TIMES HEALTH

Circulated with The Times of India, Hyderabad | Powered by Hyderabad Times | Sunday, August 30, 2026

An Advertorial Health Promotional Feature
An Optimal Media Solutions Initiative, A division of Times Internet Limited

When the Scalpel Became Another Choice-Not the Only Voice

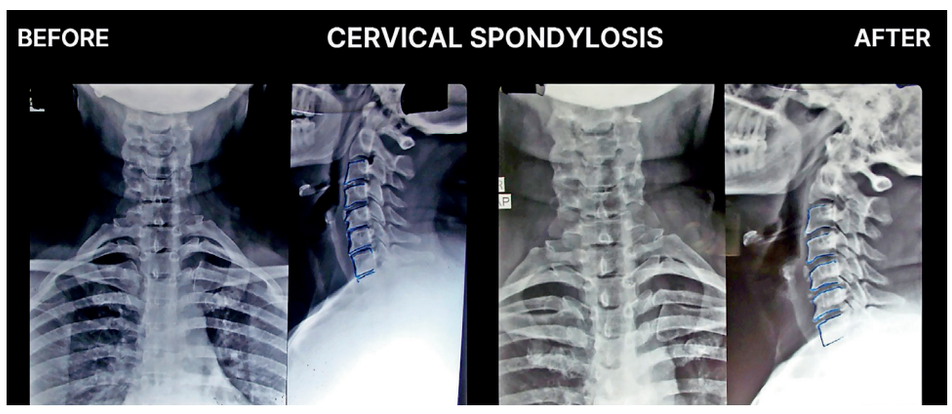
Dr Saji Dsouza and a three-decade pursuit to bring evidence, accountability and a non-surgical perspective to Ayurvedic spine care

Significant journeys in medicine do not always begin with dramatic discoveries. Sometimes, they begin with a question that simply refuses to go away. For Dr Saji Dsouza, that question arose nearly three decades ago while treating patients with cervical spondylitis: How much of what appears formidable on an MRI truly determines what a patient must endure—and how much can change when the patient, rather than the image alone, becomes the centre of treatment? It was a question that would eventually shape his professional journey and KSAC Hospitals' approach to spine care.

Cervical spondylosis is among the common consequences of ageing and degeneration. Discs may lose hydration, joints may undergo wear, osteophytes may develop and the spaces surrounding nerve roots or the spinal cord may narrow. MRI reports can consequently sound alarming—disc bulge, protrusion, foraminal narrowing, nerve compression, stenosis. Yet an abnormal scan is not necessarily synonymous with an abnormal life. Degenerative changes can exist even without significant symptoms, which is why Dr Dsouza has consistently maintained, "Treat neither the X-ray, CT or MRI alone, nor the pain alone. Treat the person in whom both must be understood together." A scan can describe a disc; it cannot describe the sleepless nights, the fear of turning one's neck while driving, the inability to work comfortably or the anxiety produced by numb fingers.

Perhaps the most important message for patients frightened by the words "disc bulge" is that, almost 90% of appropriately assessed disc-bulge or herniated disc cases may not require surgery and can potentially be managed conservatively, provided there are no neurological emergencies or other clear surgical indications. The presence of a disc bulge on MRI, therefore, should not by itself become a passport to the operating theatre. Between ignoring disease and operating upon it lies perhaps the most valuable territory in medicine—clinical judgement.

Since 1998, Dr Dsouza has focused extensively on cervical spondylitis and related spinal disorders, progressively refining specialised non-surgical Ayurvedic protocols at KSAC Hospitals. The approach begins with detailed case-taking and a 360-degree understanding of the patient, followed by correlation of symptoms, neurological findings, functional limitations and medical investigations. Treatment is undertaken only after assessing the condition and its realistic recovery potential. According to KSAC's clinical experience, many appropriately selected patients show substantial symptomatic and functional improvement within approximately 7–28 days, although complex conditions may require longer and individual outcomes naturally vary.



What eventually distinguished this journey, however, was another question: Can healing be documented? Dr Dsouza believed that Ayurveda's antiquity should never exempt it from scrutiny. Reduced pain matters; restored sleep matters; regained movement and independence matter—but wherever improvement can be objectively assessed, it deserves to be recorded. Symptoms are compared, clinical signs reassessed, function reviewed and, where appropriate, investigations before and after treatment considered alongside clinical progress. Thus emerged a philosophy that came to define his work: Evidence-Informed Ayurveda. Not Ayurveda attempting to imitate another system of medicine, but Ayurveda possessing the confidence to examine itself.

Over the decades, patients from across India and overseas have sought Dr. Dsouza's specialised spine treatments. According to KSAC Hospitals, they have included many luminaries from different walks of life including from the medical faternity,bureaucrats etc. Yet awards and recognition tell only the visible part of the story. The deeper legacy lies in consultation rooms, difficult cases, protocols repeatedly questioned and refined, and the willingness to acknowledge that when surgery is genuinely necessary, ideology must never stand between a patient and appropriate care.

Patients occasionally call remarkable recoveries miracles. Dr Dsouza prefers a more demanding word: Method. A miracle needs to happen only once; a method must work often enough to be observed, questioned, documented, refined and repeated. And after almost three decades, his philosophy can perhaps be distilled into four lines:

> Almost 90% of appropriately assessed disc-bulge or herniated-disc cases may not require surgery and can potentially be managed conservatively. An MRI finding alone should not determine the need for surgery; clinical assessment remains crucial.
>
> **— Dr. Saji Dsouza, Founder, CMD & Chief Consultant**

- Wisdom showed the path
- Experience refined the method
- Compassion gave it purpose
- Evidence gave it a voice

For the appropriately selected patient, therefore, a disc bulge need not automatically be a sentence to surgery.

For more details contact:
KSAC Hospitals
Banjara Hills Main Road,
Hyderabad – 500034
Call: 09866132743

Dr. Saji Dsouza's
KSAC HOSPITALS
EVIDENCE BASED AYURVEDA
(A Unit of KSAC Hospitals (I) Pvt Ltd)

MISU: An Evolving Approach to Knee Replacement Surgery

Total Knee Replacement has evolved beyond just replacing the joint. The MISU (Minimally Invasive Subvastus) approach focuses on preserving muscles, minimising pain and helping patients return to the activities they love-faster and stronger.

UNDERSTANDING THE MISU APPROACH

The quadriceps muscle group is essential for knee movement and stability. Traditional approaches may involve cutting or splitting parts of this mechanism. MISU uses a natural anatomical plane beneath the vastus medialis muscle, allowing surgeons to access the knee joint without cutting the quadriceps tendon.

This helps preserve muscle strength, reduce surgical trauma and promote a faster, more comfortable recovery.

PRECISION MEETS MODERN TECHNOLOGY

When combined with advanced surgical planning, some of the premium implant designs and modern technology including computer navigation and robotic assistance, the MISU approach enables precise implant alignment while protecting vital structures. This precision helps improve joint balance, implant longevity and overall outcomes.

Dr Vikram Goud Byre

> Modern knee replacement is not just about replacing a joint. It's about preserving muscles, minimising pain and restoring movement for a better quality of life.
>
> – Dr. Vikram Goud Byre

RECOVERY AFTER MISU KNEE REPLACEMENT

Patients are encouraged to stand and walk with assistance soon after surgery. Early movement improves circulation, reduces stiffness and builds confidence. With guided physiotherapy and proper care, most patients return to their independent lifestyle faster and with better comfort, recovery timelines vary from patient to patient.

POTENTIAL BENEFITS OF THE MISU APPROACH

- Muscle Preservation
- May Reduce Postoperative Discomfort
- Better Function
- Faster Recovery
- Lower Complications in selected patients
- Cosmetic Advantage

WHO CAN BENEFIT?

- Advanced Osteoarthritis
- Rheumatoid Arthritis
- Post-Traumatic Arthritis
- Degenerative Joint Disease
- Failed Previous Knee Procedures
- Progressive Knee Deformities Causing Pain and Disability

DID YOU KNOW?

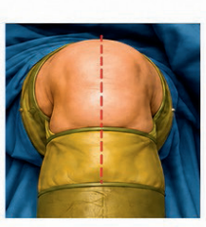
- Quadriceps muscles are preserved during MISU surgery.
- Earlier walking and rehabilitation are often possible.
- Reduced tissue trauma can mean less postoperative discomfort.
- Natural muscle pathways are used for joint access.
- Faster return to routine activities for appropriately selected patients.

YASHODA HOSPITALS

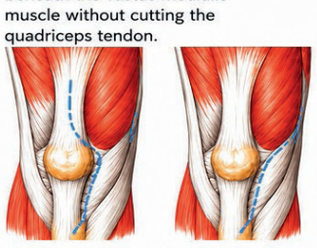
For more details contact:
Dr Vikram Goud Byre
Sr. Consultant Orthopedic Surgeon
Specialist in Robotic Joint Replacement
Complex Trauma & Sports Medicine Specialist
Yashoda Hospitals, Secunderabad,
Call: 97034 81819
Myortho Centre, AS Rao Nagar,
Call: 91338 81819

HOW MISU WORKS – THE MUSCLE-SPARING WAY

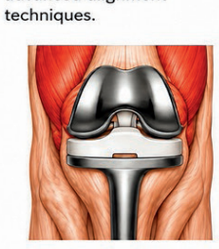
1 SMALL INCISION
A smaller skin incision is made for minimal tissue disruption.



2 SUBVASTUS MUSCLE-SPARING ACCESS
The surgeon reaches the knee joint through the natural interval beneath the vastus medialis muscle without cutting the quadriceps tendon.



3 PRECISE IMPLANTATION
The implant is placed with accuracy using advanced alignment techniques.

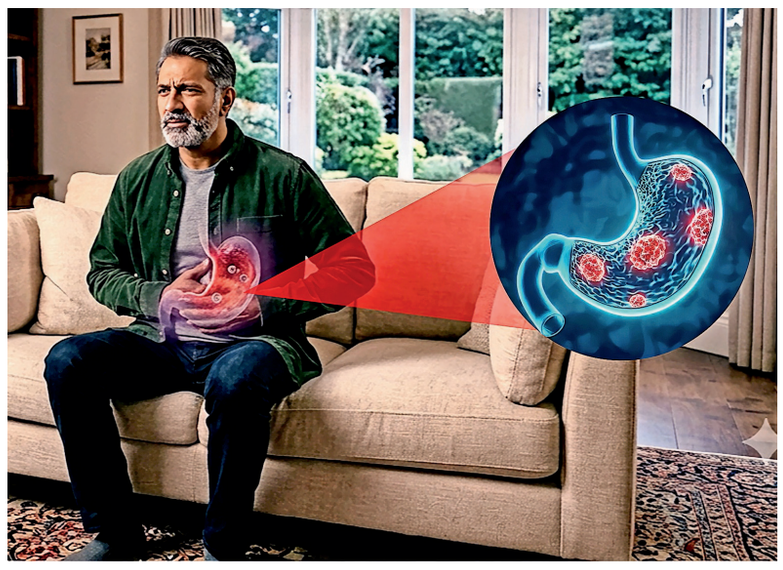


4 EARLY MOBILIZATION
Muscle-sparing technique enables faster recovery and earlier return to function.

When Your Gut Raises a Red Flag, Don't Ignore It

Cancer is no longer a distant health concern affecting only a few. In India, the burden is substantial: one in nine people is likely to develop cancer during their lifetime. National estimates recorded around 14.6 lakh new cancer cases in 2022, with cancers of the digestive system contributing nearly one-fifth of the total burden, as per the Indian Journal of Medical Research, National Cancer Registry Programme (NCRP), 2022. These figures highlight the growing importance of awareness, early detection and timely treatment of digestive-system cancers.

Gastrointestinal (GI) cancers include cancers affecting organs such as the oesophagus, stomach, liver, gallbladder, pancreas, colon and rectum.



SYMPTOMS TO WATCH OUT FOR

Despite growing awareness about cancer, GI cancers often remain under-recognised. One reason is that their early symptoms can easily be mistaken for everyday digestive complaints such as acidity or indigestion. While these symptoms are usually caused by conditions other than cancer, persistent or unexplained symptoms should be evaluated.

- Persistent acidity or indigestion
- Difficulty or pain while swallowing
- Persistent abdominal pain, discomfort or bloating
- A noticeable change in bowel habits
- Blood in stools or black-coloured stools
- Unexplained weight loss
- Loss of appetite or feeling full unusually quickly
- Persistent nausea or vomiting
- Unexplained fatigue or weakness
- Jaundice or dark urine

LET'S BUST SOME MYTHS ON GI CANCER:

Myth: Cancer affects only older people.
Fact: Age remains an important risk factor, but cancer can occur at younger ages too. People younger than 40 yrs constitute a quarter to a third of new diagnoses of colorectal cancer. Persistent symptoms should be evaluated irrespective of age.

Myth: Blood in the stool is always due to piles (haemorrhoids).
Fact: Piles are a common cause, but persistent bleeding can also result from other conditions, including colorectal disease, and requires medical evaluation.

Myth: Cancer always causes severe symptoms.
Fact: Most GI cancers have few or no obvious symptoms in their early stages. This is why appropriate screening, and timely investigations can be important, particularly for people at increased risk.

Myth: A healthy lifestyle guarantees protection from cancer.
Fact: Healthy habits can reduce risk, but they cannot eliminate it completely. Tobacco and alcohol use, obesity, unhealthy diet, certain infections, chronic diseases and family history may all contribute, depending on the type of cancer.

Dr. Chinnaya Parimi

Sharing insights from his 25 years of medical practice, Dr. Chinnaya Parimi, Senior Surgical Gastroenterologist at Apollo Spectra Hospital, Kondapur, and a specialist in complex GI and GI Cancer surgeries, says, "The encouraging aspect of GI cancer care today is the significant progress in both diagnosis and treatment. Advanced tools such as endoscopy, colonoscopy and modern imaging help us investigate suspicious symptoms and diagnose cancers more accurately. Depending on the type and stage of cancer, treatment may involve surgery, chemotherapy, radiation, targeted therapy or immunotherapy. Advances in minimally invasive and robotic surgical techniques have also expanded our ability to manage complex GI cancers with greater precision and improved recovery for appropriately selected patients."

AWARENESS WITHOUT FEAR

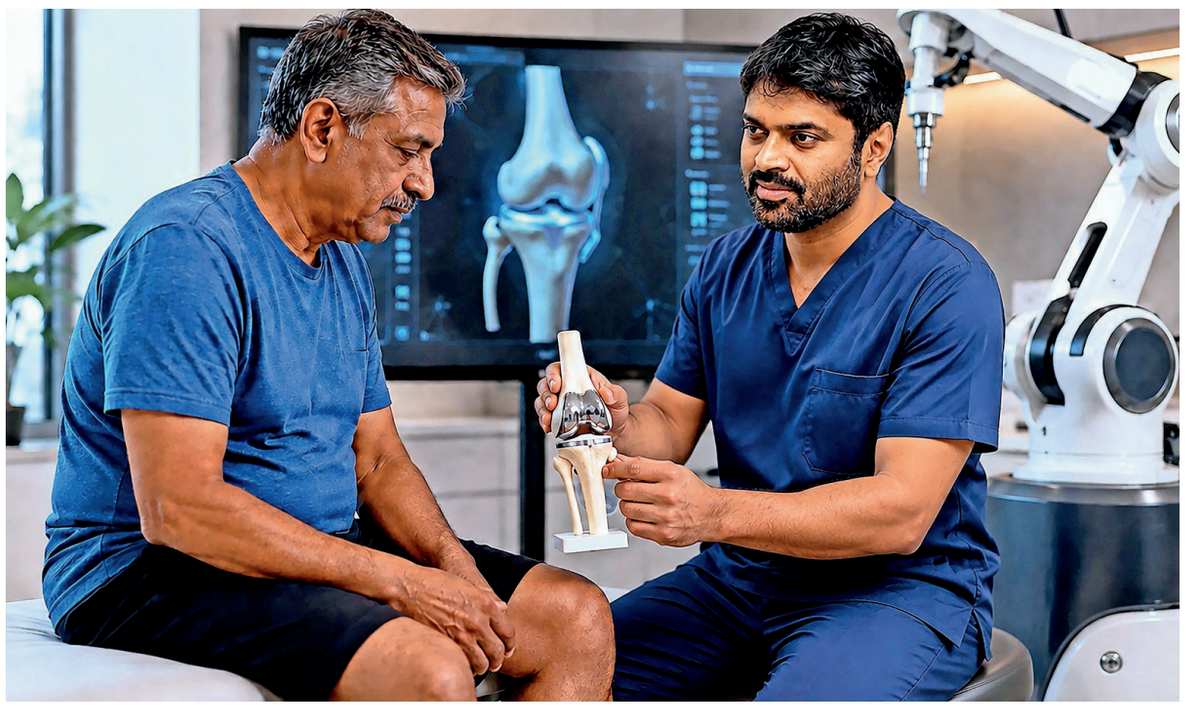
Not every digestive concern is cancer, but chronic or persistent warning signs should never be brushed aside. Timely medical evaluation can make a meaningful difference. At Apollo Spectra Hospital, Kondapur, patients can avail free consultation for GI symptoms till 10th September, along with 25% off on diagnostics.*

For more details, contact:
Apollo Spectra Hospitals,
Plot # 1 & 6, Kothaguda X Road,
Near Harsha Toyota Showroom,
Kondapur, Hyderabad
Call: 04069146097

***Terms and Conditions apply**
Prior Appointments are mandatory

Apollo Spectra™ HOSPITALS
Specialists in Surgery

Robotic Knee Replacement: Where Surgical Expertise Meets Precision Technology



Knee osteoarthritis is a common cause of chronic pain, stiffness and difficulty in walking. While weight management, physiotherapy, medications, activity modification and selected intraarticular injections may provide relief, advanced arthritis with persistent pain and reduced mobility may eventually require Total Knee Arthroplasty (TKA).

Today, Robotic-Assisted Total Knee Arthroplasty (RATKA) is bringing greater precision to knee replacement surgery. A common question patients ask is, "Will the robot perform my surgery?" The answer is no. The surgeon remains completely in control, while robotic technology serves as an advanced surgical tool.

Dr Abhishek Barli

According to Dr. Abhishek Barli, Consultant – Robotic Joint Replacement, Trauma & Arthroscopic Surgeon, robotic systems assist with pre-operative planning, bone preparation, implant positioning, alignment and soft-tissue balancing. Advanced imaging and computer-assisted navigation allow the surgical team to assess the patient's anatomy, alignment, deformity and mechanical axis before surgery. During the procedure, real-time information helps achieve planned bone cuts and implant positioning with greater consistency.

This patient-specific planning and precision can be particularly valuable in patients with significant deformities, advanced arthritis or complex knee anatomy. Proper ligament balancing and alignment are important for achieving a stable, functional knee.

However, robotic technology does not replace surgical expertise. Dr. Abhishek Barli emphasises that clinical judgement, experience and appropriate patient selection remain central to successful knee replacement. A robot cannot independently diagnose a condition, choose the right implant or manage unexpected findings during surgery.

Recovery is equally important. Early mobilisation, quadriceps strengthening, range-of-motion exercises and structured physiotherapy help patients regain strength and function.

"Do not choose a procedure merely because it is robotic. Choose the right treatment and an experienced surgeon who can use technology appropriately," says Dr. Abhishek Barli.

Robotic-assisted knee replacement represents an important advancement, combining precision technology, personalised planning and surgical expertise for a more controlled approach to knee surgery.

YASHODA HOSPITALS

For more details contact:
Dr Abhishek Barli
Senior Consultant Robotic Joint Replacement Surgeon, Arthroscopic and Sports Medicine expert
Yashoda hospitals,Somajiguda
Call: 70950 88055
www.drabhishekbarli.com

Beyond "Just a Viral Fever"

Understanding the Risks and Warning Signs of H1N1 Influenza

Ramesh (name changed) returned from Tirupati after a fulfilling pilgrimage. Soon, fever, body aches and cough appeared. He dismissed them as a routine viral illness. Then came breathlessness. His oxygen levels fell rapidly, and pneumonia progressed to respiratory failure. Even mechanical ventilation was inadequate, requiring extracorporeal membrane oxygenation (ECMO), which temporarily supports lung function. Fortunately, he reached specialised care in time and was discharged three weeks later. While many people recover without complications, influenza can become serious in certain individuals and may require timely medical attention.

H1N1, or "swine flu", is no longer the novel pandemic virus of 2009; it now circulates as seasonal influenza A. Concern over influenza activity is understandable, but an ICMR assessment presented by ICMR Director General Dr Rajiv Bahl on 25 August 2026 was reassuring. Surveillance through 73 DHR-ICMR Virus Research and Diagnostic Laboratories (VRDLs) showed expected seasonal changes, with no new or unusual strain detected and no unusual genetic shift.

Apollo HOSPITALS

Influenza viruses continually evolve. Antigenic drift refers to small genetic changes that occur as influenza viruses circulate and can gradually alter how they are recognised by the immune system, one reason seasonal influenza vaccines require periodic updating. Antigenic shift, in contrast, involves a major change in an influenza A virus, typically associated with reassortment of viral genes, which can result in a virus to which populations have limited immunity. According to the Ministry of Health and Family Welfare's 25 August 2026 update, based on ICMR surveillance, the genetic changes observed in circulating H1N1 viruses in India are consistent with normal seasonal antigenic drift, with no unusual genetic shift detected.

For most healthy people Influenza usually improves with rest, fluids, and symptomatic and supportive care.

COMMON SYMPTOMS

- Fever
- Cough
- Sore throat
- Headache
- Fatigue
- Muscle aches

HIGHER-RISK GROUPS WHO REQUIRE GREATER VIGILANCE

- Adults aged 65 and above
- Children under five, particularly those under two
- Pregnant women and those who are recently postpartum
- People with asthma or COPD
- Those with heart, kidney, liver or neurological diseases
- People with diabetes or severe obesity
- Individuals with cancer, a transplant or weakened immunity

KNOW WHEN FLU SYMPTOMS REQUIRE IMMEDIATE MEDICAL CARE

- Breathlessness
- Falling oxygen saturation
- Chest pain
- Confusion
- Bluish lips
- Persistent vomiting
- Dehydration
- Severe weakness
- Worsening fever and cough after initial improvement

High-risk patients: Contact a doctor early rather than waiting for symptoms to worsen.

Antiviral medicines such as oseltamivir may be recommended by doctors for certain patients with suspected or confirmed influenza, particularly those who are hospitalised, at higher risk of compli-

Dr. Vijay Kumar Chennamchetty

cations or experiencing progressive illness. Treatment decisions, including timing, should be made by a qualified medical professional. Antibiotics do not treat influenza unless bacterial infection is suspected. Severe cases may require oxygen, ventilation and sometimes ECMO.

Influenza vaccination may be recommended for people at higher risk of complications and certain healthcare workers, in accordance with applicable medical guidance. Vaccination, staying home when ill, good ventilation, masking around vulnerable people, cough etiquette and hand hygiene reduce transmission. The response is neither denial nor panic: recognise risk, seek help early and let science—not social-media fear—guide action.

For more details contact:
Dr. Vijay Kumar Chennamchetty
Senior International Pulmonologist & Sleep Disorder Specialist
Apollo Health City, Jubilee Hills
Call: 836 729 9655

MagnAid Hospitals: Towards a More Integrated Approach to Multispeciality Healthcare

(L to R) Dr. Vijay Krishna Adusumalli , Dr. M. Arjun Reddy, Dr. Madhurya Reddy, Dr. Sindhu Kodali, Dr. CH Hanumantha Rao, Dr. Sidda Amrish Ram Reddy

Magnaid Hospitals in Yousufguda have emerged as one of the leading multi-specialty critical-care facilities committed to providing comprehensive, compassionate, and patient-centred healthcare under one roof. Equipped with experienced specialists, advanced infrastructure, and a multidisciplinary approach, the hospital continues to strengthen clinical services and patient care.

Established to make quality healthcare accessible, Magnaid Hospitals had a soft launch on November 6, 2022, and was officially inaugurated on November 13, 2022. Since then, it has enhanced its clinical capabilities, technology, and coordinated healthcare delivery.

Magnaid Hospitals delivers comprehensive care through major specialties including General Surgery, Critical Care and Pulmonology, Orthopaedics, General Medicine, Obstetrics and Gynaecology, Plastic Surgery, Neurology, and Medical Gastroenterology.

General Surgery, led by Medical Director Dr. Sidda Amrish Ram Reddy, focuses on surgical care, patient safety, modern surgical techniques, faster recovery, and compassionate care. The department follows a multidisciplinary approach to support patients through diagnosis, treatment and recovery.

Round-the-clock Critical Care and Pulmonology, headed by Medical Superintendent Dr. CH Hanumantha Rao, provides 24/7 intensive care supported by advanced monitoring, timely intervention, and multidisciplinary expertise. The Pulmonology service also offers bronchoscopy and pulmonary intervention procedures, strengthening the hospital's ability to evaluate and manage complex respiratory conditions.

KEY HIGHLIGHTS

- 24/7 Critical Care unit, Emergency and Ambulance Services
- 24/7 Laboratory support, Diagnostics, Pharmacy, CT scan & X-Ray
- Endoscopy, Colonoscopy & Bronchoscopy
- Patient-centered, ethical and compassionate care
- Modern Operation Theatres

Orthopaedics department, led by Dr. Vijay Krishna Adusumalli, handles musculoskeletal conditions, fracture management, joint care, and rehabilitation.

General Medicine, led by Dr. Madhurya Reddy, emphasizes accurate diagnosis, effective treatment, preventive healthcare, and continuity of care.

Obstetrics and Gynaecology, led by Dr. Sindhu Kodali, offers specialised treatment with emphasis on safety, dignity, and personalised care. The department also provides dedicated infertility evaluation and management, supporting couples with comprehensive reproductive healthcare.

Plastic Surgery, led by Dr. M. Arjun Reddy, the Plastic Surgery department provides experienced plastic and reconstructive surgery, , specializing in all kinds of cosmetic and aesthetic procedures such as PRP for hair loss, growth factors, hair transplantation, and scar revision.

Neurology and Medical Gastroenterology further enhance the hospital's capacity to manage complex medical needs through specialised consultation, diagnostic support, and coordinated treatment.

The hospital features 24/7 emergency and ambulance services, advanced critical care, dialysis support, modular laminar-flow operation theatres, and minor operation theatres. Diagnostic capabilities encompass digital ECG, digital X-ray, 2D Echo, TMT, PFT, advanced ultrasound, endoscopy, colonoscopy, colour Doppler, CT scan, pharmacy, and round-the-clock laboratory support.

Hospital leadership comprises Dr. Sidda Amrish Ram Reddy as Medical Director, I Sampath Kumar Reddy as Managing Director, Sahas Kumar Panthula as Operations Director, and CH Hanumantha Rao as Medical Superintendent. Guided by compassion, competence, and commitment, Magnaid Hospitals remain focused on ethical, accessible, patient-centred healthcare.

Carrying the core promise of hope, care and cure, the institution continues its journey towards medical care by strengthening infrastructure, expanding specialised clinical services, and building greater public trust while delivering better community healthcare outcomes.

MagnAid™ HOSPITALS

For more details contact:
Magnaid Hospitals,
8-3-224/B/5, Metro pillar No.C, 1494, Yousufguda Main Rd,
Yella Reddy Guda
Call: 79939 99040
wesbite: www.magnaid.com

Orthognathic Surgery: Transforming Lives Beyond a Beautiful Smile

Many people believe that jaw correction surgery is performed primarily to improve facial appearance. However, orthognathic surgery is a specialised procedure that is designed to restore both function and facial balance, significantly improving a patient's quality of life.

According to Dr. Vikram Singh of Mukha - Centre for Oral & Facial Surgery,, jaw discrepancies can affect much more than appearance. Patients may experience difficulty chewing, speech problems, an improper bite, facial asymmetry, jaw pain and, in some cases, sleep-related breathing difficulties. These

mukha ORAL & MAXILLOFACIAL SURGERY
CENTRE FOR ORAL & FACIAL SURGERY

conditions often cannot be corrected with braces alone. Orthognathic surgery, performed in combination with orthodontic treatment, repositions the jaws into their ideal relationship, resulting in improved function and facial aesthetics.

PRECISION THROUGH DIGITAL PLANNING

Modern treatment planning utilises 3D CBCT imaging, digital facial analysis, and virtual surgical planning, detailed pre-surgical assessment and planning intended to support precise surgical execution. Every procedure is individually planned to achieve facial harmony while preserving the patient's unique identity.

Dr. Vikram Singh

Patients commonly seek treatment for a receding chin, protruding lower jaw, gummy smile, facial asymmetry, open bite, or obstructive sleep-related jaw problems. Beyond cosmetic improvement, patients frequently report easier chewing, clearer speech, better breathing, reduced jaw discomfort, and an Improved self-confidence after surgery.

A MORE COMFORTABLE RECOVERY

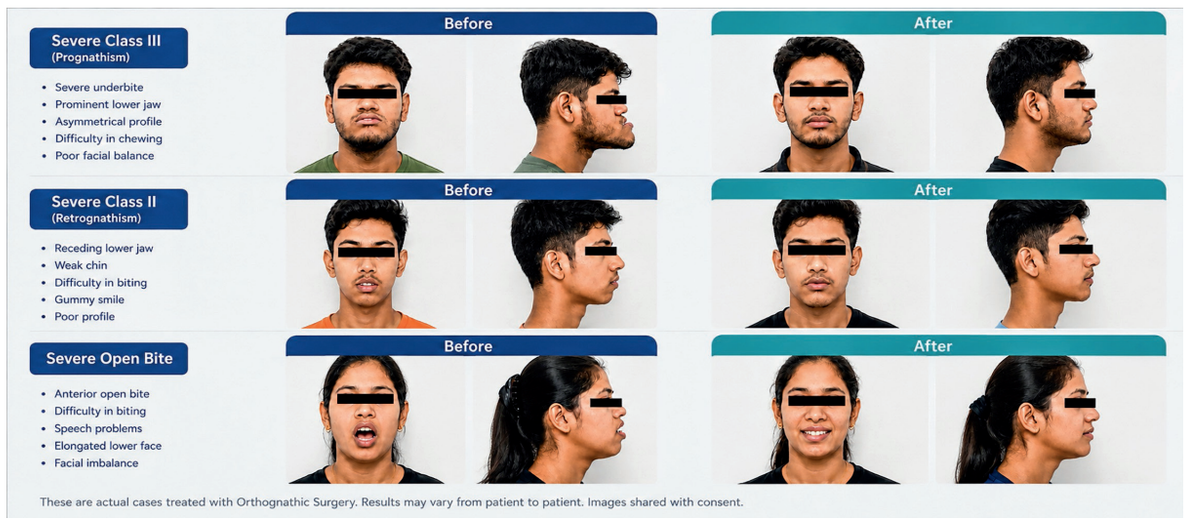
At Mukha - Centre for Oral & Facial Surgery, Dr. Vikram Singh follows a comprehensive, technology-driven approach that combines detailed diagnosis, meticulous surgical planning and personalised care. The objective is not simply to change the way a patient looks, but to ensure a face that functions as beautifully as it looks. The comprehensive approach combines advanced technology with meticulous surgical planning to deliver safe, predictable, and outcomes that are intended to support both function and aesthetics. Recovery has become more structured with modern protocols, and many patients are able to resume their daily routine within a few weeks, subject to individual recovery.

Orthognathic surgery is not merely about changing faces—it is about restoring confidence, improving health, and transforming lives.

For more details contact:
Dr. Vikram Singh,
Consultant Oral & Maxillofacial Surgeon,
Mukha - Centre for Oral & Facial Surgery

@DR.VIKRAMSINGH.OMFS

BRANCHES:
● *Trimulgherry*
● *Lothukunta* ● *Sainikpuri*
Hyderabad
Call: 70320 52782, 83099 34591



These are actual cases treated with Orthognathic Surgery. Results may vary from patient to patient. Images shared with consent.

PRP, Rehabilitation and Arthroscopy: Modern Solutions for Knee and Shoulder Pain

Dr. Siddharth Reddy

Knee and shoulder injuries are common among athletes, active adults, and people involved in physically demanding work. They may cause pain, swelling, locking, weakness, instability, or difficulty returning to sport. Common conditions include ACL and PCL tears, meniscus injuries, cartilage damage, shoulder instability, rotator-cuff tears, and SLAP or labral tears. However, not every injury requires surgery.

Treatment begins with an accurate clinical examination and, when necessary, X-rays or an MRI scan. Depending on the diagnosis, initial treatment may include activity modification, medication, physiotherapy, strengthening, weight management, bracing, and a gradual return-to-sport programme.

Orthobiological treatments such as platelet-rich plasma, commonly called PRP, may be considered for selected patients. PRP is prepared from the patient's own blood and contains concentrated platelets. It may provide pain relief and functional improvement in some patients with mild-to-moderate knee osteoarthritis or certain chronic tendon problems. However, PRP cannot be guaranteed to regrow damaged cartilage, and its suitability must be decided individually.

When a structural injury continues to cause instability, locking, weakness, repeated swelling, or persistent pain, arthroscopy may be considered. Knee arthroscopy may be used for ACL reconstruction, PCL reconstruction, meniscus repair, selected cartilage procedures, and removal of loose bodies. Shoulder arthroscopy may be used for rotator-cuff repair, Bankart repair for recurrent shoulder instability, SLAP repair for selected labral injuries, and subacromial decompression when clearly indicated.

The key strength of Dr. Siddharth Reddy's approach is personalised, joint-preserving care. He evaluates surgical and non-surgical options and plans treatment according to each patient's age, activity, injury, and recovery goals.

Archana Hospital provides patient-focused care centred on accurate diagnosis, minimally invasive treatment, coordinated rehabilitation, transparent communication, and continued follow-up.

ARCHANA HOSPITALS

For more details, contact:
Dr. Siddharth Reddy
Consultant Joint Replacement, Arthroscopy and Sports Surgeon
Archana Hospital, Madinaguda
Call: +91 83410 40626, 040 71071000

Before the First Report Card: Why the First 3,000 Days Matter

Early Childhood Development

Dr Nalinikanta Panigrahy

When should we begin preparing a child for the future? At school admission? At preschool? The answer is much earlier—before birth.

The first 3,000 days, extending from conception to approximately eight years of age, form one of the most powerful bridge between the womb and the classroom. During these years, the brain builds connections at remarkable speed, the body's systems mature, and the foundations of language, behaviour, immunity, learning and emotional security are laid.

We are familiar with the "first 1,000 days"—pregnancy to the child's second birthday. A mother's nutrition and health, safe delivery, warmth after birth, breastfeeding, immunisation, growth monitoring and protection from infection can shape lifelong health. UNICEF and WHO India describe this period as a critical window for nutrition and development.

But childhood does not become less important when the second birthday cake is cut.

The next 2,000 days—roughly from two to eight years—are when children rapidly expand their vocabulary, develop self-control, learn to cooperate, build physical skills and discover how the world works. Surprisingly, their most valuable learning tools are not expensive coaching classes, electronic devices or complicated toys. They are nutritious food, adequate sleep, outdoor play, stories, conversation, affection, safety and the undivided attention of caring adults.

Modern parenting, however, is increasingly anxious. Earlier reading, earlier writing and earlier competition are mistaken for better development. Toddlers are handed screens to keep them quiet, worksheets replace play, and family conversations disappear behind mobile phones. Yet a young child learns best by touching, moving, asking, imagining and interacting—not by passively swiping a screen.

Health during these years also means more than height and weight. Vision, hearing, dental health, vaccination, sleep, behaviour and developmental progress deserve regular attention. Loss of previously acquired skills, delayed speech, poor response to name, difficulty walking or feeding, or limited social interaction should never be dismissed with "the child will catch up." Early assessment and support can change a child's trajectory.

Families cannot carry this responsibility alone. Fathers, grandparents, healthcare workers, Anganwadi centres, preschools, communities and governments all influence childhood. Paid parental leave, accessible healthcare, nutritious meals, safe neighbourhoods, clean air, inclusive schools and protected spaces for play are not luxuries—they are investments in national development.

The message is not meant to frighten parents or demand perfect parenting. Childhood remains adaptable, and loving, responsive care can help children recover even after early difficulties. What matters is consistent care: every nutritious meal, comforting touch, shared story, answered question and joyful game adds something valuable.

A society that waits until school to invest in children has already missed One of its earliest and most cost-effective opportunity to reduce inequality and unlock human potential.

Before a child receives the first school report card, nearly 3,000 days of learning have already passed. If we want healthier, kinder and more capable adults, we must begin long before the classroom door opens.

Nourish the first 1,000 days. Nurture the next 2,000. Shape a lifetime.

"Childhood is not a race to academic success—it is a journey of nutrition, connection, play and discovery."

Rainbow® Children's Hospital
It takes a lot to treat the little.

BirthRight™ BY RAINBOW HOSPITALS
Your Right to a Safe Delivery

For more details, contact:
Dr Nalinikanta Panigrahy,
Neonatologist & Development Pediatrician
Rainbow Children's Hospitals, Hyderabad
www.rainbowhospitals.com
Call: 040-18001222

Sudden Hearing Loss? Don't Wait. Every Hour Matters

Imagine waking up one morning and realising that one ear is suddenly not hearing properly. You may feel its blocked do to wax, a cold or congestion. You may try ear drops, home remedies or simply wait for it to "open".

But that blocked sensation could actually be Sudden Sensorineural Hearing Loss (SSNHL)—a condition where delaying treatment can reduce the chance of recovery.

WHY IS IT OFTEN MISSED?

SSNHL is a rapid loss of hearing caused by a problem in the inner ear or hearing nerve. It can occur instantly or develop over a period of 72 hours, usually affecting one ear.

WARNING SIGNS INCLUDE:

- Sudden reduction in hearing, usually in one ear
- Ears feeling full or blocked
- Ringing or buzzing in the ear
- Dizziness or imbalance in some cases
- Often, no pain

Because it is usually painless, many people assume the problem is minor and wait for it to resolve.

That can be a costly mistake.

WHY DOES EVERY DAY MATTER?

The inner ear contains delicate sensory cells that have limited ability to regenerate. When sudden hearing loss occurs, the opportunity for recovery can be time-sensitive.

Dr. Harika Surapaneni, ENT specialist at Dr. Harika ENT Care Hospitals, emphasises that sudden hearing loss should be treated as a medical emergency. Early evaluation allows an ENT specialist to confirm the diagnosis, assess the degree of hearing loss and initiate appropriate treatment without unnecessary delay.

In many cases, the exact cause of SSNHL cannot be identified. Viral infections, vascular problems, autoimmune mechanisms and other factors have been proposed. Importantly, some patients recover substantially, particularly when evaluated and treated promptly.

Dr. Harika Surapaneni

WHAT TREATMENTS ARE AVAILABLE?

Treatment may include corticosteroids in appropriately selected patients. These may be given orally or administered directly into the middle ear through intratympanic injections.

Hyperbaric oxygen therapy may also be considered for selected patients. The choice of treatment, dose and route depends on the individual case and should be determined by an ENT specialist.

Recovery varies. Some patients regain much of their hearing, while others may experience partial or persistent loss. Early assessment gives patients the best opportunity for recovery.

WHAT SHOULD YOU DO?

If hearing suddenly decreases, particularly in one ear, see an ENT specialist as soon as possible.

An ENT examination followed by an audiogram can distinguish sensorineural hearing loss from common causes such as earwax or middle-ear problems. The hearing test also establishes a baseline to monitor recovery.

Do not self-medicate or wait several days to see whether your hearing returns. As Dr. Harika puts it, sudden hearing loss is not a "wait and watch" problem. It should be treated as a medical emergency.

Recognise it. Get tested. Seek specialist care early. When hearing suddenly fades, timely action matters.

Dr. Harika ENT CARE HOSPITALS
Restoring Senses, Enriching Lives!

For more details, contact:
Dr. Harika Surapaneni
Senior ENT Surgeon
Call: +91 9848 336 090 | +91 8886 103 040
Website: https://drharikaentcare.com

BRANCHES:
● *Kondapur* ● *Chandanagar*
● *Vanasthalipuram*

CLINIC 2000: ONE-STOP ANTI-AGEING SOLUTION

Skin ageing used to announce itself in the mid-40s. Not anymore. Stress, erratic sleep, poor diets, sun exposure and sedentary routines are pushing dullness, dryness, pigmentation and fine lines into much younger faces — and the face bears the brunt of it more than anywhere else on the body.

SKIN CONCERNS CHANGE WITH AGE

According to Dr. Ravindranath Reddy, Clinic 2000 the pattern is predictable once you know what to look for. Younger skin battles acne and acne marks. As the years pass, pigmentation on the cheeks and forehead, uneven tone, and eventually fine lines and a loss of radiance take over.

The everyday basics — sunscreen, hydration, good nutrition, a proper skincare routine — can slow this down. But once concerns are already visible, lifestyle changes alone often aren't enough. That's where targeted treatment comes in.

A TARGETED APPROACH: C2K PEEL

C2K Peel is a skin rejuvenation treatment designed to address certain skin concerns, including pigmentation, melasma, acne, acne scars, uneven tone, fine lines, dull ageing skin, and even under-eye dark circles. Long-term outcomes depend on individual factors, including skin type, age, lifestyle and adherence to post-treatment care.

THE TREATMENT WORKS ON THREE FRONTS:

- Exfoliation : Natural fruit acids gently lift away the skin's superficial layers, revealing smoother, more even-toned skin underneath.
- Pigment control : It inhibits tyrosinase, the enzyme responsible for melanin production, which may help address pigmentation concerns.
- Collagen stimulation: Intended to support skin firmness and the appearance of fine lines over time.

Dr. V. Ravindranath Reddy

CLINIC 2000
THE OBESITY & LASER CLINIC

BUILT FOR SKIN THAT'S AGEING FASTER THAN IT SHOULD

Dr. Reddy notes the treatment is especially effective for people whose skin looks prematurely aged, may be considered for such patients, with the goal of supporting a healthier-looking skin. Recovery is supported afterward with prescribed creams and moisturisers to lock in and extend the results.

It's earned a fitting description: For ageing, pigmentation, melasma, acne and acne marks — essentially, a multi-action skin rejuvenation option that may be performed in a single session, subject to clinical assessment.

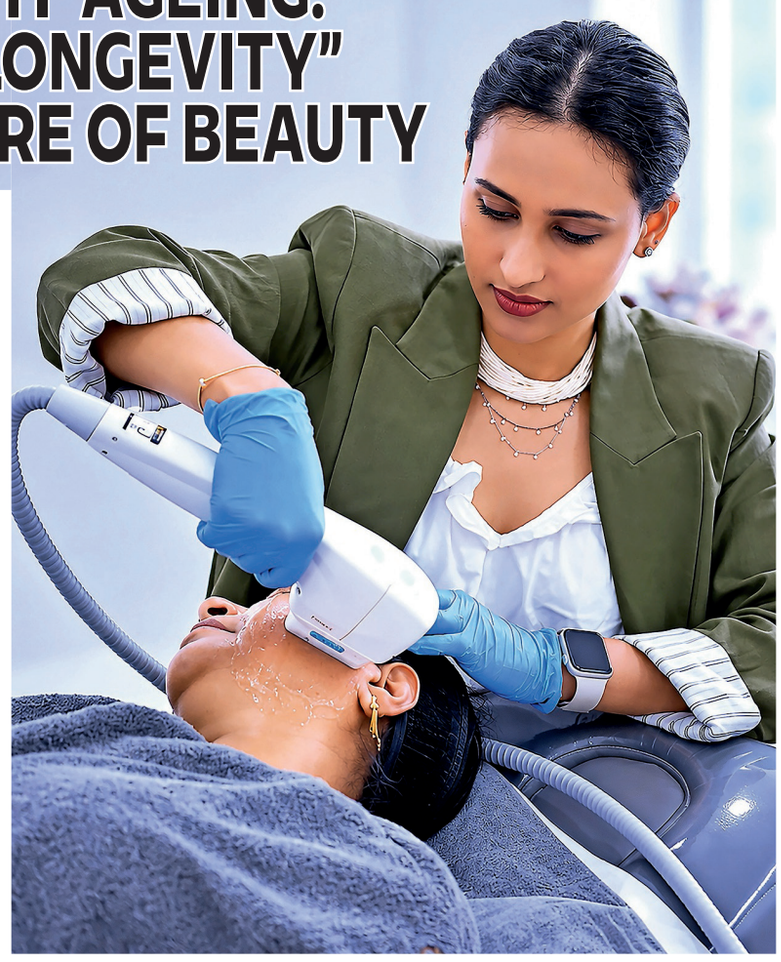
THE TAKEAWAY

Premature skin ageing is increasingly common, and a range of treatment options may help address its visible signs. With proper assessment and the right aftercare, options like C2K Peel offer a real path back to healthier, more radiant skin.

If you've noticed your skin ageing faster than expected, the appropriate next step is to consult a qualified dermatologist for a personalised assessment.

For more details, contact:
Dr. V. Ravindranath Reddy,
Clinic 2000, Premier Skin, Hair & Obesity Clinic,
203, Second Floor, Sai Datta Arcade, Street No-6,
Himayatnagar, Hyderabad
www.clinic-2000.com
Call: 8978537720 & 9676231891

BEYOND ANTI-AGEING: WHY "SKIN LONGEVITY" IS THE FUTURE OF BEAUTY



For years, the beauty world gave us just three options: anti-ageing injections, fillers to smooth out lines, or expensive creams that promised a lot. The focus was always on correcting the visible signs of ageing rather than improving the underlying health of the skin. A growing approach in aesthetic dermatology is the concept of skin longevity, which focuses on maintaining skin health and appearance over time. Rather than simply addressing visible signs of ageing, dermatologists are increasingly exploring approaches aimed at supporting the skin's health, resilience and overall appearance.

This shift is at the heart of regenerative aesthetics and the concept of prejuvenation, which Dr. Deepthi Atmakuri has been advocating with her clients.

Techniques such as exosomes, polynucleotides and PRF (platelet-rich fibrin) are increasingly being explored in aesthetic dermatology as part of personalised approaches to skin rejuvenation and maintenance. Energy-based treatments, including radiofrequency, High-Intensity Focused Ultrasound (HIFU), red-light therapy and hydrogen therapy, further support the longevity of the skin.

Take exosomes, for instance. These tiny biological messengers can help signal ageing or damaged skin cells to function more effectively, supporting smoother texture, even tone and a healthier glow—with a focus on natural-looking results.

AGEING WELL, NOT JUST LOOKING YOUNG

"What we're seeing is a real shift in mindset," says Dr. Deepthi Atmakuri, founder of Clinica Derm. "Patients don't want to look like someone else. They want their skin to reflect how healthy and full of life they feel. That means supporting skin health, not just masking it."

For Dr. Atmakuri, the goal is simple: patients should look comfortable, radiant and like the best version of themselves—not like they are chasing a trend. That is why she encourages a thoughtful, personalised approach rather than following every new beauty fad.

What was once limited to select clinics overseas is now becoming more accessible through specialised dermatology practices. Clinica Derm offers skin-health assessments and personalised treatment plans designed around this evolving philosophy of ageing well.

Ultimately, skin longevity isn't about chasing a younger face. It is about helping the skin remain strong, resilient and radiant for years to come. The future of beauty isn't correction. It's care.

Skin longevity is not about trying to stop the ageing process or chasing a younger appearance. It is about investing in the health, resilience and quality of your skin over time. With personalised, regenerative approaches, the goal is to help patients age naturally, while maintaining skin that looks healthy, radiant and authentically their own.

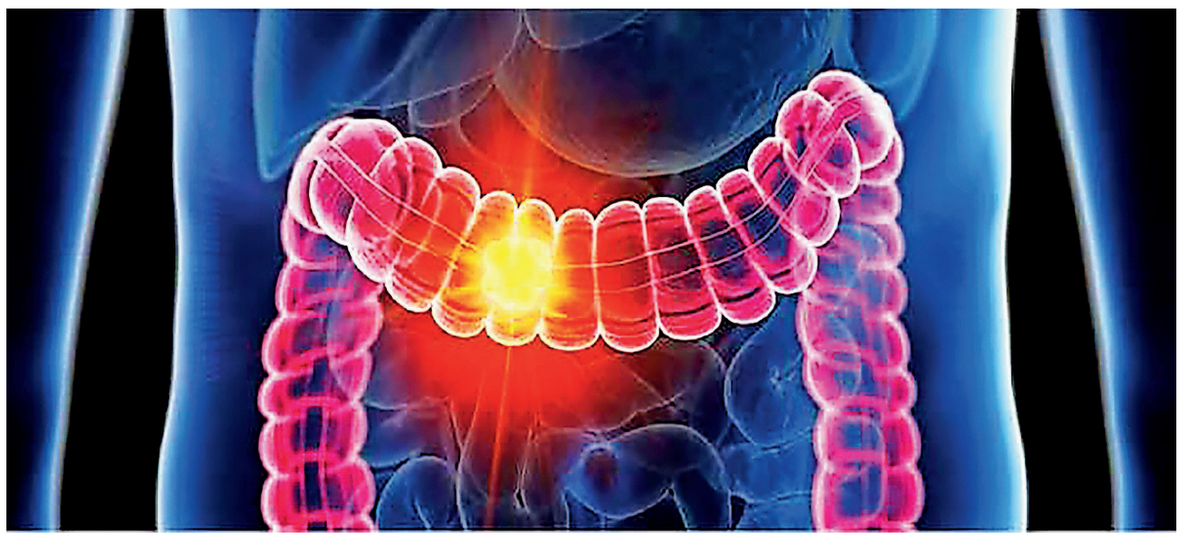
– Dr Deepthi Atmakuri

CLINICA DERM
SKIN | HAIR | AESTHETICS | HAIR TRANSPLANT

For more details contact:
Dr Deepthi Atmakuri,
Consultant Dermatologist and Trichologist
Clinica Derm, Road No. 12,
Banjara Hills
Call: 63098 01421
www.clinicaderm.in

Young, Urban, and at Risk

What Hyderabad Needs to Know About Colorectal Cancer



A 34-year-old software professional in Hyderabad dismissed months of rectal bleeding as piles. By the time he saw an oncologist, it was colorectal cancer—something he assumed he was too young to worry about. He is not alone. Doctors across Indian metros are increasingly diagnosing colorectal cancer in patients in their 30s and 40s.

"Ten to fifteen years ago, colorectal cancer in a 35-year-old would have been unusual. Today, we see it often enough to change how we approach screening and symptom evaluation in younger patients," says Dr. Srinivas Prasad Perla, Senior Surgical Oncologist, Horizon Cancer Care, Banjara Hills.

Dr. Srinivas Prasad Perla

IS URBAN LIFESTYLE PART OF THE STORY?

There is no single confirmed cause, but processed diets, low fibre intake, sedentary lifestyles, obesity and alcohol consumption are being studied as possible contributors. Research is also examining the gut microbiome.

"Genetics, family history, inflammatory conditions and tumour biology matter," says Dr. Srinivas. "Regular activity, more fibre, less processed food and limiting alcohol are modifiable factors worth addressing."

KNOW THE WARNING SIGNS

- Rectal bleeding or blood in stool
- Persistent change in bowel habits
- Unexplained abdominal pain or bloating
- Unexplained weight loss
- Persistent fatigue or iron-deficiency anaemia

These symptoms can have non-cancerous causes, but persistent or unexplained symptoms should not be dismissed because of age.

"The single biggest reason younger patients present later is delay in screening and treatment," says Dr. Srinivas. "Persistent symptoms need investigation rather than reassurance based on age. Those with a family history should discuss screening earlier."

Diagnosis typically involves clinical evaluation, blood tests, colonoscopy with biopsy and imaging for staging.

TREATMENT IS PERSONALISED AND PRECISE

Treatment depends on the cancer's location, stage, tumour biology and overall health. It may involve surgery, chemotherapy, radiation, targeted therapy or immunotherapy.

Laparoscopic techniques, high-definition visualisation and ICG-guided imaging now enable many colorectal procedures with smaller incisions, greater precision and faster recovery.

"The goal is precise cancer surgery—removing disease completely while preserving healthy tissue and function wherever oncologically safe," says Dr. Srinivas.

For Hyderabad's younger population, the message is simple: don't let age become a reason to ignore persistent symptoms.

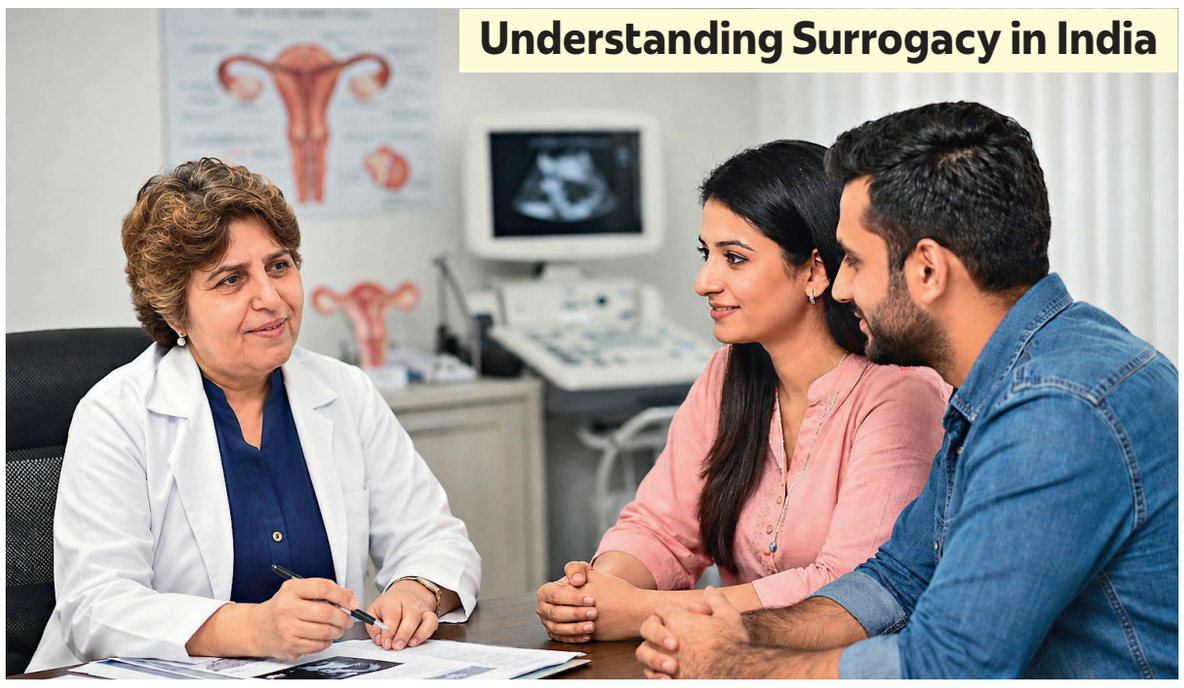
HORIZON CANCER CARE

QR for website

For more details, contact:
Dr. Srinivas Prasad Perla
Senior Surgical Oncologist
Horizon Cancer Care
Road no 1. Banjara Hills
Hyderabad
Call:95736 05000

When Parenthood Needs Another Path

Understanding Surrogacy in India



Surrogacy may be considered in limited circumstances where prescribed medical conditions prevent or make it inadvisable for an intending woman to carry a pregnancy. However, in India, the procedure is governed by stringent legal and ethical regulations designed to protect the interests of the intended parents, the surrogate mother and the child.

According to Dr. Roya Rozati, Medical Health & Research Institute (MHRI), Hyderabad, surrogacy involves a woman carrying and giving birth to a child with the Intention that the child is lawfully raised by the intending parent(s), subject to the statutory framework.

WHAT DOES INDIAN SURROGACY LAW ALLOW?

The Surrogacy (Regulation) Act, 2021, along with the 2022 Rules and subsequent amendments, prohibits commercial surrogacy and permits only altruistic surrogacy under specified conditions. The surrogate mother cannot receive monetary Expenses beyond statutorily permitted medical and prescribed expenses.

The law also lays down eligibility requirements for intending couples. Surrogacy is permitted when there is a medical indication necessitating gestational surrogacy, subject to the statutory eligibility criteria, medical certification and approval of the appropriate authority. The framework also provides for insurance coverage for the surrogate mother for 36 months to cover pregnancy, delivery and postpartum complications.

Dr. Roya Rozati

WHEN IS SURROGACY MEDICALLY INDICATED?

Dr. Roya Rozati explains that medical indications can include the absence or significant abnormality of the uterus, surgical removal of the uterus due to conditions such as cancer, repeated unsuccessful IVF or ICSI attempts, recurrent implantation failure and certain recurrent pregnancy losses. Surrogacy may also be considered when carrying a pregnancy to viability could pose a serious or life-threatening risk to the woman.

The regulations also address important aspects such as informed consent, embryo transfer and abortion. Any termination of pregnancy must comply with the Medical Termination of Pregnancy Act and the applicable surrogacy regulations.

Ultimately, Dr. Roya Rozati emphasises that surrogacy is not simply a medical procedure but a carefully regulated process involving medical, ethical and legal considerations. For couples considering this route to parenthood, understanding eligibility, medical indications and legal requirements is essential before beginning treatment.

MHRI HOSPITAL & RESEARCH CENTER

For more details contact:
Dr. Roya Rozati
Infertility Specialist
MHRI Hospital & Research Center
Venkat Nagar,
Banjara Hills, Hyderabad
Call: +91 98491 61421

This content is for informational purposes only and is not a substitute for professional medical or legal advice. Surrogacy in India is subject to applicable laws, rules and regulatory approvals. Eligibility, treatment and outcomes vary by individual circumstances and must be assessed by qualified professionals and competent authorities. No outcome or success is guaranteed. The publication house/ its representatives/affiliates are not responsible/liable whatsoever.

Do You Really Need Spine Surgery? Understanding When Surgery is Necessary—and When it isn't

Dr. Uday Goutam

Back and neck pain are increasingly common, driven by prolonged sitting, smartphone use, inactivity, obesity, poor posture and ageing. Yet fear of spine surgery is growing too. Terms such as "disc bulge", "slip disc", "stenosis" or "cervical spondylosis" on an MRI report can make patients assume surgery is inevitable. It isn't.

An abnormal MRI does not automatically mean an operation is needed. Treatment decisions should consider symptoms, neurological examination, imaging, disability, symptom progression and response to non-surgical treatment—not the MRI alone.

WHEN IS SURGERY NOT NECESSARY?

Most uncomplicated mechanical back pain does not require surgery. In the absence of progressive neurological weakness, major nerve compression or another serious condition, treatment may include physiotherapy, targeted exercises, activity modification, weight management, ergonomic improvements, appropriate medication and selected non-surgical interventions.

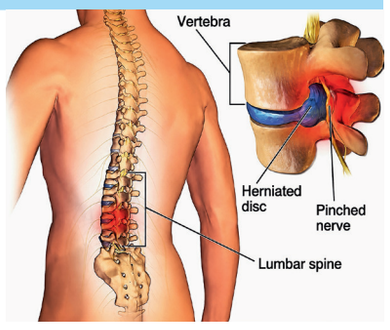
WHEN DOES A SLIPPED DISC REQUIRE SURGERY?

A herniated disc can compress a nerve, causing pain radiating into the arm or leg. Many patients improve without surgery. However, surgery may be appropriate when there is:

- Significant or progressive muscle weakness
- Severe, persistent, disabling pain despite appropriate treatment
- Clinically significant nerve compression confirmed by symptoms and imaging
- Persistent nerve-related symptoms severely limiting daily activities
- A serious neurological emergency

WHEN IS SURGERY URGENT?

Some conditions should not simply be observed. Urgent assessment may be necessary for progressive neurological weakness, loss of bladder or bowel control, spinal cord compression, fractures, tumours or infections.



HOW LONG SHOULD YOU WAIT?

There is no universal timeframe. Mild pain without neurological deficits may be managed conservatively, while progressive weakness or spinal cord dysfunction may require early surgical assessment.

CAN PHYSIOTHERAPY CURE A DISC PROBLEM?

Physiotherapy may not literally make every disc bulge or herniation disappear, but it can play a very important role in reducing pain, improving mobility and restoring normal function. Many patients with disc-related symptoms can improve significantly with appropriate non-surgical treatment.

THE BOTTOM LINE

An MRI should not decide whether you need spine surgery—your clinical condition should. If surgery is recommended, understand the diagnosis, alternatives, benefits and risks.

Not every disc needs surgery. But when the spinal cord or nerves are at risk, delaying appropriate surgery can also be harmful.

GOUTAM NEURO CARE
ADVANCED BRAIN AND SPINE CENTRE

For more details contact:
Dr. Uday Goutam
Associate Professor of Neurosurgery
Goutam Neuro Care
- *KPHB*
- *Kompally*

Call- 9666219699
www.goutamneurocare.com