

June 2020

Vellore News

CMCH Vellore Web site:
Australian FOV web site:
SA FOV email:

<http://www.cmch-vellore.edu>
<http://www.australianfov.net.au>
safriendsofvellore@gmail.com

Hope for Tomorrow

I have been overwhelmed by the kindness of friends and well-wishers like you. CMC has received a tremendous response to our COVID-19 Preparedness appeal from all over the world. Your generous support and prayers are a great encouragement to our medical and support teams during this unprecedented crisis.

In 1922 Dr. Ida Scudder, our founder, said to her first batch of graduating doctors: "You will not only be curing diseases, but will also be battling with epidemics, plagues and pestilences and preventing them. Face trials with a smile, with head erect and a calm exterior. If you are fighting for the right and for a true principle, be calm and sure and keep on until you win."

Nearly a hundred years later, her words ring true. The hospital is still working, but at reduced capacity, admitting only for emergencies. We have responded to the crisis in various ways. Our community health teams have distributed medicines to patients with chronic illnesses, like diabetes or hypertension, since they cannot come to hospital. We are giving food coupons to patients in need. Long range telemedicine consultations have started and our students have online classes. In discussion with our District Collectors, we are making ready additional ICU beds and isolation wards for the COVID-19 pandemic. We are preparing for the worst, while hoping and praying for the best.

As anxiety, fear and apprehension loom large, I urge you to remember the Good Friday & Easter story. The pain of the cross gave way to the glory of the resurrection. Light triumphs over darkness. There may be a night of weeping, but joy will come in the morning. Let us hold fast – we have hope for tomorrow.

In gratitude,

Dr. J.V. Peter, Director, CMC Vellore

CMC's
Response to
COVID-19

From the
President of
SA FOV

SA FOV Cancellations

Due to COVID-19 both the May medical meeting and the SA FOV annual dinner for 2020 have been cancelled.

In lieu of buying dinner tickets this year, please consider making a donation to CMC Vellore. They desperately require funds for ramping up their preparation for an expected surge in patients in the coming weeks and months.

Tax deductible donations to CMC can be made online at: <http://australianfov.net.au/donations/>

If you'd like your donation to be specifically for CMC's COVID-19 response, make your online donation first, and then contact Stephen Aseervatham using his email: seyan@bigpond.net.au. He will ensure your donation is directed appropriately.

A reminder that if you wish to receive this newsletter by email and no longer require the paper form, please email: safriendsofvellore@gmail.com

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With the Coronavirus pandemic sweeping the world, CMC Vellore is committed to serving and caring for our patients. We are preparing our staff and scaling up our services to care for our patients with our best professional care. In this unprecedented crisis, we seek your prayers and good wishes. We need your support to face the challenges that lie ahead of us. Don't panic, wash your hands and donate now!

Thank you to all our friends for your overwhelming response! With your generous contributions, we have converted our old 'S ward terrace room' into a brand new ICU dedicated to COVID-19 patients.



New ICU dedicated to the care of COVID-19 patients

Dr Renjy Nelson, President of SA Friends of Vellore

It has not been very long since my report in the last newsletter. Much has happened since then. 2020 has been a challenging year on an unprecedented scale. Following close on the heels of one of the worst bushfire seasons Australia has experienced, is another natural calamity in the form of a pandemic that we now know as COVID-19. The bushfire resulted in extensive loss of human and animal life and property. The pandemic caused by a microscopic virus has caused such immense damage resulting in loss of life and livelihood on a scale that most of us have not seen. It has not distinguished between colour, creed or economic prosperity. Incredibly, these adversities seemed to have brought out the best in humankind with incredible acts of blind generosity, kindness, compassion and love, often despite suffering enormous loss.

CMC has also endured its own challenges. As most of you would be aware, the new hospital at the Kannigapuram campus was due to open early this year. Delay in completion due to the lockdown, the impact of the curfew, travel restrictions and enforced reduction in activity despite no change in expenditure have had a large impact on its financial bottom line. CMC has pledged 300 beds in the new Hospital for isolation and intensive care of COVID patients. CMC has been looking after numerous patients and families from other states, and countries stranded in Vellore at the start of the lockdown, many who ran out of money, by providing them with food and essential supplies. Through its community outreach programme, CMC ensured care needs were met and medicines supplied to people in remote communities. Nursing students stranded in the campus utilised the time sewing masks for the occasion. Unlike many countries in Europe and America which saw a rapid surge in cases, India has seen a steady rise in cases and the lifting of lockdown is likely to see a surge in cases. CMC is preparing for this. Following a request from the CMC directorate, Australian Friends of Vellore (FOV) along with FOVs from other countries have contributed towards a COVID relief fund for CMC and the directorate extends its gratitude for your generosity.

The pandemic has given us time to pause and take stock of how we have been conducting ourselves and provided many opportunities to reprioritise and change the way we conduct business, many to stay into the future thanks to innovative thinking and technology. It has also given us time to appreciate the value of family and spending time with loved ones.

This year the FOV committee chose not to host the annual Friends of Vellore Dinner. We welcome any donations which can be made through online donations at <http://australianfov.net.au/donations/> All donations are tax-deductible.

As the pandemic enters a new phase and different parts of the world face new challenges that threaten the fabric of society, I'd like to end this report with a verse that changed the life of the late Ravi Zacharias and that gives us hope, from John 14:19, "Because I live, you also will live".

How CMC Vellore staff traced patients with chronic diseases in the Javadhu Hills and supplied their monthly medication during lockdown

While everyone was scrambling to stock up their refrigerators when the Tamil Nadu government announced the lockdown due to the outbreak of COVID-19, the members of the Community Health Department at Christian Medical College, Vellore, were up to something else. The doctors, nurses and health workers all sat down to discuss how to make sure their patients in rural and tribal areas with chronic diseases could get access to their daily medication. And well, they succeeded in doing just that.

"When we were informed that Section 144 was going to be imposed from the next day, the concern among the staff was that patients with chronic diseases such as diabetes, hypertension, seizure disorder and heart disease should not be at risk for complications arising from discontinuation of treatment because of inability to procure medications," Dr Vinod Abraham, Professor and Head of the Department of Community Health said. The health workers then came up with strategies to be carried out in two specific areas where people would have difficulty accessing their medicines.

"Six teams comprising nurses and health workers were rapidly organised to leave early morning on March 24 in order to return before the imposition of Section 144. A total of 28 villages were covered and about 500 patients were given their chronic disease medication for the next one month," Abraham informed. The team also said that there were 57 villages remaining with approximately 1500 patients with chronic diseases, "The areas will be covered over the next two weeks in a staggered manner to ensure that as many patients as possible will not be forced to discontinue their treatment because of the lockdown. This will also ensure that there is no crowding of patients in any location," he added.



CMC doctors putting together medicines ready for distribution

The Department has also been training health volunteers from 22 hamlets in the Javadhu Hills. So when it came to distributing material to them during the current scenario, the health workers had some help. "A different strategy was needed in the tribal area in view of the geographic terrain and the wide distribution of hamlets in this area. The department had identified and trained health volunteers from 22 of the hamlets who had been facilitating and enhancing the provision of health and developmental activities in the tribal area over the last 18 months," the doctor told us.

The team then extracted a list of patients and their required medication for the next one to two months from the health information system maintained by the department. "Then a large team of staff from the department packed and labelled medication for each individual patient. This medication was taken up to the tribal area in the hills on a single day and handed over to the health volunteers who will hand over the medication to the respective patients while following the appropriate steps in preventing transmission of infection even during the visits to the different hamlets," he explained.

With complaints of cops beating up people on the roads irrespective of what they're out there for and with transport cut off, residents in rural areas have little to depend on when it comes to acquiring their medication. We can only be thankful, that organisations like CMC are ensuring everyone is safe and sound, not just from COVID-19 but also from chronic ailments that they already have.

The Indian Express, 30th March 2020

A CMC Physician, shares his experiences:

"Every time I go on COVID-19 duty I am extra vigilant. In my mind, I keep rehearsing the steps for donning PPE. I'm determined to avoid unwanted contact and risk infection, especially as my wife is pregnant with our second child.



Once I enter the ward, my fears are set aside as I focus on my patients. Masks cannot hide the anxiety on their faces. I talk through my own mask and headgear, trying to reassure them. Usually I can communicate with body language and a compassionate touch. But now, they can only see my eyes.

Our patients are all alone as their family members have been sent away for home quarantine. We play the role of the family for them. We provide food, medicines and take care of their needs.

It is very difficult to be isolated for so long, especially during Easter or Ramzan when the community prays together. But we treat our patients with love and help allay their fears. We are privileged to walk the extra mile with them during these Covid times."

Story contributed by Dept of General Medicine

CMC Vellore's COVID-19 preparedness and response

In its 120-year-old history, Christian Medical College (CMC) Vellore has grappled with epidemics and pandemics. CMC began its preparation for the novel Coronavirus SARS-CoV-2 (COVID-19) pandemic from early January 2020, before the first case was reported in our country. The Hospital Infection Control Committee (HICC) brought out protocols for screening, triaging, quarantine, testing and treatment, based on available evidence, much before these were in place elsewhere. Several teams were created to equip and prepare the hospital to provide the best possible care for patients. These included the COVID central command team, mask and supplies committee, OPD/Triage team, COVID testing committee, Clinical team, Infection prevention and control team, COVID nursing task force, Staff Student Health Service and home quarantine, COVID Operating theatre and surgery team, Environmental cleaning and disinfection, Staff training team and Biomedical waste management team. These happened despite the financial challenges due to the drastically reduced patient numbers due to the lockdown.

CMC has been working with the local administration in Vellore and Ranipet Districts as well as the State Government of Tamil Nadu to create capacity to treat patients. The initial request from our Health Minister was the creation of 150 beds exclusive for COVID suspects and patients and the provision for free testing for patients who could not afford. Within the next few days it was evident that the needs would be far greater. Based on discussions with the Vellore District Collector, CMC has so far allocated 210 beds, including 36 ICU beds, in the main campus for patients presenting with influenza like illness (ILI) or severe acute respiratory infection (SARI). At the request of the Ranipet Collector to create additional capacity for Ranipet District, CMC is in the process of completing part of the work in the Kannigapuram campus to cater to up to 400 patients (including 62 ICU beds) in case the country witnesses a surge in the future. Presently on an average, around 30 patients are admitted in the SARI ward every week.

As policies evolved in the country, CMC has modified its protocols to align with all the policies laid by the government for testing and treatment, whilst ensuring that good care is provided for our patients. Most recently, an extension facility was created for the care of pregnant women who present with ILI or who come from high risk areas and for their new born babies to be cared for in specialised designated areas away from the main area. In fact, one paraplegic mother from another city, who was denied admission in various other hospitals came to us as a last resort and had a safe delivery.

The lockdown also resulted in patients being unable to visit the hospital for consultations. Following the guidelines laid by the Medical Council of India (MCI), after discussions with the authorities, tele-consultation services were started in CMC. Presently over 50 of our patients from various parts of the country who are on chronic medications use this service daily to receive important inputs on continuation of medications. This service is being ramped up.

The Departments of Community Health, Family Medicine and the Rural Unit for Health and Social Affairs (RUHSA) have been working among the local communities living in the villages, the tribal areas in Jawadhi Hills and the slums in and around Vellore. Their main concern was discontinuation of chronic medications for diabetes, hypertension and other medical problems. The healthcare teams have been visiting the villages on a regular basis and providing healthcare and medications to the communities.

In the areas covered by the Community Health and Development (CHAD) department, about 500 patients in 28 villages, were given their chronic disease medication for a month at the start of the lockdown. An additional 1500 patients with chronic diseases were covered over the next two weeks in 57 more



RUHSA staff member provides food to an elderly

villages. Further, with the permission of the local administration, the services in the mobile clinic were enhanced and 992 patients were seen over 12 clinic days.

A different strategy was needed in the tribal area. Medication was packed and labelled for around 250 patients by a large team of the staff, taken up to the tribal areas in just one day, and handed over to health volunteers for distribution.

The Low Cost Effective Care Unit (LCECU) of the Department of Family Medicine provides services exclusively for the poor and the slum dwellers of Vellore, in a 5-10 km radius around the hospital. Around 900 patients with chronic diseases are being followed up through the base hospital's initiatives. Health camps were also conducted in the regions around Vellore in the schools organised by the local administration.

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Nurses of the College of Nursing Community Health Department (CONCH) have been visiting patients with psychiatric problems at their homes to dispense monthly drugs.

RUHSA provides healthcare services to the K V Kuppam block. In the first two weeks after the lockdown, patients were delivered medication at home by a health worker. Later mobile outreach clinics were restarted to ensure that all persons on chronic disease treatment continue to receive care. Until the 15th of April, over 1000 chronic disease patients were reached through the special drug delivery system. Those reached through the mobile outreach clinics (16th to 27th April) numbered 425. Immobile patients in need of care were visited at their homes.

Rice and other essentials through contributions from within the Community Health Department were distributed to 75 people in the villages of the Kaniyambadi Block.

The LCECU has set up a food distribution program for more than 500 people in their low income, outreach areas to receive food packets, every day, for five days of the week. This is made possible through the joint efforts of donors, team members and community volunteers.

Six day-care centres for the elderly run by RUHSA have continued to function in order to provide lunch for the needy. Apart from this, more than 400 Individuals and families in the K V Kuppam Block who are especially vulnerable due to food insecurity are being supplied food items, to ensure better protein and fat intake until the next round of governmental support.

CMC is committed to serving its people as it has always done in the past. A significant amount of charity continues to be giv-



Pamphlets with information in Hindi and Bengali being distributed to patients in Gandhi Road

en to patients who are unable to afford treatment. For those who come to hospital, screening is done both at the outpatient and inpatient areas to ensure that our patients are appropriately triaged. COVID suspects and positives are treated in a separate block away from other patients who do not have ILI symptoms or who are tested negative for COVID-19.

All these measures have been instituted in our endeavour to provide a safe environment for our patients to receive treatment for their acute and chronic problems. It is our hope and prayer, that as a nation we will soon rise above these challenges.

Note: The statistics mentioned in this report include numbers sourced towards the end of April, during the second lockdown.

The complete article is available here:

<https://www.cmch-vellore.edu/Sites/Common/COVID/CMC-COVID-19-response.pdf>

CMC readies 400-bed facility in Ranipet for COVID-19 patients

To expand the capacity for management of COVID-19, the Christian Medical College (CMC) in Vellore is readying a facility to accommodate up to 400 patients on its new campus in Kannigapuram in Ranipet district.

The move is based on a request from the Ranipet Collector to create additional capacity.

“It is a new district with limited in-patient beds in the government sector and a minimal presence of private hospitals. In the first phase, we have readied two general ward floors. In the second phase, we are getting two more floors with 170-180 beds ready. The district administration has asked for an ICU facility that will be ready in two months,” said J.V. Peter, director of CMC.

On its main campus in Vellore district, CMC has allocated 210 beds, including 36 ICU beds, for patients presenting with Influenza Like Illness or Severe Acute Respiratory Infection. The institution began its preparation for the COVID-19 pandemic early January.

The Hospital Infection Control Committee brought out protocols for screening, triaging, quarantine, testing and treatment based on available evidence, he said.

The number of COVID-19 cases is low in the now trifurcated Vellore district — Vellore, Ranipet and Tirupattur districts. “Despite the actual numbers, Tamil Nadu has done very well with a phenomenal number of tests. Countries like Singapore and South Korea have demonstrated that when you do a lot of testing, we can isolate the cluster and manage them,” he said. Preparing for COVID-19 was a challenging task considering the huge inflow of patients. CMC put in place certain policies. It made use of masks mandatory for both public and healthcare professionals. Next was physical distancing.

“This was challenging due to the number of patients. But we have staggered OPD timings. For hand washing, we have installed wash stations with soap solutions at different points. No spitting is allowed on campus. We have also taken up screening of patients at the entrances,” Dr. Peter said.

“Our current thinking is that we will have designated green zones — certain areas in the hospital where we will have patients with absolutely no symptoms of COVID-19 or those who have tested negative. One block will be designated for COVID-19 suspects and patients,” he added.

Noting that Tamil Nadu was a destination for medical tourism, he said, “Persons from other States visit places such as Chennai, Coimbatore and Vellore for treatment. We need to create protocols on how we can manage such patients, how we can screen, isolate and test them. We are having a dialogue with the State government and our policies should be in alignment with the policies of the government.”

The institution is ramping up its tele-consultation services, while its departments of Community Health, Family Medicine and the Rural Unit for Health and Social Affairs (RUHSA) have been working among local communities in villages, tribal areas in Jawadhu Hills and the slums in and around Vellore, and providing healthcare.

Nurses of the College of Nursing Community Health Department have been visiting patients with psychiatric problems at their homes to dispense monthly drugs. Among other activities, medical and nursing students and fashion designing students from RUHSA have stitched more than 264 masks, 650 head covers and 70 pairs of shoes so far.

The Hindu, May 16, 2020

Dr. Ian Roberts-Thomson
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Please accept the enclosed donation of \$..... to the work of the Christian Medical College and Hospital at Vellore, India.

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(Donations are tax-deductible if made to the Vellore Christian Medical College and Hospital Support Fund)