HEART TODAY

"KNOW YOUR HEART FOR BETTER TOMORROW"

News Bulletin | ISSUE : 62 | October 2026

U. N. MEHTA INSTITUTE OF CARDIOLOGY & RESEARCH CENTRE AHMEDABAD

WORLD DIABETES DAY

14 NOVEMBER

FOR INTERNAL CIRCULATION ONLY
AHMEDABAD, INDIA

Medicity

U. N. MEHTA INSTITUTE OF CARDIOLOGY & RESEARCH CENTRE

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Our Achievements

Commitment to Excellence in Healthcare

ASSOCHAM
Ideate · Innovate · Impact

4th ASSOCHAM Health & Wellness Excellence Awards 2026

Presented at the 4th National Health & Wellness Summit held on 17 September 2026 in New Delhi.

Outstanding Healthcare Leadership Award

Winner Name

Dr. Chirag Doshi
Director, UNMICRC, Ahmedabad

ASSOCHAM
Ideate · Innovate · Impact

4th ASSOCHAM Health & Wellness Excellence Awards 2026

Presented at the 4th National Health & Wellness Summit held on 17 September 2026 in New Delhi.

Healthcare Excellence of the Year

Winner Name

U. N. Mehta Institute of Cardiology and Research Centre, Ahmedabad

INDIAN CHAMBER OF COMMERCE | CAHO Consortium of Accredited Healthcare Organizations

5th ICC National Healthcare Summit & Excellence Awards 2026

Organized by Indian Chamber of Commerce (ICC) in association with **CAHO** held on 16th September 2026 at Radisson Blu Atria, Bengaluru.

U. N. Mehta Institute of Cardiology and Research Centre, Ahmedabad has won 5 awards in this event, in categories of Western Region & Hospitals with 1,000 or More Beds.

Category
Hospital of the Year

Winner Name

U. N. Mehta Institute of Cardiology and Research Centre, Ahmedabad

Category
Excellence in Healthcare Delivery

Winner Name

U. N. Mehta Institute of Cardiology and Research Centre, Ahmedabad

Category
Best CEO of the Year

Winner Name

Dr. Chirag Doshi
Director, UNMICRC, Ahmedabad

Category
Excellence in Technology Transformation

Winner Name

U. N. Mehta Institute of Cardiology and Research Centre, Ahmedabad

Category
Excellence in Patient Safety & Quality Control

Winner Name

U. N. Mehta Institute of Cardiology and Research Centre, Ahmedabad

World Diabetes Day

14 November 2026

Early action on diabetes

Detect • Prevent • Manage • Live Better

Dr. Tanvi Ranka
Full Time Physician

Why it matters?

Diabetes mellitus represents one of the most pressing global health challenges of the 21st century.

Early action can prevent complications, save lives and build healthier communities.

Key Insights for 2026 Campaign

- **>40%** undiagnosed globally
- **80%** diagnosed by 2030 (WHO goal)
- Up to **50%** already have complications at diagnosis
- **635 million** adults at high risk of type 2 diabetes
- **#ActEarlyOnDiabetes** — Global campaign hashtag

What is Diabetes?

Diabetes is a long-term condition altering how the body converts food into energy. Normally, food breaks down into glucose. As blood sugar rises, the pancreas releases insulin (the 'key') to let glucose enter cells. If this process fails, glucose remains in the blood, damaging blood vessels like sandpaper and threatening the heart, kidneys, eyes and nerves.

How Diabetes Starts

Type 1 (Missing Keys)
Autoimmune condition where the body destroys insulin-producing cells. Daily insulin is required for survival.

Type 2 (Rusty Locks)
Cells develop insulin resistance due to genetics and sedentary lifestyle. Pancreas overworks and eventually burns out.

Gestational (Temporary Block)
Pregnancy hormones block insulin. Usually resolves after birth, but increases future Type 2 risk.

Why High Blood Sugar is Dangerous

Acts like sandpaper inside blood vessels, causing damage to heart, kidneys, eyes and nerves.

Clinical Benchmarks (HbA1c)

Normal	< 5.6%
Prediabetes Window	5.7% – 6.4% (Crucial stage for lifestyle reversal)
Diabetes	≥ 6.5%

Annual checks are vital for individuals over 30.

Myths vs Facts (Evidence-Based Realities)

Sugar
Myth: Sugar directly causes diabetes.
Fact: Type 2 stems from genetics and body weight, not just sugar.

Carbs & Fruits
Myth: Eliminate carbs and fruits.
Fact: Choose fiber-rich complex carbs and controlled portions of berries or apples.

Treatment Stigma
Myth: Insulin means personal failure.
Fact: Insulin is a medical necessity to save target organs.

Body Type
Myth: Only overweight people get Type 2.
Fact: Even thin people can develop Type 2 due to lack of exercise and visceral fat ('skinny fat').

Clinical Diet Schedule (Ambulation to Sleep)

Time / Phase	Recommended Diet & Multi-Grain Framework	Portion & Clinical Notes
Early Morning	Warm water with overnight soaked fenugreek (methi) seeds.	1 Glass / 5g. Activates early metabolic systems.
Breakfast	Unsweetened milk/tea/coffee + choices: Khakhra, Ragi Idli, Upma, Poha, Handvo, Uttapam, or Methi Thepla.	1 Cup fluid + 2 pcs Khakhra or 150g cooked items. Incorporate alternative grains.
Mid-Day Snack	Roasted chana, mamra, makhana, or low-sugar sprouted sprouts. Optional: 1 apple, orange, guava, kiwi, or pomegranate.	100g fruit or 1 small bowl snack. Keeps glucose levels stable between major meals.
Lunch	Salad/Soup + Fulka Rotli (made from wheat, ragi, barley, oats, and soybean flour mix) + seasonal vegetables/pulses + buttermilk/curd.	1 bowl salad, 3 rotlis, 1 bowl veg, 1 bowl curd. Avoid rice; mix flours to blunt glycemic spikes.
Evening Snack	Unsweetened green tea or roasted grains, plus ragi/oats biscuits.	1 cup tea + 3 biscuits max. Avoid bakery snacks.
Dinner	Fresh salad + Multi-grain mixed flour chapati / Khichdi alternatives (wheat daliya, moong daliya, millet khichdi) + light soup/kadi.	1 bowl salad, 3 rotlis (or 1 bowl daliya/khichdi), 1 bowl vegetable. Keep dinner light.
Bedtime	Warm turmeric milk or plain warm milk (strictly unsweetened).	100ml / 1 small glass. Aids recovery and night-time stability.

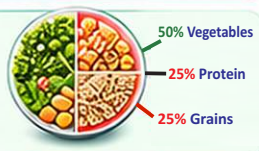
Mandatory Preventive Lifestyle Actions

The 150-Minute Rule
Complete at least 150 minutes of moderate aerobic exercise (brisk walking, cycling) per week to boost insulin function.

The 30:3 Desking Rule
For every 30 minutes of desk sitting, stand and walk for 3 minutes to halt glucose accumulation.

Strength Resistance
Incorporate basic bodyweight or resistance training 2–3 times a week to build muscle mass and lower resistance.

The Plate Method
Structuring lunch/dinner plates: 50% non-starchy green vegetables, 25% lean pulses/proteins, and 25% intact complex whole grains.



Healthy Choices | Active Lives | A Diabetes-Free Future

World HEART DAY 2026

Healthy Hearts • Healthier Lives

Stronger Hearts for a Healthier Tomorrow

The **Health & Family Welfare Department, Government of Gujarat,** and the **U. N. Mehta Institute of Cardiology & Research Centre (UNMICRC)** successfully celebrated **"World Heart Day 2026"** a state-level medical symposium today under the theme **"DON'T MISS A BEAT."**

UNMICRCThe high-profile event focused on advancing preventive healthcare, highlighting a milestone project on **women's cardiovascular health (NPAC-WOMEN)** and sharing advanced heart transplant success stories.

Chief Guest **Shri Rajeev Topno, IAS** Additional Chief Secretary to Government, Health & Family Welfare Dept., Govt. of Gujarat and Chairman, Governing Board, UNMICRC and **Dr. Ratankanvar H. Gadhavicharan, IAS,** (Commissioner of Health (Rural) & Mission Director, National Health Mission, Gandhinagar) led the ceremony, emphasizing the state's expanding medical network.

On the occasion, UNMICRC's massive healthcare footprint has been shown, which now delivers **"Quality Global Care Under One Roof"** via **1,251 beds** in Ahmedabad, **96 cardiac/neuro beds in Gandhinagar** and expanded **OPD services in Rajkot.** The event concluded with a strong public call to adopt core heart-healthy habits, including daily exercise, nutrition, stress management, and tobacco cessation.

Shri Rajeev Topno, IAS

Dr. Ratankanvar H. Gadhavicharan, IAS

Dr. Chirag Doshi (MS, Mch)
Director

Dr. Vishal Sharma
Professor in Cardiology

Dr. Bhavik Champaneri
Professor in Pediatric Cardiology

Dr. Maruti Haranal
Associate Professor in Paediatric CVTS

Research Abstract

Organ donation awareness: A research study on knowledge and intervention impact in India

Indian Journal of Health Professionals Education and Research 1(2):p 83-87, Jul-Dec 2026. | DOI: 10.4103 / IJHPER. IJHPER_13_26

Ms. Bharti Vasnani, Ms. Ashmita Chauhan,Ms. Mittal Parmar, Ms.Himani Pandya, Ms. Kajal Patel, Ms. Rakhsha Patel.

BACKGROUND :

India faces critical organ shortages due to low awareness, misconceptions, and sociocultural barriers. Engaging youth and nursing students is essential for building a sustainable organ donation culture.

AIM :

To assess baseline knowledge and evaluate the impact of a structured educational intervention on organ donation awareness among school-going and nursing students.

METHODOLOGY :

This quantitative, quasi-experimental pretest–posttest study enrolled 423 school children (Classes 10–12) and 559 nursing students. A baseline questionnaire evaluated initial knowledge and misconceptions. Participants then underwent a structured educational session covering donation eligibility, procedures, myths, and professional roles. Postintervention knowledge shifts were measured using descriptive and inferential statistics.

RESULTS:

The educational program significantly elevated participants' understanding, showing a marked improvement in posttest knowledge scores compared to baseline. Targeted education successfully bridged critical knowledge gaps and dismantled major misconceptions across both groups.

CONCLUSION:

Structured educational interventions are highly effective at correcting misconceptions and elevating organ donation awareness. Integrating this curriculum into secondary and nursing education equips adolescents to act as community ambassadors and empowers future healthcare workers to advocate for donation. Cultivating early-stage awareness is a vital long-term strategy to drive donation rates and improve life-saving transplantation access in India.

Knowledge indicator	Group	Presurvey (%)	Postsurvey (%)	Positive knowledge gain
Awareness of NOTTO	Nursing students	16.8	92.1	+75.3
	School students	28.6	77.3	+50.7
Knowledge of registry	Nursing students	44.0	85.8	+41.8
	School students	(N/A)	(N/A)	.
Legal age (18 years)	Nursing students	84.2	86.3	+2.1
	School students	66.2	84.1	+17.9
Organ sales illegal	School students	36.3	64 9	+28.6

NOTTO: National Organ and Tissue Transplant Organization

Attitude/belief	Group	Pre (%)	Post (%)	Positive knowledge gain
Willing to register	Nursing students	64.1	75.8	+11.7
	School students	58.1	69.2	+11.1
Believe the system is fair	School students	41.4	60.2	+18.8
Feeling scared	School students	15.5	41.2	+25.7
Religion compatibility	School students	52.8	42.9	-9.9

Case Report

Hypereosinophilic endocarditis presenting with intracardiac mass and severe mitral regurgitation : a case report of FIP1L1–PDGFRA positive myeloid neoplasm

12;10(5):ytag296. doi: 10.1093/ehjcr/ytag296

Eur Heart J Case Rep . 2026 May

Dr. Nilay Sanjay Rao, Dr. Abhrajyoti Biswas, Dr. Shyam S Kothari , Dr. Pooja Vyas , Dr. Kewal Kanabar

Background

Loeffler's endocarditis is a serious manifestation of hypereosinophilia, and it is associated with endomyocardial fibrosis, thrombus formation, valvular dysfunction, and, rarely, intracardiac mass lesions.

Case summary

A 28-year-old male patient had progressive dyspnoea, facial oedema, and fatigue for 2 years. A 2D trans-thoracic echocardiogram revealed a 24 × 15 mm mobile echogenic mass attached to the mitral valve, associated with severe mitral regurgitation. Blood counts showed hypereosinophilia. Cardiac MRI showed subendocardial fibrosis. Bone marrow examination showed increased hypercellularity, and molecular testing was positive for FIP1L1–PDGFRA fusion, confirming a myeloid neoplasm with hypereosinophilia. The patient was treated with corticosteroids, anticoagulation, and Imatinib. Following initiation of therapy, the mass size reduced, and the patient improved symptomatically.

Discussion

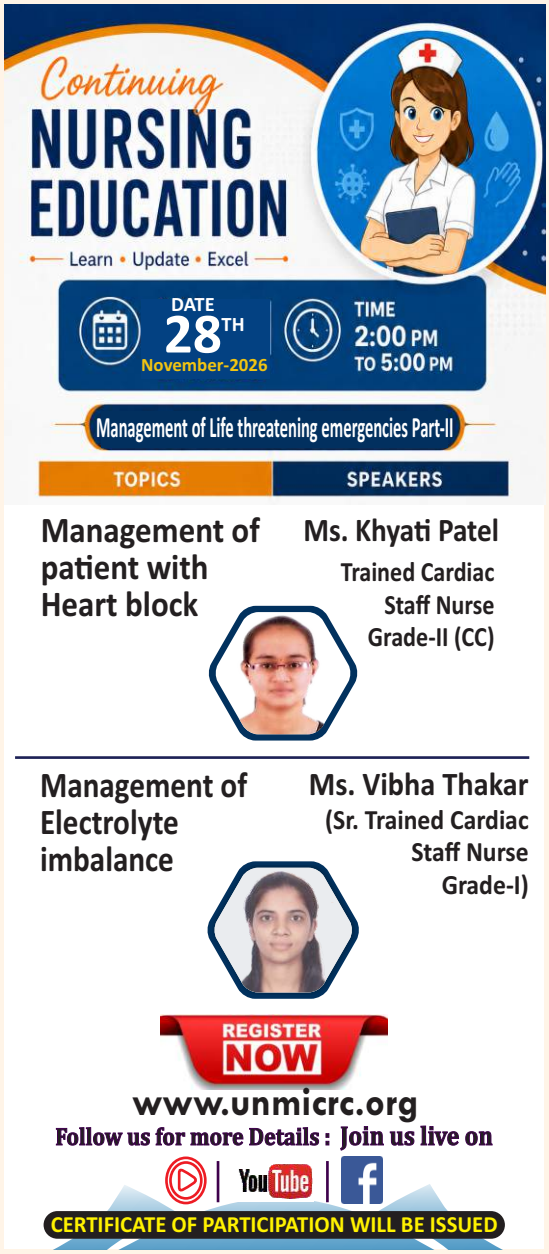
This case emphasizes the importance of a thorough diagnostic workup, including genetic testing in Loeffler's Syndrome, to guide therapy. Recognizing molecularly driven eosinophilic disorders is essential, as targeted treatment can significantly improve prognosis. The presence of the Fip1-Like1-platelet-derived growth factor receptor alpha (FIP1L1–PDGFRα) fusion gene is a rare cause of hypereosinophilic syndrome requiring a distinct therapeutic approach.

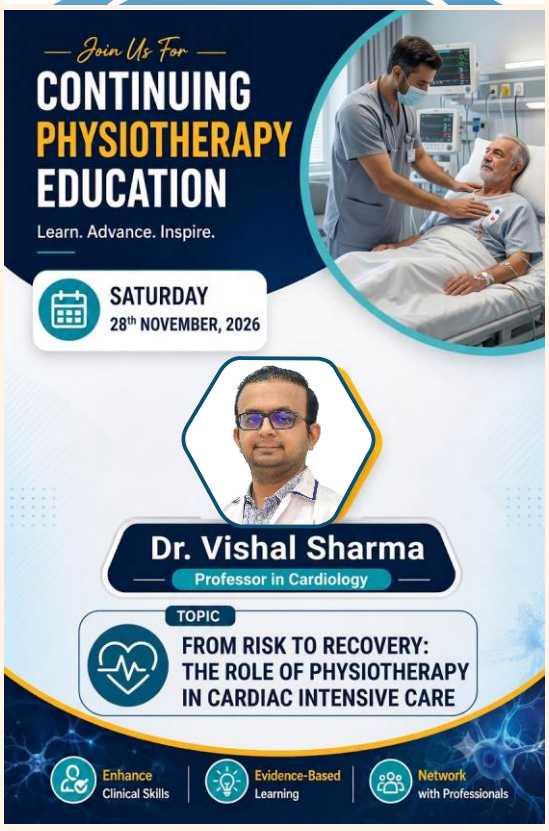
Keywords: Case report, Loeffler's endocarditis, Hypereosinophilic syndrome (HES), PDGFRA (platelet-derived growth factor receptor alpha), Imatinib, CEL (chronic eosinophilic leukaemia), TKI (tyrosine kinase inhibitors)

UPCOMING EVENTS

Continuing Cardiac Education

	Date	Topics	Speakers
Cardiology	07-11-2026	Complictions of PCI	Dr. Parth Patel, Assistant Professor
	14-11-2026	Interface between Renal Diseases & Cardiovascular Illness	Dr. Sanat Kumar Thakur, Assistant Professor
	21-11-2026	Transcatheter based tricupsid valve inyervention & imaging modalities	Dr. Akshay Dhengale, Assistant Professor
	28-11-2026	DAPT After PCI : Practical Approach	Dr. Shreyank Itagi, Assistant Professor
Cardiovascular Thoracic Surgery	07-11-2026	Lung Transplantation - Surgical Technique (Retrival & Implantation)	Dr. Gowtham Thakut, Assistant Professor
	14-11-2026	Aortic Valve Surgery in special situations (Small Aortic Annulus)	Dr. Vartika Jain, Assistant Professor
	21-11-2026	Pulmonary Endarterectomy for CTEPH	Dr. Madhusmita Acharya, Assistant Professor
	28-11-2026	Perioperative Myocardial Protection - Cardioplegia Strategies	Dr. Herin Patel, Assistant Professor
Cardiac Anesthesia	07-11-2026	Pediatric TEE SERIES: Outflow Tract Anomalies	Dr. Shreya Singh, Assistant Professor
	14-11-2026	TEE SERIES: TEE for Peadiatric & Congenital Heart Disease - Ventricular Septal Defect	Dr. Jigisha Pujara, Professor
	21-11-2026	Mechanical Circulatory Support in ICU	Dr. Siddhartha Singh, Assistant Professor
	28-11-2026	Massive Pulmonary Emolism	Dr. Bhawana Sharma, Assistant Professor





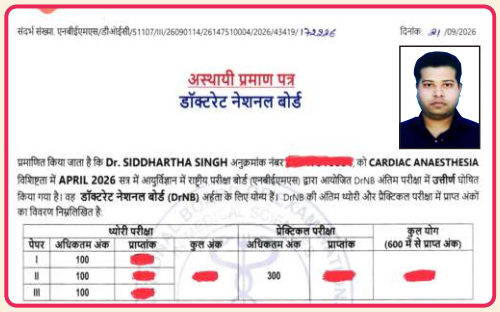
Anandit Hridayam Activities-Garba

Our institute has started recreational activities for revitalization & rejuvenation of employees and to develop team spirit. As a part of this there are various activities which will be held on the third Saturday of every month. On the third Saturday of October 2026, **Garba** was held for rejuvenation of employees, more than 100 employees took part in the garba function.

Pre-Conception Counselling and Cardio-Obstetric Clinic at UN Mehta Institute Cardiology & Research Department

As part of the Research-ICMR-funded **NPAC (National Pregnancy and Cardiac Disease)** of India Project, U. N. Mehta Institute of Cardiology and Research Centre has established a dedicated Pre-Conception Counseling and Cardio-Obstetric Clinic for women with known or suspected heart disease planning pregnancy. The clinic operates on Wednesdays from 10:00 AM to 12:00 PM, providing cardiovascular risk assessment, maternal and foetal risk counseling, medication optimization, and guidance on safe pregnancy planning and follow-up care.

EMPLOYEE ACHIEVEMENT



अस्थायी प्रमाण पत्र
डॉक्टरेट नेशनल बोर्ड

प्रमाणित किया जाता है कि **Dr. SIDDHARTHA SINGH** अनुक्रमांक नंबर [redacted] को **CARDIAC ANAESTHESIA** विशिष्टता में **APRIL 2026** सत्र में आयुर्विज्ञान में राष्ट्रीय परीक्षा बोर्ड (एनबीईएमएस) द्वारा आयोजित DrNB अंतिम परीक्षा में **उत्तीर्ण** घोषित किया गया है। यह **डॉक्टरेट नेशनल बोर्ड (DrNB)** अर्हता के लिए योग्य है। DrNB की अंतिम थ्योरी और प्रैक्टिकल परीक्षा में प्राप्त अंकों का विवरण निम्नलिखित है:

	थ्योरी परीक्षा			प्रैक्टिकल परीक्षा		कुल योग
पेपर	अधिकतम अंक	प्राप्तांक	कुल अंक	अधिकतम अंक	प्राप्तांक	(600 में से प्राप्त अंक)
I	100	[redacted]	[redacted]	300	[redacted]	[redacted]
II	100	[redacted]				
III	100	[redacted]				

Dr. Siddhartha Singh, DM, Assistant Professor in Cardiac Anaesthesia at the **U.N. Mehta Institute of Cardiology and Research Centre,** BJMC, Ahmedabad, has successfully passed the final **DrNB (Doctorate National Board) examination in Cardiac Anaesthesia.** The examination was conducted in **April 2026** by the **National Board of Examinations in Medical Sciences (NBEMS),** New Delhi and result declared on 21/09/2026.

PCSICON 2026 HYDERABAD
UNITING THE WORLD FOR LITTLE HEARTS
Indian Innovation, Global Collaboration
Date: 8th - 11th October 2026, Venue: HICC, Hyderabad

CERTIFICATE OF PARTICIPATION

DR. KEERTIKA KUNTAL

has presented an **Paper** titled

UTILITY OF DIAPHRAGMATIC ULTRASOUND AS A PREDICTOR OF SUCCESSFUL WEANING FROM MECHANICAL VENTILATION IN POST PAEDIATRIC CARDIAC SURGERY A PROSPECTIVE OBSERVATIONAL STUDY

at the National Conference of Pediatric Cardiac Society of India held on 08th - 11th October 2026 at HICC, Hyderabad.

Dr. Keertika Kuntal, a second-year resident in the Department of Cardiac Anaesthesia, presented a research paper titled 'Utility of diaphragmatic ultrasound as a predictor of successful weaning from mechanical ventilation in post paediatric cardiac surgery - A prospective observational study'. The presentation was delivered under the prestigious Professor Savitri Shrivastava Imaging Award category at the **PCSICON 2026 conference.** The event took place from 8th to 11th October 2026 at the Hyderabad International Convention Centre (HICC) & Novotel in Hyderabad, Telangana.

CAHO
Consortium of Accredited Healthcare Organizations
CERTIFICATE OF PARTICIPATION

This is to certify that **Ms Jenis Parmar** has participated

"MASTERCLASS SERIES"
JCI Accreditation Standards

Course(s)
International Patient safety Goal (IPSG)

CREDIT POINTS - 1

2026

Ms. Jenis Parmar, Trained Cardiac Staff Nurse GR-III, Cardio Ward -3, UNMICRC has successfully participated in the **"MASTERCLASS SERIES"** program focused on JCI Accreditation Standards and the International Patient Safety Goal (IPSG). The training session was conducted in the year 2026 under the banner of the Consortium of Accredited Healthcare Organizations (CAHO).

Gandhinagar Satellite Center "STAR OF THE MONTH September-2026

STAR OF THE MONTH
U. N. MEHTA INSTITUTE OF CARDIOLOGY & RESEARCH CENTRE
AHMEDABAD

Dr. Hardik Darji
Assistant Professor in Neurosurgery (FT)

Ms. Anjaliben Bulani
Trained Cardiac Staff Nurse Grade-III

Shraddha Acharya
Laboratory Technician

Ms. Sneha Shethiya
HR Executive

Aditya Maheriya
Janitor

U. N. Mehta Institute of Cardiology & Research Centre

September-2026 | **Till Date 30-10-2026**

- 1251 Beds
- 15 Cardiac Operation Theatre
- 6 Cardiac Cath Lab
- 513 Cardiac ICU Bed

- 34551 OPD Patient
- 4184 IPD Patient
- 83 Complex Cardiac Procedures
- 50 Complicated Complex Cardiac Surgery
- 2338 Cardiac Procedures
- 753 Cardiac Surgery
- 2606 EMCS Admission
- 70/18 PAMI/ Rescue PCI
- 98 Pediatric Procedure
- 164 Pediatric Cardiac Surgeries
- 86 EP procedure & Pacemaker Devices
- 2 EVAR/TEVAR

- 85 Heart Transplantation
- 260 Robotic Cardiac Surgery
- 52 TAVI

UNM Gandhinagar Satellite Centre

- 96 Beds
- 1 + 1 Neuro & Cardiac Operation Theatre
- 5218 OPD Patient
- 569 IPD Patient
- 62 Cardiac Neuro ICU Bed
- 1 Cardiac Cath Lab
- 260 Cardiac Procedures
- 77 Cardiac Surgery

UNM Rajkot Satellite Centre

- 1776 OPD Patient
- 95 IPD Patient
- 950 ECHO
- 115 Cardiac Procedures
- 1745 ECG
- 36 TMT

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(Affiliated to B. J. Medical College, Ahmedabad)

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(Affiliated to GMERS Medical College, Gandhinagar)
GMERS Medical College, Civil Hospital Campus, Nr. Pathikasharam, Sector-12, Gandhinagar-382 012
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UNM Rajkot Satellite Centre
(Affiliated to P.D.U Medical College, Rajkot)
P.D.U. Hospital & College, Civil Hospital Campus, Rajkot-360001, Gujarat.
Phone : +91 63573 78701• Email : info@raj.unmicrc.org

Shri Rajeev Topno, IAS
Additional Chief Secretary, Health & Family Welfare Dept., Govt. of Gujarat and Chairman G. B., UNMICRC

Dr. Chirag Doshi (M.S., Mch CVTS)
Director & Member Secretary, Governing Board, UNMICRC

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