak Municipal General Hospital and Lokmanya Tilak Municipal Medical College, Sion Mumbai

मिहना

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गोम ताज्या बातम्या महाराष्ट्र राष्ट्रीय आंतरराष्ट्रीय क्रिडा व्यापार मनोरंजन संपादकीय मंगल सखी ऑक्सिजन जस इटके

मुंबई पुणे रावपूर औरंगाबाद नाशिक कोल्हापूर सांगली सातारा सोलापूर अकोला अहमदनगर जळगाव गोवा

मयामी जुळ्यांवर यशस्वी शस्त्रक्रिया

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मुंबई : सायन रुग्णालयात शरीर जोडल्या गेलेल्या जुळ्या मुलींवर शस्त्रक्रिया करून त्यांना वेगळे करण्यात आले. जन्मल्यापासून सहाय्या दिवशी शस्त्रक्रिया करून त्यांना वेगळे करण्यात आले. आता दोघांची प्रकृती स्थिर आहे.

पेंडुर येथील योगिता रिधाडिया (२८) यांनी १० जून रोजी जुळ्या मुलींना जन्म दिला. या जुळ्या मुली पोटाच्या भागात जोडलेल्या होत्या. यामुळे या मुलींचे यकृत जोडले गेले होते. योगिताचे नाव राजाबाई रुग्णालयात घातले होते. योगिताच्या सोनोग्राफीमध्ये या मुली जोडल्या गेल्या असल्याचे स्पष्ट झाले होते. यानंतर राजाबाई रुग्णालयाने तिला सायन रुग्णालयात उपचारासाठी जाण्याचा सल्ला दिला. सातव्या महिन्यात या जुळ्या मुलींचा जन्म झाला. जन्माच्या वेळी दोघांचे वजन मिळून ४.९ किलो होते. जन्माला आल्यावर दोन्ही मुली रुडल्या. त्यांना थसनाचा कोणताही त्रास नसल्याने ऑक्सिजन लावण्याची गरज पडली नाही. सहा दिवसांनी म्हणजे १६ जूनला त्यांच्यावर शस्त्रक्रिया करण्यात आली. यकृताच्या पेशी वेगळ्या करण्यात आल्या. त्यावेळी जास्त रक्तसांच झाला नाही. त्वचा ही प्थवस्थित बंद करण्यात आली. शस्त्रक्रियेनंतरही त्या दोघांची प्रकृती चांगली आहे. त्यांना कोणत्याही सपोर्ट सिस्टीमची गरज लागली नाही. दोन्ही मुली प्थवस्थित खात असून नैसर्गिक विधी योग्य पद्धतीने होत असल्याचे सायन रुग्णालयाचे अधिकाता डॉ. सुलेमान मर्चंट यांनी सांगितले.

जाणवती संबंधित बातम्या
कुटुंबकल्याण विविध प्रसारावाचीय रासक्रिया

भूकंपग्रस्त नेपाळला ४ हजार कोटींची मदत
बॉक्सफोटातील हिंदू आरोपींखाबत समुरीन घेण्यासाठी मोदी सरकारचा दबाव - विरोध सरकारी कर्मिनांचा खळबळजनक आरोप
प्रवासांच्या खिशांना घाट
आण्वीबाणी भारतच्या इतिहासातील सर्वात काळा टियस - नरेंद्र मोदी
पोलिसांच्या हक्काच्या आगेवर एमआरए प्रकल्पाचा इल्ला इटिबेटेड प्रवेशाची माहिती घ्या
देशभाल दुसऱ्यासाठी निधीप नाही
ऑनलाइन फसवणूक; बँक खाते गोंडविणार
आरटीओ तपासणीत वाहने नापस
पाऊस सुर, दीज बंद

Conjoint omphalopagus

दुर्लभ केस

सायन अस्पताल में ऑपरेशन से किया गया अलग

कंजाइंट ट्विंस को मिली मुस्कान

दीपिका शर्मा, मुंबई

बीएमसी के सायन अस्पताल में शरीर से जुड़ी दो बच्चियों को ऑपरेशन करके अलग किया गया है। अब ये दोनों एकदम स्वस्थ हैं। गर्भावस्था के 7वें महीने में पैदा हुई इन दोनों बच्चियों का लिवर आपस में जुड़ा हुआ था। एक बच्ची की आंत दूसरी के शरीर में जा रही थी। इन बच्चियों का ऑपरेशन करने वाले सायन अस्पताल के पीडियाट्रिक डॉ. पारस कोठारी ने बताया, 'चेंबूर की योगिता केलाश रिताडिया (28) की गर्भावस्था के दौरान बाकी प्रेग्नेंट महिलाओं की तरह सोनोग्राफी की गई। तब पता चला कि उनके कंजाइंट ट्विंस हैं, जिनके लिवर जुड़े हुए हैं। योगिता ने 10 जून को इन

गर्भावस्था के दौरान हुई सोनोग्राफी में इन दोनों बच्चियों के कंजाइंट ट्विंस होने की बात पता चली है। समय पर जानकारी मिलने से डॉक्टर यह सफल ऑपरेशन कर पाए।
-डॉ. सुलेमान मर्चेंट, डीन, सायन अस्पताल

बच्चियों को जन्म दिया। दोनों की एक ही गर्भनाल थी।' इनके जन्म के 6 दिन बाद डॉ. कोठारी, डॉ. अभय, डॉ. भारती तेंडुलकर और डॉ. दीपाली ठाकुर की टीम ने यह ऑपरेशन किया। डॉ. पारस ने बताया, 'पहली बच्ची के हृदय में तीन छेद हैं, जबकि दूसरी बच्ची के हृदय में एक छेद है। बाद में ये छेद अपने आप भर जाएंगे। इसके लिए सर्जरी की जरूरत नहीं होगी।'



1. अलाइव ऐप लेने के लिए 18001023324 पर मिस्ड कॉल दें या मोबाइल से liveapp.in पर जाएं।
2. फोन पर ALIVE ऐप ओपन करें। कैमरा ऑन कर फोटो स्कैन करें। एंड्रॉयड और iOS पर यह आसानी से स्कैन हो जाता है। दूसरे फोन्स पर

Options में क्लिक करके कैप्चर करें।
3. विडोज बेस्ड फोन (7.5 और अपर वर्जन) को ईमैज पर ले जाकर कैप्चर के लिए टैप करें और होल्ड करें।
4. ऐसा करते ही फोन पर फोटो अलाइव हो जाएगी। इसे खुद देखिए और दोस्तों के साथ शेयर कीजिए।

Conjoint omphalopagus

Hospitals take care of twins who were conjoined

Sadaguru Pandit
a www.fishbase.org

As experts from Bharosa and Mumbai's Jodak Hospital join hands to attend to the critical case of conjoined twins born at Sion hospital, two similar set of twins born in the city are surviving largely with the help of public hospitals.

Riddhi and Siddhi, who were separated in June 2014, have been abandoned by their families and are being taken care of by staffers of BJ Walia Hospital. Sitaran and Hargun, born in Sion's Lokmanya Tilak Memorial Hospital in June 2015, are being cared for by the hospital which takes care of their medicines, food and clothes.

Riddhi and Siddhi are healthy and are three years old. They were abandoned by their parents

within a year of admission at the hospital. Joined at the abdomen in such a manner that their bodies formed a 'y' sign, they underwent a life-saving procedure immediately to separate renal opening for passing stool as one of them started developing sepsis due to the accumulation of faeces inside the body.

Dr Mirasa Bodhanwala, chief executive officer of BJ Walia Hospital, said they have started walking on their own and are talking, speech, occupational and physiotherapy sessions. "We are raising them in such a manner that they don't even miss their

parents. They will soon undergo an MRI scan and then we will take care of their final surgery" said Bodhanwala.

Sitaran and Hargun were born at the Sion hospital on June 6 and were discharged within a month. Doctors said the two weighed 4.9kg and shared a liver. As the parents already had two daughters, they told the doctors that it was impossible to take care of the expenses of four daughters. The hospital has been providing ration, medicines and baby clothes to the Chamber-based family.

"Their mother Yogita asked for a job since she wouldn't be able to take care of four daughters. But, we told them that we will be able to take care of the basic needs," said Dr Paras Kofhari, HOD paediatric surgery, Sion hospital.

One-year-olds Hargun and Sitaran with their parents at Chamber, PAFU ASSOCIATES

Conjoint omphalopagu

Lokmanya Tilak Municipal General Hospital and Lokmanya Tilak Municipal Medical College, Sion Mumbai

In rare op, Sion hospital separates Siamese twins

Somita Pal @somitapal

Sion Hospital's Paediatric Surgery department, on June 16, successfully separated conjoined twins after a delicate surgery. The operation was conducted six days after their birth. Born to a Chembur couple on June 10, the girls were joined at the chest and lower abdomen, and shared a liver.

According to medical experts, such conjoined twins, whose skins and internal organs are fused together, are rare.

At birth, the babies jointly weighed 4.9 kilos.

"These twins were connected from the breastbone to the waist. 33% of all conjoined twins are connected in this way. Such twins can share a liver, gastrointestinal or genitourinary organs. In this case, the twins shared a liver, and one of the twin's intestines was going into the other," said Dr Paras Kothari, head of the Paediatric Surgery department at Sion hospital.

The case was detected when the twins' mother came in for sonography. She was in the seventh month of pregnancy. The mother, who already has two sons, had to be taken up for emergency surgery. The

twins were, after birth, shifted to paediatric care. After taking the family's consent, the decision to operate on them was taken.

Tests such as CT scan were conducted in order to find out which organs were shared by the girls.

"Normally, surgery for separation is done after three months of birth. In this case, the girls were doing fine. We decided to take them up for surgery. We used a special instrument which burns the tissue and helps to cut it. This leads to minimal bleeding," said Dr Kothari.

Since the survival rate in such cases are poor, the twins were closely monitored for a week after the operation. "Both are doing fine and are recovering well," said Dr Kothari.

"Surgical separation of conjoined twins needs extreme precision and care. It is a very delicate and risky procedure. We are proud that this rare feat was successfully achieved by our team of doctors," said Dr Suleman Merchant, dean of LTMG Sion Hospital.

This is the second separation of conjoined twins conducted at the hospital in a year.

inbox@dhalindia.net



A file photo of the twins after the operation on June 16

Twins doing well

"These twins were connected from the breastbone to the waist. 33% of all conjoined twins are connected in this way. Such twins can share a liver, gastrointestinal or genitourinary organs. In this case, the twins shared a liver, and one of the twin's intestines was going into the other," said Dr Paras Kothari, head of the Paediatric Surgery department at Sion hospital. After the operation, the twins are recovering well.

Man donates father's organs, promotes cause at prayer meet

Somita Pal @somitapal

A Govandi resident not only donated his father's organs on June 17, but also took the cause of organ donation forward in the prayer meeting held in his father's memory on Monday.

After suffering brain haemorrhage, 65-year-old businessman Shanlal Jain was declared brain-dead on June 17. His family of four—his wife, two sons and a daughter, decided to donate his liver, kidney and eyes to let needy patients get a new lease on life.

"Dr Amit Shobhavat, the intensivist under whom my dad was admitted, informed us about his condition. He told us about organ donation and we felt that we should say yes to this noble cause," said Sanjay Jain, the eldest son.

On Monday, the prayer meeting was attended by around 2,500 people at Nalanda hall in Chembur. "My dad was a member of many local committees like the jewellery

association. He was well-known in the Jain community. We therefore decided to spread the message of organ donation in his prayer meeting," said Sanjay, who owns a bike showroom.

The meeting was attended by representatives of the Zonal Transplant Coordination Committee and doctors.

"We had requested the ZTCC to give a lecture on organ donation. They readily agreed. In the meeting, they informed people about how organ donation can be done and who can donate organs. People were impressed with the information. For many, it was a completely new subject," said Sanjay. Some people who attended the meeting also pledged to donate their organs, and filed a form to the effect. So far, in 2015, 22 cadaver donations have taken place, resulting in 35 kidney donations and 19 liver donations. In 2014, the city saw 41 cadaver donations that benefited 107 people.

Conjoint omphalopagus

**Lokmanya Tilak Municipal General Hospital
and Lokmanya Tilak Municipal Medical College, Sion Mumbai**

STAN TIMES, MUMBAI
ESDAY, JUNE 21, 2016

TODDLER WITH ESOPHAGEAL LUNG OPERATED

Aayushi Pratap

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MUMBAI: Doctors successfully operated on an eight-month-old girl who was born with a rare congenital abnormality where a lung was connected to her food pipe instead of the windpipe. As a result, the food entered the lungs where it rotted.

Doctors said Anushka Yadav, whose parents live in Thane, was diagnosed with chronic cough, breathlessness and fever three months ago. A CT-scan revealed an extremely rare congenital abnormality called 'esophageal lung'. Doctors said only 25 such cases have been reported across the world so far.

"Her abnormal lung was two by two inches in size, which is half the size of a normal lung. It had food rotting in it so there was a lot of pus coming out of it," said Dr Paras Kothari, head of paediatric surgery, Sion hospital, who operated Yadav.

"The pus that came out from the abnormal lung and entered the normal lung which led to her respiratory problems," he added.

Anushka is now left with one lung. But, she is unlikely to face any medical problem because of that. "The normal lung will compensate for the missing lung. It will increase in size and do the job of both the lungs," said Dr Aditi Deshpande, a paediatric specialist at Sion hospital.

**Lokmanya Tilak Municipal General Hospital
and Lokmanya Tilak Municipal Medical College, Sion Mumbai**
Esophageal lung

HINDUSTAN TIMES, MUMBAI
THURSDAY, JANUARY 12, 2012

Surgery to help 3-yr-old overcome birth defect

Sonal Shukla

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MUMBAI: Panvel resident Pragati Gharat, 22, used to have to change the soiled clothes of her three-year-old son Atharva at least eight times a day.

Atharva was born without defined genitals and had no control over his bowel movements.

On Wednesday, doctors at the paediatric ward of the Sion Hospital surgically reconstructed Atharva's penis. Gharat is hopeful that the surgery will help her son overcome the birth defect.

"Atharva is suffering from a rare congenital disorder called cloacal exstrophy of bladder which involves multiple systems of the body such as urinary system, external genitalia and gastrointestinal system.

The disorder is reported in one among a lakh persons," said Dr Paras Kothari, head of the department of paediatric surgery, Sion hospital.

The lower part of Atharva's abdominal wall and front part of the bladder were missing, leading to an open bladder, said Dr Ritesh Ranjan, senior registrar, department of paediatric surgery. Besides, Atharva's

navel was not formed. His pelvic bones were not joined and affected his walking.

He also had stones in both his kidneys.

"The muscles responsible for controlling the bladder were also not developed leading to continuous flow of urine," said Dr Ranjan.

After consulting three private doctors, the family admitted Atharva to Sion hospital last year.

"Private doctors asked for Rs 4 lakh for the surgery. We could not afford that," said Gharat whose husband works in a warehouse.

Atharva has undergone four major surgeries at Sion hospital in the past year.

A hole was made in his abdomen to divert stool coming out through the open bladder. Then in two separate operations, doctors removed his kidney stones.

Last week, in a major operation, doctors closed the open bladder and abdominal wall.

Speaking about the success rate of the surgery, Dr Kothari said, "He (Atharva) might not be able to father a child. Otherwise he can lead a normal life."

DNA

DAILY NEWS & ANALYSIS

Doctors divide infant's stomach to form food pipe

Somita Pal

An 11-month-old baby was finally able to taste food after Sion Hospital doctors reconstructed his gastric tube.

Soon after Ritesh Yadav was born, his mother realised that the food being fed to her son wasn't reaching his stomach.

"He initially had congestion in his chest. Later when I breast-fed him, the milk would come back out. It's only when we brought him to Sion Hospital that we found out he doesn't have a food pipe and that's why the food never reached his stomach," said Seema Yadav, his mother. The doctors initially inserted a feeding tube straight into his stomach through which the baby could be fed. But recently, the doctors reconstructed his food pipe so that Ritesh can eat food like a normal person.

"In Ritesh's case, the food pipe was not developed. We were unable to reconstruct it earlier as he was too young. We divided the stomach in two



MATTER OF TASTE: Baby Ritesh can now eat normally

parts and made a tube out of one, placing it behind the chest bones so that it extends right up to the neck, forming a new food pipe," explained Dr Paras Kothari, head of the paediatric department, Sion Hospital.

"We initially approached private hospitals and the cost of operation was quoted as Rs1.5 lakh. We didn't have that much money. The doctors at Sion Hospital were very co-operative. We were so happy with the way they took care of my son that we decided to name

him after Dr Ritesh Ranjan, one of the team members who operated on our son," said Seema.

"We have retained the tube in the stomach for psychological reasons, since the baby has been feeding via the inlet since birth. Once he develops his sense of taste by eating normally, we'll remove the inlet too," said Dr Guruse Sandlas.

The doctors are presently studying how a food pipe made from the stomach reacts in the long run.

Lokmanya Tilak Municipal General Hospital and Lokmanya Tilak Municipal Medical College, Sion Mumbai

Vision lost, boy shows I-can-do-it spirit

Kaanti Vibhute

After losing his vision at the age of four due to an infection in his brain, Sujal Parate (9) did not lose hope and continued his education and stood fourth in class 1. Sujal, a student of UNKARSH Mandir at Malad (E), was helped by his mother, Shrawanti, in classes 1 and 2. She used to attend classes with Sujal. Now that he has entered class 3, it will not be easy to teach him, so the Parates have decided that Sujal should learn Braille from National Association for the Blind (NAB).

Early days
For the Parates, the day Sujal was born was the happiest day in their lives. But on the 30th day of his birth, the kid was diagnosed with excessive water in his brain. Doctors quickly fitted a pipe from his head to his stomach to drain out the excess water through his urine. He used to attend junior and senior KG at UNKARSH Mandir high school with the pipe fitted in his system. When Sujal was four, he contracted cough and cold and as a result, the tube attached to his body was affected, causing further infection in his brain. Once the tube was removed, the water in his brain dried up completely and he lost his vision. Dr Parag Kothari, paediatric surgeon, LTMG Hospital, Sion, who had operated on Sujal, said: "He was treated for excessive water in his brain. But due to the infection, the water dried up and he lost his vision. He is a bright child."

Mum's the word
Shrawanti said: "When Sujal lost his vision, he was helped by his school. The Shikshan Prasarak Mandal Trust that runs the school allowed me to attend classes with him to help him write his notes. And they conducted his exam without my help, which he cleared with flying colours. He is ranked fourth in class 1."

How NAB helped?
After Sujal entered class 3, the Parates decided it was time for him to learn Braille. They approached NAB. "NAB sends a special teacher to his school to teach him Braille. They also helped Sujal with Braille type-writer," said Shrawanti.

attend Braille training. A special teacher comes to school once a week to train him."

What school says
Jaswanti Nanche, principal, UNKARSH Mandir School, said: "The trust has been very supportive in Sujal's case. Our teachers now take care of Sujal. As he enters higher classes, studying would become difficult for him, so it has been suggested that he



Hydrocephalus with blindness

Sion hosp to do rare surgery

Somita Pal

For a year, Krish Sharma was only breastfed as he didn't have an anal opening and passed urine and stool from his penis. His parents instead of taking him to a doctor, decided to feed him a liquid diet so that he doesn't have to pass stool.

Krish, who was suffering from congenital anomaly (there was no anus formation and rectum was connected to urethra), was brought to Sion Hospital last month. He will be taken up for definitive surgery this week, in which they will pull down the rectum and place it in the muscle complex.

Dr Paras Kothari, head of the department of pediatric surgery, Sion Hospital, said: "Congenital anomaly is found in one in five lakh children but the most unusual fact of this case is the age of presentation. Male patients with Anorectal Malformation (ARM) are usually brought to the hospital within four or



five days. Only one or two cases worldwide have been reported where the child with such symptoms was brought for treatment after a year."

Krish weighed only 6 kg when he was first brought to Sion hospital. "Since he was only breastfed, he didn't gain much weight. We have now created an opening in his lower abdomen area and asked the

mother to feed him solid food. It is a serious condition, and requires a series of operations. But the long-term outcome is good for many children," said Dr Krushnakumar Kesan.

Krish is in the hospital for definitive surgery in which anus will be created and stoma will be closed. "Normally, in such conditions, the child may develop kidney in-

THE CASE

Krish is suffering from congenital anomaly – Anorectal Malformation (ARM), in which there is no anus formation and rectum is connected to urethra

This congenital anomaly is found in one in five lakh children but most are brought for treatment four or five days after they are born

Krish's case is unusual as he is almost a year old. He will now undergo definitive surgery in which anus will be created and stoma will be closed

fection. Luckily Krish doesn't have those complications. It is mainly because of uneducated parents and the doctors not guiding the parents properly that led to the delay," said Dr Kothari.

Krish's case study will now be presented in the clinical meets and the department is also sending it for medical journals for printing.

Infant ARM

तीन किलो का बच्चा, डेढ़ किलो का ट्यूमर

■ दीपिका शर्मा, मुंबई

मुंबई में एक 27 दिन के बच्चे में से उसके वजन से आधे ट्यूमर को ऑपरेशन के जरिए निकाला गया है। यह सर्जरी BMC के सायन हॉस्पिटल में की गई। डॉक्टरों के अनुसार बच्चे के भीतर इस ट्यूमर की जानकारी तब लगी थी जब यह बच्चा मां की कोख में सात माह का था। इस बच्चे का वजन लगभग तीन किलो है।

सायन हॉस्पिटल के पीडियाट्रिक सर्जरी विभाग के प्रमुख डॉ. पारस कोठारी ने बताया कि इस बच्चे की मां डिलिवरी के लिए इसी हॉस्पिटल में आई थी। बच्चे के जन्म के तुरंत बाद ही इसे पीडियाट्रिक विभाग में हमारे पास भेज दिया गया। डॉक्टरों के अनुसार इस बच्चे के शरीर से इस ट्यूमर को निकालने में लगभग चार

घंटे का समय लगा। डॉक्टरों को सबसे ज्यादा डर इस बात का था कि कहीं यह ट्यूमर कैसरयुक्त तो नहीं है। इसके लिए डॉक्टरों ने कई बार बायोप्सी की और पाया कि ट्यूमर कैसरयुक्त नहीं था। डॉक्टरों के लिए इतने छोटे बच्चे के शरीर से इतना बड़ा ट्यूमर निकालना अपने आप में बहुत ही चुनौतीपूर्ण था। साथ ही शरीर की ज्यादातर रक्त धमनियां और अंग इस

27 दिन के
बच्चे का हुआ
ऑपरेशन
कोख में ही
7वें महीने से
था ट्यूमर

ट्यूमर से जुड़े हुए थे जिसके चलते यह ऑपरेशन और भी कठिन हो गया था। डॉ. कोठारी ने बताया कि यह ट्यूमर पूरी तरह से बढ़ गया था और लगभग डेढ़ किलो का हो गया था। यह ट्यूमर बच्चे की किडनी को भी धकेल रहा था। यह ऑपरेशन पूरी तरह सफल रहा और पिछले हफ्ते यह बच्चा और मां हॉस्पिटल से डिस्चार्ज हो गए हैं।

Neonatal teratoma

Lokmanya Tilak Municipal General Hospital
and Lokmanya Tilak Municipal Medical College, Sion Mumbai



Neonatal teratoma

**Lokmanya Tilak Municipal General Hospital
and Lokmanya Tilak Municipal Medical College, Sion Mumbai**

Infant with 1.5 kg tumour goes under scalpel

dna correspondent @dna

In the last week of December, a team of surgeons at Sion hospital operated on a 27-day-old infant born with a tumour weighing half her weight. As per the doctors, the tumour in the girl's stomach was detected when her mother was in the seventh month of her pregnancy.

Dr Paras Kothari, head of the paediatric surgery department, said, "Luckily, the

child's mother was registered with Sion hospital for delivery. Once she delivered her in December, we transferred the baby under our care from the gynaecology department."

The tumour is termed Teratoma (from Greek; Terato meaning 'a monster' and 'onkoma' meaning 'swelling or mass'). Necessary medical tests were conducted before she was taken for surgery.

Elaborating on the result of the tests, Dr Kothari informed:

The tumour was half the weight of the baby. It was weighing on the kidneys

— Dr Paras Kothari

"Teratomas in newborns are generally benign and don't spread. They can, however, be malignant, depending on the maturity and other types of cells that may be involved. We did multiple biopsy tests to

ensure that the tumour was not cancerous. Thankfully, the report was negative."

The tumour encompassed major blood vessels and organs, making it a big challenge for the doctors. "A major blood vessel was passing through the tumour. It was a matured full-grown tumour and weighed one and half kg. It was pushing the kidneys down. The baby's weight was around 3 kg," Dr Kothari added.

Doctors took four hours to remove the tumour.

Now, after a month of staying in hospital, the baby and the mother were discharged last week. "The weight of the tumour was half the weight of the baby. Since it was linked to a major blood vessel, the case is a distinct one and so, we will be sending this case to the paediatric medical journal. We are happy that the baby is faring well and gaining weight," the doctor added.

MUMBAI, MONDAY
12.01.2015

dna OF mumbai

Neonatal teratoma

Boy suffers uncommon genital injury, docs suspect abuse

Somita Pal

In a bizarre incident, a 10-year-old boy was operated on at LTMG Sion hospital after a strand of hair almost cut into his genitals.

The hospital registered a medico-legal case as the patient looked to be a victim of child abuse. Neither the boy nor his parents have been able to offer an explanation.

Dr Paras Kothari, the head of the paediatric surgery department in Sion hospital, said, "Arif Khan (name changed) came to us a week ago with a swelling near the tip of his penis. The patient revealed that the swelling has

The boy revealed that the swelling has existed for the last two weeks. But he refused to divulge any other details

existed for the last two weeks. But he refused to divulge any other details."

On examination, doctors found a strand of hair encircled around the organ. This medical condition is known as penile tourniquet syndrome, an uncommon syndrome characterised by progressive penile strangulation caused by human hair.

Shirin, Arif's mother, said,

"He has been quiet for some days. While he was urinating, I saw the swelling. He didn't want to show me. He later said that he experienced pain while urinating. We asked him how it happened but he said nothing." The mother brought him to Sion hospital last Friday.

"A human hair when wet, contracts and is sharp enough to cut the organ. It can be accidental only if the child doesn't maintain hygiene. But our past experience has shown that such cases are proof of child abuse and often done deliberately," said Dr Kothari.

The doctors managed to suture the cut on time, and Arif is now recuperating.

Penile hair tourniquet

**Lokmanya Tilak Municipal General Hospital
and Lokmanya Tilak Municipal Medical College, Sion Mumbai**

DELICATE OPERATION | 2-yr-old's lung had partially collapsed & he was operated on in nick of time

Infant misdiagnosed as having TB, treated for vascular tumour

dna correspondent
correspondent@dnaindia.net

For a two-year-old Rohan Kumar's parents, it was a shock when doctors in Delhi said he has tuberculosis and was put on TB treatment. After being on treatment for a month, they brought him to Sion hospital, only to learn that his breathlessness is not due to TB but a vascular tumour that was growing between his pleura and pericardium, thereby collapsing his right lung.

"Pleura is a thin membrane that lines the surface of the lungs and the inside of the chest wall outside the lungs; pericardium is the covering of the heart. Diagnostic tests showed that there was liquid accumulation in the chest region, but we were not sure what it is. His right side of the lung had collapsed," said Dr Paras Kothari, head of paediatric sur-



File photo of doctors performing an operation

gery, Sion hospital.

With Rohan's condition getting worse, Sion hospital doctors decided to take him up for surgery. "We sent a scope to the thorax region. It was not of much help as the area was full of blood. We decided to open him up," said Kothari.

He added that they were surprised to see 100-150cc blood accumulation in the chest cavity. "During the surgery, we found that there was communication between the pericardium and pleura because of which there was blood accumulation. This was pressing on the lungs,

Medical literature has no mention of such a condition, although vascular tumour is very common

— Dr Paras Kothari, Sion hosp

leading to the right one's collapse," explained Kothari.

He also said that a child of Rohan's age weighs 10 to 12 kg and has 70-80 cc blood. "He was lucky to be operated on in time. Medical literature has no mention of such a condition, although vascular tumour is very common."

Rohan was kept in the hospital for a week. Kothari said his lungs returned to normal size within three days of surgery.

Seeing the uniqueness of the case, the department has decided to send Rohan's case to a medical journal.

Pleural vascular tumor

**Lokmanya Tilak Municipal General Hospital
and Lokmanya Tilak Municipal Medical College, Sion Mumbai**

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MUMBAI 3 SATURDAY, SEPTEMBER 17, 2011

DNA CITY

Rats nibble infant's face as mum sleeps

Somita Pal

A two-month-old girl was admitted to Sion Hospital after being bitten by rats on Monday. The rats ate up her nose, upper lip and left ear. Unfortunately for little Bilkis, her mentally-ill mother was sleeping at that time and her father, a night watchman, was at work. Doctors at the hospital are trying to restore normal breathing and reconstruct her nose, ear and lips.

"The rat has eaten away her nose cartilage, ear cartilage and upper lip. There are multiple bite marks also in her body. She is presently breathing from her mouth. Luckily her eyes have not been harmed," said Dr Paras Kothari, head of the pediatric surgery department at the Sion Hospital.

Kothari said Bilkis' father first saw her in that condition. "He returned from work at 6am and saw the child crying in pain. He rushed the child to us immediately. We gave her tetanus injection, antibiotics and put her on IV fluid. We have removed the dead tissues.

It will take another 15 days to completely clean the wound," said Dr Parag Karkera.

The father in his statement to police and doctors said there are many rats in Dharavi where they live.

According to doctors, her mother is mentally ill and can't take care of the child and her father comes to visit her for some time in the day. "On the first day, he admitted her and never returned. The mother was also not there. We thought Bilkis will become yet another abandoned child as her parents have not married. The next day when the father came to see her, we took his picture and address to ensure he doesn't run away," said Dr Kothari. The sisters and aayas in the ward are presently taking care of her as there is no one to look after her in the hospital.

"We have seen many rat bite cases. But this one is very bad. She will have to stay with the scar and being a girl it will be very difficult for her. We will reconstruction skin grafting only when she is at least 10 years old," said Dr Karkera.



Two-month-old Bilkis undergoes treatment at Sion Hospital on Thursday

Rat menace. Rats attacked two-month-old Bilkis while her mentally-ill mother was sleeping. His father, a watchman, was at work. Doctors are trying to restore normal breathing and reconstruct her nose, ear and lips. They said reconstruction skin grafting only when she is at least 10 years old

Rat bite

Baby bitten by rat to stay in Sion hospital for two more weeks

HT Correspondent

■ htmetro@hindustantimes.com

MUMBAI: Two-month-old Bilkis, who was brought to Sion hospital with rat bites on her face, will have to stay in hospital for at least two weeks. The girl, whose mother is reportedly "mentally unsound", was brought to the hospital a fortnight ago with bite marks on her nose, ears and upper lip. Her father, who lives in Dharavi, works a watchman.

"When she was brought to us, she was severely dehydrat-

ed. We first gave her intravenous (IV) fluids with antibiotics to stabilise her," said Dr Paras Kothari, head of paediatric surgery at Sion hospital.

The bite wounds had turned black because of toxicity and inadequate blood supply to the skin. The surgeons had to remove the dead skin and will perform skin grafting on the wounds.

"Right now, she is breathing through her mouth. In 10 days, we will graft skin on her nose leaving a passage for breathing. When she is older, we will have

to graft the cartilage on her nose and ears and shape them," said Dr Kothari.

Dr Kothari said Bilkis's father had said he was unable to take care of the baby.

"Our ayah takes care of her. But she is there only for eight hours after which resident doctors take care of her. I am worried about the child's safety considering there is no one around her all the time," said Dr Kothari.

The doctors have taken the father's photograph and noted his address and phone number.

HINDUSTAN TIMES, MUMBAI
MONDAY, SEPTEMBER 19, 2011

Rat bite

मासूम की मदद के लिए बड़े हाथ

पिता की हैवानियत
की शिकार बच्ची
को गोद लेने आया
एक परिवार

सीमा शर्मा ॥ मुंबई

तीन साल की रोशनी (बदला हुआ नाम) को अब 'पापा' शब्द से डर लगने लगा है। अपने पिता से ही यौन शोषण का शिकार रोशनी का इलाज सॉयन हॉस्पिटल में चल रहा है। बाप ने तो जिंदगी बर्बाद की ही, मां भी साथ छोड़कर चली गई। अपनों से ठोकर खाई मासूम को थामने के लिए एक अनजान परिवार सामने आया है। धर्म की दहलीज लांघकर शेख शकील व अजमिना ने रोशनी को गोद लेने के लिए अस्पताल से संपर्क किया है। हालांकि कानूनी प्रक्रिया पूरी करने के बाद ही इसका निर्णय किया जाएगा कि बच्ची को किसे गोद दिया जाए।

अस्पताल करेगा सिफारिश: सॉयन अस्पताल के डीन डॉ. सुलेमान मर्चेट ने बताया, रोशनी को यहां लाने के बाद से कई लोगों ने उसकी मदद के लिए संपर्क किया है। कोई खिलौने दे कर जा रहा है, तो

काई उसके इस्तेमाल की अन्य चीजें। उन्होंने बताया, वैसे तो इस बात का निर्णय पुलिस ही करेगी कि बच्ची को किसे गोद दिया जाए, लेकिन हम हमारे यहां आए इच्छुक जोड़े को प्राथमिकता देने की सिफारिश करेंगे।

स्टॉफ की बन गई है जान

12 दिनों से अस्पताल के वार्ड नंबर 1 ए में इलाज करा रही रोशनी यहां के स्टॉफ की जान बन गई है। बेहद मासूम रोशनी से सभी का इतना लगाव हो गया है कि कोई भी उसे जाने नहीं देना चाहता। पेडिआट्रिक विभाग प्रमुख डॉ. पारस कोठारी कहते हैं, रोशनी अब ठीक है, लेकिन जब तक उसके रहने की कोई उचित व्यवस्था नहीं होती हम उसे कहीं नहीं जाने देंगे, बेशक उसे हमें यहां साल भर ही क्यों न रखना पड़े। बोलने में तेज रोशनी की बातों से सभी का दिल लगा रहता है। उसकी देखरेख के लिए एक महिला कॉन्स्टेबल हर वक्त तैनात रहती है।

क्या है मामला

24 नवंबर को कल्याण में अजय बेहेरा नामक व्यक्ति ने अपनी ही तीन साल की बेटी के साथ रेप किया था। परिवार सड़क पर रहता था। घटना के बाद से बच्ची की मां ज्योत्सना गायब है और पिता पुलिस हिरासत में है।



Lokmanya Tilak Municipal General Hospital
and Lokmanya Tilak Municipal Medical College, Sion Mumbai



Sacrococcygeal teratoma

**Lokmanya Tilak Municipal General Hospital
and Lokmanya Tilak Municipal Medical College, Sion Mumbai**

Tiny tot survives rare tumour, TB



Little Sohaib Shalkh with his mother

We cut off only 10% of the liver along with the tumour. The operation went off fine without any complications. He is doing well and will be discharged in two weeks

—Dr Paras Kothari,
head of paediatric surgery
department, LTMG Hospital

doctors at LTMG Hospital were shocked to find a two and half kilo heavy tumour in his liver. "The tumour, whose weight was equal to one third of the child's weight, occurs to one in 1.5 million people in the world according to the medical journal," said Dr Kothari.

He also added that the doctors had initially planned to cut off half his liver with the tumour but as the four hour-long operation began, they managed to save 90 per cent of the liver. "We cut off only 10 per cent of the liver along with the huge tumour. The operation went off fine without any complications. He is doing well and will be discharged in two weeks," said Dr Kothari. Seeing the rarity of the case, the doctors now plan to present the same in a medical journal.

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Liver tumor

Lokmanya Tilak Municipal General Hospital
and Lokmanya Tilak Municipal Medical College, Sion Mumbai

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Sion docs perform rare surgery on 3-month-old kid

Somita Pai @somitapai

Mumbai: When a three-month-old baby was admitted to LTMG Sion Hospital with a chest infection, it was hard for doctors to believe that it will be one of the handful cases of a rare congenital malformation.

According to doctors, the child, with a history of recurrent chest infection, was born without a chest bone. This exposed his heart to recurrent infection and there was always the fear of being punctured by rib bones. Medical journals show that there have been only 24 such cases in the world before.

Seeing the uniqueness of the case, doctors are all set to send it to international paediatric surgery journals.



Rare condition

Congenital absence of sternum (chest bone) is also known as sternal cleft. It is of two types- complete or incomplete. Complete sternal cleft is rarer than incomplete one. It usually presents in early infancy or immediately after birth. Depending on the size of the defect, the sternal cleft may be treated or not.

What is the disease?

In medical language, the condition is called total sternal cleft. In this condition, the chest bone that holds one's ribs together and protects the chest is absent. "While partial sternal cleft is a known phenomenon, total sternal cleft is very rare," said Dr Paras Kothari, head of the paediatric surgery department at the hospital. Being a high-risk case, top hospitals refused to operate on the baby.

What if there is no chest bone?

"We could clearly see and feel the child's heart beating under the skin because of the absence of chest bone," said Dr Kothari. Dr Nitin Dhende, head of the department of pediatric surgery at JJ Hospital, said: "It is indeed a rare case. Once the heart is put inside the chest cavity, there should not be any problem, if he doesn't have any other congenital heart problem."

How did doctors treat the child?

In a surgery lasting two-and-a-half hours, doctors brought the rib bones together and stitched it with stainless steel wires. "Before carrying out the procedure, we brought the rib bones together with our hands to check how the child's basic parameters like pulse rate and blood pressure level work. After this litmus test, we went ahead and stitched the ribs together," said Dr Kothari.

Did the child develop infection?

While doctors decided to go ahead with the surgery, injectable antibiotics were given to treat chest infection. "We did tests like CT scan and waited for the infection to subside. At the time of operation, as soon as we cut the skin layer, we could see the curtain of the heart. The left and right bones were four-and-a-half inch apart. We have never seen such a case before," said Dr Kothari.

Sternal cleft

MUMBAI, THURSDAY
02.07.2015

dna OF mumbai

Docs remove mass of hair, thread from stomach of 8-year-old girl

Somita Pal @somitapal

She was eating and yet starving. An eight-year-old girl's compulsive habit of eating her own hair and threads from clothes, which meant she had no appetite for food, landed her up in hospital.

Doctors at Sion hospital, where the Std IV student was admitted with stomach pain, removed the two-and-a-half-foot-long mass. Head of the paediatric surgery department Dr Paras Kothari said, "Neeti Sakpal was brought to us in the second week of June. X-ray showed the presence of a hazy mass inside the stomach."

Doctors said the girl's mother told them about her hair eating habit. "She noticed Neeti eating her own hair eight months back. When she started complaining of stomach pain, the family got an endoscopy done. The doctors



Amit Bandre

there advised them to go for tertiary care," said Kothari.

Doctors said that Neeti, who lives with her parents in Nalasopara, also tore clothes and ate the threads. "It's called the Rapunzel syndrome, which leads to phyto-trichobezoars — a solid mass of indigestible material that accumulates in the person's digestive tract," said Kothari.

In Neeti's case, the mass was located in the stomach with a tail extending into the small intestine. "The total mass covered 90% of the stomach space. This led to her not able to eat; it also trapped food particles. We had to operate on her and remove the mass," he added.

While Neeti is recuperating and will be discharged in the next few days, doctors have referred her for psychiatric counselling. "Her mother said she is not good in academics. She had seen sometime back a huge patch of hair missing from Neeti's head. Seeing her eat hair, she had shaved her head. Even Neeti's teacher had complained about how corners of her books were torn as she ate paper too. She is possibly suffering from some psychiatric problem and needs counselling," said Kothari.

Trichobezoar

भारत में पहली बार

तीन लिंग वाले बच्चे का सफल ऑपरेशन

■ वरिष्ठ संवाददाता, मुंबई

बीएमसी के सायन अस्पताल में हुई एक अनोखी सर्जरी ने मुंबई के डॉक्टरों की सफलता की कहानी में एक और कहानी जोड़ दी है। सायन अस्पताल में 2 साल के एक ऐसे बच्चे का ऑपरेशन हुआ है जिसके जन्म से ही तीन लिंग थे। अपने तरह के इस अनोखे मामले में भारत में पहली बार सर्जरी की गई है।

इस बच्चे का जन्म उत्तरप्रदेश में हुआ था। बच्चे को जन्म से ही शरीर में तीन लिंग थे और प्राकृतिक रूप से यह बच्चा मल भी त्यागने में असमर्थ था। साल भर इस बच्चे के इलाज के लिए भटकने वाले परिजनों को उनके बेरिवली में रहने वाले रिश्तेदार ने इलाज के लिए

जन्म से तीन लिंग वाले बच्चे का सायन अस्पताल में हुआ ऑपरेशन

मुंबई बुलाया। इसी साल जुलाई माह की शुरुआत में इस बच्चे को सायन अस्पताल के पीडियाट्रिक विभाग में भर्ती किया गया था। सायन अस्पताल के पीडियाट्रिक विभाग के प्रमुख डॉ. पारस कोठारी ने बताया कि इस बच्चे को ऑब्जर्वेशन में रखने के बाद हमने जुलाई के दूसरे हफ्ते में इस बच्चे का ऑपरेशन किया, जो सफल रहा। इस बच्चे को तीन लिंग थे, जिनमें दाएं तरफ

के लिंग से यह मूत्र त्याग करता था। सर्जरी के बाद हमने दायां और बायां लिंग एक कर दिया और तीसरे अतिरिक्त लिंग को सर्जरी की मदद से हटा दिया। डॉ. कोठारी ने बताया कि यह अपने तरह का पहला ऑपरेशन है। यह एक तरह से शारीरिक विकास से जुड़ी असमानता है। यह समस्या आनुवंशिक नहीं कही जा सकती, लेकिन ठोस रूप में इस तरह की समस्या के कारण के बारे में कह पाना मुश्किल है। उन्होंने बताया कि इस तरह की समस्या के कुछ कारण हो सकते हैं, जैसे गर्भ में बच्चे तक सही से रक्त न पहुंच पाना या मां का कोई गलत दवा खा लेना आदि। लेकिन इस मामले में कौन-सा कारण रहा होगा, यह कहना मुश्किल है।

3 लिंग वाले बच्चे का सफल ऑपरेशन

सायन अस्पताल देश में पहला आपरेशन
में हुई सर्जरी

कार्यालय संवाददाता
मुंबई. सायन अस्पताल में
तीन लिंग वाले 2 वर्षीय
बच्चे की सफल सर्जरी की
गई. सर्जरी कर डॉक्टरों ने
दो लिंग को जोड़कर एक
किया और एक लिंग को
काट दिया है. सायन
अस्पताल में हुई यह सर्जरी
देश में हुआ अलग तरह का
यह पहला ऑपरेशन है.



डॉ. पारस
कोठारी ने
नवभारत को बताया कि
उत्तर प्रदेश के गौनपुर के
रहने वाले दीपू यादव
सामान्य बच्चों से काफ़ी
भिन्न था. उसके शरीर में

तीन लिंग के अलावा शौच करने की जगह
नहीं थी, जिस जगह से उनके पास सर्जरी के
अलावा कोई पर्याय नहीं था. अपने 20 साल के
कैरियर में उन्होंने ऐसा पहला मरीज देखा है.

बच्चे में जन्म से ही थीं खामियां

मरीज के चाचा संजय यादव के अनुसार
जन्म से ही बच्चे के शरीर में यह खामियां
थी. पैदा होने के बाद यूपी के डॉक्टरों ने पेट
के जरिए से मरीज के शौच की व्यवस्था कर
दी थी. परिवार वालों को आगे कोई उपचार
संभव नहीं है ऐसा कह दिया था. इसके बाद
मुंबई के गौरेगांव में रहने वाले मरीज के
चाचा ने उन्हें उपचार के लिए मुंबई बुलवा
लिया. सायन अस्पताल के डॉ. पारस
कोठारी से संपर्क किया.

डॉ. कोठारी ने देश में
तीन लिंग वाले पहले
मरीज के सर्जरी का जिम्मा
उठाया. 6 घंटे की सर्जरी के बाद
डॉक्टर ने तीन लिंग में से एक
को काट दिया जबकि दो लिंग को
जोड़ कर एक कर दिया, वही
शौच के लिए जगह बनाने 27
अगस्त को मरीज की दुबारा
सर्जरी की जाएगी.

वैद्यकीय झेप : तब्बल ६ तास डॉक्टरांनी केले प्रयत्न

तीन लिंग असलेल्या चिमुड्यावर शस्त्रक्रिया

मुंबई : दोन वर्षापूर्वी उत्तर प्रदेशातील जन्मलेल्या बाळाला तीन लिंग आणि गुद्द्वाराची जागा बंद होती. उत्तर प्रदेशात त्याच्यावर उपचार होऊ शकले नाहीत. त्याला उपचारांसाठी शीव रुग्णालयात दाखल करण्यात आले होते. या ठिकाणी या चिमुड्यावर यशस्वी शस्त्रक्रिया पार पडली. पुढच्या काही दिवसांतच हा चिमुडा घरी परत जाणार आहे.

या बाळाला जन्मल्यापासून पोटाला नळी लावून नैसर्गिक विधी केले जात होते. डॉ. कोठारी यांनी पुढे सांगितले, जुलैच्या दुसऱ्या आठवड्यात मुलाला रुग्णालयात तपासणीसाठी आणले. या वेळी उजवीकडच्या लिंगातून लघवी जात होती. पण, डावीकडच्या लिंगातून लघवी जात नव्हती; आणि खाली एक लिंग होते त्याची वाढ पूर्ण झालेली नव्हती. यानंतर गुद्द्वाराची जागा तपासल्यावर ती बंद असल्याचे अचूक निदान



महापालिका रुग्णालयाचे यश

महापालिका रुग्णालयात अशा प्रकारची शस्त्रक्रिया होऊ शकते. हे श्रेय डॉक्टरांच्या टीमचे आहे. आता या मुलाला काहीच कळत नाही. पण, मोठा झाल्यावर तीन लिंग असल्यामुळे त्याला मानसिक त्रास, शारीरिक त्रास होऊ शकला असता.

आता त्याला कोणताच त्रास होणार नाही, याचा आनंद असल्याचे सायन रुग्णालयाचे अधिष्ठाता डॉ. सुलेमान मर्चंट यांनी 'लोकमत'शी बोलताना सांगितले.

झाले. तिथे एक मांस, हाड, चरबी आणि त्वचेचा गोळा होता. या मुलावर जुलै महिन्याच्या दुसऱ्या आठवड्याच्या शेवटी शस्त्रक्रिया करण्यात आली.

ही शस्त्रक्रिया तब्बल सहा तास चालली. या शस्त्रक्रियेत मुलाचे उजव्या आणि डाव्या बाजूचे लिंग जोडण्यात आले. तर खालचे लिंग काढण्यात आले. याचवेळी गुद्द्वारापाशी असलेला मांसाचा गोळादेखील काढण्यात आला. आता या मुलाची प्रकृती स्थिर आहे. २५

ऑगस्ट रोजी पोटाच्या वरच्या बाजूची जागा बंद करण्यात येणार आहे. भारतात पहिल्यांदाच असे मूल जन्माला आले आहे. याला डेव्हलपमेंट ऑबनॉर्मलिटी म्हटले जाते.

पोटात बाळाची वाढ होत असताना रक्तपुरवठा कमी झाला, त्यात आईने घेतलेल्या औषधांचा परिणाम गर्भावर झाला असण्याची शक्यता आहे. पण, याचे नेमके कारण सांगता येत नाही. मात्र, आता हे बाळ सामान्य आयुष्य जगू शकते, असे डॉ. कोठारी यांनी सांगितले. (प्रतिनिधी)

**Lokmanya Tilak Municipal General Hospital
and Lokmanya Tilak Municipal Medical College, Sion Mumbai**



Triphalia

Lokmanya Tilak Municipal General Hospital
and Lokmanya Tilak Municipal Medical College, Sion Mumbai

RAREST OF RARE | Doctors remove one non-functional organ, fuse the other two into one

Boy with three penises operated on

Maitri Porecha @maitriporecha

In what is a rarest of rare case, a two-year-old boy who had three penises since birth was operated at Sion hospital last month. The native of Jaunpur in Uttar Pradesh was brought to Mumbai by his mother for treatment.

"The boy suffers from Diphallia. At birth, he had three penises, but he was able to pass urine through only one of them," said Dr Paras Kothari, head, paediatric surgery in Sion hospital.

Of the three penises, two had erectile tissue, which is responsible for sexual function, while the third was rudimentary. Also, his anus was absent. "There was a huge soft boney mass and tissue to which the penises were attached. However, the anus was absent. Two years ago, after his birth, the doctors in Uttar Pradesh had created an incision on the lower left side of his stomach, in a procedure called Colostomy, to let the excreta pass through a tube," said Dr Vishesh Dixit, paediatric surgeon at the hospital.



The two-year-old with his mother

Doctors said it is an extremely rare anomaly, with only a hundred such cases reported in medical literature since 1609. Its occurrence is one in 55 lakh live male births.

The family got the boy to Mumbai for

surgery after understanding that a complex procedure of removal of penises was not possible in UP. In a surgery that lasted for six hours, doctors at Sion hospital extracted the soft boney mass as well as the rudimentary penis. "The two functional penises were fused into one, by wrapping a mass of skin around them. Further, an anal path was created through the boy's rectum to facilitate the passage of excreta," said Dixit.

The boy will be taken up for a second surgery at the end of August to close the incision in the stomach. "The incision, through which he currently passes excreta, will only be closed after the anal path that has been created by us heals and is capable of function," said Kothari.

The boy's sexual function will be normal and his fertility will not be affected when he attains adulthood, said doctors.

"We want our boy to lead a normal life, and are grateful to the doctors who have conducted a successful surgery," said the boy's uncle.

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MUMBAI, SATURDAY
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Triphalia