

Mure Memorial Hospital

Maharajbagh Road, Sitabuldi, Nagpur - 440001, (M.S.), India. Tel. Nos. 0712-2522370, 2535317,
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NEWS FOR THE MONTH OF JULY - 2022

Doctors Day:

Doctor's day was celebrated with zeal on 1st July 2022 at Mure Memorial Hospital. On this occasion the Doctors were recognized and felicitated by the Mr. Vilas Shende, Director and other staff members in the Hospital.

Dedication of Operation Theater Table & Lights:



Table and Lights were dedicated at Mure Memorial Hospital's Operation Theater on 2nd July 2022 at 10 a.m., by the auspicious

hand of Rev. Suresh Sonawane, Vice-President of CNI Nagpur Diocese along with Mr. Vilas Shende, Director and Staff members. These table and lights are high-tech and built with latest technology and it would enhance efficiency of Operation Theater.



Health Check Up Camps:



Free health check up camps were conducted on 7th & 9th of July 2022 at Waddhamna and Dattwadi slums in Nagpur. Dr. Joel, Dr. Amanpreet, and Dr. Diksha examined the patients. Total 245 patients were benefitted out of these camps. Sr.

Prathibha Bhange, and Nursing Students worked hard for the success of these camps.

Nurses Lead Clinic:



MMH Mobile Nurse Lead Clinic is continuously visiting different slums of Nagpur city. On 11th July they visited Surendragad slum; Dr. Purva along with senior Nurse Sr. Prathibha Bhange, examined the patients and at the same time the inmates of this slum were aware about hygiene and about new disease i.e. Monkey Pox.

Medical Home Care visit:

MMH Medical team visits to senior persons and bed ridden patients whose family members want them to treat at their own home. This team consists of Doctors and well trained Nurses, who examined the senior patients time to time at their home, and perform other basic tests if needed.

Medical Care for Bed Ridden / Elderly Patients

At Home
First Visit Free



Advantages of Medical Home Care

1. Home care offers cost saving in conditions which requires long stay at hospital
2. Patients have privacy at home and feel at home
3. Easier for family, relatives and friends to visit
4. Allowing relatives more opportunity to make decisions about their care

Availability of Doctors, Physiotherapist & Nursing Attendant Services

Mure Memorial Hospital
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PLHA Support Groups family Get-together



The theme of the program was "Celebrating the Success of Togetherness" The uniqueness of this was this get together was that to support members who were coming from poor and vulnerable community. The

program was more like a festival for the PLHIV's family. They were also able to showcase their talent, skills and shared different success story which had a positive impact to many people in the community. 250 persons participated in these get together.

On this occasion Dr. Narendra Bahirwar (Health Department, NMC, Nagpur), Chief Guest, Mr. A.K.Nanda, Project Implementer, EFICOR, Nagpur, Smt. R.Vimala (Collector And District Magistrate, Nagpur) and Mr. Vilas Shende, Director of MMH were present.

Awareness Camps:



MMH Conducts awareness camp on various topics related to holistic health care. Such camps were conducted on 28th & 30th July 2022 at NGO Sanjeevan.

B. S. S. Sanstha and in Vikas Public School, Manewada, Nagpur. The team covered topics on hand wash techniques, personal hygiene and

about Arogya Surakhsha Card Scheme benefits. Mr. Prajot Thakre and Nursing Tutors conducted these camps efficiently.



Staff Birthdays for the month of August 2021 :

1. Dr. Darshan Rewanwar - 05/8/2022
2. Mrs. Mariyam Francise - 15/8/2022
3. Mrs. Kavita Sutar - 15/8/2022
4. Ms. Fatima Pilley - 19/8/2022

National & International Days for the month of August 2022:

1. Hiroshima Day, Anti Nuclear Day - 6/8/2022
2. World Senior Citizen Day - 8/8/2022
3. International Youth Day - 12/8/2022
4. India's Independence Day - 15/8/2022
5. World Humanitarian Day - 19/8/2022
6. National Senior Citizen Day - 21/8/2022

Monkey Pox

Key facts as per WHO:

Vaccines used during the smallpox eradication programme also provided protection against monkeypox. Newer vaccines have been developed of which one has been approved for prevention of monkeypox

Monkeypox is caused by monkeypox virus, a member of the Orthopoxvirus genus in the family Poxviridae.

Monkeypox is usually a self-limited disease with the symptoms lasting from 2 to 4 weeks. Severe cases can occur. In recent times, the case fatality ratio has been around 36%.

Monkeypox is transmitted to humans through close contact with an infected person or animal, or with material contaminated with the virus such as body fluids, respiratory droplets and contaminated materials such as bedding.

An antiviral agent developed for the treatment of smallpox can be used for the treatment of monkeypox.

The clinical presentation of monkeypox resembles that of smallpox, a related orthopoxvirus infection which was declared eradicated worldwide in 1980. Monkeypox is less contagious than smallpox and causes less severe illness.

Monkeypox typically presents clinically with fever, rash and swollen lymph nodes and may lead to a range of medical complications.

Overview :

Monkeypox virus is an orthopoxvirus that causes a disease with symptoms similar, but less severe, to smallpox. While smallpox was eradicated in 1980, monkeypox continues to occur in countries of central and west Africa. Two distinct clades are identified: the west African clade and the Congo Basin clade, also known as the central African clade.

Monkeypox is a zoonosis: a disease that is transmitted from animals to humans. Cases are often found close to tropical rainforests where there are animals that carry the virus. Evidence of monkeypox virus infection has been found in animals including squirrels, Gambian poached rats, dormice, different species of monkeys and others.

Human-to-human transmission is limited, with the longest documented chain of transmission being 6 generations, meaning that the last person to be infected in this chain was 6 links away from the original sick person. It can be transmitted through contact with bodily fluids, lesions on the skin or on internal mucosal surfaces, such as in the mouth or throat, respiratory droplets and contaminated

objects.

Detection of viral DNA by polymerase chain reaction (PCR) is the preferred laboratory test for monkeypox. The best diagnostic specimens are directly from the rash skin,

Symptoms :

Monkeypox presents with fever, an extensive characteristic rash and usually swollen lymph nodes. It is important to distinguish monkeypox from other illnesses such as chickenpox, measles, bacterial skin infections, scabies, syphilis and medication-associated allergies.

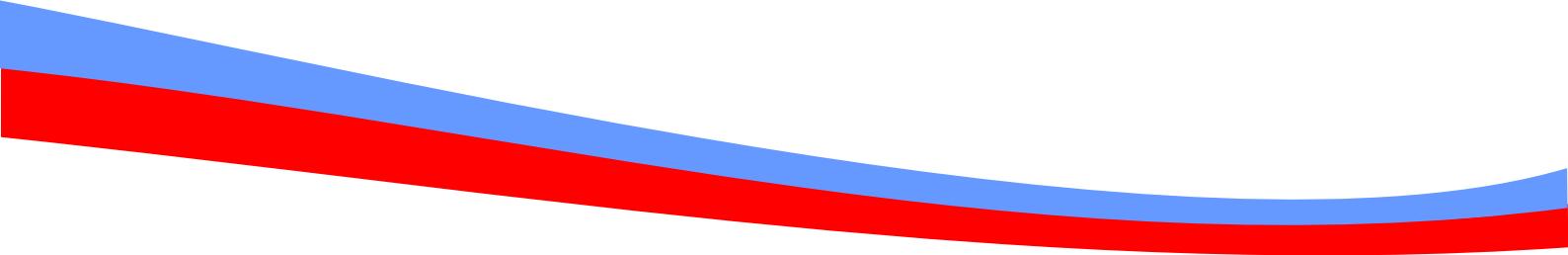
The incubation period of monkeypox can range from 5 to 21 days. The febrile stage of illness usually lasts 1 to 3 days with symptoms including fever, intense headache, lymphadenopathy (swelling of the lymph nodes), back pain, myalgia (muscle ache), and an intense asthenia (lack of energy). The febrile stage is followed by the skin eruption stage, lasting for 2 to 4 weeks. Lesions evolve from macules (lesions with a flat base) to papules (raised firm painful lesions) to vesicles (filled with clear fluid) to pustules (filled with pus), followed by scabs or crusts.

The proportion of patients who die has varied between 0 and 11% in documented cases and has been higher among young children.

Treatment:

Treatment of monkeypox patients is supportive dependent on the symptoms. Various compounds that may be effective against monkeypox virus infection are being developed and tested.

Prevention and control of human monkeypox rely on raising awareness in communities and educating health workers to prevent infection and stop transmission.



Most human monkeypox infections result from a primary animal-to-human transmission. Contact with sick or dead animals should be avoided, and all foods containing animal meat or parts need to be properly cooked before eating.

Close contact with infected people or contaminated materials should be avoided. Gloves and other personal protective clothing and equipment should be worn while taking care of the sick, whether in a health facility or in the home.

Populations have become more susceptible to monkeypox as a result of the termination of routine smallpox vaccination, which offered some cross-protection in the past. Vaccination against smallpox with first generation vaccinia virus-based smallpox vaccine was shown to be 85% effective in preventing monkeypox in the past. Family and community members, health workers and laboratory personnel who were vaccinated against smallpox in childhood may have some remaining protection against monkeypox.