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Infant walkers could be deadly



When tigers and cheetahs roamed free in the city

NTR draws similarities of his new film with his life



How prolonged stress and competition can lead to depression, anxiety, substance abuse, even suicide, among doctors, and why attention to mental health should start before medical college

:: SUNALINI MATHEW

"I sit in the OPD and tell my patients to eat a healthy diet, go for a walk every day, take breaks, set aside time for vacation, spend time with their family. I never do it myself," says Prof Sandeep Grover, Department of Psychiatry, PGIMER, Chandigarh. He begins work at 7.30 am and usually has 12-hour days, teaching, mentoring, attending to patients, and doing research work. Dr Grover is not the exception.

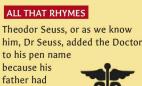
Most doctors across our country work these hours, some seeing up to 400 patients a day, in facilities that at times lack basic infrastructure. And while we rile at the quality of care, doctors say they want to do more, but there is a payoff between quantity and quality. "Doctors say that just the guilt of not spending enough time with patients kills them," says Prof Pratap Sharan, who is in the psychiatric department and heads student welfare in AIIMS Delhi. He isn't joking.

Last year, a study by the Indian Medical Association (IMA) in Kerala found that doctors die approximately 10-12 years before the average person in Kerala, and

seven years before the average person in India. But it goes deeper; it isn't just overwork that's killing our doctors. Earlier this year. six doctors checked into the psychiatric ward at AIIMS at the same time, even as the IMA declared physician suicides "a public health crisis". How did we go down this road?

It begins in school

Pressure begins to mount from Class IX onwards, when parents may push children into medicine, even though children themselves are unsure of their own interests. "Earlier, the focus was on values: being a good person was important. Today, it's all about being someone else," says Dr Harjit Singh



always wanted him to practise medicine.

Bhatti, the president of the Resident Doctors' Association at AI-IMS, Delhi. "Become Dhoni is not something you should tell a child," he says. He may swagger around with a bat, but may not have the capability to be a cricke-

ter at all. Just getting into medical college can be a struggle: In 2018, 13,26,725 candidates registered for NEET (the entrance exam) and only 7,14,562 made it through, as per CBSE data. Which pushes children into hectic coaching classes.

It continues in college

As more and more teens move from villages to bigger towns, cultural challenges play a large part in feeling unsettled. "These do not themselves result in depression and anxiety, but layered with other pressures, they may," says Dr Sharan. Students often end up living in cramped, windowless, pocket-size spaces. They may have been toppers in school, but may be just scraping through in college. They may have studied through school in a local language and have to now switch to English. Plus, there's the isolation of technology and

its all-pervasive nature, sometimes driving already-lonely

teens into isolation. After a basic MBBS degree, a doctor then begins to explore a specialisation. Again, the number of seats funnels down, and with it the thought of going abroad bringing on additional academic and monetary pressure. The 2017-18 batch had just 35,117, as per a Press Information Bureau release last year.

Burnout, alienation, facing disease and death daily, getting pulled up by senior doctors, demoralisation may push a student into depression and anxiety. "Rates of addiction to alcohol and drug abuse in the medical field



Pressure cooker Not only is the job exhausting, but the threat of being physically assaulted also looms large • GETTY IMAGES/ISTOCK

healthy," says Madhuri Krishna, a psychologist with Sangath.

And into careers

Most doctors in their first few years feel the need to prove themselves, both at their work and in the number of research papers they write. "That is the system, and competition is cutthroat," says Dr Sharan. If they're setting up their own practice, he says there are so many legalities that a doctor cannot handle it himself, forcing him to be more than just a doctor. Private set-ups are geared towards pressuring doctors for revenue.

Today, with depleted doctorpatient trust, being physically assaulted by patients' relatives is a reality, says Dr Bhatti. Legally, a senior doctor is responsible for patients. "The quality of doctors is being diluted, with many who have neither the interest in the subject nor the temperament. I cannot sleep at night, because I have to trust them, but I may not be able to," he says.

The future

AIIMS has this year instituted a Student Wellness Centre that has a dedicated staff of three psychologists, working with the psychiatry department. In addition, there's a 24-hour helpline that connects with a psychiatrist. The Students' Welfare Programme has a mentorship facility for UG students. There is also an initiation programme that helps ease students into college life. It also offers language courses in English and Hindi. PGIMER also has a helpline and a mentorship programme.

However, healthcare pros say that while these are good, there has to be an overhaul of the system. In the UK, for instance, doctors can work a maximum of 72 hours in any seven-day period, reduced from 91. They can do a maximum of 8 consecutive shifts, with a 48-hour rest period after. But it goes beyond that. It really starts with parents letting their children take a call about picking a branch of study they are most inclined to. And then re-examining how we can be more reasonable with our

Days of their lives

Soaps that take a break from the hospital-affair drama to talk about their doctors' mental health

:: SWETA AKUNDI

There isn't a better place than a hospital for a soap opera. Which explains why medical dramas have been some of the longest-running TV shows. These below have real characters that experience the stress that comes with the job.



M*A*S*H

*M*A*S*H*'s final episode, Goodbye, Farewell and Amen' is still remembered for its main character Hawkeye Pierce's mental breakdown. On being treated at a mental hospital, the surgeon is forced

to recall repressed memories of watching a mother choke her infant during the Korean War. The episode effectively deals with PTSD, and the long-lasting effect of war on army doctors.

One Day at a Time

The lead Penelope, a nurse and United States Army Nurse Corps veteran, battles anxiety, depression, PTSD. Living with her mother who, in an old-fashioned Latina way, believes depression is something "you just have to get over", Penelope stops taking her medicines and going to therapy, believing she has finally outrun it – only for it to catch up with her when she least expects it.



House MD

The famous Dr House: brilliant, cheeky, brutally sarcastic, irreverent – the ultimate 'bad boy' of the medical world. But when it comes to handling his own issues, he is less than equipped. Blaming chronic knee pain, he relies on painkillers, overdosing to a point that he starts to hallucinate. He checks himself into rehab, but soon reverts to his self-destructive habits.

Grey's Anatomy

Though the show occasionally touches upon how its doctors, from Cristina Yang, to Owen Hunt and Meredith Grey, deal with the stress and depression, most of the show's drama comes from ridiculous plot points (a bomb lodged in a patient's chest, can you believe?), invented only to pull the narrative forward. The show has problems with continuity (understandable, what with doctors dropping dead like flies, and so many permutations and combinations of couples), one of which is surgeon Bailey's on-today, off-tomorrow OCD.

Scrubs

Scrubs has a loyal fan following among actual doctors for getting the stresses that come with the job right. The show, which specialises in escapist humour, often surprises us with its sensitivity. We watch as protagonist doctor JD comes to term with the reality of losing patients, and senior doctor Cox gives a chillingly practical advice.

RESEARCH MATTERS



Up for a drink tonight? You may want to rethink that

That glass of wine or mug of beer can cause more harm than good, according to researchers from Washington University School of Medicine in St Louis. In a recent study published in Alcoholism: Clinical & Experimental Research, it was found that people who had one or two drinks four or more times weekly had a 20% higher risk of premature death, compared with those who drank only three times per week or less often. Over four lakh participants were studied, and added death risk remained the same across all age groups. The scientists also found out that though drinking a little did help protect the heart in some cases, daily consumption - even when light increased a person's risk of cancer.



Why Vitamin D isn't a cure-all for your bones

According to a study published in The Lancet Diabetes & Endocrinology, vitamin D supplementation does not prevent fractures, or have clinically meaningful effects on bone mineral density. It concluded that there was little justification to use vitamin D supplements to maintain or improve musculo-skeletal health, and advised

health professionals to stop recommending the supplements, which have long been thought to decrease the risk of osteoporosis and brittle bones, to most patients. However, it agreed that the supplement is helpful in preventing conditions such as rickets and osteomalacia in high-risk groups, which can occur after a prolonged lack of exposure to sunshine, resulting in deficiency.





How to improve your odds for pregnancy in an IVF cycle?

For many women wanting to get pregnant, IVF can 1. Make Sure That You're Healthy.

For the majority of women who chose IVF, the per cycle success rate is 20-35%. Several rounds of IVF treatment is not only expensive but also takes a toll on your health bringing with it myriad harsh short term and long term side effects. Plus, the more IVF cycles you go through, the less likely you are to become pregnant as a result of the hormonal bashing your body is being subjected to.

Whether you're getting ready to start your first IVE treatment cycle or you've been through IVF before. you probably have heard a lot of different advices on how to make sure your cycle is successful and would like to know whether such advise really 3.Don't ignore the male factor. make a difference. The fact of the matter is that a A semen analysis is Important when going through make up including one's resolve.

Below are few steps you can take to improve your chances of getting pregnant:

Do your homework.

It takes time and patience to select a successful IVF center. When you screen

potential IVF sites, ask questions, Research the clinics in your area. Compare the

- various sites based on different qualities such as: Are the physicians board certified?
- What specialties are they certified in? Do the clinics use accredited labs? What types of amenities and services are
- offered to patients? Have they worked with many women of
- age with your particular health condition and procedure?



get to your goal of starting a family.

seem like the fallback option if all else fails - an Your general state of health affects your chances of a option that will bring your baby into the world successful embryo transfer and a healthy pregnancy. when all other options are exhausted. IVF So the best thing you can do is to lead a healthy life. procedure is a seemingly simple procedure that is Plan a healthy diet, exercise in moderation, lose the bound to work but the reality however is quite extra weight, and get more sleep. Stop consumption of alcohal, cigarette or any kind of recreational drugThis may sound dull, but it's worth it to help you

2. Age is a Factor.

Don't wait too late to start IVF. Success rates with IVF decrease over age 35, and decrease sharply over age 40. Some experts estimate that as many as 1 in 3 women will have trouble with fertility after age 35, with most women struggling to conceive after they turn 40. If you're over 40, you may want to consider donor eggs to increase your odds of having a healthy

woman's conception chance is dependent on IVF. Sperm quality can change as time passes, and variety of variables coming into place at the right sperm health can change in just one year's time. It is time and much of it is determined by the doctor's important for your partner to undergo a semen medical expertise and the patients psychological analysis before you begin an IVF cycle. Other tests to check DNA fragmentation may be recommended by your doctor based on your case history.

4. Talk openly with your doctor.

Ask questions. Find out what to expect during the IVF process. Learn the dos and don'ts of taking care of yourself during your cycle. Write everything down, especially the directions for all of your medications. Once you understand more about how IVF works, you can boost your chances for a successful concep-

5. Talk to a counselor.

Consider talking to a psychiotrist if you feel anxious, depressed, or if your relationship feels strained. Some findings show that being involved in a stress management program or undergoing counseling may even boost your chances of conceiving. Above all, do not be ashamed or feel guilty if your emotions are overwhelming during this time. It is completely normal. Still, it will help you greatly to practice self-care during this time.

No doctor will be able to "guarantee" a healthy pregnancy after IVF, but you can get a good idea of your potential for success with IVF by doing your homework and following your doctor's recommenda-