

# ನೆತ್ರ ವಾರ್ತೆ NETHRA VAARTHE



Newsletter of Karnataka Ophthalmic Society

Volume 2 | Issue 2

Oct 2025

NETHRA  
VAARTHE



## EDITOR'S MESSAGE

**Dear KOS members**

On behalf of all the office bearers and the editorial team, I wish each one of you a very Happy Deepavali- in advance. It gives me immense pleasure to release the 4th newsletter "**Nethra Vaarthe**". This issue contains details of KOS activities and good number of articles on topics

which are thought provoking and informative.

I sincerely thank all the contributors of this newsletter for sparing their valuable time.

I take the opportunity in requesting, especially the young clinicians and researchers of our society to contribute towards our scientific journal, due to be released in November 2025

EDITOR'S MESSAGE

**Dr Kavitha V**

Editor In Chief

Journal of Vision Sciences

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## LIST OF CME'S UNDER THE AGIES OF KOS

| Sl No | Title of the CME                                           | CME date                | Place of CME                                                                                            |
|-------|------------------------------------------------------------|-------------------------|---------------------------------------------------------------------------------------------------------|
| 1     | Annual conference of Karnataka Ophthalmic Society          | 22nd to 24th Nov'2024   | Udupi District Ophthalmic Society                                                                       |
| 2     | Skill, Biology, Clinix - a confluence retina meeting       | 21st to 22nd Dec'2024   | Narayana Nethralaya , Bangalore                                                                         |
| 3     | Eye Fest 2025                                              | 4th and 5th Jan'2025    | DENISSONS HOTEL Hubballi, Karnataka (MM Joshi Eye Institute)                                            |
| 4     | The Lenticule Congress                                     | 16th to 19th Jan'2025   | Narayana Nethralaya, Bangalore                                                                          |
| 5     | Practice Development Program                               | 16.02.2025              | AIOC                                                                                                    |
| 6     | CME ON GLAUCOMA                                            | 12th Mar'2025           | Department Of Ophthalmology, ADICHUNCHANGIRI INSTITUTE OF MEDICAL SCIENCES                              |
| 7     | Annual conference of ACOIN Karnataka chapter               | 20.04.2025              | Sankara eye hospital shimoga                                                                            |
| 8     | Through The Master's Lens                                  | 11.05.2025              | Nethradhama super speciality eye hospital, Jayanagar Bangalore                                          |
| 9     | Macular Edema Masterclass from Pathophysiology to practice | 18.05.2025              | Mysore Ophthalmic Trust                                                                                 |
| 10    | CME - RETINA FOCUS                                         | 22.06.2025              | BELGAUM OPHTHALMIC                                                                                      |
| 11    | HMV conference                                             | 18th to 20th July'2025  | Narayana Nethralaya, Bangalore                                                                          |
| 12    | UVEITIS with Rheumatology Perspective                      | 20.07.2025              | Mysore Ophthalmic Trust                                                                                 |
| 13    | BOSSUMMIT 2025                                             | 26th and 27th July'2025 | Bangalore Ophthalmic Society                                                                            |
| 14    | Blink revolution 3.0 - A CME on dry eyes                   | 10.08.2025              | Nethradhama eye hospital jayanagar, Bangalore                                                           |
| 15    | CME on Essentials of orbit, oculoplasty and Aesthetics     | 10.08.2025              | Mysore Ophthalmic Trust                                                                                 |
| 16    | Glaucoma India Education Program                           | 10.08.2025              | South Kanara Ophthalmic society in association with Glaucoma society of India.                          |
| 17    | interdisciplinary session on the occasion of Eye Donation  | 1st week of Sept'2025   | Department Of Ophthalmology, ADICHUNCHANGIRI INSTITUTE OF MEDICAL SCIENCES                              |
| 18    | Keratosight -5                                             | 7th Sept'2025           | Bangalore West Lion Super Speciality Eye Hospital                                                       |
| 19    | Manipal HOTS 2.0: Retina Hands-on Training Session         | 7th Sept'2025           | Department of Ophthalmology, Kasturba Medical College Manipal                                           |
| 20    | Postgraduate Surgical Training – The Way Forward           | 13.09.2025              | DEPARTMENT OF OPHTHALMOLOGY, A.J. INSTITUTE OF MEDICAL SCIENCES & RESEARCH CENTRE, KUNTIKANA, MANGALORE |
| 21    | Insights of Eye Infection                                  | 14.09.2025              | Academic and Research Committee - AIOS                                                                  |
| 22    | CME on Phaco and Pediatric Ophthalmology                   | 14.09.2025              | Mysore Ophthalmic Trust                                                                                 |
| 23    | Biometric Club                                             | 21st Sept'2025          | Narayana Nethralaya , Bangalore                                                                         |
| 24    | Annual conference of Karnataka Ophthalmic Society          | 14th to 16th Nov'2025   | Davanagere Ophthalmic Association /JJMMC/ SSIMS                                                         |
| 24    | Holistic Approach to Uveitis                               | 30.11.2025              | Nethradhama super speciality eye hospital, Jayanagar Bangalore                                          |
| 25    | Glaucoma Mastercuts                                        | 19th to 21st Dec'2025   | Narayana Nethralaya, Bangalore                                                                          |





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**AWARD**



## Indian Journalist Union Award

given by

Honorable Karnataka Lagislative Assembli Speaker

**U. T. Khader Fareed** on 14<sup>th</sup> Feb in GOA





ಅಕ್ಟೋಬರ್ 2022

ಬಂಟರ ವಾಹಿನಿ

# ಖ್ಯಾತ ನೇತ್ರತಜ್ಞ ಡಾ. ಸುಬ್ಬಣ್ಣ ಶೆಟ್ಟಿ ಯಡ್ತೆರೆ

ನೇತ್ರತಜ್ಞರಾಗಿ ಜಾಗತಿಕ ಮಟ್ಟದ ಗಮನ ಸೆಳೆದಿರುವ ಖ್ಯಾತ ವೈದ್ಯರಲ್ಲ ಕುಂದಾಪುರದ ಡಾ. ಸುಬ್ಬಣ್ಣ ಶೆಟ್ಟಿ ಕೂಡ ಒಬ್ಬರು. ಪ್ರಸ್ತುತ ಕಾರ್ಕಳ ತೆಲ್ಲೂರ್ ರಸ್ತೆಯಲ್ಲಿರುವ ನಿಟ್ಟಿ ಗಾತ್ರದ ಸ್ವಾಸ್ಥ್ಯ ಆಸ್ಪತ್ರೆಯಲ್ಲಿ ಸೇವೆ ಸಲ್ಲಿಸುತ್ತಿರುವ ಅವರ ಬಗ್ಗೆ ಒಂದು ಕಿರು ಪರಿಚಯ ಇಲ್ಲಿದೆ.

1943ರ ಡಿಸೆಂಬರ್ 17ರಂದು ಕುಂದಾಪುರದ ಯಡ್ತೆರೆ ಮನೆತನದ ಸೂರಣ್ಣ ಶೆಟ್ಟಿ ಹಾಗೂ ಅಲಂದೂರು ಮೂಕಾಂಬಿಕಾ ಶೆಟ್ಟಿ ದಂಪತಿಯ ಮಗವಾಗಿ ಜನಿಸಿರುವ ಡಾ. ಸುಬ್ಬಣ್ಣ ಶೆಟ್ಟಿಗೆ ಮನೆತನದ ಸಮಾಜಸೇವೆಯಿಗಾಗಿ ರಕ್ತಗತವಾಗಿ ಬಂದಿದೆ. ಇವರ ಅಜ್ಜ ರಾವ್ ಬಹಾದೂರ್ ಆಸ್ಪತ್ರೆ ಶೆಟ್ಟಿ ತಂದೆ ಸೂರಣ್ಣ ಶೆಟ್ಟಿ ಅವರು ವಿಜಯ ಭಾರತ ಸಂಸ್ಥಾಪಕ ನಿರ್ದೇಶಕರಾಗಿದ್ದರು ಎಂಬುದು ಈ ಮನೆತನದ ಪ್ರತಿಭೆಗೆ ಸಾಕ್ಷಿ.

ಬೈಂದೂರಿನ ಮೋರ್ಡ್ ಹೈಸ್ಕೂಲಿನಲ್ಲಿ ಪ್ರಾಥಮಿಕ ಶಿಕ್ಷಣವನ್ನು ಮುಗಿಸಿದ ಬಳಿಕ ಬೆಂಗಳೂರಿನ ಮೆಡಿಕಲ್ ಕಾಲೇಜಿನಲ್ಲಿ ಎಂಬಿಬಿಎಸ್ ಪದವಿಯನ್ನು ಪಡೆದ ಸುಬ್ಬಣ್ಣ ಶೆಟ್ಟಿ ಅವರು 1970ರಲ್ಲಿ ದಿಲ್ಲಿಯ ಇರ್ವಿನ್ ಆಸ್ಪತ್ರೆಯಲ್ಲಿ ಮತ್ತು ಮಣಿಪಾಲ್ ಆಸ್ಪತ್ರೆಯಲ್ಲಿ ಆಪ್ತರಾದಲ್ಲಿ ತರಬೇತಿ ಪಡೆದುಕೊಂಡರು. ನೇತ್ರ ವೈದ್ಯರಾದ ಕೂಡಲೇ ಬಡ ಜನರ ಸೇವೆ ಮಾಡುವ ಆದಮ್ನ ಉತ್ಸಾಹ ನಿಮ್ಮಲ್ಲಿ ಮೂಡಿತ್ತು. ಅದಕ್ಕೆ ಪೂರಕವಾಗಿ ಉಡುಪಿ ಸರಕಾರಿ ಆಸ್ಪತ್ರೆಯಲ್ಲಿ ಕಣ್ಣಿನ ಶಸ್ತ್ರಚಿಕಿತ್ಸಾ ವಿಭಾಗವನ್ನು ಆರಂಭಿಸಲು ಕಾರಣರಾದೀರಿ.

1974ರಲ್ಲಿ ಮಣಿಪಾಲದಲ್ಲಿ ಡಿಎಂಎಸ್ ಪದವಿಯನ್ನು ಮುಗಿಸಿದ ಬಳಿಕ 1976ರಲ್ಲಿ ಕುರುಡುತನನಿವಾರಣೆ ಬಗ್ಗೆ ಮಹಾಪ್ರಬಂಧವನ್ನು ರಚಿಸಿ ಸಲ್ಲಿಸಿದ ಬಳಿಕ ಬೆಂಗಳೂರಿನ ಖ್ಯಾತ ಕಣ್ಣಿನ ಆಸ್ಪತ್ರೆಯಾಗಿರುವ ಮಿಂ-ಟೋ ಆಸ್ಪತ್ರೆಯಲ್ಲಿ ಎಂ.ಎಸ್. ಪದವಿಯನ್ನು ಮುಗಿಸಿದರು. 1976ರಿಂದ ಕರ್ನಾಟಕ, ಹರಿಯಾಣ, ಶ್ರೀಲಂಕಾ, ತಮಿಳುನಾಡು ಹಾಗೂ ನೈಜೀರಿಯಾದ ಗ್ರಾಮೀಣ ಭಾಗಗಳಲ್ಲಿ ನೂರಕ್ಕೂ ಹೆಚ್ಚು ನೇತ್ರ ತಪಾಸಣೆ ಹಾಗೂ ಚಿಕಿತ್ಸಾ ಶಿಬಿರಗಳ ಮೂಲಕ ಜನರಿಗೆ ಸಹಾಯ ಮಾಡಿದ್ದಾರೆ.

ಗ್ರಾಮೀಣ ಭಾಗಗಳಲ್ಲಿ ನೇತ್ರ ತಪಾಸಣೆ ಶಿಬಿರ ಮಾಡುವಾಗ ಆ ಕಾಲದಲ್ಲಿ ಇವರಿಗೆ ಸಾಕಷ್ಟು ಸಮಸ್ಯೆಗಳು ಎದುರಾಗಿದ್ದವು. ಸರಿಯಾದ ರಸ್ತೆ ಸೌಕರ್ಯ ಇಲ್ಲದಿದ್ದುದು, ಏಮ್‌ಎಸ್ ಸಂಪರ್ಕ ಇಲ್ಲದಿದ್ದುದು ಮುಂತಾದ ಸಮಸ್ಯೆಗಳು ಇವರಿಗೆ ಸವಾಲೊಡ್ಡಿತ್ತು. ಆದರೆ ಅದಕ್ಕೆಲ್ಲ ಅಂಜದೆ, ಅಳುಕದೆ ಮುಂದುವರಿದುಕೊಂಡು ಸಾಗಿ ಜನಸೇವೆ



## ಸಾಂಸಾರಿಕ

ವಿಜಯ ಭಾರತಿನ ಮಾಜಿ ಅಧ್ಯಕ್ಷ ರಾಗಿಧ್ವ ಬಡಗಟ್ಟು ರಿ. ರಂಗನಾಥ್ ಹೆಗ್ಡೆ ಅವರ ಪತ್ರಿ ಮಾಯಾ ಅವರನ್ನು ವಿವಾಹವಾಗಿರುವ ಸುಬ್ಬಣ್ಣ ಶೆಟ್ಟಿರಿಗೆ ಇಬ್ಬರು ಮಕ್ಕಳು. ಮತ್ತಿ ಮಾಲಿಕಾ ಹಾಗೂ ಮತ್ತಿ ಡಾ. ಅಶ್ವಿನಿ ಜತೆಗಿನ ಸಂತ್ಯಕ್ತ ಸಾಂಸಾರಿಕ ಬದುಕು ಇವರದಾಗಿದೆ. ಮತ್ತಿ ಡಾ. ಅಶ್ವಿನಿ ಅವರು ಅಭೋಜೆಡೆಕ್ ಸರ್ಜನ್ ಹಾಗೂ ಪೆಡ್ಲೆಸರ್ ಆಗಿದ್ದು, ದೇರಲಕಟ್ಟೆಯ ಕೆ.ಎಸ್. ಹೆಗ್ಡೆ ಆಸ್ಪತ್ರೆಯಲ್ಲಿ ಸೇವೆ ಸಲ್ಲಿಸುತ್ತಿದ್ದಾರೆ. ಮತ್ತಿಯ ಮಾಲಿಕಾ ಅವರ ಗಂಡ ಡಾ. ಸರ್ವೋತ್ತಮ ಶೆಟ್ಟಿ ಅವರು ಯುಎಸ್‌ಎಯಲ್ಲಿ ಇವರ ಎಲ್ಲ ಸಾಧನೆಯ ಹಿಂದೆ ಪತ್ನಿ ಹಾಗೂ ಕುಟುಂಬದ ಸಹಕಾರವನ್ನು ಉಲ್ಲೇಖಿಸಲೇಬೇಕಾಗಿದೆ.

ಮಾಡಿದವರು. ಶ್ರೀಲಂಕಾದಲ್ಲೂ ಶಿಷ್ಯ ಇವರ ಇನ್ನೊಂದು ಪ್ರಮುಖ ದಾಖಲೆ ಎಂದರೆ ಶ್ರೀಲಂಕಾದಲ್ಲಿ ಶಿಬಿರ ಮಾಡಿರುವುದು.

## ಕೆಲವು ಪ್ರಮುಖ ಸಾಧನೆಗಳು

- ಉಡುಪಿಯ ಸರಕಾರಿ ಆಸ್ಪತ್ರೆಯಲ್ಲಿ ನೇತ್ರ ವಿಭಾಗ ಆರಂಭಿಸಿದ ಮೊದಲಿಗರು.
- ಶ್ರೀಲಂಕಾದಲ್ಲಿ 1978ರಲ್ಲಿ ಕಣ್ಣಿನ ತಪಾಸಣೆ ಮತ್ತು ಚಿಕಿತ್ಸಾ ಶಿಬಿರ ನಡೆಸಿದ ಮೊದಲ ಭಾರತೀಯ.
- ದಿಲ್ಲಿಯ ಮೌಲಾನಾ ಆಸ್ಪತ್ರೆಯಲ್ಲಿ ನಡೆದಿದ್ದ ವಿಶ್ವ ಆರೋಗ್ಯ ಸಂಸ್ಥೆಯ ಕಾರ್ಯಾಗಾರದಲ್ಲಿ ಭಾಗವಹಿಸಲು ಅವಕಾಶ ಪಡೆದ ವೈದ್ಯ.
- ಕರ್ನಾಟಕ, ಗುರ್ಗಾಂವ್ ಮತ್ತು ನೈಜೀರಿಯಾದಲ್ಲಿ ಸುಮಾರು 300ಕ್ಕೂ ಹೆಚ್ಚು ನೇತ್ರ ಶಿಬಿರ ನಡೆಸಿದ ಸಾಧಕ.
- Phacoemulsification ನಲ್ಲಿ ಆಮೆರಿಕದಿಂದ ತರಬೇತಿ ಪಡೆದ ಹೆಗ್ಗಳಿಕೆ.
- ಕರ್ನಾಟಕ ಸರಕಾರದಿಂದ ರಚಿಸಲ್ಪಟ್ಟ ಕುರುಡುತನ ನಿವಾರಣಾ ಸಮಿತಿ ಸದಸ್ಯ.
- ಕರ್ನಾಟಕ ಆಪ್ತಾರ್ಥಿಕ ಸಮಿತಿಯ ಉಪಾಧ್ಯಕ್ಷ.
- ಆಲ್ ಇಂಡಿಯಾ ಆಪ್ತಾರ್ಥಿಕ ಸಮಿತಿಯ ಆಜೀವ ಸದಸ್ಯ.ಇತ್ಯಾದಿ

ಭಾರತದಿಂದ ಮೊದಲ ಬಾರಿಗೆ ಶ್ರೀಲಂಕಾದಲ್ಲಿ ನೇತ್ರ ತಪಾಸಣೆ ಹಾಗೂ ಚಿಕಿತ್ಸಾ ಶಿಬಿರ ಮಾಡಿರುವ ಹೆಗ್ಗಳಿಕೆ ಇವರಿಗೆ ಸಲ್ಲುತ್ತದೆ. ಸರಕಾರಿ ಕೆಲಸಕ್ಕೆ ರಾಜೀನಾಮೆ ಸಾಕಷ್ಟು ಜನರಿಗೆ ಸಹಾಯ ಮಾಡಿರುವ ಇವರು ಇನ್ನಷ್ಟು ಮಟ್ಟದಲ್ಲಿ ತನ್ನ ಸೇವೆಯನ್ನು ವಿಸ್ತರಿಸಬೇಕು ಎಂಬ ಕಾರಣಕ್ಕಾಗಿ ಸರಕಾರಿ ವೈದ್ಯ ಸೇವೆಗೆ ರಾಜೀನಾಮೆ ನೀಡಿದರು. ಬಳಿಕ ಪ್ರಖ್ಯಾತ ಖಾಸಗಿ ಆಸ್ಪತ್ರೆಗಳಲ್ಲಿ ಒಂದಾಗಿರುವ ಬೆಂಗಳೂರಿನ ಸೈಂಟ್ ಮಾರ್ಕಾಸ್‌ನ ನೇತ್ರ ವಿಭಾಗದ ಮುಖ್ಯಸ್ಥರಾಗಿ ಸುಮಾರು 18 ವರ್ಷಗಳ ಕಾಲ ಸೇವೆ ಸಲ್ಲಿಸಿದರು. ಇದಲ್ಲದೆ ಎಚ್.ಎ.ಎಲ್. ಆಸ್ಪತ್ರೆಯ ನೇತ್ರ ವಿಭಾಗದ ಮುಖ್ಯಸ್ಥರಾಗಿ 24 ವರ್ಷಗಳ ಕಾಲ ಸುದೀರ್ಘ ಸೇವೆ ಸಲ್ಲಿಸಿದರು. ಇವರು ಹೊಸಕೋಟೆಯ

ಎಂ.ವಿ.ಜೆ. ಮೆಡಿಕಲ್ ಕಾಲೇಜಿನಲ್ಲಿಯೂ ಸಹ ಪ್ರಾಧ್ಯಾಪಕರಾಗಿ ಸೇವೆ ಸಲ್ಲಿಸಿದ್ದಾರೆ. ಜತೆಗೆ ಸಿದ್ಧಾರ್ಥ ಮೆಡಿಕಲ್ ಕಾಲೇಜಿನಲ್ಲೂ ಪೆಡ್ಲೆಸರ್ ಆಗಿದ್ದರು. ಈ ಸಂದರ್ಭ ಕುಮಕೂರಿನ ಗ್ರಾಮಾಂತರ ಭಾಗಗಳಲ್ಲಿ ನೇತ್ರ ಚಿಕಿತ್ಸಾ ಶಿಬಿರ ನಡೆಸಿ ಜನಸೇವೆ ಮಾಡಿದ್ದರು.

ಹೀಗೆ ಸುಮಾರು 52 ವರ್ಷಗಳ ಕಾಲ ಆರೋಗ್ಯ ಕ್ಷೇತ್ರದಲ್ಲಿ ಗಣನೀಯ ಸೇವೆ ಸಲ್ಲಿಸಿರುವ ಇವರಿಗೆ ಹಲವಾರು ಪ್ರಶಸ್ತಿ, ಗೌರವಗಳು ಕೂಡ ಸಂದಿವೆ.

**ಪ್ರಮುಖ ಜವಾಬ್ದಾರಿ**

2004-05ರಲ್ಲಿ ಕರ್ನಾಟಕ ರಾಜ್ಯ ಆಪ್ತಾರ್ಥಿಕ ಸೊಸೈಟಿಯ ಅಧ್ಯಕ್ಷರಾಗಿ ಸೇವೆ ಸಲ್ಲಿಸಿದ್ದಾರೆ. 2003-04ರಲ್ಲಿ ಕರ್ನಾಟಕ ಆಪ್ತಾರ್ಥಿಕ ಸೊಸೈಟಿಯ ಉಪಾಧ್ಯಕ್ಷರಾಗಿ, 2004-05ರಲ್ಲಿ ಕರ್ನಾಟಕ ರಾಜ್ಯ ಆಂಧ್ರಕ ನವರಣಾ ಸೊಸೈಟಿಯ ಸಮಿತಿ ಸದಸ್ಯರಾಗಿ, 2005-06ರಲ್ಲಿ ಕರ್ನಾಟಕ ರಾಜ್ಯ

ರೆಡ್ ಕ್ರಾಸ್ ಆಪ್ತಿಕಲ್ ಸೊಸೈಟಿ ಸಮಿತಿ ಸದಸ್ಯರಾಗಿ ಸಹಿತ ಹಲವು ಸಂಸ್ಥೆಗಳಲ್ಲಿ ಸೇವೆ ಸಲ್ಲಿಸಿದ್ದಾರೆ. 1991ರಲ್ಲಿ ವಿಶ್ವ ಆರೋಗ್ಯ ಸಂಸ್ಥೆಯವರು ಆಯೋಜಿಸಿದ್ದ Re orientation of under graduate curriculum in ophthalmology ಕಾರ್ಯಾಗಾರಕ್ಕೆ ಆಹ್ವಾನಿಸಲ್ಪಟ್ಟಿರುವುದು ಇವರ ಸಾಮರ್ಥ್ಯಕ್ಕೆ ಸಾಕ್ಷಿಯಾಗಿದೆ.

**ಕ್ರೀಡೆಯಲ್ಲೂ ಮುಂದು**

ಡಾ. ಸುಬ್ಬಣ್ಣ ಶೆಟ್ಟಿ ಅವರು ಉತ್ತಮ ಕ್ರೀಡಾಪಟುವೂ ಆಗಿದ್ದಾರೆ. ಶಾಲಾ - ಕಾಲೇಜು ಮಟ್ಟದಲ್ಲಿ ಅವರು ಕ್ರಿಕೆಟ್, ಚೆಸ್ ಮೊದಲಾದ ಕ್ರೀಡೆಗಳಲ್ಲಿ ಸಕ್ರಿಯವಾಗಿ ಭಾಗವಹಿಸಿ, ಹಲವಾರು ಸ್ಪರ್ಧೆಗಳಲ್ಲಿ ಬಹುಮಾನ ಗೆದ್ದವರು. ಬಂಟರ ಸಂಘದಲ್ಲಿ ನಡೆದಿದ್ದ ಚೆಸ್ ಸ್ಪರ್ಧೆಯಲ್ಲೂ ಗೆದ್ದು ಬಹುಮಾನಕ್ಕೆ ಭಾಜನರಾಗಿದ್ದುದು ನಿಮ್ಮ ಕ್ರೀಡಾಪ್ರತಿಭೆಗೆ ಉತ್ತಮ ಸಾಕ್ಷಿಯಾಗಿದೆ.

## ಇವರು ಸೇವೆ ಸಲ್ಲಿಸಿರುವ ಕೆಲವು ಪ್ರಮುಖ ಸಂಸ್ಥೆಗಳು

- ಕೆಎಂಸಿ - ಮಣಿಪಾಲ ಮತ್ತು ಮಂಗಳೂರು
- ಮೌಲಾನಾ ಅಬ್ದುಲ್ ಮೆಡಿಕಲ್ ಕಾಲೇಜು ಮತ್ತು ಇರ್ವಿನ್ ಆಸ್ಪತ್ರೆ, ಮೊಸರದಲ್ಲಿ
- ಕೆ.ಸಿ. ಪಾಸ್ಕಿಲ್ ಮತ್ತು ಪೊರ್ಟ್ ಆಸ್ಪತ್ರೆ ಬೆಂಗಳೂರು
- ಮಿಂಟೋ ಆಸ್ಪತ್ರೆ ಬೆಂಗಳೂರು
- ಇ.ಎಸ್.ಸಿ.ಎಲ್. ಆಸ್ಪತ್ರೆ ನೈಜೀರಿಯಾ
- ಕಲಾಬರ್ ಯೂನಿವರ್ಸಿಟಿ ಮೆಡಿಕಲ್ ಆಸ್ಪತ್ರೆ ನೈಜೀರಿಯಾ
- ಸೈಂಟ್ ಮಾರ್ಕಾಸ್ ಆಸ್ಪತ್ರೆ ಬೆಂಗಳೂರು
- ಎಂ.ವಿ.ಜೆ. ಮೆಡಿಕಲ್ ಕಾಲೇಜು, ಹೊಸಕೋಟೆ
- ಶ್ರೀ ಸಿದ್ಧಾರ್ಥ ಮೆಡಿಕಲ್ ಕಾಲೇಜು ಕುಮಕೂರು.
- ಎಚ್‌ಎಎಲ್ ಆಸ್ಪತ್ರೆ ಬೆಂಗಳೂರು
- ನಿಟ್ಟಿ ಗಾತ್ರಿಯಾ ಸ್ವಪಾಲಿಟಿ ಆಸ್ಪತ್ರೆ, ಕೆಲ್ಲೂರ್ ರಸ್ತೆ, ಕಾರ್ಕಳ

## ಎಕ್ಸಾಮಿನರ್ ಆಗಿ

ಮಂಗಳೂರು ವಿವಿ, ರಾಜೀವ ಗಾಂಧಿ ವಿವಿ, ಸಿದ್ಧಾರ್ಥ ವಿವಿ, ಮಾಜಿ ವಿಶ್ವವಿದ್ಯಾಲಯ ಮಣಿಪಾಲ, ಎನ್‌ಎಲ್ ವಿವಿ ಆಂಧ್ರಪ್ರದೇಶ, ವಿದ್ಯಾಯ ಆಸ್ಪತ್ರೆ ಸೇಲಂ, ಎಂಜಿಆರ್ ವಿವಿ ಚೆನ್ನೈ ಮತ್ತು ಇನ್ನೂ ಅನೇಕ ವಿವಿಗಳ ಒಪ್ಪಂದಾಲೋಚನಾ ಪದವಿ ಮತ್ತು ಸ್ನಾತಕೋತ್ತರ ಪದವಿಗಳ ಪರೀಕ್ಷಕರಾಗಿ ಸೇವೆ ಸಲ್ಲಿಸಿದ್ದಾರೆ.

**ಬೆಸ್ ಜಾಂಪಿಯನ್**

ಇವರು ಅತ್ಯುತ್ತಮ ಕ್ರೀಡಾಪಟುವೂ ಆಗಿದ್ದು, 100 ಮೀ. ಹಾಗೂ 200 ಮೀ. ಅಟಲಿಟಿ ಚಾಂಪಿಯನ್ ಆಗಿದ್ದರು. ಜತೆಗೆ ಕಾಲೇಜು ದಿನಗಳಲ್ಲೇ ಚೆಸ್ ಅಟಲಿಟಿ ಚಾಂಪಿಯನ್ ಆಗಿದ್ದರು. ಶಾಲಾ ದಿನಗಳಲ್ಲಿ ಕ್ರಿಕೆಟ್ ತಂದೆದ ನಾಯಕರಾಗಿದ್ದರು. ಕೆಲವು ಕ್ರೀಡಾಸ್ಪರ್ಧೆಗಳಲ್ಲಿ ಭಾಗವಹಿಸಿ ಪ್ರಶಸ್ತಿ ಹಾಗೂ ಬಹುಮಾನ ಗೆದ್ದಿದ್ದರು.



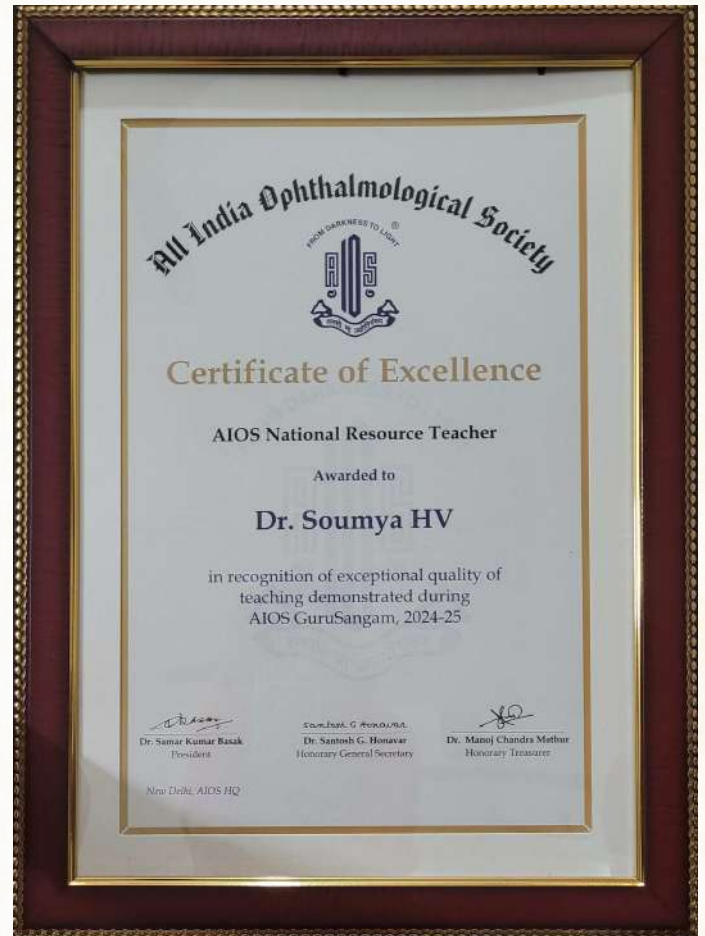
**Dr Soumya H V**

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**AWARD**

**AIOS NATIONAL RESOURCE TEACHER**  
at the final conclave of GURUSANGAM 2025  
held at AIOS Headquarters Delhi  
on 16<sup>th</sup> March 2025.





**Dr Madhuri Parande**

Associate Professor

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**AWARD**

## FAICO in Comprehensive Ophthalmology for the year 2024-25





**Dr Atul Kamath**

Asst. Prof. Department of Ophthalmology  
Yenepoya Medical College.  
Consultant Ophthalmologist  
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**COMMUNITY  
SERVICE**

## Restoring Vision, Transforming Lives: Netrakumbh At Mahakumbh

**Introduction**

According to statistics, approximately 40% of India's population visited the Mahakumbh, not mentioning the foreign tourists, diplomats and international delegates at Prayagraj, making it approximately 61 crore people. In an effort to address the ophthalmological issues, NETRAKUMBH a mega eye camp was hosted which provided comprehensive eye camp, providing free eye care services to hundreds of individuals in need also making a record of the largest eye camp ever conducted in Asia book of records. Located in Sector-6 spread over 10 acres of land, the camp was prepared to cater to the humongous load of patients who would be coming for eye check-ups. Netrakumbh was conducted roughly over 53 days beginning from January 6 to February 26 2025. Netrakumbh was conducted on a joint venture & collaboration with SAKSHAM, Uttar Pradesh State Government, Seva Bharati, National Medicos Organization, All India Ophthalmological Society and various other NGO'S. Around 24 eye hospitals and corporate hospitals provided logistical support for the same.

**Services Provided at Netrakumbh**

- Comprehensive eye exams
- Distribution of free glasses and contact lenses
- Medication for eye infections and diseases
- Cataract surgeries
- Referral services for advanced care

**My Experience**

I offered my services from January 27 to January 31 2025. The slots were pre-booked by the ophthalmologists as per their convenience, the

minimum period of service being 5 days. The camp was arranged very efficiently. There was a transport department which co-ordinated with the ophthalmologists and took care of the transport with minimal inconvenience. Accommodation and food were provided to all the volunteers due to tie up with ISKCON.

There were 2 OPD blocks accommodating 40 ophthalmologists and 60 optometrists. The daily registrations would average from 4000-6000 patients per day. After due registration the patients were directed to the OPD blocks where the optometrist would do the basic refraction after which the ophthalmologist would examine. All ophthalmologists were provided with slit lamp and each OPD block was equipped with a portable hand-held fundus photography.

Per day each ophthalmologist saw around 100 patients. Every team had equal number of volunteers working tirelessly to provide co-ordinate, distribute free glasses and medications, and perform surgeries for those requiring more advanced care following the Mahakumbh at their respective districts.

**Impact**

The eye camp was a resounding success, with over 237964 individuals receiving eye care services. Of these, 17069 patients were referred for further treatment, and around 16952 received free spectacles. The camp not only improved the vision of these individuals but also had a profound impact on their overall quality of life.



**Registrations:** 2,37,964

**Total Spectacle Distributed:** 1,62,925

**Total Referrals:** 17,069

**Eye Donation pledges:** 1739

1. Netrakumbh 2025 has served pilgrims as patients from every single Indian State and Union Territory.
2. 65% spectacles made to order
3. 97% of these were ready for delivery in less than 8 hours
4. Fastest time to deliver a made to order spectacles (from point of patient registration) = 18 minutes
5. Age 20 to 50 represented 50% of spectacles distributed.
6. Age 51 to 80 represented 46% of spectacles distributed
7. Less than 19 yrs of age represented 4% of spectacles distributed
8. 7.2% of patients screened were children (<18)

9. There were 2 patients over the age of 100 (spectacles prescribed and delivered)

10. Many presbyopic glasses prescribed were for first time Spectacle users.

There were foreign delegates from more than 16 countries who visited Netrakumbh

### Conclusion:

Netrakumbh was a heartwarming experience that demonstrated the power of collective effort and community spirit. With the success of Netrakumbh there are plans to conduct such mega eye camps in every KUMBH MELA happening in the four religious spots namely Ujjain, Nashik, Haridwar & Prayagraj. Looking forward for more active participation from all ophthalmologists for such eye camps in the future and continuing to make a positive impact on the lives of those in need. Proud to be a part of this mega camp.





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**ENVIRONMENT****Sustainable Living-Everyday Choices That Matter**

As doctors, we see every day how the environment affects our well-being. In recent years, the conversation around sustainability has become more urgent. We are now seeing ill-effects of climate change in everyday lives like unseasoned rains, floods, water shortage, price increase, decreased nutrition in foods... But sustainability is not limited to news channels and magazines-it starts at home.

Over the past few years, I've gradually shifted to a lifestyle that is simple, intentional, and eco-conscious. It's not about perfection; it's about consistency and awareness.

**Home: Where Sustainability Begins**

Our home is a small ecosystem, and we as a family try to make choices that are gentle on the planet:

**Waste segregation and composting:**

Every day, we separate wet and dry waste. Kitchen waste is composted and converted to manure right in our balcony. We do not need a large space to compost. Just some old paint buckets with lids. Use it to grow plants may be even some veggies. It's a beautiful cycle-what we consume gives back to the soil. Reduce dry waste as much as possible by refusing single use disposables. Recycle whatever possible. We give out waste to local garbage truck once in 25- 30 days and aim to become dust-bin-free home.

**Low-waste living:**

We avoid single-use plastic wherever possible-carrying our own cloth shopping bags, steel cutlery, straw, tiffin box, napkin, tumbler and saying no to disposable cutlery, Paper cups (Yes, they have plastic lining and so many trees are cut to

make this paper), tissue paper and straws whenever we head out (Even to restaurants, conferences and marriages). You can eat panipuri from street vendor in your own box (instead of disposable plates) or even carry the left- over from a 5- Star restaurant in the same tiffin box. We carry own pouches, bags and boxes and bring groceries in loose and veggies in them avoiding a lot of plastic covers.

**Mindful consumption:**

We buy only what we need, repair rather than replace, and choose durable products over fast, disposable ones. We also opt for natural cleaning solutions like soapnuts, we make bioenzymes at home with orange and other fruit peels or just buy from sustainable brands which natural cleaners without plastic packaging too and reduce chemical load.

**Energy and water savings:**

Simple steps like switching off appliances when not in use, using fans over ACs when possible, reusing discarded RO water have made a difference-not just to the bills, but to our mindset.

**Slow fashion:**

Try to avoid shopping especially during "SALE". Delete shopping apps from phones. Swap clothes, re-wear your clothes or use your mother's, sisters' or friends' clothes for the next function you attend. Support local weavers and artisans, avoid synthetic clothing, and buy something only when it is absolutely necessary.

**Sustainable menstruation:**

I do not generate any reject waste as I use



menstrual cups, cloth pads and period panties instead of disposable sanitary pads. We have not used disposable diapers for my kid.

### Weekend activities:

We go for volunteering activities like plogging, conduct sessions on sustainable menstruation, low waste lifestyle, attend various Green workshops and activities on the weekends.

### And at Work...

While the bulk of my efforts are at home, I try to stay eco-conscious in my practice as well-using digital records, reusable surgical caps, and minimizing unnecessary printing. Thankfully I work at Aravind Eye Hospital which believes in sustainable choices and practices reducing carbon footprint of patient travel, OPD and surgical waste generation. The changes in clinic routines align with a lifestyle that puts both people and the planet at the center.

### Dealing with Eco-Anxiety

Not everything can be perfect, we cannot expect everyone to understand us and cooperate. But we need to remember every little choice we make is going to have an impact. By looking at me many

people around me have started making better choices including my family, friends and strangers. A shout-out to them. We need not be someone leading the BEST or perfect Zero Waste lifestyle but we need thousands, lakhs and crores of people leading a low-waste lifestyle imperfectly.

### Sharing the Journey

To document and share this journey, I run an active Instagram page where I talk about practical tips for sustainable living-how to compost in small spaces, zero-waste swaps, plastic-free product reviews, and more. It's been fulfilling to connect with a like-minded community and encourage others to begin their own eco-journey, one habit at a time. ID @hasiru.irali. The name literally translates to "Let greenery prevail".

Each one of us has the responsibility to be more mindful as we have taken Mother Earth as debt from our children and future generations. The next time you take that small plastic bottle in your next conference think about your child and choose to carry your own water bottle instead.

## BECAUSE THERE IS NO 'PLANET B'





### Dr Sonia Singh

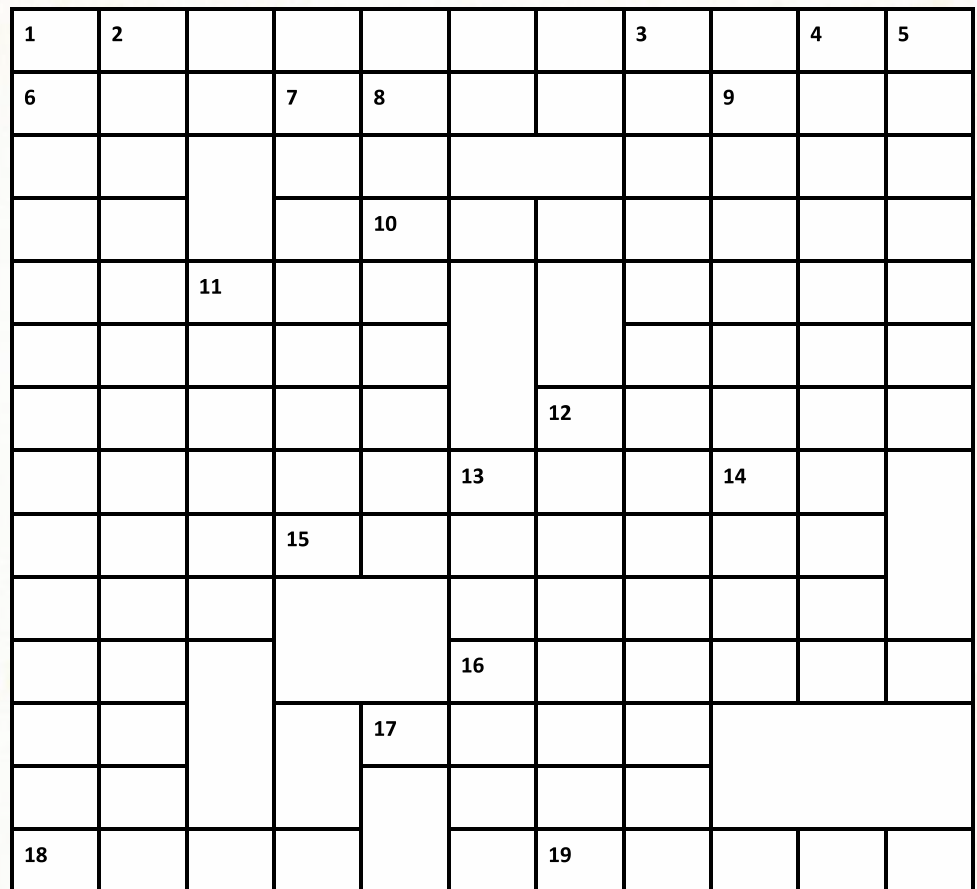
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## CROSSWORD PUZZLE



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### CLUES

#### ACROSS

1. Colour vision defect involving the red cones
6. Inventor of the ophthalmoscope
10. Abnormal dilation and tortuosity of the posterior retinal blood vessels in ROP
12. What ocular fluid contains lysozyme and lactoferrin as antimicrobial agents
15. Pigment that determines brown eye color
16. The lesion lies here in bitemporal hemianopia
17. The most common cause of an altitudinal visual field defect
18. Horizontal or concentric striae in Descemet's membrane of the cornea
19. AREDS formula is associated with this eye condition

#### DOWN

1. Transducin is a protein found in
2. Amaurotic cat's eye reflex is seen in this condition
3. Horner's syndrome has this component along with miosis and anhidrosis.
4. Drug causing whorl-like corneal deposits
5. Tubulointerstitial nephritis can be associated with this ocular condition
7. Most commonly fractured bone in blow out fracture
8. Person who wears convex lenses
9. Modified sebaceous glands associated with the eyelash follicles
11. Potential space located between the posterior surface of the lens capsule and the anterior face of the vitreous
12. Corneal Herbert's rosettes are found in
13. Corneal imaging system using reflected concentric rings to assess anterior corneal curvature
14. A quantitative topographic index in Pentacam used to detect keratoconus



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Vice President, Karnataka Ophthalmic Society

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**POEM**

# Star You Are



BE a star that shine and shimmer, and not fade away.

An intense glow within, to glitter without a break.

Doesn't have a mirror- mirror on the wall to confirm the twinkle.

No poet or an astro sang a sonnet you could hear.

Nor could you see the romantic couple call your name to their beloved.

Some of your kith and kin shine brighter nor did it make you jealous.

You keep your distance and mind your own light - night after night.

A full moon or a shooting stars can make an admirer ecstatic for a while,

But you don't give a glimmer, you are the same - night after night.

Materialistic world compare you to diamonds in the sky.

Least they know you are priceless.

Movie maker's created 'star wars' to instigate a big bang, but you are always at peace - night after night.

Coffee makers created. 'Starbucks' for lesser mortals, you need no caffeine to stay awake - night after night.

You distract my inner sorrow just by making me count endlessly in a clear night sky.

You do not need air or water to twinkle in the dark

I am star stuck, when I star gaze

FOR

You are my loyal star - night after night.

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**TRAVELLING****Bali – An Immersive Vibe Of A Destination**

In the era of Vlogging travel related stuff all over Instagram - Here is my old school version of letting you read through my journey in Bali and letting your imagination run wild. Bali is definitely not an off beat destination as you might have guessed. Unlike most beach destinations which are mostly about resorts and scuba diving-here is a land-the pulse and culture of which will certainly strike deep and resonate with you step by step. Come let us delve into this journey to Bali from Bangalore. We were at one point, not even sure of landing in Bali due to eruption of an active volcano named Mount Lewotoba Loki Loki about 1000 kms to the east of Bali which spewed up volcanic ash cloud as high as 10 km into the sky. So make sure you have your travel insurance is sorted for unexpected disappointments. We got lucky unlike the travellers from the previous day of our travel and landed in Bali as per our itinerary. I had booked a customised itinerary 9 day itinerary on Make my trip.com after thoroughly researching what to visit with my family.

We started off with exploring the beautiful Balinese temples. Bali is the only island in Indonesia which has a demographic high percentage of local Hindu population. The display of scenes from Mahabharata at various junctions in the cities and villages will leave you in awe as soon as you land in Bali and drive out of the airport. Most of the streets are named after the Pandavas. They revere our epics more than we do in India. Most of these temples are water temples which have a water management system to its surrounding rice terraces. The Temples in Bali do not follow the pattern of temples here in India. Idol worship is not prevalent. However I did manage to spot a Shiva Linga in one of the temples-Pura Tirtha empul. Bali

follows an ancient Vedic version of Hinduism. All across Bali you will find That the locals make offerings consisting of colourful flowers and incense-some of these to ancestors(pitrus) and some to the Gods and some to ward off evil spirits. Be mindful not to step on these outside shops if kept on the floor. Tourists are generally not allowed inside the Temple praying area where there are altars for offerings. However you can observe the temple wearing the traditional “Sarong”(available outside temples). Most of the temples have fish ponds where you can feed the fishes and these ponds are really clean. Pura tirtha empul has shops to buy souvenirs. We also visited Pura Puseh desa Batuan temple (Brahma Vishnu temple of Batuan) and Pura Ulun danu Beratan dedicated to Shiva and inside a Beautiful lake surrounded by mountains. Mind you it can get cold and breezy here if it rains. Do not miss the temples I mentioned as you will appreciate their concept of water conservation and irrigation. We enjoyed learning local language words like Pura =temple, Tutup = Close, Buka = Open, Wanita= Ladies from the sign boards.

Note the Sanskrit words. All temples have an entrance fee.



**City junction depicting a scene from Mahabharata**





Samudra Manthan scene



Tirtha empul temple



Ulun Danu Bratan temple in the middle of Lake Bratan

There are lot of photogenic spots for tourists to dress up with professional photographers such as the Ubud Aloha swing. The ladies get to wear beautiful gowns on rent and click pictures from scenic hilltop locations such as Wanagiri Hill and twin lakes. This experience is probably unique to Bali. We also did the Campuhan Ridge walk which takes us through lush green nature on top of a hill inside the village which eventually ends in a street with beautiful cafés. Do not miss “Bali Kopi (coffee). Bali has lot of coffee plantations on its hills and is mainly a coffee staple country. The coffee has a distinct flavour in contrast to Chikmagalur coffee. We however did not try the Luwak coffee (made from civet cat pooping the beans). Bali has great Non vegetarian and vegan food options as well. Nasi Goreng (Nasi =rice and Goreng = Fried) is ubiquitous all across Bali and is a favourite with all age groups if you are travelling with family. Normally it has stir fried rice with chicken/vegetables/ egg and has a distinct flavour which will woo our Indian taste buds. Mie Goreng is another favourite staple with noodles. You will get lot of crackers ( friums )made from Prawns as accompaniments. Lot of vegan and European food options with Tofu, tempe and Tohu(Burmese Tofu) are available and we stumbled upon yummy Pizzerias as well. Do your google research on the route to be taken on the previous day of your itinerary and I promise you that Food in Bali will not disappoint us Indians. Be wary of eating undercooked meat in street food stalls and always have mineral water. This will safely keep you off from the famous “Bali Belly”. Take a stroll across Ubud market to buy Beautiful Balinese clothes with local art prints and these are really comfortable for the weather in Bali. Kids also have really cute options for dresses.



Diamond Beach Nusa penida Island





Photogenic spots all across Bali



These Gates can be found all across Bali



Ramayana Kecak dance Uluwatu

Bali being close to equator has its peak tourist season from June to October ( Supposedly the dry season).We had pleasant weather on most days with intermittent bouts of rain and clouds and sun. It can suddenly shower like crazy anytime. Try the local favourite Bintang Beer (easily available in all supermarkets). Most of the supermarkets have super clean washrooms during your travel route and some even have coffee shops. Clean washrooms and changing rooms is another aspect

where India can take a leaf out of Bali's book. We had included a beautiful Twin waterfall called Banyumala in our north Bali itinerary. Apart from the fact that the water was crystal clear ,the lack of litter and the beautiful wooden bridges meant to take photos enthralled us. Clean non smelly washrooms and changing rooms made the experience truly memorable and pleasant. Spent a good 1.5 hours drenching in the waterfall and the short trek down to it and back up was truly worth it .The elderly may need some assistance but it is manageable for most people with average fitness levels. Being from the land of Jog falls, I will have to admit that you will rarely get this sort of clean experience anywhere in India's waterfalls. Most of our waterfalls will have scattered broken glass bottles and plastic cups and Cigarette butts floating around.



Wanagiri Hidden Hill with view of twin lakes

Striking feature of Bali was the cleanliness across cities, villages and temples despite being heavily populated. Despite having a heavy traffic, lane discipline is well maintained and you will rarely hear honks. Plan your itinerary keeping the traffic and curved roads in Mind particularly if you are exploring North Bali and south Bali. A drive across the villages will leave you in awe as the sight of Balinese houses



are beautiful with a distinct slopy tiled roofs similar to our west coast but with Buddhist modifications. The locals wake up early and start their day by 7am and wind up by 7pm as in most Eastern countries. We had 2 days of our itinerary for an Island named Nusa Penida which has stunning cliff views of the coast. Most beaches on this Island are beneath cliffs with rocks. So it needs a certain amount of trekking down to reach the beaches. The cliff views are stunning. Few beaches have black sand. Crystal bay beach is wonderful to spend a half day and let the kids play wild on the sand with easy access for kids and elderly. Diamond beach and Raja Lima cliff views have panoramic views of the blue sea which are not to be missed. Plenty of snorkeling options on the island. Do note there is a lot of travel involved from beach to beach with curvy roads on this island. The ferry to this island can really test your vestibular system. Do stock up an entire strip of anti emetics for your family for a more pleasant experience ! Our resort had a wonderful view from the room of Balinese house roof tops and the sea. I particularly enjoyed my morning walk with my sister at 7am to the local village to feel the pulse of the local markets and the rented Scooty ride back to our resort. The slow Balinese rural life is very appealing. The Balinese spas here offer top class professional Balinese massages from well trained masseuses for the entire family. The Island life was truly relaxing. We could not try out the party scene in Bali as we were travelling with kids and elders. That is for another visit for sure.



**Diamond beach Nusa penida**



### **Balinese Houses on Nusa penida Island**

All in all - Bali is a vibe and a melting pot of cultures. The large amount of Caucasian tourists thronging to this tropical Island will put Goa and Kerala tourism to shame. Although the hospitality in the resorts may not be in par with the hospitality of Indian star resorts, The facilities offered by these resorts for the decent pricing truly makes it a "budget destination" for most Indian families. The feeling of being on this island and experiencing the local vibe was a well deserved break in my hectic schedule as an ophthalmologist. The Hangover of this trip is pretty real and I truly left a piece of my heart on this Island.

I firmly believe that no matter how busy we are, or irrespective of the kind of practice (institute / private ) we do, we must make it a point to take atleast a week long vacation of this sort with family (without involving a conference around it) atleast once every year to recharge our batteries and to experience newer cultures and to feel the true pulse and vibe of a new country.



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**MEDICAL LAW****Bharatiya Nyaya Sanhita (BNS) sections applicable to ophthalmic practice in India**

The implementation of the **Bharatiya Nyaya Sanhita** (BNS), replacing the Indian Penal Code (IPC), has brought significant changes to the legal landscape for medical professionals in India, including ophthalmologists. These changes aim to modernize and clarify the law, but also introduce new considerations for doctors regarding patient care and liability.

**Criminal Negligence and Section 106**

The most talked-about change for doctors is **Section 106** of the BNS, which replaces the IPC's Section 304A. This section deals with causing death by a rash or negligent act not amounting to culpable homicide. For registered medical practitioners, a special provision has been included.

While the general punishment is up to five years imprisonment, for doctors, the punishment remains up to two years.

This is a notable change from the IPC, which did not differentiate between doctors and other individuals, although judicial pronouncements had established a higher bar for prosecuting doctors.

For an ophthalmologist, this means that if a patient dies as a result of a gross, criminally negligent act during a procedure, they could face criminal charges under this section. Examples could include a clear breach of a standard protocol that directly leads to a patient's death, such as using an unsterilized instrument or an outright failure to monitor the patient during surgery. However, the legal threshold for proving criminal negligence is high; it must be a degree of negligence that is considered "gross" or "reckless," not just a simple mistake or an error in judgment.

**General Exceptions and Patient Consent**

The BNS also retains crucial protections for doctors under its "General Exceptions" chapter. These provisions are vital for ophthalmic practice, where many procedures carry inherent risks.

•**Section 26 (Act done with consent in good faith):** This section is a cornerstone of medico-legal

practice. It states that an act is not an offense if it is done in good faith for a person's benefit and with their consent, even if it might cause harm. This provides a legal shield for ophthalmologists performing procedures like cataract surgery or retinal detachment repair, where there are known risks. The concept of informed consent is critical here. It is not just about getting a signature on a form, but about ensuring the patient fully understands the procedure, its risks and benefits, and alternative treatment options. The BNS reinforces the importance of this communication process.

•**Section 30 (Communication in good faith):** This section protects doctors who, in good faith, communicate with a patient about their illness, even if the communication causes harm. For example, honestly informing a patient about a poor prognosis for their vision could be distressing, but this section ensures the doctor is not criminally liable for the emotional harm caused by the truthful communication.

**Hurt and Grievous Hurt**

The BNS also contains sections on causing "hurt" and "grievous hurt," which are relevant in cases of non-fatal harm due to negligence. These sections define different levels of injury and the corresponding punishments. In ophthalmic practice, if a negligent act leads to a patient losing their eyesight in one eye (a "grievous hurt") or a temporary injury, the doctor could face charges under the relevant sections of the BNS, even if the act did not lead to the patient's death. This reinforces the need for meticulous care and adherence to safety standards in all procedures.

The video titled "Medical Negligence and the Bharatiya Nyaya Sanhita Act, 2023" provides a detailed explanation of the changes brought by the new law, including how it impacts medical professionals like ophthalmologists.

Medical Negligence and the Bharatiya Nyaya Sanhita Act, 2023





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## DASARA



### Mysuru Dasara An emotion



Mysore / Mysuru Dasara, also known as Nadahabba (the state festival of Karnataka), is one of India's grandest and most culturally significant celebrations. It involves history, mythology, devotion and tradition. This festival transforms the city of Mysuru into a glowing spectacle of lights, music, and festivities. Visitors come from all over the world to witness this celebration.

Mysore Dasara has been celebrated for over 400

years, dating back to the rule of the Wodeyar dynasty in the 15<sup>th</sup>–16<sup>th</sup> century. This festival is also known as "Navaratri: celebrated for nine days starting from Padya till Maha Navami which is also known as Ayudha pooja. The 10<sup>th</sup> day is known as "Vijayadashami" which is a victory of the good over the evil.

It is the victory of Goddess Chamundeshwari (Maa Durga) over the demon Mahishasura, after whom the city is named (Mahishuru → Mysuru)



### Major highlights at Mysuru during Dasara are:

**Jamboo savari**, is a grand procession where an idol of Goddess Chamundeshwari is placed in a golden howdah, on the top a decorated elephant. The procession includes Folk dancers, Mounted horses and camels, Traditional music bands. Tableaus representing Karnataka's culture etc. The procession moves from Mysore Palace to Bannimantapagrounds.

### Illumination:

Whole city is illuminated along with the palace and it is a VISUAL TREAT.

### Torchlight Parade:

is held at the Bannimantapa grounds on the final evening, its features:

- Daredevil stunts by the armed forces
- Traditional performances, Horse shows
- Fireworks and laser displays

### Cultural and Artistic Displays

Throughout the city, there are many stages arranged where classical dance, folk dance and music are performed. Renowned artists from across India participate. Exhibitions, food festivals, and handicraft fairs also attract thousands of visitors.

### Religious Ceremonies

Each day of Navaratri includes special pujas at the Chamundi Hill Temple and inside the Mysore Palace. The royal family still plays a ceremonial role, preserving centuries-old traditions

### Conclusion

**Mysuru Dasara** is not just a festival - it is a **majestic blend** of history, devotion, art, and celebration. With its illuminated palace, regal traditions, and vibrant culture, it continues to be a **symbol of Karnataka's identity and pride.**





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**RIDDLES**

# Ophthalmic Riddles

1. I hide when both eyes work as one  
But show myself when the tasks are done  
I go up and rarely go down  
Under cover, I look like a hot air balloon  
What condition am I?

2. A Center's dim, lines start to bend  
Fluid pools where light should end  
What condition am I?

3. Frosty flakes everywhere  
High pressure situation is a scare  
What am I?

4. A shameful lid, a pupil small,  
No sweat at all, that's my call.  
A hidden nerve, a silent break,  
A trio of signs, for goodness sake.  
What am I?

5. I give a long slender form  
But my Crystalline stuff may wander breaking the norm  
A heart's gentle hum, can turn to Roar  
A protein's small flaw, shatters nature's core..



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**FARMING**

## Agriculture For Ophthalmologists Foraying Into Uncharted Territory

If you have ever envisioned a dream weekend getaway to a green quiet paradise every weekend in the midst of your hectic professional life as a doctor – then you have stumbled upon the correct article. Ever wondered if you could take the plunge into the field of agriculture despite not having any such background? Ever wondered what is the right time to begin such an enterprise? Well the answer with regard to buying land for the same is always “Now” as land value invariably appreciates.

How to Begin? Some of my pearls and thoughts before you set foot on this hobby

1) Being passionate about pursuing this as a hobby is a basic requirement. If you do not have the inner will and drive to do this – you may not enjoy it as much. It demands some amount of work and attention despite your busy schedule. Now don't get me wrong – Even the busiest doctor always “makes” time for their priorities.

2) Natural love for greenery and Gardens will make it easier for you to settle into this new hobby for sure.

3) Strong determination to balance both your medical profession and agriculture keeping medical profession as the main source of your income. It can be your much needed break from the heavy demands and stresses of medical profession.

4) Scouting for the right piece of land is probably the toughest part of starting this venture as this can take months before you decide to invest your hard earned money in your dream land. Seek help from

other doctors who have ventured into this as they can get you the right kind of contacts and middlemen who can guide you to available options in the land market in your area and the correct pricing.

5) Search for a land of atleast 4-6 acres if you are not planning to venture into agriculture as a prime business. A property which is within an hour's drive from your workplace or home would be the best bet as this gives you the right kind of balance between profession and hobby. Do ensure that the property has fairly good amount of mobile network connectivity and abundant consistent water supply / irrigation supply. A property on the edge of a forest or river may come with the risk of flooding or devastation by animal encroachment.

6) Have a primary crop in your farm such as arecanut / coffee / mango / coconut. Multiple intercropping with one main commercially sustainable crop in your geographical location protects you from financial crisis and becomes self sustaining. You can add on other crops eventually such as vanilla / pepper / coconut / banana etc. Find a reliable caretaker family who can look after your crops during the hectic weekdays and look for someone with a genuine interest in agriculture and love for plants. Now remember that they are akin to your OT staff in the hospital and hence a priority to search or the right person for this job.

**What are the benefits?**

1) No points for guessing that if you manage a decent crop you can add a significant income which



is tax free to your yearly income and this makes you feel more secure about not having to depend solely on your hand eye coordination skills for a lifetime.

2) Physical activity becomes an inseparable part of your weekends .As you approach your farm you can disconnect from the material world and unwind with nature on every weekend . Many doctors have even kept animals in their farms ranging from Turkey to Ducks , swans, rabbits, dogs, cats, birds, Fishes In a pond etc . It is your gateway to connect with nature .

3) Slowly you can build a self sustaining kitchen garden to provide your family your weekly source of organic and chemical free vegetable and fruits .We use Banana leaf sourced from our farm for dining at home everyday!

4) Eventually people have even converted their farms into Homestays and resorts for tourism purposes or even for self relaxation with a private pool and villa .

### **All roses have a couple of thorns**

1) Your crop could get badly infested with diseases and microbes – hence it is important to read and be aware of the diseases of your crops and the necessary precautions. We as doctors are pro at this and can handle it certainly very well with our scientific knowledge .Always never depend on agriculture alone as primary source of income .

2) Having a good set of labourers is a boon which can quickly turn into a bane if your workers try to harass you and make unreasonable demands under the labour act . Try to keep them in your good books always . Be kind and courteous ,yet keep an eye on them as you do with your hospital staff .Try to help out their families and this will help them stick to you in the long run along with providing them with a decent pay scale.

3) It is important to educate yourself and be up to date about the latest government policies for agriculturists and to avail the benefits of crop insurance and other policies .Knowledge about managing plant diseases and sprays to prevent the same .Personally monitoring the harvest season as well as the crop processing into commercial products with the involvement of reliable trustworthy middle men is of paramount importance

I was very lucky to be introduced into this by my good friend Dr. Manjunath who is a busy dentist by profession with fantastic entrepreneurial skills and an inborn love for agriculture deeply rooted in his family traditions . He has motivated a lot of doctors in our Malnad area to venture into this uncharted territory and self sustain themselves .So go ahead and take that plunge into investing on the land you have always dreamt of and find an alternative backup source of income combining it with your hobby .





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**ETHICAL  
PRACTICE**

## Time for Standardization

### Securing the Future of Ethical Ophthalmic Practice

In the evolving landscape of healthcare, where quality, accessibility, and sustainability are constantly challenged, the time has come for the ophthalmic community to take a hard look at one of its most fundamental concerns: the standardization of consultation and surgical charges. This is not merely a matter of economics-it is a matter of principle, professional integrity, and the future of our field.

As ophthalmologists, we take pride in offering world-class care and advancing the science of vision. But behind every successful practice lies the silent struggle of balancing service with sustainability. Nowhere is this struggle more pronounced than among young ophthalmologists venturing into private practice, who find themselves squeezed between low consultation fees set by seniors and aggressive undercutting by corporate players.

While seasoned practitioners can offset low fees with patient volume, newcomers face daunting operational costs-rent, salaries, maintenance, and equipment-without the same patient base or financial cushion. As a result, many are forced to **compromise**: either reduce the quality of care or delay investments in technology and training. This is not the foundation upon which we want the future of ophthalmology to rest.

Furthermore, the infiltration of corporate healthcare chains-often driven by profit motives and marketing muscle-has introduced market practices that undermine independent practitioners. Heavy discounts, unsustainable pricing, and loss-leader strategies may bring short-term patient footfall, but they distort the value of our professional services and create a false expectation of what good eye care should cost.

It is in this context that the call for a standardized minimum fee structure emerges not as a restriction, but as a necessary safeguard. Standardization does not imply rigidity or uniformity in all practices-it means creating a fair and transparent baseline that respects the cost of quality care, rewards professional skill, and allows ethical competition.

We believe the state and national ophthalmic societies-KOS, AIOS, and others-must lead this conversation. It is time for these bodies to publish guidelines for minimum consultation and surgical charges, taking into account regional variability, practice settings, and levels of experience. These guidelines would serve not as enforcement tools but as a moral and professional compass for the community.

**The standardization of fees will:**

- Protect younger colleagues as they establish their practice,
- Ensure sustainability for independent practitioners,
- Preserve the quality of ophthalmic care,
- And uphold the dignity of our profession in the face of commercial pressures.

We understand this issue invites diverse opinions and concerns. But dialogue is the first step to consensus, and consensus is the first step to reform. Let us bring this matter into the open-at conferences, society meetings, and journal discussions-so we may arrive at a solution that is fair, forward-thinking, and feasible.

The future of our profession lies not just in what we do in the operating room or clinic, but in how we stand together as a fraternity to defend the values we believe in.



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**POEM****Motherhood**

In the middle of the night,  
When you cry with all your might  
As I run towards the cradle  
Lift and hug you to cuddle  
I realise what you need  
Of course it is a good midnight feed.

In those days waiting for you  
Exhausted, anxious, but all to see you  
To give you all the love that I carried  
To hold you close is all that I cared for

And finally it was a magical moment  
When I heard you cry  
I didn't know whether to smile or cry  
But I knew the world has changed  
Forever for you and me.

When I knew you were within me  
The countdown was from 10 to 1  
And now after u arrived  
We have counted 1 to 10.

Tears and laughter, ups and downs  
We have survived through it all  
Each milestone that you achieved  
Is a beautiful reward, we forever longed.

Days, weeks and months will pass  
In a blink you will be going to school and class,  
But forever we will hold you close  
And celebrate every milestone that you cross.

**Dr Prabitha P B**



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**CROSSWORD  
PUZZLE****Crossword 1****1 ACROSS**

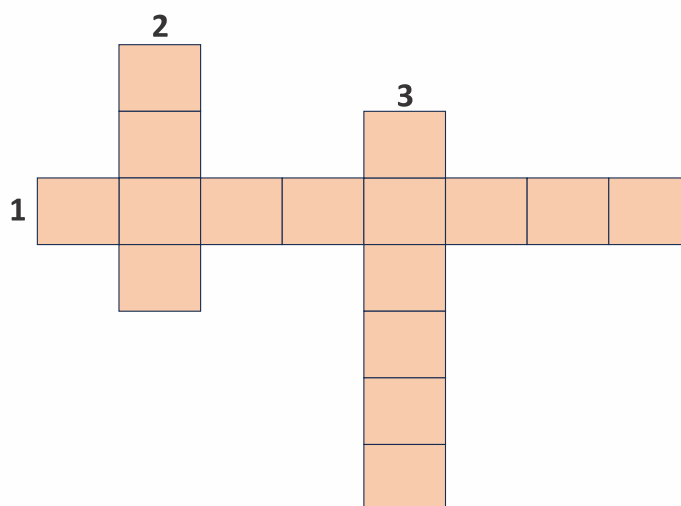
A SPOT and A PEARL are  
named after me

**2 DOWN**

Intravenous drug users  
can have this retinopathy

**3 DOWN**

I don't fracture bones  
but I do break retina

**Crossword 2****1 ACROSS**

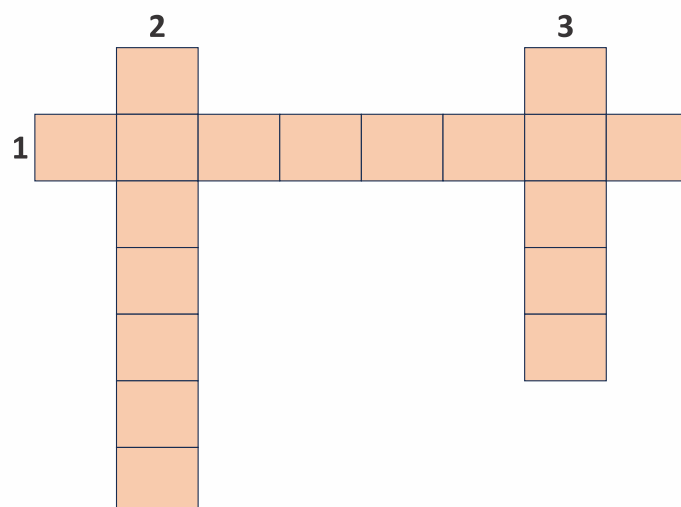
Mizuo's Companion

**2 DOWN**

A central crack in myopia

**3 DOWN**

Best's Ratio





## Crossword 3

## 1 ACROSS

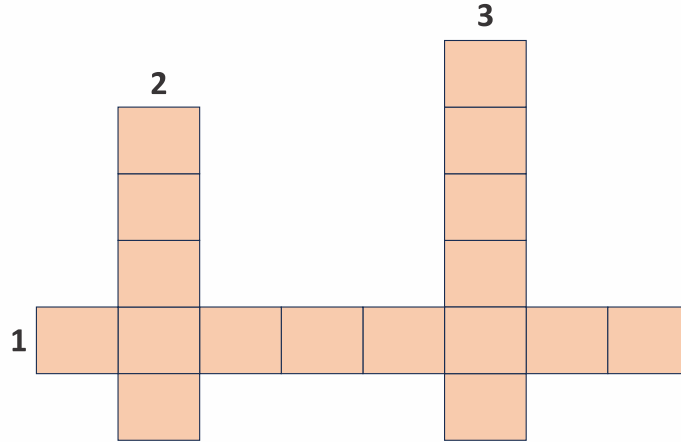
Not a serious but an oily cone

## 2 DOWN

Photoreceptor pigment

## 3 DOWN

Not a fish but a patch



## Crossword 4

## 1 ACROSS

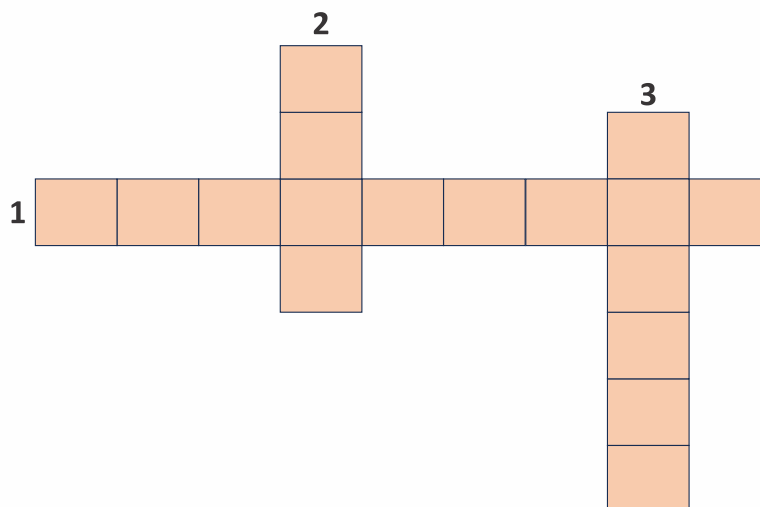
Red and white lesions in the Fundus of a person following cranial trauma

## 2 DOWN

I do not hurt while imaging

## 3 DOWN

My Swelling during commotion





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**POEM**

## When golden'silence'muted 'silver' speech

A new Endeavour was in the making  
Of going 'silent' with all the talking  
At the annual BOS summit 2025 meeting  
Replicating an earlier “Keracon” scouting

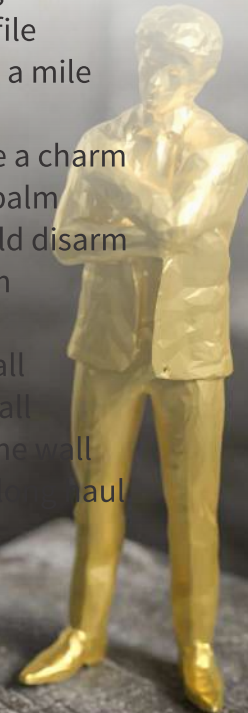
How will it pan out? –an anxious gingerly wait  
Will the headphones work or crumble under the weight?  
Of heightened expectations & it's still unknown fate  
Yet Elan et. al dared to take the bait!

Will it be a normal delivery or a glitchy one?  
Did they ditch tradition & jump the gun?  
Can justice to the audience really be done?  
And about panel discussions - many doubts under the sun

The novel 'experiment' took off in rollicking style  
An instant hit with hardly any 'missing tile'  
All unease eased among the rank & file  
Unfamiliar terrain now friendly by many a mile

All presentations & discussions worked like a charm  
No noise or cacophony - an auditory balm  
Every query & doubt - the 'aisle mikes' could disarm  
An allround vibe - so serene & calm

Four halls coalesced into one big hall  
? Unity in diversity – this, you may call  
No missed sessions or being driven up the wall  
From sprinting in the lobby & hallway in a long haul



Most enjoyed the 'undisturbed' unique platform  
A few squirmed in their seats adapting to the new norm  
Stifled & unable to chat, whisper or inform  
their adjoining colleagues - about some juicy romcom!

'Loud speakers' at the mike to subdue their decibel  
In order that other stations too were heard well  
A few-unsettled with this new mandate that befell  
'Full throated' lectures would no longer sell

The headphone -inputs thwarted folks from dozing  
The 'voyeur' could even access another screen sitting  
Merely flipping the channels without stressing  
Sans fear of missing out anything interesting

The trail blazing lessons - clear & loud  
That's made everyone so very proud  
Elan & co. stood out in the crowd  
With elan (pun unintended!), new seeds they sowed

'Silent' & 'conference' sounded mutually contradictory  
In the end, turning out so revolutionary  
All fears, misgivings quelled at the valedictory  
The think tank basking in a resounding victory.

A thunderous shout out to our illustrious brigade  
Who stole a march with their sterling crusade  
Largely unscathed; all roles so well played  
Smelling of roses, they've surely made the grade.





## Answer Riddles

|    |                                |
|----|--------------------------------|
| 1. | Dissociated Vertical Deviation |
| 2. | Central Serous Retinopathy     |
| 3. | Pseudoexfoliation              |
| 4. | Horners Syndrome               |
| 5. | Marfans Syndrome               |

# ANSWERS FOR CROSS WORD

## ACROSS

|     |            |
|-----|------------|
| 1.  | Protanopia |
| 6.  | Helmholtz  |
| 10. | Plus       |
| 12. | Tears      |
| 15. | Melanin    |
| 16. | Chiasm     |
| 17. | AION       |
| 18. | Haab       |
| 19. | ARMD       |

## DOWN

|     |                |
|-----|----------------|
| 1.  | Photoreceptor  |
| 2.  | Retinoblastoma |
| 3.  | Ptosis         |
| 4.  | Amiodarone     |
| 5.  | Uveitis        |
| 7.  | Maxilla        |
| 8.  | Hyperope       |
| 9.  | Zeis           |
| 11. | Berger         |
| 12. | Trachoma       |
| 13. | Placido        |
| 14. | KISA           |



# ANSWERS FOR CROSS WORD

## Crossword 1

### 1 ACROSS

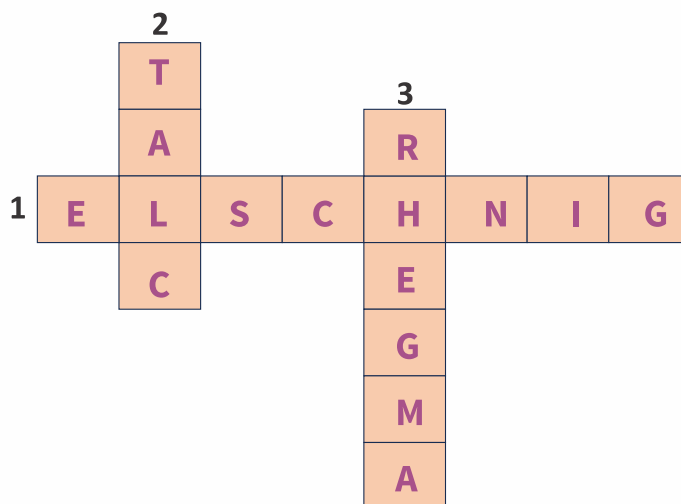
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but I do break retina



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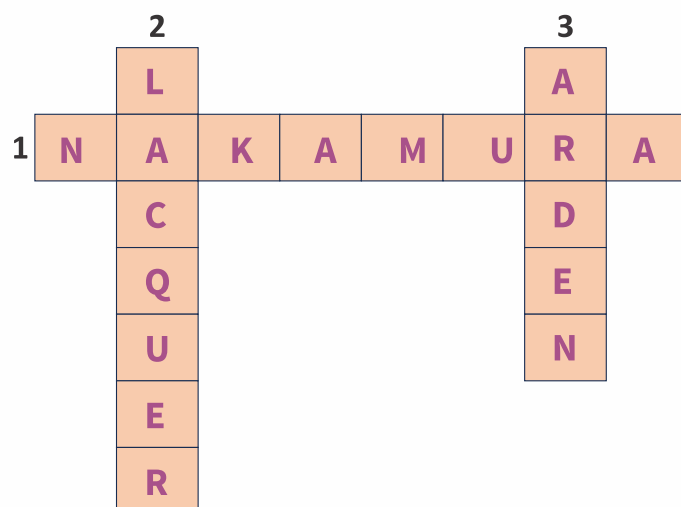
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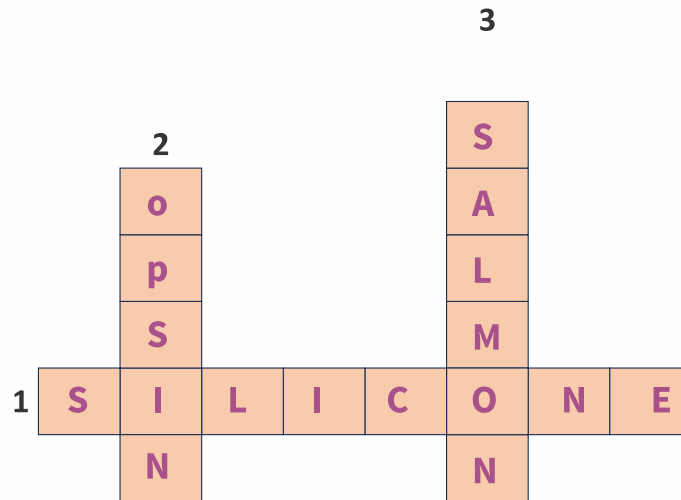
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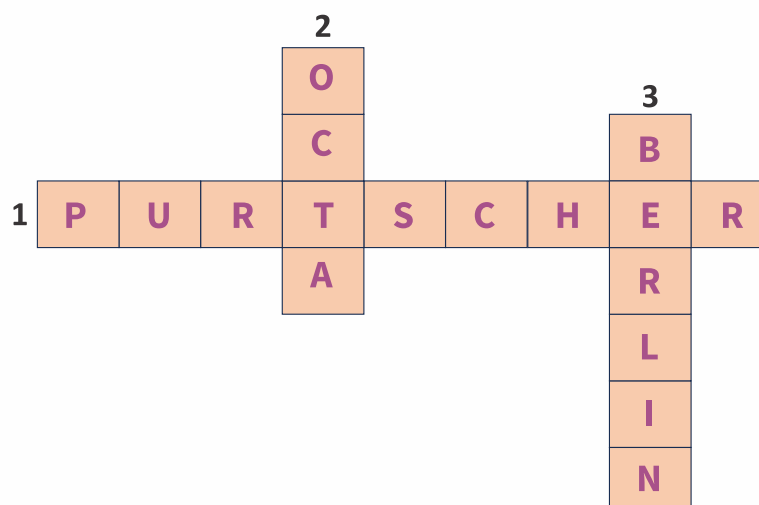
Red and white lesions in the Fundus of a person following cranial trauma

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I do not hurt while imaging

## 3 DOWN

My Swelling during commotion





Schedule for next release of 4<sup>th</sup> Scientific journal November 2025**Link for Previous Journals and Newsletters**

we also welcome advertisements to be published in our Journals  
for job opportunities / fellowships programmes from Institutions / Hospitals

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DOA

WELCOMES YOU ALL



KOSCON  
— 2025 —  
DAVANAGERE

ENJOY OUR HOSPITALITY AND MAKE IT A GRAND SUCCESS

