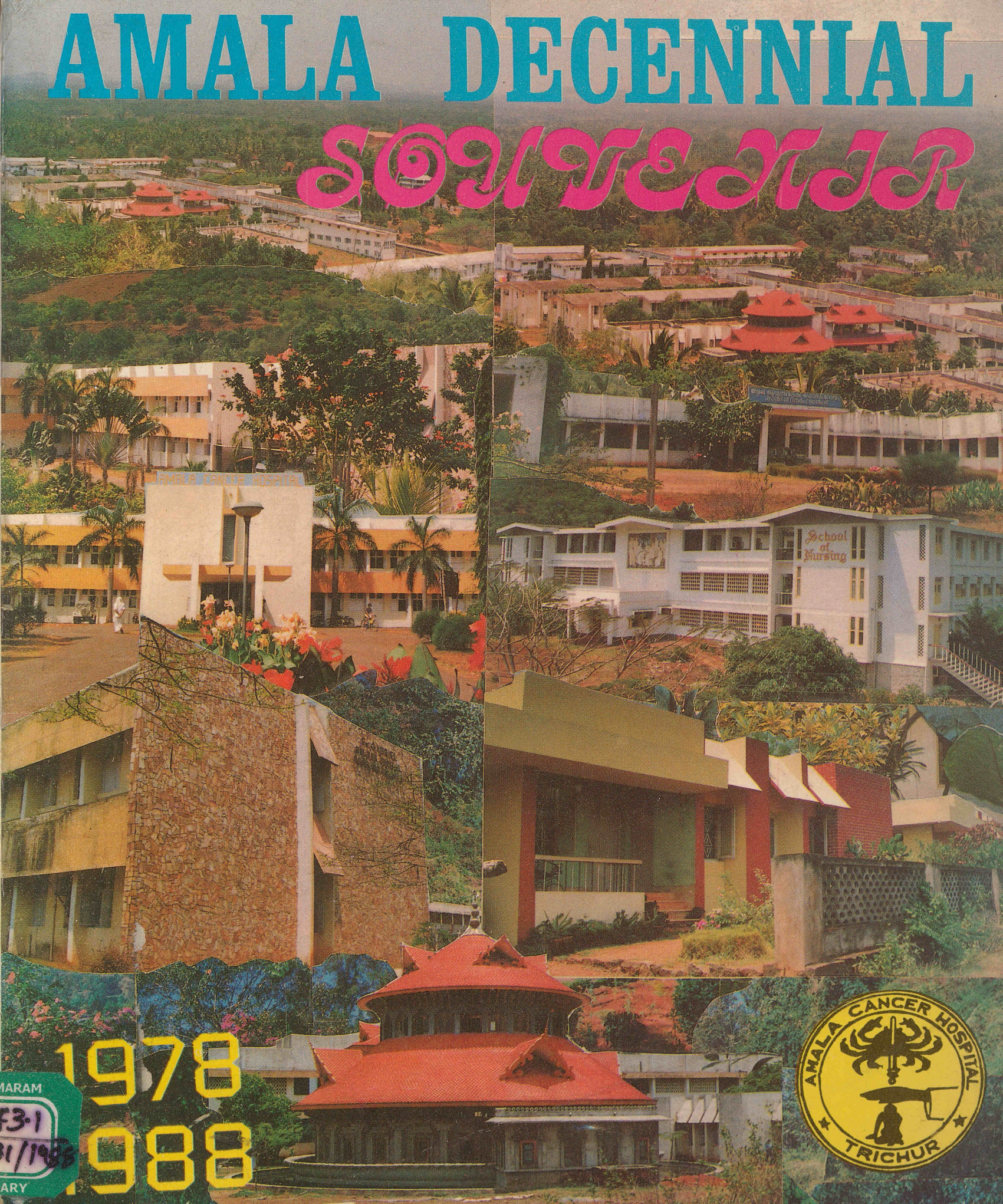
AMALA DECENNIAL SOUVENIR



1978
1988

AMALA CANCER HOSPITAL
TRICHUR

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AMALA

DECENNIAL CELEBRATIONS SOUVENIR

1988

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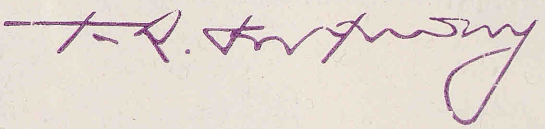
EDITOR

Dr. T. R. Sankunny

മരം തളിർക്കാൻ തുടങ്ങുമ്പോഴേയ്ക്കും ഒപ്പം മുളച്ച വള്ളി കളും പൂക്കുന്നതു പ്രകൃതിയൊരുക്കുന്ന പരിണാമവിസ്മയമാകുന്നു. അമലയുടെ വളച്ച് പരിശോധിക്കുന്നവർക്ക് ഇത്തരമൊരു പ്രതിഭാസത്തിന്റെ നിഴലാട്ടം കാണാനാവും; പത്തു കൊല്ലക്കാലംകൊണ്ടു പല പ്രസ്ഥാനങ്ങളും തളിർക്കാൻ തുടങ്ങുമ്പോഴും, ഒപ്പം മുളച്ച അമല പൂത്തുലഞ്ഞുനില്ക്കുന്നു ...

സേവനത്തിന്റെ പത്തു വർഷങ്ങളിലൂടെ നടന്നെത്തുന്ന അമലയുടെ വർത്തമാനവും ഭൂതവും ഭാവിയും ഉള്ളംകയ്യിൽവെച്ച നെല്ലിക്കപോലെ കാണിയ്ക്കത്തക്കവിധമാണ് ഈ കാണിയ്ക്ക സംവിധാനം ചെയ്തിരിക്കുന്നത്. ഇതിന്റെ നിർമാണത്തിൽ ഞങ്ങൾക്കുവേണ്ട സഹായസഹകരണങ്ങളെത്തിച്ചു തന്ന അമലയുടെ സുഹൃത്തുക്കളോട് ഹൃദയം നിറഞ്ഞ നന്ദി പറയാൻ ഈ അവസരം ഉപയോഗിക്കട്ടെ.

അമലയുടെ ദശവത്സരസ്മരണിക സവിനയം സഹൃദയസമക്ഷം സമർപ്പിക്കുന്നു.



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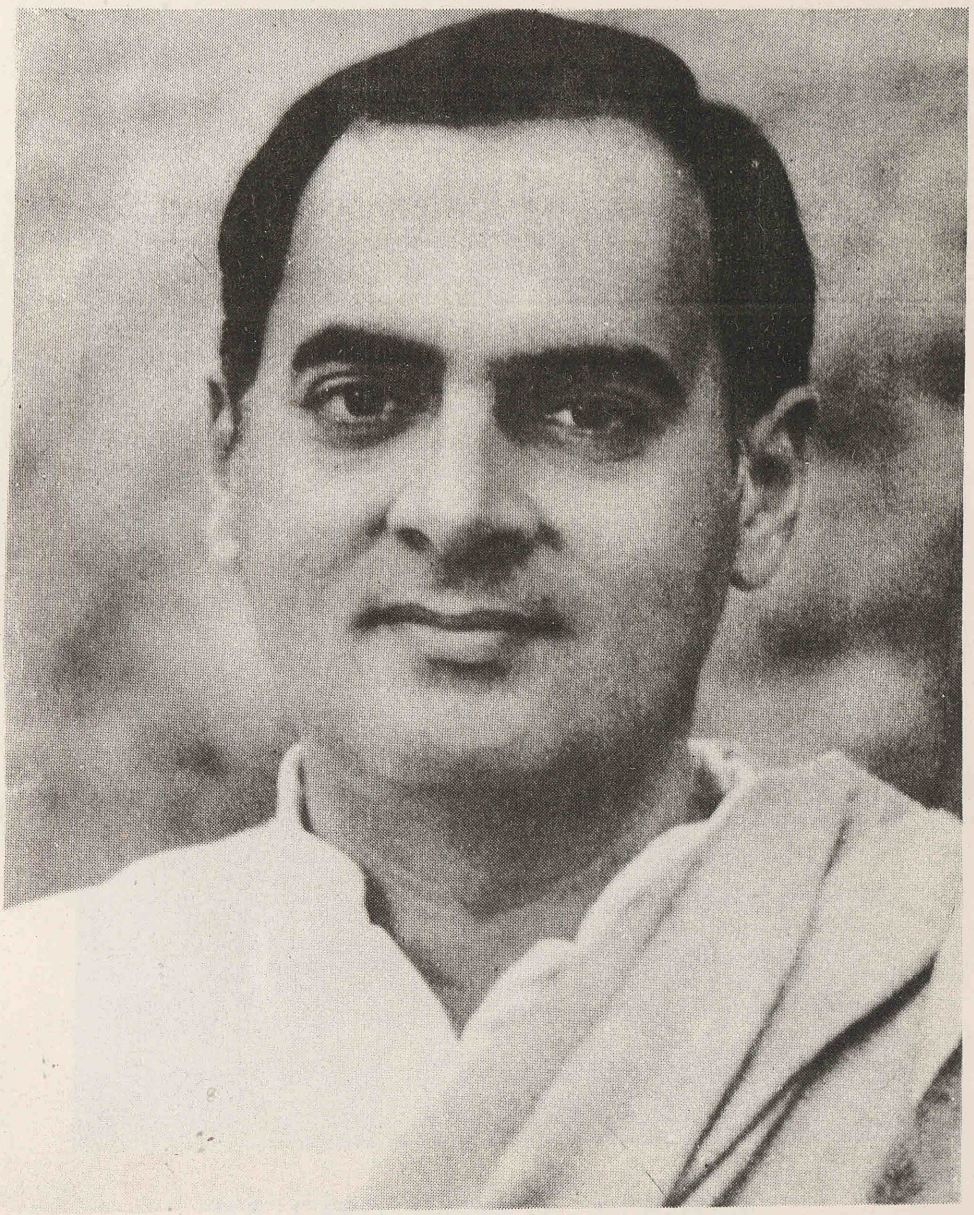
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AMALA - A DREAM CAME TRUE
RESEARCH ACTIVITIES OF AMALA
AMALA AYURVEDIC HOSPITAL
AMALA - VISION FOR THE FUTURE
AMAZING ACHIEVEMENT
ഒരു മഹാശയത്തിന്റെ സാക്ഷാത്ക്കാരം
ബഹുജനസമ്പർക്കത്തിൽനിന്നു
ഉരുത്തിരിഞ്ഞ ഒരു മഹാ സ്ഥാപനം
FLASH BACK – EVENTS OF AMALA
EXTENSION PROGRAMMES OF AMALA
AMALA AFTER A DECADE
ABSTRACTS & REPORTS
ADVERTISORS' ANNOUNCEMENTS



HIS HOLINESS POPE JOHN PAUL II



SHRI R. VENKITA RAMAN
President of India



SHRI RAJIV GANDHI
Prime Minister of India



H.E. CARD. SIMON D. LOURDSAMY



RT. REV. DR. JOSEPH KUNDUKULAM
Bishop of Trichur

MESSAGE

I am glad to understand that the Amala Cancer Hospital and the Research Centre has completed 10 years of very useful service to the people in Kerala. The progress this institution has made in such a short period of ten years is highly remarkable. Amala has grown into one of the best hospitals in Kerala as if it was existing there for the last hundred years. It provides the best treatment for Cancer which is its speciality.

I wish that the Amala Cancer Hospital and Research Centre grow to new heights at all levels in its effort to serve our people in alliviating their pain and suffering and bringing into their hearts Christ's peace and happiness. May God bless all who are concerned with this noble service.

Bp. Kundukulam

+ Joseph Kundukulam
Bp. of Trichur



FR. VIJAY ANAND NEDUMPURAM, CMI
Prior General

PRIOR GENERAL'S HOUSE
ERNAKULAM, COCHIN-682 011

APRIL 21, 1988

MESSAGE OF GREETINGS

I am glad to know that Amala Cancer Hospital and Research Centre is publishing a souvenir on the occasion of its Decennial Celebrations. Amala Cancer Institute is a Creative and innovative step taken by the Devamatha Province of the C.M.I. Congregation. Father Gabriel CMI and his collegues deserve praise and congratulations for their dedicated work and sensitivity to the needs of the people of our times.

Scientists all over the world battle to conquer the killer disease, Cancer. I hope and pray that the Cancer Research Centre at Amala may make significant contributions in the field of cancer research, with an emphasis on indegenous and low cost methods of treatment.

With prayerful best wishes,

Yours devotedly in Jesus,

Fr. VIJAY ANAND NEDUMPURAM, CMI
Prior General.



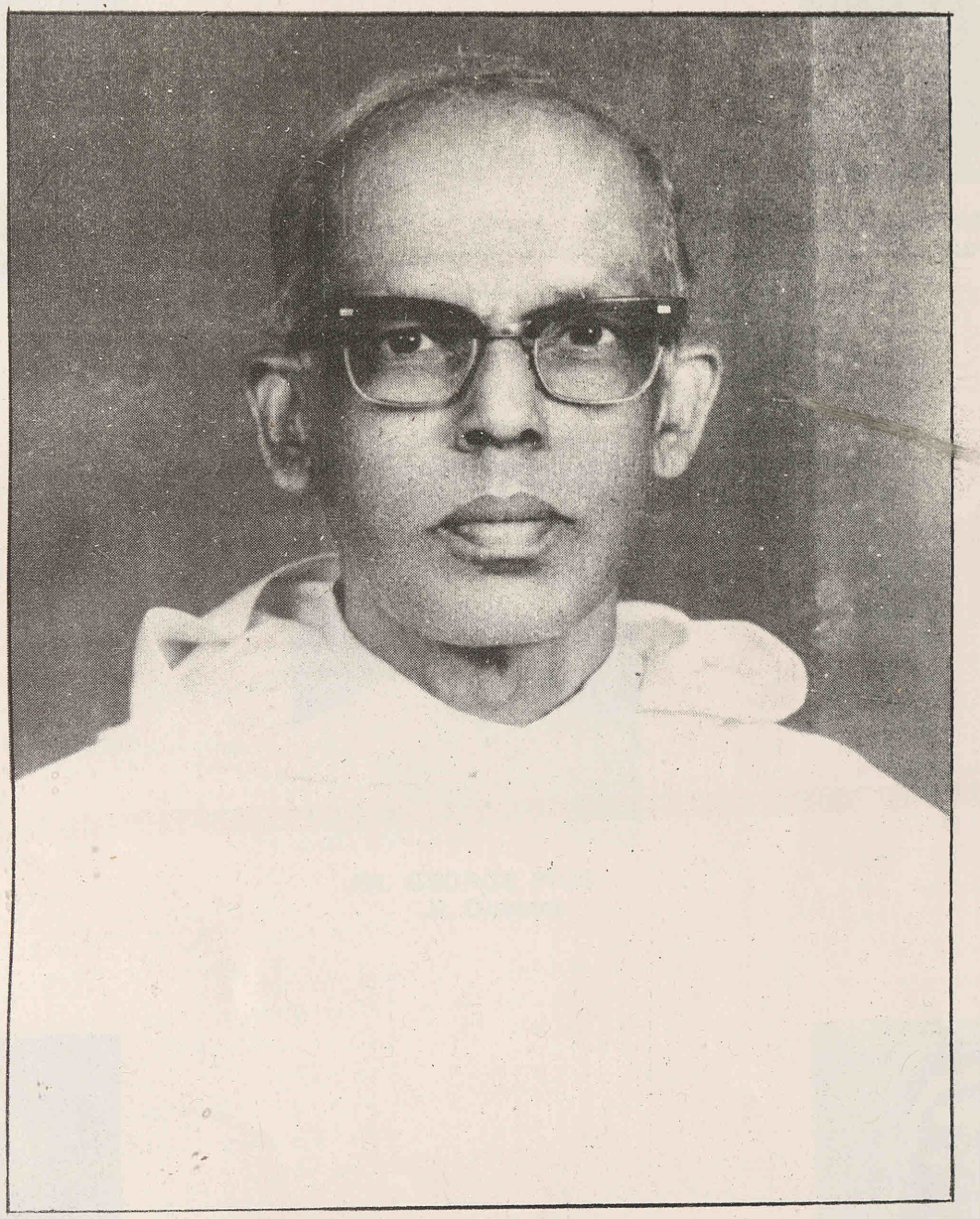


FR. ALEX UKKEN, CMI
Provincial

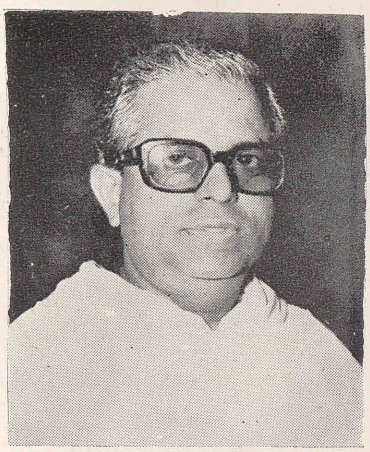
സന്ദേശം

അമലയാരംഭിച്ചിട്ട് പത്തു വർഷം തികയുന്ന ഈ ശുഭമുഹൂർത്തത്തിൽ അതിന്റെ സ്മരണ നിലനിർത്തുന്നതിനായി ഒരു സ്മരണിക ഇറക്കുന്നതു സമുചിതം തന്നെ. പത്തു വർഷം കൊണ്ടുണ്ടായ അമലയുടെ വളർച്ച അത്ഭുതാവഹമെന്നു് ആരും സമ്മതിക്കും. ക്രാന്തദർശിയായ ബ. ഗബ്രിയേലച്ചന്റെ കഴിവും മറ്റുള്ളവരുടെ സഹകരണവും ഇതിന്റെ വളർച്ചയിൽ സാരമായ പങ്കുവഹിച്ചിട്ടുണ്ടു്. അനേകായിരങ്ങൾ, പ്രത്യേകിച്ചു് കാൻസർ രോഗികൾ ഇന്നു് അമലയിൽനിന്നു് ആശ്വാസം തേടുന്നു. അമല ആയിരങ്ങൾക്കു് ആശ്വാസമേകി അനേക വർഷങ്ങൾ സേവനത്തിന്റെ പാതയിലൂടെ മുന്നോട്ടു് പോകുവാൻ നല്ല ദൈവം ഇടവരുത്തട്ടെ എന്നാശംസിക്കുന്നു.

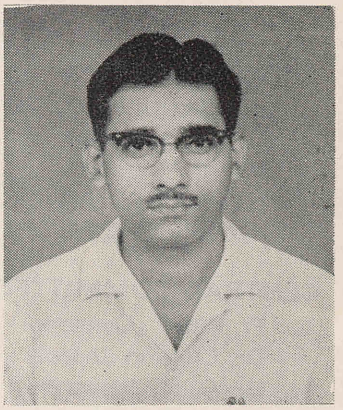
ഫാ. അലക്സ് ഊക്കൻ സി. എം. ഐ.



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Founder & Director



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Administrator Ayurveda Unit



DR. CHERIYAN JOSEPH
Medical Superintendent



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MESSAGES



On the occasion of the tenth anniversary of the Amala cancer centre I wish to offer my best wishes for the further progress of the institution. From small beginnings it has grown to be one of the biggest institutions in the state for treatment of the dreaded disease of cancer. But for the dedicated and hard work of the CMI fathers it would not have been possible to achieve such progress within a short space of time. They have been able to collect lakhs of rupees from the public of the state, they have been able to get one Cobalt Unit as a gift from the Govt. of India and another one as a donation from some German charitable trust. Besides the cancer Hospital they have built a small hospital for the treatment of ordinary diseases also which has proved to be a boon to the people of the locality. One has to specially commend the clean and beautiful up keep of the hospital and the dedicated service rendered to the patients.

I once again wish the institution all success and hope to see it developing still further.

Trichur
2/7/88

Sd/-
C. Achutha Menon

Trivandrum
May 24-1988

K. KARUNAKARAN
Leader of opposition, Kerala



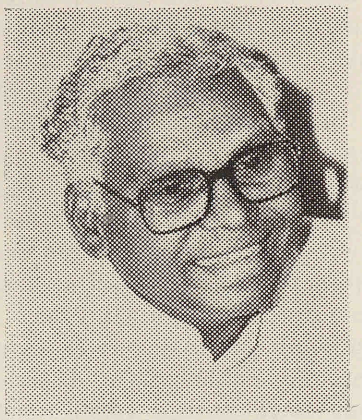
'അമലാ കാൻസർ ഹോസ്പിറ്റൽ ആൻറ് റിസർച്ച് സെൻറ'റിൻെറ ശതാബ്ദി ആഘോഷങ്ങളോടനുബന്ധിച്ച് ഒരു സ്മരണിക പ്രസിദ്ധപ്പെടുത്തുന്നു എന്നറിഞ്ഞതിൽ സന്തോഷമുണ്ട്.

ആതുരസേവനരംഗത്തു് അമലാ കാൻസർ ഹോസ്പിറ്റൽ ആൻറ് റിസർച്ച് സെൻറിൻെറ സംഭാവന ഇതിനകം അംഗീകരിക്കപ്പെട്ടുകഴിഞ്ഞിട്ടുള്ളതാണു്. ഭാവിപ്രവർത്തനങ്ങൾക്കും ഞാൻ എല്ലാ ഭാവുകങ്ങളും നേരുന്നു.

സ്മരണികാപ്രസിദ്ധീകരണത്തിനും എൻെറ ആശംസകളും.

Sd/-
(കെ. കരുണാകരൻ)

MESSAGES



Minister Of State
Science & Technology, Atomic Energy,
Space, Electronics & Ocean Development
Government of India

19th April, 1988

I am glad Amala Cancer Hospital and Research Centre is bringing out a Souvenir highlighting the work of the Centre during the last ten years. The Centre has established excellent medical and research facilities to serve the people of the area in fighting cancer. The pioneering research being conducted at the Centre is of high quality and can be described as part of the world-wide effort to find a solution to the threat of the dreadful disease of cancer. I am glad that the Amala Centre is also taking steps to propagate among the people preventive measures against the incidence of cancer.

My best wishes to the successful functioning of the Centre in the years to come.

Sd/-
K. R. Narayanan

Deputy Minister
Information & Broadcasting
India, New Delhi-110001

May 17, 1988.



I am glad that Amala Cancer Hospital and Research Centre is celebrating its Decennial Anniversary. It is only due to the dedicated efforts of institutions such as Amala Cancer Hospital that Kerala State has been able to record the best health status for its people in the entire nation.

On the occasion of the Decennial Celebrations I wish Amala Cancer Hospital and Research Centre the very best and I hope it would continue to strive for the betterment of the health of the people of the State.

Sd/-
S. Krishnakumar

MESSAGES



A. K. ANTONY,
President,
Kerala Pradesh Congress
Committee (I)

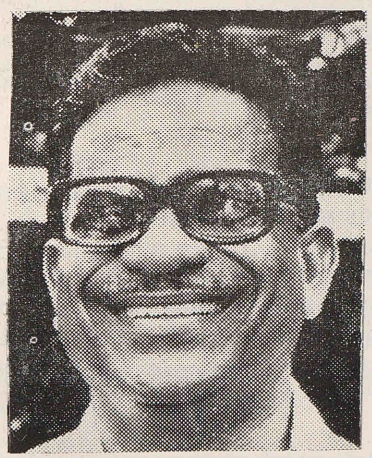
Indira Bhavan,
Trivandrum-10.
25-4-1988

I am happy to learn that Amala Cancer Hospital & Research Centre is completing ten years of noble service this year and it is proposed to bring out a Souvenir in this connection highlighting your achievements. The yeomen service rendered by your hospital is praise worthy and hope you will continue your service for the betterment of thousands of cancer victims.

I wish your institution and the Souvenir all success.

With regards,

Yours sincerely,
Sd/-
(A. K. ANTONY)



V. V. RAGHAVAN
Minister for Agriculture

Trivandrum
19-5-1988

I am extremely glad to know that you propose to publish a Souvenir in connection with the Decennial Celebrations of Amala Cancer Hospital & Research Centre. I hope that the publication shall be of much public use radiating the vistas of medical knowledge and information.

Let me share your hard-earned cause of joy.

Yours sincerely,
Sd/-
(V. V. RAGHAVAN)

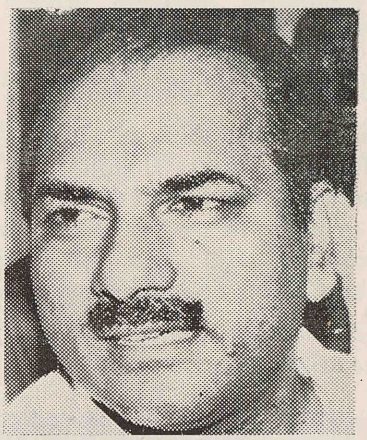
ലോനപ്പൻ നമ്പാടൻ
ഭവനനിർമ്മാണവകുപ്പ് മന്ത്രി

തിരുവനന്തപുരം
തീയതി : 19-5-1988

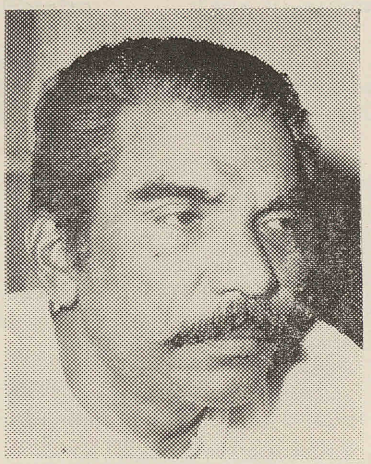
അമലാ കാൻസർഹോസ്പിറ്റൽ ആൻറ് റിസർച്ച് സെൻറർ ദശവാഷ്കികാഘോഷത്തോടനുബന്ധിച്ച് ഒരു സ്മരണിക പ്രസിദ്ധീകരിക്കുന്നു എന്നറിഞ്ഞതിൽ സന്തോഷിക്കുന്നു.

മനുഷ്യസമൂഹത്തെ ഭീതിപ്പെടുത്തുന്ന അർബുദരോഗത്തിൻെറ പ്രതിരോധത്തിനും നിവാരണത്തിനുമായി ഈ സ്ഥാപനം നടത്തിവരുന്ന ബഹുമുഖപ്രവർത്തനങ്ങളും ഏവരുടേയും മുക്തകണ്ഠമായ പ്രശംസയ്ക്ക് വിഷയീഭവിച്ചിട്ടുണ്ട്. ഈ പ്രവർത്തനങ്ങളുടെ വിജയത്തിനായി യത്നിച്ച എല്ലാവരേയും അനുമോദിക്കുന്നതോടൊപ്പം പുതിയ ഉദ്യമങ്ങൾക്ക് എല്ലാ ഭാവുകങ്ങളും നേരുകയും ചെയ്യുന്നു.

Sd/-
ലോനപ്പൻ നമ്പാടൻ



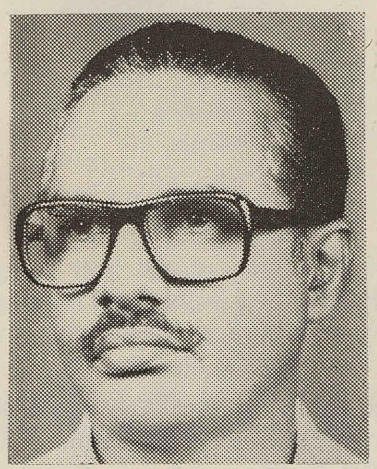
MESSAGES



Sri. Baby John,
Hon. Minister for Irrigation, Kerala State

"...I am sure the people of Kerala can be proud of this institution. Amala Hospital has made great progress during these past ten years. I am sure that it will keep growing in serving the people of Kerala through continued dedication and service. I wish Fr. Gabriel and all his coworkers every success."

(From speech made in connection with the Decennial Celebrations of Amala)



Sri. A. C. Shanmukhadas,
Hon. Minister for Health, Kerala State

"...I am glad that Amala Cancer Hospital and Research Centre is making progress in the service of the country....The important thing about a hospital is that it stands for catering to the needs of the ordinary people. All modern facilities should be made available to all people. I am happy to note that Amala Cancer Hospital is one of such private hospitals which is aware of its role and do great service..."

(from speech made in connection with the Decennial Celebrations)



Sri. K. Chandrasekharan,
Hon. Minister for Education, Kerala State

"I have always been happy to visit Amala Cancer Hospital and Research Centre, which is doing wonderful service to this country. Under the leadership of Fr. Gabriel and Fr. Pius, and the untiring service given by the Doctors, Nurses and other staff of the Hospital, this institution has made great progress within this short span of ten years. I wish this Hospital every success..."

(from speech made in connection with Decennial Celebrations)

Sri. J. Chitharanjan,
Former Minister of Health, Kerala

"...I am glad to note that a big cancer Institute is coming up here. This institution will be a boon to the large number of persons who may have Cancer infection, I wish all progress and success to this institution." (9-7-'77)

MESSAGES

N. N. Vanchu, Former Governor of Kerala

"...I am happy to see the very good progress in construction of the Amala Cancer Hospital. When completed, it should provide a greatly needed facility in this part of the country. I hope the desire of the organisers and the patrons of the hospital to convert it into one of the finest cancer hospitals in the world will be fulfilled. I wish them all success in the great humanitarian endeavours" (11-9-1977)

Hon'ble Justice P. Subramaniam Potti

"I see the beginnings of a great institution here. The promoters have a true perspective of the future so much so their vision is bound to be realised. Though modern medical sciences can combat cancer reasonably, the common man rarely gets the benefit of all the progress that has been achieved in the field of research in cancer...The birth of the institution here is a great boon not only to the people of Kerala but the whole of India. I have no doubt that this will grow into a prestigious treatment Centre of national acceptance." (25-9-'77)

Sri. Raj Narayan,
Late Union Health Minister of India

" Let this institution prosper and keep the general public healthy. These are my sincere wishes." (4-11'77)

Sri. Neelam Sanjeeva Reddy,
Former President of India

Best wishes to Amala Cancer Hospital.
(25-4-1978)

Sri. K. C. Abraham,
Former Governor of Andhra Pradesh

"I was greatly impressed by the neat and careful arrangements. It is a growing hospital for cancer treatment. When fully developed, it will be a unique institution of its type in Kerala. I wish the institution will soon grow up to be of great benefit to suffering humanity." (7-8-1978)

Sri. Bharathan Pillai,
District Governor, Lions Club

".. Amala-This is a great institution run by dedicated service - minded men under the able and dedicated leadership of Rev. Fr. Gabriel. I am sure Amala will become a truly great Institution in the world. I wish Amala all success." (5-11-1978).

Sri. N. Kaleeswaran, IAS, former Vice-Chancellor, Kerala Agricultural University, Trichur

"I was much impressed by the great progress made within a very short period in the development of Amala Cancer Institute. Although the progress appear to the work of the genius of Aldin's magic lamp, the tireless efforts put in by Fr. Gabriel, his collegues and coworkers form the basis for this magnificent progress. May God shower the blessings on the efforts of these pioneers. My best wishes." (29-12-'78)

His Grace Abp. Luciano Storero,
Apostolic pronuntio of India

"With my heartfelt congratulations best wishes for the future." (1-1-1979)

Rt. Rev. Dr. Seth, the CSI Bishop, North Kerala

"I am extremely pleased to come and visit the Amala Cancer Hospital today. I thank God for the progress which the hospital achieved for so short a period. The Dedicated service of Fr. Gabriel and Fr. Pius are worthy to be noted. May God our loving Father bless them in their endeavour to continue His healing ministry in this place." (24-1-'79)

Mr. C. Huebener, German Consul General, Madras

"On the occasion of my first visit to the Amala Cancer Hospital I should like to express my sincere admiration for the wonderful results already achieved and the great dedication of the entire staff. I wish the hospital and its staff the very best success in their work."

MESSAGES

Sri. P. K. Vasudevan Nair,
Former Chief Minister of Kerala

"I am very happy to have visited Amala Cancer Hospital and Research Centre. I consider this institution to be a very significant one with a great future. I am sure that this hospital will develop as one of the best in India. I wish the Institution all success." (18-3-1979)

Sri. C. H. Mohamed koya,
Former Chief Minister of Kerala

"I visited this wonderful institution. All philanthopists and the Govt. should lend a helping hand to this useful institution." (26-11-1979)

Mr. C. M. Stephen,
Former Union Cabinet Minister for Communication

"A great institution, humbly began, grandly conceived and progressively rising - my salutations to the sense of service and dedication that motivates it. Cancer is today a frightening scurge to those who come under its menacing grip. To those afflicted and their number is increasing-here is a healing touch and a fountain of love. I find the staff dedicated, the patients satisfied, the premises tidy and look of confidence for the future on the face of all who are in charge. May merciful God guide it forth by his kindly light." (20-4-80)

Sri. Vakkom Purushothaman,
Former Minister for Health and Tourism, Kerala State

"I am extremely happy to note that the progress of this institution is tremendous within a short period. It is well planned and I am sure that this will come up as a model Cancer Institute which can compete with any national institutes of this country. I wish the institution all success." (3-5-1980)

Mr. Pranab Mukherjee,
Former Union Cabinet Minister

"I am glad to have the opportunity of visiting this institution. This is a standing symbol of determination and will of a few persons who were determined to build it up with the help and assistance of public. The establishment of such a complex within such a short span of time is very encouraging. I congratulate the promoters of this organization for building up such a nice institution. I wish them all success in this mission...."

Mr. P. C. Alexander,
Present Governor of Tamil Nadu

"I had heard a good deal about Amala Cancer Centre. I am indeed glad that I have the opportunity today to visit this centre and see the facilities it offers to the patients. I am indeed happy that the entire project is financed by the donations from the public and a few individuals. I desire the centre many many years of useful service." (1-2-1983)

Rt. Rev. Dr. Joseph Kelanthara,
The late Archbishop of Verapoly

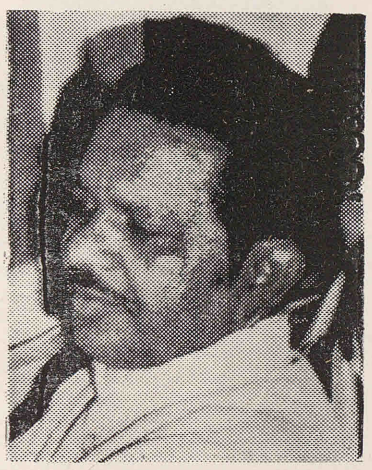
"...I am happy to visit the Amala Cancer Hospital and meet with the Director Rev. Fr. Gabriel CMI and the chief medical officer and the other Doctors and the Sisters and the nursing staff and all the other members who offer their kind services to the hundreds of patients who come here for medical care. It was a great chance for me to meet several of the patients and speak with them.

The mission of Christ, specially to the less fortunate and the most needy is being carried on through kind and efficent medical hands. My prayer is that may Our Lord himself extend to the doctors and the patients his loving call and blessing I shall continue to pray for all ..." (Nov. 22, 1984)

Rt. Rev. Francis Kallarackal, Bishop of Kottapuram

"I am so happy to come and see this hospital. It is so clean and tidy. I wish and pray that God bless this hospital and all those who are rendering their selfless services." (11-5 88)

MESSAGES



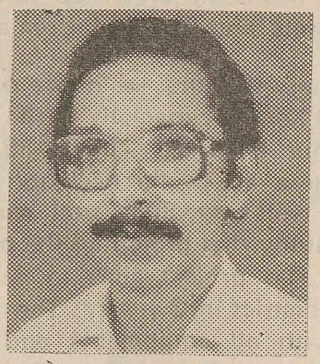
Extremely happy to Visit the Amala Hospital. An excellent example of devotion and duty to the suffering humanity.

B. Shankarand
Union Health Minister
New Delhi
15-10-1981

ഇന്നു രാവിലെ 10½ മണിമുതൽ 11½ വരെയുള്ള സമയത്തു് അമല കാൻസർ ഹോസ്പിറ്റൽ & റിസേർച്ചു് സെൻറർ സന്ദർശിക്കുവാൻ കഴിഞ്ഞു. ഇത്രയും നന്നായി കാൻസർ രോഗശമനത്തിനും മറ്റു രോഗനിവാരണത്തിനുംവേണ്ടി ചികിത്സിക്കുന്ന ഉയർന്ന നിലയ്ക്കുള്ള ഒരാശുപത്രി കേരളത്തിൽ ഇല്ലെന്നുള്ളതാണു് യാഥാർത്ഥ്യം. അശരണരായ രോഗികൾക്കും നാട്ടുകാർക്കും സൗജന്യചികിത്സയടക്കം ലഭിക്കുന്ന ഈ സ്ഥാപനം ഉയർന്നുവരുമെന്നും ഈ സ്ഥാപനത്തിനു ഗവണ്മെൻറിൻെറ എല്ലാതരത്തിലുമുള്ള സഹായവും അർഹിക്കുന്നുണ്ടെന്നും ഈ ഘട്ടത്തിൽ പ്രസ്താപിക്കാൻ ഞാൻ ആഗ്രഹിക്കുന്നു. ഡോക്ടർമാരുടേയും നേർസുമാരുടേയും മറ്റു ജീവനക്കാരുടേയും സേവനവും പ്രവർത്തിയും ഈ സ്ഥാപനത്തിൻെറ മേന്മയും കഴിവും വർദ്ധിപ്പിക്കുന്നതിനു സഹായമായിത്തീരുന്നുണ്ടെന്നും മനസ്സിലാക്കാൻ കഴിഞ്ഞു. അവർക്കും എൻെറ അഭിവാദനങ്ങളും.

എൻെറ ഭാവുകങ്ങളും

ഇ. കെ. നയനാർ
ചീഫു് മിനിസ്റ്റർ, കേരള സ്റ്റെയ്റ്റു്
22-8-'81



Prof. John Cyriac

AMALA

A Dream Came True

'I have a dream', said Fr. Gabriel when the idea of a Cancer Institute was conceived. And the dream came true. Amala Cancer Hospital & Research Institute is the dream realization not only of the untiring Director but of the Kerala Cancer Society and of millions of people in central Kerala.

Though cases of the elusive cancer devil was spreading, facilities meagre as they were, were limited to the extreme ends of the State, leaving central Kerala practically without any facility for early detection and effective check of it.

This prompted the Kerala Cancer Society to action. But due to limitations, they could not deliver the goods They then started looking for a competent agency. Thereon it became a combined venture on the part of the Kerala Cancer Society and the Devamatha Province of the C. M. I. Congregation.

The Province under the innovative leadership of the Provincial Fr. Gabriel did deliver the goods with miraculous efficiency and speed.

That was exactly ten years back.

On the lush slopes of the sleepy Vilangan hills, an extensive airy stretch of about 35 acres of scenic splendour, inauguration of the construction work took place on the 19th September 1976.

Steadily did Amalagiri grow into a self-contained township housing the prestigeous Amala Hospital. The Cancer Institute, the Ayurveda Hospital and Research Centre, the School of Nursing, the Spiritual Centre, a School and a number of ancillary institutions.

Though the Kerala Cancer Society was founded in 1973, it could not make much headway in establishing a Cancer Institute which was the society's first love They came in contact with Fr. Gabriel who had taken up Provincialship of the Devematha Province, on retirement from Christ College as its Principal. Fr. Gabriel had a proven prowess to take up challenging tasks. And he was the right person to venture into an unchartered course.

Formidable were the hurdles and legal formazlities to cross over before a joint enterprise of this sort between two Societies could be taken up. Funds and personnel posed problems. But gradually thanks to the relentless efforts and united work of sponsors, funds and patronage began to drizzle down like summer showers

Once started, work went fast. On 25th March 1978, AMALA became a reality. Since then, over the decade Amala was growing in age and excellence to become one of the most modern house of succour for thousands of cancer patients in central Kerala.

Amala Hospital today, consists of departments such as Oncology, Medicine, Surgery, Gynaecology and Obstetrics, orthopaedics, Dental Surgery, Pathology and Anaesthesiology. All the specialities have spaceous out-patient departments and modern facilities in the Wards and rooms.

Amala's radiation therapy is highly sophisticated in equipment and lay out. Radiotherapy, chemotherapy and cancer surgery are available in this department. Equipped with the latest facilities like Cobalt therapy units, Selectron, Brachytherapy, Operation theatres, Cardiac monitors, the Oncology department effectively fills the vacuum in cancer therapy, in central Kerala. Amala cares for the weaker sections of the society by earmarking 25% of the treatment facilities for the deserving ones free of cost.

Amala has joined hands with thousands of researchers, the world over in finding out the effective remedy for the killer disease. The Research wing is being governed by eminent scientists, representatives of State & Central Governments and various Universities. It is a place where more than a dozen research fellows burn midnight oil trying to find out an oncogenic virus associated with oral carcinoma, isolation of tumour associated antigens, protection against side effects of anti-cancer drugs etc. The Fellows work under conducive conditions and under Professors outstanding in their respective fields.

Under the mature guidance of Dr. D. M. Vasudevan, the Director, and other senior scientists like Dr. K. R. Panikkar, Dr. Ramdas Kuttan and Dr. Isaac Chackalaparampil the Research wing has made considerable achievements. Most of the members of staff regularly present papers in seminars. One of the research students, Mr. P. R. Varghese has been the recipient of the prestigeous young Scientist's award.

Ayurveda wing is another major field where Amala has laid her hand. Treatment and research are done in the ancient Indian medicines. Efforts are on in this field too, to find out an Indian cure for cancer. Panchakarma theatre for the traditional Kerala treatment of Uzhichil, Dhara etc, a green house and herbal garden for valuable medicinal plants are some of the features of Ayurveda Research Centre. Plan has been drawn up to start a Health resort for patients and the aged from abroad.

Studies show that the incidence of oral cancers is very high in Kerala especially in the rural coastal areas of Trichur District. Nearly 35% of cancer cases in this area are in the neck and head region and of which well over 30% oral cancer. It was this startling study that prompted the project Mobile Ambulance. The project aims to screen 3 lakhs people in the district in 3 years. The mobile Dental Ambulance with all equipments and facilities for oral examination and dental check up and service for ealry detection of mouth cancer goes to the people with effective treatment facilities and a mobile mission.

The Rural Medical Mission programme has taken quick steps in providing timely medical care to the interior villages and tribesmen of Vettilappara and Varandirappilly Panchayats. Health service and village improvement programmes will soon be extended to Vadakkumchery of Palghat district and Ponnani of Malappuram District. The nearby health centre now provide them treatment by qualified medical personnel. Children are given immunization vaccination. Qualified social and health workers regularly visit the beneficiaries in their houses and carry out health education to promote integral development of the entire community.

Project comfort is a low cost supportive therapy programme to improve the quality of life of the ambulatory cancer patients. Much long and careful study has gone in formulating this project into the physical and psychological conditions of the helpless cancer patients during their days of dejection. Accordingly the project concentrates on personal hygiene improvement scheme, ward prayer programme and recreational and diversionary activities scheme. The project has contributed positively to improve morale of cancer patients. Integrationof high technology with the highest form of compassion has been the motto of the oncology section and project comfort marks a small but significant achievement towards the noble goal.

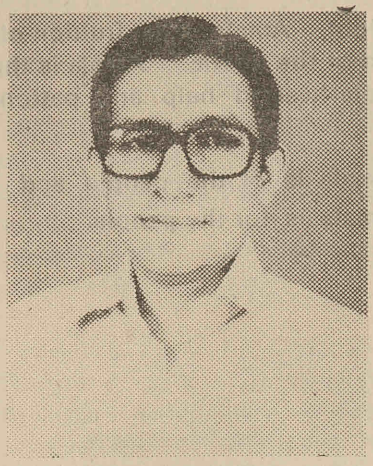
Amala has friends and patrons all over the world. Most of the funds came from compassionate individuals and organizations. Governments both State and Central were generous towards various noval schemes chalked out by the organisers. There are groups of people voluntarily organised themselves to

help Amala with advice, suggestions and cash. They call it the Amala Fellowship. There are at present eleven fellowship units in Trichur District and beyond. They too are responsible for the rapid growth of this house of mercy.

Amala is much more than a hospital. She is an institution with a heart. She responds to the call of the people and the times. When so many people come calling for pioneering work and with hearts full of enthusiasm, how but one can dare into ventures despite odds and hurdles, asks Fr. Gabriel.

He is right. Amala is the fruition of the concerted demand of the public. Amala is the blossming of the whole-hearted help and patronage of the people.

Amala is of the people and
Amala is for the people.



Dr. D. M. Vasudevan

Research Activities of the Amala Cancer Research Centre

Cancer is already a major health problem in Kerala. It is reported that cancer is the second commonest cause of death in major hospitals of this state. The two major factors contributing to escalation of cancer incidence are the control of communicable diseases and increased life expectancy. Both these factors are operating in Kerala. At this rate, cancer is likely to emerge as the most important public health problem in the next few years. Such a changing pattern of disease, calls for a radical change in the planning of our health care delivery system. Cancer being such an emigma that any arguments on the relevance of cancer research will only be superfluous.

It is obvious that this is the appropriate time to develop futuristic programmes to implement primary and secondary prevention of cancer, to install modern therapeutic measures and to organise research in the various aspects of cause and prevention of cancer. Our aim is to establish a centre par excellence in the field of applied research relevant to cancer problems of this region.

The Amala Cancer Research Centre was registered as a separate Society on 21.3.1984, in compliance with the recommendation of the Dept. of Science & Technology to have a separate Society for the Research Centre with a Governing Body having a predominantly research personnel.

Physical facilities:

The new Research block constructed has a space of about 5000 sq.ft. and it houses the research units of Biochemistry, Immunology, Virology, Radiobiology, Tissue culture as well the applied research laboratories of Histopathology, Cytology, Microbiology and Cytogenetics.

Finance:

Major equipments worth Rs. 25 lakhs were purchased for basic research and for Rs. 35 lakhs for clinical and applied research.

The huge financial outlay involved in this challenging job is met by the donation given by philanthropic individuals and institutions and by project–oriented grants given by Dept of Science & Technology, Govt. of India; Indian Council of Medical Research, Council for Scientific & Industrial Research and the Kerala Government.

Recognitions:

The Research Centre has been recognised by the University of Calicut and Mahatma Gandhi University

for Ph.D programmes in various basic medical sciences. There are 4 research guides, 2 post-doctoral and 10 Ph.D research scholars. I am very happy to state that the Amala Cancer Centre has been recognised by the ICMR as a Research Institution after considering our present research activities and future potentialities. The 12th National Conference of the Indian Immunology Society was held at our Research Centre in December 1985 in which 250 delegates, eminent scientists from India and abroad participated. In December 1986 an Indo-US Workshop on Viruses and Human Cancers" was conducted at Amala Cancer Research Centre. Nine eminent American and 12 leading senior Indian scientists and 15 active researchers from various states of country participated in this workshop. The latest honour conferred on this Institution is the IInd Group Monitoring Workshop of the DST on Medical Biology convened in January 1988. These workshops have fostered a greater opportunity for technology transfer, exchange of scientific ideas and research results.

Dr Sunil Kumar, Ph. D, a Senior Research Scholar in our department has been recognised by the ICMR Award, for his original work done in our laboratory on Radiobiology, showing that drugs such as MPG and WR-2721 impart protection against radiation induced mortality in animals.

Mr. P. R. Varghese, our research scholar won the unique distinction of becoming the first scientist working in Kerala to get the Young Scientist Award of the Indian Science Congress Association for his paper "Dermatoglyphics as a preclinical marker in Breast Cancer".

Ongoing reseasch activities:

a) Search for new anticancer drugs:

A few plant extracts are being studied for their cytotoxic activity against cultured mammalian tumour cells as well as in tumour bearing animals. Cytotoxicity of the alcoholic extracts from 8 different spices used in Indian diet have shown inhibition of cell growth at considerably low concentration. The extract of garlic was found to protect animals from the side effects of radiation and chemotherapy. Curcumin, the active ingredient of turmeric (Curcuma longa) was found to be cytotoxic to tumour cells in vitro and liposomal encapsulated Curcumin reduced the growth of ascites tumour in mice. Using Ame's test the antimutagenicity of Curcumin and turmeric have been established. A cytotoxic peptide has been isolated using biochemical separation techniques from the mistletoe extract, Iscador and was found to be highly cytotoxic to tumour cells sparing normal lymphocytes.

A potent protein biosynthetic inhibitor was demonstrated in Sandal (Santalum album). The sandal leaves and seeds also contain a lectin whose nature is being elucidated. Studies have revealed that out of several locally available ferns, the 'silver fern' (Pityrogramme Calomelanos) is effective against Dalton's ascites as well as Ehrlich ascites tumour cells.

The cytotoxic principle isolated from leaves and flowers of Ixora Javanica was separated by thin layer chromatography into 3 tractions all of which inhibited the development of ascities tumour in mice and reduced growth of solid tumours. Thymidine uptake studies hinted that the mechanism of action might be at the level of replication of DNA synthesis. The seeds of Carum bulbocastanum were found to contain a highly cytotoxic substance, and the 3 active components isolated by TLC gave 100% cytotoxtcity of tumour cells *in vitro* and significant reduction of tumour growth in mice. The seeds of Concavalia virosa are used in the treatment of scorpion-centipede stings by the tribals of Bastar. A lectin from these seeds has been isolated by affinity chromatography and is being purified.

b) Tumour Immunology/Biology:

We have already established transplantable tumour lines in mice. A tumour associated antigen has been isolated from the animal tumour cells, antibody raised against it and these antibodies being utilised as carriers of anticancer drugs for specific targetting of cancer cells. This approach has the advantage of concentrating the drug in the vicinity of the cancer cells thereby reducing the dose of the drugs as well as minimising unwanted side effects and toxicity of the drug. General application of anticancer drugs will kill not only the cancer cells but also the bystander normal cells.

The tumour associated antigens expressed on cancer cell surface elicit an immunological reaction. Examples are carcinoembryonic antigen produced by colon cancer cells and alphafeto protein by liver cancer cells. It is our aim to look for such new antigens in oral and cervical cancers, the two major forms of cancer seen in this part of the country. 81% and 88% of serum samples from oral and cervical cancer patients respectively demonstrated significantly elevated levels of circulating immune

complexes compared to normal controls. These complexes are made up of antigens secreted by cancer cells and antibodies produced by the immunological systems. Once pure antigens and antibodies are available, these could be utilised for early detection of cancer and also for active immunotherapeutic measures.

Natural killer cells, antibody dependent cell mediated cytotoxicity, lymphocytes and antibody complement – mediated cell lysis are some of the mechanisms of tumour cell destruction in the body. It is when these mechanisms fail (immune surveillance breaks down) that tumour develops. These immunological parameters are being evaluated during tumour development in a mouse tumour model and their modulations on Ayurvedic drug therapy studied.

Alpha feto protein used in the diagnosis of liver cancer has been isolated from cord blood and antibodies produced. This antigen and antibody will be used in the production of indigenous radioimmunoassay kits in collaboration with BARC.

c) Viral carcinogenesies and oncogenes:

By means of epidemiological analysis, it is known that the oral cancer is associated with chewing and smoking habits. Tobacco is known to promote cancer. However other etiological factors should be actively investigated. There are many evidences to shown an association between Herpes virus and cancers in experimental animals as well as in human beings. Epstein Barr Virus (EBV) has been shown to be the causative factor in Burkitt's lymphoma and nasopharyngeal carcinoma. Viruses can cause cancer when other promoting factors are also acting simultaneously.

Serum samples from 800 oral cancer patients, 200 uterine cervical cancer patients and 300 normal healthy controls were investigated for the presence of antibodies against HSV by means of haemagglutination and neutralisation tests. Anti-HSV antibodies were positive in 61% of oral cancer patients, 70% of cervical cancers and 39% of control samples. These values show a statistically significant correlation between Herpes infection and oral cancers. Further, fluorescent studies showed Herpes antigen on oral cancer cells Furthermore, herpes genes were shown to be present in oral cancer cell DNA by molecular hybridisation techniques.

Research on cancer is currently focussed on oncogenes genes that are defective or abnormally active. Elucidation of the mechanism of action of oncogenes, therefore is very important to unravel the secrets of oncogenesis. Plans are in progress to initiate projects in biotechnology to work on cancer genes

d) Radiobiology:

One of the major forms of treatment of cancer is radiotherapy. About 80% of cancer patients require radiotherapy at one or other time of the disease sequence. Therefore, it is important to know the biological behaviour of gamma radiation on normal and cancer cells. It is highly desirable to identify methods by which selective killing of cancer cells by radiotherapy is increased while preventing side effects. It is with this aim we are experimenting on animal tumours the effects of certain radioprotective agents like MPG and WR compounds.

e) Cytogenetics:

Cancer is known to arise from abberations in the genetical component of the cells. It is observed that various cancers show different chromosomal abnormalities. The classical example is the philadelphia chromosome described as the deletion of short arm of chromosome No. 21 in chronic myeloid leukemia. Basic facilities for cytogenetics and Karyotyping are now established at the Amala Cancer Centre.

f) Dermatoglyphics:

Dermatoglyphics is the study of ridges and grooves on the epidermis of palm and sole. Alterations in dermatoglyphic patterns are seen in chromosomal abnormalities and the chromosomal involvement in probable etiology of breast cancer promotes dermatoglyphic studies as a possible modl for early identification of high risk women.

Collaborations with other Research Institutions:

An institutional collaboration has been established.

a) with Cancer Institute, Bad Godesberg, West Germany: The collaboration is for personnel exchange on clinical oncology.

b) Collaboration has been formalised with the Uniformed Services University of Health Sciences, USA, on the topic of Tumour Virology, in the field of exchange of research personnel and technology transfer from USA on molecular hybridisation techniques.

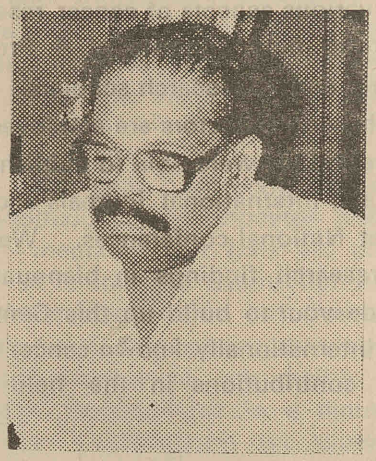
c) Collaboration with Bhabha Atomic Research Centre, Bombay is on the isolation and purification of tumour associated antigens.

d) Technical collaboration has been formalised with the Indian Institute of Science, Bangalore for the technology transfer on molecular biology of tumours.

e) Collaboration with Dr. Rita Leroi of Varein Fuer Krebsforschung, Arlesheim, Switzerland for research on Mistletoe (Viscum album) extract Iscador used in Europe for cancer therapy.

f) Collaboration with Regional Research Laboratory, Srinagar on anticancer activity of polysaccharides of Kashmir Mushroom.

In conclusion I am happy to state that within the last 5 years, we have already initiated active research in various aspects of cancer research. Our research group now consists of 4 Professors, 2 post-doctoral and 12 research scholars. In the applied research wing 9 doctors are employed. During this short period we were able to publish 33 articles in national and international journals and presented 36 papers at National conferences. We are publishing our research findings in biannual bulletins. It is our endeavour to build up this Centre into the level of an internationally known cancer institute by substantial contributions in the field of cancer research.



Dr. K. Rajagopalan

Amala Ayurvedic Hospital And Research Centre-An Over View

The importance of Ayurveda as a Holistic system of medicine was well recognized by the ancient Indians. The psychosomatic approach described in this system in the treatment of diseases received the attention of scientists in modern times. Whatever phenomenon or principle found in the universe is also represented in the human beings in a miniature form. In other words whatever exists in the macrocosm is represented in the microcosm in a miniature form.

Ayurvedic treatment is found to be effective in several chronic and degenerative illnesses like Rheumatoid Arthritis, sciatica, nervous disorders and many other modern stress problems. Rev. Fr. Gabriel, Director of this institution was very much aware of this and was particular to start a separate Ayurvedic section in this institution for conducting scientific research and formulating effective new methods of Ayurvedic treatment. Because the infrastructure necessary for this objective was already existing in this institution, the idea of having both Ayurvedic and modern systems of treatment under one umbrella was fructified on 27th March 1982.

Administration

Director	:	Fr. Gabriel C. M. I.
Joint Director	:	Fr. George Pius C. M. I.
Administrator	:	Fr. Paul Kodiyan. C. M. I.

Research And Clinical Staff

Dr. K. Rajagopalan. DAM, MBBS, FAIM (Research Director)
Dr. Sr. Donata. MD (AY) (Research Officer)
Dr. M. Kesavan. BA, MSAM (Research Officer)
Dr. K. S. Mohan. BAM, DAC, (Research Assistant)
Dr. Sr. Austin. MD (Ay) (Research Assistant)

Ayurveda Hospital and Research Centre is a major unit of Amala Cancer Hospital Complex, Trichur. The Ayurveda Institute consists of (a) Ayurvedic research wing (b) Ayurvedic general hospital (c) Preparation unit and (d) Ayurveda Bhavan.

Ayurvedic Research Wing

This wing started to function from 27-2-1982 as a grant in-aid research project of Central Council for research in Ayurveda and Siddha, New Delhi vide their Lr. No. F. 3-22/81-CCRAS/Budget Dated 14-1-1982. A 3 year study on "Leukemia and allied disease" was completed on 26-3-1985 and the

study on cancer with selected single and compound drugs regime was completed on 31-3-1987. Further study on cancer with selected drugs viz. (1) Plumbago zeylanica (Chitraka) (2) Solanum Trilobatum (Tutuvila) and (3) Alstonia scholaris (Saptacchata) has been sanctioned by the CCRAS, New Delhi.

Ayurvedic General Hospital

The general hospital started to function from 19-8-1983 in a newly constructed building. Here the treatment is given for all the general diseases. A fully equipped panchakarma theatre has also been formulated to give panchakarmas and Kerala special treatments like Dhara, Pizhichil, Navarakizhi etc. to the patients those are having the complaints of Hemeplegia, Paraplegia, facial paralysis, Rheumatoid arthtitis, Pepticulcer, etc.

Preparation Unit

A preparation unit for preparing genuine Ayurvedic medicines for the use of patients of our hospital has already been started with modern mechanised appliances. This preparation unit with its research work for genuine Ayurvedic drugs at a cheaper rate was Commissioned in December 1987.

Ayurveda Bhavan

Ayurveda unit has started construction of a 'health resort" to accommodate foreign and other, patients who are interested to have panchakarma treatment in this centre.

Physical Facilities

Total bed strength	:	50
Beds provided for free treatment for research patients	:	10
Reception and registration room	:	1
O. P. Consultation room	:	2
Panchakarma treatment room	:	4
Preparation room	:	3
Physio therepy room	:	1
Pharmacy room	:	1
Store room	:	3
Library room	:	1
Discussion hall	:	1

Besides the above facilities we have also arranged a green house for medicinal plants in the premises of our Ayurvedic Hospital. In this green house we have a collection of more than 200 valuable herbs. A small herbal garden is also locaied in front of the Ayurvedic hospital where valuable medicinal plants are grown. A project has been formulated for the cultivation and preservation of medicinal plants at a hill area.



Fr. Gabriel C. M. I.

AMALA-
Vision for the Future

The goals set for the first span of Amala's existence have been more or less realised by the grace of God.

Today Amala Cancer Hospital is one of the major Medical Centres in India. Though only a decade has elapsed since its inception, the hospital now offers reliable diagnostic and treatment facilities not only for cancer but for other diseases as well. The various departments like Oncology, Medicine, Surgery, Gynaecology & Obstetrics, paediatrics, ENT, Pathology etc are headed by experienced specialists. Three air-conditioned Operation Theatres, an Intensive Care Unit, casualty service, a Nursing School, a major water supply scheme, quarters for doctors and other staff, a canteen and a Post office and a modern medical library are only some of the facilities which contribute to make Amala a standard cancer hospital. The Biochemistry and other laboratories, Endoscopic instruments, Ultrasound Scanner, Echocardiogram, Cardiac Monitor, Treadmill and other equipments make the diagnostic side unerringly precise. Two Cobalt Units, Caesium Cobalt needles and Iridium Wires 192 are effectively made use of for radiotherapy. Amala has at present a bed strength of 350 of which 150 is for cancer patients.

The Ayurveda wing of this hospital which has made considerable progress during the last five years, is going to play a greater role in the years to come, as more and more people in different parts of the world come to realize the value of this ancient system of medicine. The increasing demand for accommodation would make it necessary to raise the ground floor of the present building in the immediate future.

The bare facts above point to what other facilities this Medical Centre should strive for in the near future. A special ward for intensive care and post operational service is an immediate necessity. In the area of radiation treatment it is Amala's ambition to procure the most modern and precise equipment namely, a Linear Accelerator. This sophisticated equipment would cost about Rs. 1.25 crores and will need another Rs. 15 lakhs for its annual maintenance. This is indeed a challenge, and Amala has to face it to survive as a modern cancer hospital in India, A CT Scanner also will become a necessity in due course. The bed strength also has to be raised to 500 within the coming 5 years

The experience gained by this Centre in the area of community health and cancer detection by the Dental Ambulance Project and the community health

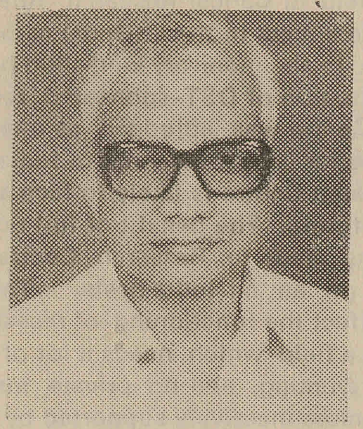
programmes at Vettilappara, has made it bold to launch a new community health programme at Vadukkumchery in Palghat district. If the University concurs, it might be possible to make available the facilities of Amala Cancer Hospital for starting new courses like B.Sc. Lab. Technology, B.Sc Nursing, D. Pharm and B. Pharm. This institution has also plans to start a Homoeopathic Centre for research and treatment. With this Amala will come occupy a unique position in India by scientifically juxtaposing three major disciplines in the medical field namely Allopathy, Ayurveda and Homoeopathy, functioning side by side and mutually cooperating

Though the concessions and freeships offered by this Centre to cancer patients are large and extensive, these are often nullified by their expenses on food served from the canteen and expenses on accommodation of bye-standers who attend on them, This problem is particularly acute in the management of a disease like cancer which often needs protracted treatment and prolonged hospitalisation. The problem can be solved to a great extent on the completion of the proposed Dharmasala where facilities for free accommodation and self-cooking will be provided.

Another project which Amala Centre will take up immediately is Bethany Gram - a Home for the aged. Bethany will offer shelter and care to aged persons on a no-loss-no-profit basis. We are sure that the presence of two medical centres in the campus, the proximity of places of worship and the spiritual support available, will make Amala a haven of peace for the elderly persons.

In the field of Cancer Research, this Centre has already made a mark in the all-India map of research institutions. In the monitory workshop held recently for the evaluation of DST-sponsored research projects, this Centre was adjudged as one of the foremost Centres for cancer research in India. However Amala Research Centre is likely to face a great crisis in the near future. The benefit of full tax exemption on donations made to Research Centres has been withdrawn on an all-India basis. This step will adversely affect the functioning of research centres. Research is a field which needs a lot of finance for its efficient working, and no private institution can take it up unless massively supported by the Government or major Trusts. It will be a national loss if research centres like Amala which has been built up as a Centre of national excellence are forced to close down owing to paucity of funds. It shall be our endeavour to survive but it cannot be at the expense of cancer patients to whom is our first commitment.

The above projects and programmes, when completed, will substantially augument the physical facilities of this institution. We however, fully realize that a Medical Centre of this kind dedicated to the service of cancer patients should distinguish itself more by its spirit of service than by the addition of physical facilities. Amala's humanitarian mission therefore will become a success only, if her capacity to offer selfless service to the sick also increases proportionately with the growth of the institution. May God guide our steps. ●



Dr. P. M. Varkey

Amazing Achievement

Plains are smooth and comfortable; ascends are strenous and sinews cracking. But some times we take a chance at climbing knee jolting hights. Panting and exhausted, we reach the top and when we look down upon the inhospitable slope we feel surprised at the stupendous task we have performed. And at that moment we experience a sense of fulfilment; a feeling that we have refused to submit to a routine and vegitative exsistance and that we did cut across the vicious circle of inertia and made ourselves dynamic in thought and in action.

Precisely this is the feeling I have when I look back upon the past decade of the history of Amala Cancer Hospital. Once a pinapple plantation, the valley of Vilangan has now become a structural complex, housing one of the best Cancer Hospitals, shining as one in the best ten in India. This 300 bedded hospital has now all the modern facilities in the dignosis, treatment, Research and Rehabilitation of Cancer patients in modern as well as in the Ayurvedic Medicine. It has become not only self sustaining but is progressively developing and has acquired notable position in the international family of Cancer Hospitals and Research Centres. It is a living monument of achievements of voluntry organisation in the health care field.

The vision of Cancer Hospital for Trichur emerged out of my several bitter experiences of the plight of many Cancer patients, that came across my practice. The idea was mooted to like minded people. Their experiences were also similar and that prompted us to strive for a solution. The result was the formation of Kerala Cancer Society with ultimate aim of establishing an ideal Cancer Institution – a reliable refuge for all Cancer patients. By the enormous and unprecedented public support, we launched a crusade for the establishment of full fledged Cancer Institute for this region and there begins the story of the Amala Cancer Hospital.

The Foundation stone of the Cancer Institute was laid by the then President of India Mr. V. V Giri on 13th April, 1973. The progress in our venture was accelarated by the C. M. I Congregation of Trichur, a dedicated group of Preists who rose to the occassion and took up the challenge in continuing our efforts to establish the Cancer Institute. From there onwards the progress was stupendous.

The Amala Cancer Hospital with its sprawling buildings and changing skylines is not merely a hospital. It is emerging as a total institution for Cancer patients encompassing within its manifold activities, the complete welfare of Cancer patients. When we are celebrating the centeneal this year, we have the satisfaction of achieving much more than what was expected in ten years - an amazing achievement.



പുഴങ്കര ബാലനാരായണൻ

ഒരു മഹാശയത്തിന്റെ സാക്ഷാത്ക്കാരം

നട്ടെല്ലൊടിഞ്ഞിട്ടും ഗുരുത്വാകർഷണശക്തിയാൽ തല നിവർത്തി നില്ക്കുന്ന മനുഷ്യൻ എന്ന അയ്യപ്പപണിക്കരുടെ കവിതാശകലം ജീവിതാനുഭവമായി പരിണമിച്ച കാലഘട്ടമായിരുന്നു, എന്നെ സംബന്ധിച്ചിടത്തോളം എഴുപതുകളുടെ ആദ്യപാദം, ആതുരസേവനത്തിന്റെ കർമഭൂമിയിലേയ്ക്കു കാലെടുത്തുവെയ്ക്കാൻ എന്നെ പ്രേരിപ്പിച്ചതും ആ ജീവിതാനുഭവമാണു്. അന്നനുഭവപ്പെട്ട അദൃശ്യവും അമൂർത്തവുമായ ആ ഗുരുത്വാകർഷണശക്തിയുടെ ദൃശ്യരൂപമായി അമലാ കാൻസർആശുപത്രിയെ ഞാനിന്നു കാണുന്നു.

കേരളാ കാൻസർസൊസൈറ്റി എന്നൊരു സംഘടനയെ രൂപകല്പനചെയ്യുവേളയിൽ, ഇന്നു കാണുന്ന അമലാ ആശുപത്രിയുടെ രൂപത്തിലൊരു സ്ഥാപനം വിലങ്ങൻകുന്നിന്റെ ഉറങ്ങിക്കിടന്നിരുന്ന താഴ്വരയിൽ ഉയർന്നുവരുമെന്നു നിരൂപിച്ചിട്ടില്ല. കാൻസർസൊസൈറ്റി ആരംഭിച്ചപ്പോഴും അതു വിപുലമോ സമഗ്രമോ ആയ ഒരു പദ്ധതിയെക്കുറിച്ചു വിഭാവനംചെയ്തിരുന്നില്ല — അന്തിമമായ ലക്ഷ്യം സമഗ്രമായ ഒരു കാൻസർആശുപത്രി സ്ഥാപിക്കുക എന്നായിരുന്നെങ്കിലും. തൃശ്ശൂരിൽ നിലവിലുള്ള വൈദ്യസങ്കേതങ്ങളെ ഉപയോഗപ്പെടുത്തിക്കൊണ്ടു കാൻസർ എന്ന മഹാരോഗത്തിനെതിരെ ഒരു പ്രതിരോധം വളർത്തിയെടുക്കുക എന്നതായിരുന്നു അടിയന്തിരലക്ഷ്യം.

പക്ഷേ ആശയങ്ങൾക്കൊരു സവിശേഷതയുണ്ടു്. അവ പലപ്പോഴും ചക്രവാളസീമകളെ അതിലംഘിച്ചു വളർന്നു വലുതാകും. കാൻസർസൊസൈറ്റിയുടെ ചരിത്രത്തിലും അതാണു് സംഭവിച്ചതു്. പടിക്കല അന്തപ്പൻ വിലങ്ങൻകുന്നിൽ പതിനെട്ടു് ഏക്കർ സ്ഥലം കാൻസർസൊസൈറ്റിക്കു ദാനം തരുവാൻ സന്നദ്ധനായി. സ്ഥലമേറ്റെടുത്തു. തറക്കല്ലിട്ടു. പക്ഷേ തറക്കല്ലു ഭിത്തിയായി, കെട്ടിടമായി പരിണമിക്കാൻ മടിച്ചുനിന്നു. മുട്ടാത്ത വാതിലുകളില്ല. സമീപിക്കാത്ത സംഘടനകളില്ല. ഡോ. വക്കിയും പി. വി. ജോണും ഈ എളിയവനും അക്ഷരാർത്ഥത്തിൽ കുരിശേറി നടക്കുകയായിരുന്നു.

അക്കാലത്താണു് ഗാബ്രിയൽമാലാഖ പ്രത്യക്ഷപ്പെട്ടന്നതു്. സെൻറ്മേരീസ് ഓർഫനേജ്പ്രസ്സിൽവെച്ചു്, അന്തരിച്ച മോൺസിഞ്ഞൂർ തെക്കേക്കരഅച്ചന്റെ സാന്നിദ്ധ്യത്തിൽ റവ. ഫാ. ഗാബ്രിയലിനെ സന്ദർശിച്ച ദിവസം ഇന്നും മങ്ങാതെ മായാതെ ഓർമയിൽ ഓളംവെട്ടുന്നു. റവ. ഫാ. ഗാബ്രിയൽ ഞങ്ങളെ ഒരു ''ഇൻകൃിസിഷനു''' വിധേയരാക്കി. ഏതാണ്ടൊരുവഷ്ം നീണ്ടുനിന്ന വിചാരണയ്ക്കുശേഷമാണു് കാൻസർസൊസൈറ്റി എന്ന സംഘടന സൃഷ്ടിച്ച ആശയത്തിന്റെ ജൈവസാഹസികതയെ റവ. ഫാ. ഗാബ്രിയലും ദേവമാതാപ്രോവിൻസും അംഗീകരിച്ചതു്.

അവിടന്നങ്ങോട്ടുള്ള പ്രവർത്തനം ആവേശകരമായിരുന്നു. ഉറക്കമുണർന്ന വിലങ്ങൻകുന്നിന്റെ താഴ്വരയിൽ ഇഷ്ടികയും കുമ്മായവും ഇരുമ്പും ഉരുപ്പടികളും കൊച്ചു കൊച്ചു കൂമ്പാരങ്ങളായി ഉയർന്നുവന്നു. അവയുടെ മദ്ധ്യത്തിൽ രണ്ടു വെളുത്ത ലോഹകരം സദാ ചലിച്ചുകൊണ്ടിരുന്ന ചിത്രം ഇന്നും ഞാൻ ഓർക്കുന്നു—റവ. ഫാ. ഗാബ്രിയലും റവ. ഫാ. പയസ്സും.

ഒരു വലിയ ആശയത്തിന്റെ സാക്ഷാത്ക്കാരമാണു് അമലാ കാൻസർഹോസ്പിറ്റൽ. ആ വലിയ ആശയത്തിന്റെ ചിറകിൽ അള്ളിപ്പിടിച്ചിരിക്കാൻ ഭാഗ്യമുണ്ടായതിൽ ഞാൻ അഭിമാനംകൊള്ളുന്നു. ●



പി. വി. ജോൺ

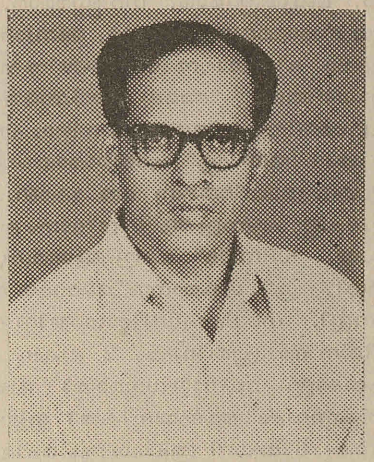
ബഹുജനസമ്പർക്കത്തിൽനിന്നു ഉരുത്തിരിഞ്ഞ ഒരു മഹാസ്ഥാപനം

ഒരു സൗഹൃദസായാഹ്നം — കേരള ഹൈക്കോടതിയിൽ അന്ന് ജഡ്ജിമാരായിരുന്ന ജസ്റ്റിസ് പി. സുബ്രഹ്മണ്യൻ പോറ്റിയും ജസ്റ്റിസ് പി. ഗോവിന്ദമേനോനും എന്റെ വസതിയിൽ എത്തി. സംഭാഷണം പല മേഖലകളിലേയ്ക്കും കടന്നു. മനുഷ്യനന്മയ്ക്കു വേണ്ടിയുള്ള സാമൂഹ്യപ്രവർത്തനങ്ങളെപ്പറ്റിയായിരുന്നു ഞങ്ങൾ ഏറെയും സംസാരിച്ചത്. ആരോഗ്യസംരക്ഷണരംഗം സംബന്ധിച്ച ചർച്ചകൾ ചെന്നെത്തിയതു കാൻസറിന്റെ കടിവായിൽ കിടന്നു പിടഞ്ഞു മരിക്കുന്ന മനുഷ്യരുടെ അതിദയനീയമായ സ്ഥിതിവിശേഷത്തിലേയ്ക്കാണ്. വൈദ്യശാസ്ത്രം തന്നെ അർബുദത്തിന്റെ ഭീകരരൂപത്തിനുമുമ്പിൽ പകച്ചുനില്ക്കുന്നു. ഇന്ത്യയിൽ ഈ മഹാവ്യാധിക്കുവേണ്ടിമാത്രം ആസ്പത്രികളുണ്ട്. എന്നാൽ കേരളത്തിൽ അതിനായിമാത്രം ഗവേഷണത്തിനും ചികിത്സയ്ക്കും ഒരു ആസ്പത്രിയില്ല. സർവവിധ ആധുനിക സജ്ജീകരണങ്ങളുമുള്ള ഒരു ആസ്പത്രിക്കു രൂപം നൽകുവാൻ കഴിഞ്ഞാൽ അതു സമൂഹത്തിനുവേണ്ടി ചെയ്യുന്ന ഏറ്റവും വലിയ ഒരു സേവനമായിരിക്കുമെന്ന കാര്യത്തിൽ സംശയമില്ല. ഈ സൗഹൃദസംഭാഷണത്തിൽനിന്ന് ഉരുത്തിരിഞ്ഞ ആശയം എങ്ങനെ സഫലീകരിക്കാം. എന്റെ ചിന്ത പിന്നീട് കാൻസർ ചികിത്സാകേന്ദ്രത്തെക്കുറിച്ചായി— കാണുന്നവരോടൊക്കെ ഈ കാര്യത്തെക്കുറിച്ചായിരുന്നു ചർച്ച. ഡോ: പി. എം. വക്കീ, അഡ്വ. പുഴങ്കര ബാലനാരായണൻ തുടങ്ങിയ സുഹൃത്തുക്കളുമായുള്ള നിരന്തരസമ്പർക്കമാണ് കേരള കാൻസർസൊസൈറ്റിയുടെ രൂപീകരണത്തിലെത്തിയതു്. ഡോ. വക്കീതന്നെ പ്രസിഡണ്ടായി സൊസൈറ്റി രൂപീകൃതമായി. തൃശ്ശൂരിലെ ഡോക്ടർമാരും അഭിഭാഷകരും മതമേധാവികളും വ്യാപാരി വ്യവസായ പ്രമുഖരുമെല്ലാം ഈ സംരംഭത്തിനു് അകമഴിഞ്ഞ പിന്തുണയാണ് നൽകിയതു്. ബഹുജനങ്ങളിൽനിന്നു ലഭിച്ച പ്രോത്സാഹനം ഒരു ആസ്പത്രിക്കു തുടക്കം കുറിക്കുവാനുള്ള ആത്മധൈര്യം ലഭിച്ചു. ആസ്പത്രി എവിടെ സ്ഥാപിക്കണം, സ്ഥലം ആർ നല്കും? അന്വേഷണമായി—ഉദാരനിധിയായ ശ്രീ പടിക്കല അന്തപ്പൻ വിലങ്ങനിൽ 18 ഏക്കർ സ്ഥലം നൽകാമെന്നു് ഏറ്റതോടെ ഞങ്ങളുടെ പ്രവർത്തനത്തിനു കൂടുതൽ പ്രോത്സാഹനമായി.

കേരളത്തിന്റെ വിവിധ ഭാഗങ്ങളിലുള്ള ജനങ്ങളുമായി ഇതിനിടയ്ക്കു സമ്പർക്കങ്ങൾ നടന്നുകൊണ്ടിരുന്നു. എവിടെനിന്നും പ്രോത്സാഹനത്തിന്റെ ഉദാരഹസ്തങ്ങൾ ഉയർന്നു. അന്നത്തെ രാഷ്ട്രപതിയായിരുന്ന വി. വി. ഗിരിയെക്കൊണ്ടുതന്നെ ശിലാസ്ഥാപനം നടത്തിക്കുവാൻ തീരുമാനിച്ചു. അദ്ദേഹം അതു സന്മനസ്സോടെ നിർവഹിക്കുകയും ചെയ്തു. ഒരു ബൃഹത്തായ സംരംഭത്തിനു് അങ്ങനെ വിത്തുപാകി. ഇനി അതു വെള്ളമൊഴിച്ചു മുളപ്പിച്ചു വളർത്തിയെടുക്കണം— എന്താണു് വഴി—ആലോചനയായി—രാഷ്ട്രപതി സ്ഥാപിച്ച ശിലയിന്മേൽ കല്ലുകൾ പടുത്തുകയറ്റാനുള്ള യജ്ഞത്തെപ്പറ്റിയായി പിന്നീട് ചിന്ത. നിരന്തരമായ ബഹുജനസമ്പർക്കങ്ങളിൽനിന്നു് ഒരു കാര്യം ബോദ്ധ്യമായി. ശക്തവും സേവനസന്നദ്ധവും നിസ്വാർത്ഥവുമായ ഒരു ഏജൻസിയെ ഏല്പിക്കുകയാണു് മുന്നോട്ടുള്ള നീക്കത്തിനുള്ള പോംവഴി. ഏതായിരിക്കണം ആ സംഘടന? അന്വേഷണം തുടർന്നു. ഇരിങ്ങാലക്കുടയിലെ മണ്ണാടിക്കുന്നത്തു വിജ്ഞാനത്തിന്റെ ഒരത്ഭുതലോകം രചിച്ച ക്രൈസ്റ്റ് കോളേജിന്റെ ശില്പിയെത്തന്നെ ശരണംപ്രാപിക്കുവാൻ ഉറച്ചു. ഫാ. ഗബ്രിയലിന്റെ

സംഘാടക സാമർത്ഥ്യത്തിന്റെയും അർപ്പണമനോഭാവത്തിന്റെയും പ്രകടമായ തെളിവാണ് ക്രൈസ്റ്റ് കോളേജ്. കോളേജിൽനിന്നു റിട്ടയർചെയ്ത അദ്ദേഹം ദേവമാതാ പ്രോവിൻസിന്റെ പ്രൊവിൻഷ്യൽആയി ഉയർത്തപ്പെട്ടകഴിഞ്ഞിരുന്നു. ഫാ. ഗബ്രിയേലുമായി ചർച്ച നടത്തി. സി എം ഐ സഭ മെഡിക്കൽരംഗത്തു കാര്യമായി പ്രവേശിച്ചിട്ടില്ല. അതുകൊണ്ടുതന്നെ ഏറെ പ്രയാസങ്ങൾ നേരിടുമെന്നായിരുന്നു ആശങ്ക. ആദ്യദർശനംതന്നെ പ്രതീക്ഷാനിർഭരമായിരുന്നു. അദ്ദേഹം തന്റെ സംഘപ്രവർത്തകരുമായി ചർച്ച ചെയ്തു. മേലധികാരികളുമായി ബന്ധപ്പെട്ടു. ഒടുവിൽ ആസ്പത്രിക്കു സൗകര്യമായ സ്ഥലം ഏറ്റെടുത്തിക്കൊടുക്കണമെന്ന വ്യവസ്ഥ അദ്ദേഹം മുന്നോട്ടുവെച്ചു—ശരി—പിന്നീട് അതിനായി ശ്രമം. ശ്രീ പടിക്കലെ നല്കിയ സ്ഥലത്തോടുതൊട്ട് അനേകം ഏക്കർ സ്ഥലം ഗവ: വകയായി ഉണ്ടായിരുന്നു. അന്നത്തെ മുഖ്യമന്ത്രിയായിരുന്ന സി. അച്ചുതമേനോൻ, ആഭ്യന്തരമന്ത്രി കെ. കരുണാകരൻ, റവന്യൂമന്ത്രി ബേബി ജോൺ തുടങ്ങിയവരെല്ലാമായി ബന്ധപ്പെടുവാൻ തുടങ്ങി. ഒടുവിൽ സ്ഥലം ഗവണ്മെൻറിൽനിന്നു ലഭിച്ചു. (കൂട്ടത്തിൽ പറയട്ടെ മലയാളമനോരമയുടെ തിരുവനന്തപുരം റസിഡണ്ട് എഡിറ്റർ കെ. ആർ. ചുമ്മാരിന്റെ സേവനം ഈ കാര്യത്തിൽ നന്ദിപൂർവം സ്മരിക്കുന്നു.)

ഇതിനിടയിൽതന്നെ ഫാ. ഗബ്രിയൽ അണിയറനീക്കങ്ങൾ നടത്തിക്കൊണ്ടിരുന്നു. തന്നെ സഹായിക്കാൻ ക്രൈസ്റ്റ് കോളേജിൽ അദ്ധ്യാപകനായിരുന്ന ചെറുപ്പക്കാരനും ഊർജ്ജസ്വലനുമായ ഫാ. ജോർജ്ജ് പയസ്സിനേയും നിയോഗിക്കപ്പെട്ടുകഴിഞ്ഞിരുന്നു. ഫാ. പയസ്സിന്റെ സേവനം എത്രമാത്രം വിലമതിക്കപ്പെട്ടതാണെന്നു പിന്നീടുള്ള കാലം തെളിയിച്ചു. കാൻസറിനെതിരായ യുദ്ധപ്രഖ്യാപനവും ഒരു പടയോട്ടവുമാണ് പിന്നീടു നടന്നതു്. വിലങ്ങനിലെ വികസനത്തിന്റെ വാർത്ത നാടാകെ പരന്നു. പത്രങ്ങളുടെ നിർലോഭമായ സഹകരണംകൂടിയായപ്പോൾ അത്ഭുതകരമായ ഒരു മുന്നേറ്റമാണ് ഉണ്ടായതു്. സംഭാവനകൾ ഒഴുകിക്കൊണ്ടിരുന്നു. ഇന്ത്യയുടെ അകത്തുനിന്നും പുറത്തുനിന്നുമെല്ലാം. വിലങ്ങനിൽ നടക്കുന്ന യജ്ഞത്തെപ്പറ്റി നേരിട്ടു കാണുവാനും സഹായിക്കാനും സാമൂഹ്യപ്രവർത്തകരും, ഡോക്ടർമാരും, വാണിജ്യവ്യവസായികളുമെല്ലാം എത്തിക്കൊണ്ടിരുന്നു. നിർമ്മാണപ്രവർത്തനങ്ങൾ ആരംഭിച്ചു് ഒന്നരവർഷത്തിനുള്ളിൽതന്നെ ആസ്പത്രിയുടെ ഉദ്ഘാടനം ഇന്ത്യയുടെ രാഷ്ട്രപതി നീലം സഞ്ജീവറെഡ്ഡി നിർവഹിച്ചു. അർബുദത്തിനെതിരായ ഈ മഹാപ്രസ്ഥാനം നേരിൽ കാണുന്നതിനു് എത്തിയ പ്രഗല്ഭന്മാരെത്രയെന്നു പറയാനാവില്ല. കേന്ദ്രമന്ത്രിമാർ, മുഖ്യമന്ത്രിമാർ, ഗവർണ്ണർമാർ, കർട്ടിനാളന്മാർ, വിവിധ സഭാമേലദ്ധ്യക്ഷന്മാർ, അമ്പാസിഡർമാർ, ലോകപ്രശസ്തരായ ഭിഷഗ്വരന്മാർ തുടങ്ങിയവരെല്ലാം ആ കൂട്ടത്തിൽ ഉണ്ടായിരുന്നു. അമല കാൻസർആസ്പത്രിയുടെ പ്രശസ്തിയും പ്രസക്തിയും വിദൂരങ്ങളിലെല്ലാം എത്തി. കേന്ദ്ര ആരോഗ്യമന്ത്രിയായിരുന്ന ശ്രീ. രാജനാരായണന്റെ സന്ദർശനവേളയിൽ പരസ്യമായിത്തന്നെ ഒരു കോബാൾട്ട് യൂണിറ്റു വാഗ്ദാനംചെയ്തു. എന്നല്ല ആ വാഗ്ദാനം അദ്ദേഹം നിറവേറ്റുകയുംചെയ്തു. പിന്നീടു് കേന്ദ്ര ആരോഗ്യമന്ത്രിയായിസ്ഥലം സന്ദർശിച്ച ശ്രീ. ശങ്കരാനന്ദ് മറെറാരു കോബാൾട്ട് യൂണിറ്റുകൂടി നല്കി. ഗവേഷണവിഭാഗത്തിനു ഗവണ്മെണ്ട് എഞ്ചിനീയറിംഗ് പ്രതിവർഷം 2 ലക്ഷം രൂപയോളം പ്രോജക്ടുകൾക്കുള്ള സഹായധനമായി ലഭിച്ചുവരുന്നു. സംഭാവന നൽകുന്നവർക്കു് ആദായനികുതി ഇളവു ലഭിക്കുന്നുണ്ടു്. ഇതിനകം 6 കോടി രൂപയോളം ചെലവഴിച്ചുകഴിഞ്ഞു. ഇപ്പോഴും വികസനപ്രവർത്തനങ്ങൾ നടന്നുകൊണ്ടിരിക്കുകയാണു്. ഇത്രയും സംഖ്യ സംഭാവന ലഭിച്ച ഒരു സംരംഭം കേരളത്തിലുണ്ടാകുമോ എന്നു സംശയമാണു്. മഹത്തായ പ്രസ്ഥാനങ്ങൾക്കുള്ള ബഹുജനപിന്തുണയുടെയും ദൈവപരിപാലനയുടെയും ജീവിക്കുന്ന തെളിവുതന്നെയാണു് ഇതു്. ഇന്ത്യയിലെതന്നെ കാൻസർആസ്പത്രികളുടെ മുൻനിരയിൽ ''അമല'' സ്ഥാനം പിടിച്ചുകഴിഞ്ഞു. ഈ രംഗത്തു് ഇന്ത്യയിൽ ഏഴാം സ്ഥാനമുള്ള ഒരു ആസ്പത്രിയായി ഇന്ത്യാഗവണ്മെണ്ട് അംഗീകരിച്ചുകഴിഞ്ഞു. ഗവേഷണപ്രവർത്തനത്തിന്റെ കാര്യത്തിൽ ദക്ഷിണേന്ത്യയിൽ 3-ാം സ്ഥാനവും 'അമല' നേടിക്കഴിഞ്ഞു. ഒരു ചികിത്സയും ഫലിക്കാതെവരുമ്പോഴാണു് അർബുദരോഗികളെ കിടത്തി ചികിത്സിക്കുവാനുള്ള ''ടെർമിനൽ കെയർ യൂണിറ്റും'' അമലയിലുണ്ടു്. നിർധനർക്കുവേണ്ടി സജ്ജമാക്കിയിട്ടുള്ള ഈ യൂണിറ്റിൽ പ്രവേശിക്കുന്ന രോഗികൾക്കു് ഓരോരുത്തർക്കും പ്രതിവർഷം 10000രൂ യോളം അമല ചെലവിടുന്നുണ്ടു്. ഇപ്പോഴും ആ വിഭാഗത്തിൽ 30 പേർക്കു സൗജന്യചികിത്സ ലഭിച്ചുവരുന്നു—ഒരു സൗഹൃദസംഭാഷണത്തിൽനിന്നും നിരന്തരമായ ബഹുജനസമ്പർക്കത്തിൽനിന്നും ഉയർന്നുവന്ന ഈ മഹാസ്ഥാപനം ഇന്ത്യയിലെതന്നെ ഏറ്റവും ആധുനിക സൗകര്യമുള്ള അർബുദചികിത്സാകേന്ദ്രമായി വളരുമെന്ന കാര്യത്തിൽ ഏനിക്കു സംശയമില്ല. പരമകാരുണ്യകനായ സർവശക്തന്റെ അനുഗ്രഹാശിസ്സുകളും അതിനു് ഉണ്ടാകും — തീർച്ച —.



T. J. Paily

Flash Back- Events of Amala

1976 1) The Devamatha Provincial Council, Trichur of the C.M.I Congregation, then headed by the resourceful veteran administrator, Fr. Gabriel, agreed to take over the trusteeship of Kerala Cancer Society, Trichur for establishing and administering a cancer hospital, acceding to the persuasive request made by the Office bearers of that society - vide Registered Trust Deed No. 2860 dt. 13th August 1976.

2) The master plan for establishing a 500 bed hospital and research centre was prepared by Kerala Construction Corporation and was later implemented by structural Engineer Sri. R. Ananthanarayanan of Coimbatore under the advice of eminent doctors like Dr. Padam Singh, Head of cancer dept and Dr. Desmond, famous, E.N.T Surgeon and theatre planner of C.M.C, Vellore.

3) At a public meeting held on 19th Sept. 1976, attended by an elite gathering, the Chief Minister, Sri. C. Achutha Menon, inaugurated the construction work of the 1st phase of the hospital – 120 bed hospital and other ancillary buildings and his Cabinet Colleagues; (a) Sri. K. Karunakaran, the Home Minister presented to the management the 1st cheque for Rs. 25,000/- being the Kerala Government's share in the proceeds of the 'Star Night' held in that year (b) The Revenue Minister, Sri. Baby John handed over the documents relating to the leasing of the 17.14 acres of poromboke lands and that of 16.93 acres of patta lands that had been donated by Sri. Padikkala Anthappan, Trichur to the Kerala Cancer Society, Trichur and (c) Sri. N. K. Balakrishnan the Health Minister inaugurated cancer registry and survey unit.

4) To ensure that the objectives outlined in the Trust Deed are implemented, the Trustees constituted themselves into a Society (S. No. 51 of 1978), the Articles of which envisaged among others, a wide-based Board of Management to formulate policies and norms for the functioning of the hospital and its various wings and a small executive committee for carrying out day-to-day administration; the former body to meet at least once a year and the other at least in every month.

1978 5) In record time of 17 months the hospital with four wards having 120 beds, out-patient departments, X-ray block, airconditioned operation complex, diagnostic laboratory, Phar-

macy, and canteen were ready. Thanks to the untiring efforts of Bro. Athanasius & Fr. Raphael Kannanaikal.

6) On 25th March 1978, Rt. Rev. Dr. Joseph Kundukulam, Bishop of Trichur, blessed it for informal functioning and Sri. K. K. Balakrishnan, Minister for Harijan Welfare, inaugurated the free medical camp organised in that connection, on 27-3-1978.

7) At a solemn function presided over by Smt. Jyothi Venkatachalam, the Governor of Kerala, the President of India, Sri. Neelam Sanjiva Reddy formally inaugurated the hospital on 25.4.1978. The Souvenir brought out on that occasion was released by Sri. J. Chitharanjan, the Minister of Health.

Soon after this function Fr. Pius was deputed to West European countries and USA to study the working of well-equipped hospitals and also to take the message of Amala to those countries. With the help given by Fr. Werner and Fr. Jerome who were already in west Germany he was able to form a charitable society in that country under the name Amala Krebeshilfe, Bonn, with Dr. Stelzer, Ex. Ambassador of F.R G to India as President, Prof. (Dr.) Ott, Secretary of German Cancer Society as Vice-President and Fr. Jerome as Secretary.

Fr Jose Prakash Arakkal CMI, deputed to Gulf Countries succeeded in mobilising substantial donations from there. Fr. Paul Chittilappilly who took over as development officer persued the developmental activities zealously.

1979 8) 1979 was an year of consolidation and adding of bed strength and other physical facilities.

9) The Dialysis Unit presented by M/s. P. T. Manuel & Sons, Trichur was blessed by Rt. Rev. Dr. James Pazhayattil.

10) The Nursing School sanctioned by Kerala Nurses and Midwives Council in its proceding No. H. 492/79/NC dt. 27-12-79, commenced to function from Ist January 1980 onwards with 10 students.

1980 11) A gamarex-R- Rotating Teletherapy Unit was acquired with the ad-hoc grant of Rs. 10 lakhs sanctioned by Govt. of India, Ministry of Health & Family Welfare, and it was installed in Sept. 1980. From July 1980 onwards the institution started to organise cancer detection camps and in November 1980 Cancer Registry was started to collect, combine, compare and evaluate uniformly defined information on cancer patients.

1981 12) With the financial assistance given by organizations like Trichur Muncipality, Coffee Board, additional wards were constructed. Ward X constructed with the assistance given by the Tea Board was formally inaugurated on 29-3-'81 by Sri. Lonappan Nambadan, the Minister of Transport. He also performed on that occasion the switching on of the project to lift water from a perennial source located in Puzhakkal 3 kms away from the campus on a plot of 2 cents of land on registry, given by the Govt. of Kerala.

13) 16.10.81 is of special significance for the institution as on that day, Sri. B. Sankaranand, the Minister of Health & Family Welfare, Govt. of India, inaugurated the radiation therapy block, constructed with the financial assistance extended by Chakkola Family of Trichur. He also laid down the foundation stone of the Ayurveda Hospital, which was blessed by Rt. Rev. Dr. James Pazhayattil, Bishop of Irinjalakuda.

For the development of the Ayurveda wing of this institution Govt of Kerala sanctioned in Februrary 1983 the leasing of 4.77 acres of land comprised in Sy. Nos. 197, 198 and 200/2 of the Puzhakkal village.

1982 14) Having succeeded in establishing a well organised hospital and attached Research Unit the management embarked on establishing an Ayurveda wing to explore the wealth of knowledge that lies hidden in this ancient branch of medical system. From 27-3-1982 the grant-in-aid research project of Central Council for Research in Ayurveda and Siddha, New Delhi, started to function in this wing. The Ayurveda Research Centre was formally inaugurated by Ashta vaidyan Thaikkatt Valiyathampuran E. T. Neelakandan Moosed on 18-6-1982.

15) The relevance of cancer research being very obvious, selected research projects had already been undertaken by the head of the Oncology Division of this institution. Appreciating the work already undertaken, Indian

Council of Medical Research, the then relevant authority of Govt. approved this institution as an Association of medical research and issued Notification No. 4522 (F. No. 203/38/82. ITA. II dt. 2-3-'82 under section 35 (1) (ii) of the Income Tax Act making donations given to this institution during the period from 21-1-82 to 20-1-84 for research purposes eligible for deduction to the extent of 133 1/3%

16) The Paediatric Ward constructed to give special care to children afflicted by cancer in an early age was inaugurated on 2-9-82 by K. G. R. Kartha, the Minister for Health. This ward was constructed with the financial assistance donated by Sri. M. P. Menon of Savannah University USA in memory of his late son Master Venu G. Menon. On that occasion the minister declared open the newly started E. N. T. department. He also accepted the donation cheque of Rs. 30,000/- presented by Sri. O I. Thomas, Chairman, Mar Themotheus Charities and unveiled the plaque of late Mar Themotheus.

17) The Executive Committee after reviewing the progress made in the working of the research unit, which was functioning till then as an adjunct of the hospital, decided that the general hospital and research divisions shall be deemed to be independent units from 1-4-'82 onwards with the staff, finances and accounts under the overall control of the management of the institution. The norms to be adopted in sharing the expenses by the two units were also laid down.

18) As getting the "Amala Cancer Hospital Help Societies" formed in USA registered under the relevant Act of that country was found to be very important, it was decided on 13-7-82 to move the authorities for the deputation of Fr. John Tharayil CMI to that country for that purpose.

19) Decided on 9-9-1982 about the privileges to be extended to the directors and staff of the benefacter institutions-major and others. The classification of benefactor institutions are to be done taking into consideration the quantum of donation given by them.

20) To enlist willing cooperation and service of men of genuine goodwill, charity and social concern-prepared to act as benevolent promoters and contact personnel taking the message of Amala to the public in every corner of South India and carrying their needs back to Amala, Fellowship units have been formed in 11 towns of Trichur, Ernakulam, Palghat and Malappuram Districts. Formal inauguration of these units was done by Sri. K. M. Mani, Minister of Finance, Kerala on 12th December 1982. His Grace Benedict Mar Gregoriose Archbishop of Trivandrum presided over the public meeting.

1983 21) The newly constructed Ayurveda Hospital & Research Centre was inaugurated by Sri. K. Karunakaran, the Chief Minister, on 19.3 1983 at an impressive puplic meeting presided over by Rt. Rev. Dr. Clemens Thottungal. The key-note adress was delivered by Justice K. Bhaskaran of Kerala High Court.

22) The newly started discipline of Dentistry was inaugurated by Sri. P. J. Joseph, Minister for Revenue, Kerala on 14.8.83. At a public meeting presided over by Rt. Rev. Dr. Joseph Kundukulam, and donations offered by the following benifactors were accepted.

1. The Canning Industries Cochin Ltd., Trichur (CAICO).
2. Catholic Union Chitties Ltd., Mala.
3. Popular Kuries, Trichur.
4. Ollur Sadhu Samrakshana Sangham, Ollur.

The newly formed Research Council at its meeting held on 19. 8. 83 advised the management to start the following departments:-

a) Immunology/Virology
b) Biochemistry
c) Pathology/Cytology
d) Radiobiology
e) Cancer epidemiology.

23) The Golden Jubilee of the Religious Profession of Fr. Gabriel, the founder-Chief Trustee/Director was celebrated in a very fitting manner with various programmes on 19th and 20th Nov. 1983. In the Divine Liturgy offered by the Jubilarian on that occasion a number of Bishops and Fellow priests were co-celebrants. The public meeting of the day was presided over by Justice Sukumaran of Kerala High Court. The new Research Block constructed in memory

of the Golden Jubilee was inaugurated by Sri. K. Karunakaran, the Chief Minister and the Golden Jubilee Souvenir was released by Rev. Fr. Aykara CMI, Prior General of CMI, and the donations given by certain benefactors for research by Sri. K. P. Ramachandran Nair, Minister for Health, Govt. of Kerala.

1984 24) As formation of a separate society with the specific objective of undertaking research on cancer and allied diseases became imperative. in the light of the discussions held by Jt. Director of the institution with the officers of Govt. of India, Ministry of Science & Technology. Such a society titled Amala Cancer Research Centre Society was registered (as S. No. 56 of 1984) on 21st May 1984.

25) The Executive Committee decided on 17-8-84 to depute Dr. C. D. Joseph, Chief Oncologist and Fr. Pius, Jt. Director in October to W. Germany so as to pursue at personal level the research projects that have been forwarded to institutions in that country.

As a result of their visit institutional collaboration has been formed with Cancer Institute e. v. Krakenhaus, Bad Godesberg, W. Germany and also among others for the exchange of personnel on clinical Oncology. Further the powerful Dentists Association especially Dr. Wiehman was persuaded to be interested in Amala.

26) Considering the abnormal increase in the number of patients for radiation therapy, orders were placed for a second Cobalt Unit of A. E. C. L, Canada (Theratron) costing about Rs. 26/- lakhs. Since a grant of Rs. 10 lakhs only has been received from Govt. of India to acquire the second Cobalt Unit, strenuous efforts were taken to obtain donations from individuals and institutions by bringing to their notice the income tax exemption.

27) Ecumenical Prayer Hall and Hospital Chapel were completed and blessed on 8-12-1984. Mr. P. S. Sebastian, Oostpriest Hulp and Frl. Maria Schonartz were the main contributors.

28) The construction work of new wing (western block) of Ayurveda Hospital was inaugurated by Fr. Rolf Linse, one of four outstanding benefactors of W. Germany on 31-12-84.

1985 29) National Board of Examinations, New Delhi accorded permission to this institution to coach students for the diplomate in (a) Radiotherapy (b) Medicine (c) Surgery (d) Obstetrics & Gynaecology. The University of Calicut also approved this institution as a Research Centre leading to Ph. D.

30) The MNAMS (Diplomate) Course was formally inaugurated by the Principal, Medical College, Trichur on 1st July 1985.

31) The second Cobalt Unit, Theratron 780 imported from Canada was formally inaugurated on 23-11-85 by Sri. K. Karunakaran, Chief Minister at a public meeting presided over by Sri. S. Krishnakumar, Dy. Minister for Health & Family Welfare, Govt. of India.

32) Mr. P. Platte, Acting Consul General of FDRG, Madras inaugurated project for detection of oral cancer & dental care on 10th Dec. 1985 at Amala. A team of German doctors headed by Dr. G. H. Ott of E. V. Krakenhaus was present at the function. Sri Vinod Rai, District Collector, presided over the meeting.

33) The National Conference of Indian Immunology Society sponsored by Amala Cancer Hospital & Research Centre and co-sponsored by Kerala Agricultural University, the Dept. of Science & Technology, Govt. of India and the Indian Council of Medical Research was held in this institution from 14th to 16th Dec. 1985. About 250 National and international scientists participated in this conference.

1986 34) A Medical aid unit was organised at St. Thomas Nagar from 6 p.m on 6-2-1986 to 6 p.m on 7th February 1986 in connection with the visit of H.H. Pope John Paul II.

35) Amala Rural Medical Mission was formally inaugurated by Sri. P. K. Velayudan, Minister for community Development at Kunnathupadam near Varandarappally and Vettilappara. The public meetings organised in that connection at the former Centre was presided over by Sri. P. A. Antony MP and the latter centre by Sri. K. Mohandas M.P.

36) The first quarterly meeting of the Association of Radiation Oncologists - Kerala Chapter was held at Amala on 12th July 1986. Dr. K. Sreenivasan, President of the Chapter

presided over the function and the Chief Guest of the day Dr. Balaraman Nair delivered the guest lecture on "Classification of non-hodgkins Lymphoma and correlation of Pathology & Prognosis. Scientific session was inaugurated by Dr. M. Krishnan Nair (All India President, A R O I), Director, Regional Cancer Centre, Trivandrum. About 50 doctors attended the function.

37) On 25-8-1986 the west wing of the Ayurveda hospital was inaugurated by Pfr. Rolf Linse, and Pfr. Hans Linse of West Germany laid the foundation of the Pharmacy building. Dr. T. P. Santha Lakshmy, DMO (Indigenous Medicine) presided over the function. Fr. Paul Kodiyan who took over as administrator Ayurvedha wing has brought New vigour in its development.

38) Dr. V. J. Jose, Chief Surgeon of Amala visited West Germany in Nov. 1986 in response to an invitation extended by Prof(Dr) G. H. Ott, the Chief Surgeon of Evangeliche Hospital. He had very useful discussions with German experts regarding new surgical techniques and endoscopy procedures. The visit also enriched the friendship and cooperation between Amala Hospital and its German benefactors. On 12th November he received the Ultra modern ambulance fitted with cancer detection equipments, donated by Amala Krebeshilfe, Bonn.

39) The Indo-US workshop on Viruses and Human Cancer was held at Amala from 9th to 12th December 1986. This workshop was convened as a part of Indo-US Science & Technology Agreement, the first in the field of cancer and in cooperation with (1) Dept. of Science & Technology, Govt. of India, (2) Committee of science, Technology & Environment, Govt. of Kerala (3) Uniformed Services University of Health Sciences, USA (4) Fogarty Foundation, USA (5) Council of Scientific & Industrial Research, Govt. of India. 9 Scientists from USA, 12 leading senior Indian Scientists and 15 active researchers from various institutions in India participated in this workshop. Sri. T. N. Jayachandran, Vice Chancellor of the University of Kerala inaugurated the function and Dr. Dhawan, Central Drug Research Institute, Lucknow presided over the function.

1987 40) The handing over ceremony of the mobile Unit to the hospital was held on 4th January 1987. Dr. P. M. Varkey, Chairman of Kerala Cancer Society presided over the function which was inaugurated by Sri. Dayanandan, Addl. District Magistrate, Trichur. A team of German doctors headed by Dr. G. H. Ott, as representative of Amala Krebeshilfe, Bonn. attended the function. He explained the salient features and the van will be useful to conduct the oral cancer detection programme.

41) The VIIth cancer ward was formally inaugurated by Sri. Sunil Dutt MP the founder of the Nargis Foundation for cancer on 18th January 1987 at a public function presided over by P. A. Antony MP.

42) The annual conference of the Association of Surgeons of India (Kerala Chapter) was conducted at Amala on 7th & 8th Feb, 1987, thus securing the distinction of holding such a conference for the first time in a private hospital.

The continued education programme held on the same day was inaugurated by Prof. M. Thangavelu, Dean, P.S.G. Institute, Coimbatore. About 250 surgeons from all over Kerala and invitees from Tamilnadu attended the conference.

43) A German team headed by Mr. Theo Ott came to Amala on 27-1-87 and spent 3 days at Amala and took various shots on treatment procedures like Sirobasthi, dhara etc. and the various charts revealing the history, fundamentals of Ayurveda, various valuable medicinal plants, preserved raw drugs and ancient surgical instruments.

44) Since Helpage India has offered full financial assistance for the construction of 2 cottages for sick and old people, the Executive Committee at its meeting held on 11-4-1987 accepted in principle the starting of cottages and directed the drawing up of master plan for the purpose.

45) His Eminence Simon Lourdswamy, Prefect Sacred Congregation for Oriental Churches visited the hospital on 9. 8. 1987, blessed the cancer patients and also evinced keen interest in the functioning of the hospital. The Chief Trustee represented to him on that occasion, the urgent need of procuring the latest Linear Accelerator - Since His Eminence is very much impressed in the functioning of this upcoming institution, he has promised all help.

To pursue this proposal at a personal level, the Executive Committee has decided to depute the Joint Director, Fr. Pius for that purpose.

46) The Annual Convention of Amala Fellowship members which was held on 23.8.87 was inaugurated by Sri. K. P. Aravindakshan, Chief Whip of Kerala Legislative Assembly. About 90 Fellows from all the 11 units attended the meeting.

47) A commission headed by Dr. Rastogi, Director, Central Council for Research in Homoeopathy visited this institution to consider the proposal of the hospital authorities to start a homoeopathic wing with facilities in cancer. The decision of the above council is awaited.

48) An Inter-Religious prayer meeting was held as part of the Counselling service functioning in this institution. The following participated in the function and delivered messages. (1) Swami Mrudananda, Director, Ramakrishna Ashram, Puranattukara. Rev. Fr. Domitian, Editor, Deepika, Trichur. Prof. Kunjumohamed, Vice Principal, Ansar English Medium School, Perumbilavu. 120 cancer patients and their bye standers attended the prayer meeting.

59) Dr. Nagalinga shetty, Director of Medical Education, Bangalore, inspected on 14 11.87 this institution and its physical facilities for purposes of recognising for senior Housemanship by the Medical Council of India. The council's decision is awaited.

50) Taking into consideration the shortage of accommodation for the cancer patients and in Ayurveda Hospital for Panchakarama treatments plans for the construction of an additional ward in the cancer wing and cottage type buildings in the premises of hospital have been approved. The construction of the latter is progressing Rev. Bro. Xavier is looking after the extensive complex farm and utilising every cent of it in a productive way.

51) Foundation stone for the new cancer ward was laid by Sri. K. R. Narayanan, Minister of State for Science & Technology, Govt. of India on 14. 12. 1987.

52) Since the institution is completing 10 years of service on 25th April 1988, it was decided by the Board of Management at its meeting held on 28.3.1988 to hold Decennial celebration on 23rd, 24th & 25th April 1988 with befitting programmes.

MEDICAL STATISTICS

A. General Hospital

Departments: (1) Medicine (2) General Surgery (3) E. N. T. (4) Orthopaedic Surgery (5) Gynaec & Obstetrics (6) Paediatrics (7) Dentistry (8) Pathology (9) Anaesthesiology.
(10) Imageology.

Departments	Name of consultants & Doctors
1. Medicine & R. M. O. service.	1. Dr. K. C. Mathew MD 2. Dr. Cherian Joseph MD 3. Dr. Jayasree MBBS
2. Cardiology	Dr. Geevar Zacharia MD, DM (Cardiology)
3. Surgery	1. Dr. V. J. Jose. MS 2. Dr. Krishnakumar Marar MS 3. Dr. Pappachan Ambookan MBBS, FAFC (W. G) 4. Dr. V. P. Thambi MBBS 5. Dr. Siva Prasad MBBS
4. Orthopaedics	6. Dr. Dominic K. Puthoor MS (Ortho)
5. Gynaec & Obstetrics	1. Dr. V. G. Stanley MD 2. Dr. Thressia John MBBS, DGO 3. Dr. P. S. Remadevi MBBS
6. Paediatrics	Dr. Joseph Paul MD, DCH
7. E. N. T.	Dr. V. J. Vincent MS (ENT)
8. Dentistry	1. Dr. T. C Kurian BDS 2. Dr. S. A. Rajasekaran BDS
9. Anaesthesiology	Dr. P. Raghavan MD, DA
10 Pathology	Dr. Remani Varma MD
11 Imageology	Dr. Valsalan Mathew MBBS DMRD
12 Dermitology	Dr. Mercy Paul MD

Staff:

Doctors	:	26
Nurses	:	80
Paramedical	:	15
Others	:	30

Bed strength:

Oncology	:	150
Medicine	:	70
Surgery	:	60
Gynaec & Obst	:	35
Paediatrics	:	15
ENT & Dentistry	:	20
		350

Cancer Wing

Staff:

Doctors

1. Dr. C. D. Joseph MD, DABR, Chief of Oncology
2. Dr. P. C. Sudheeran MD, RT
3. Dr. Willie George MBBS, DMRT
4. Dr. Joy George MBBS

Physicists

1. Mr. I, John Britto B. Sc, DRP
2. Miss V. Jamuna Packia Rani, M. Sc.

Beds

Bed strength	:	150 beds
Free Beds	:	65 beds

B. Ayurveda Institute

Staff:

Dr. K. Rajagopalan DAM, MBBS, FAIM – Research Director

Dr. (Sr) Donata, MD (Ay), – Research Officer.

Dr. M. Kesavan BA, MSAM– ResearchOfficer.

Dr. Sr. Austin MD (AY) – Research Officer.

Dr. K. S. Mohan BAM, DAC–Research Assistant.

Beds : Total Bed strength		40
Beds provided for free treatment.		10

C. Research Centre.

Dr. K. R. Panikkar Ph. D. Prof. of Biochemistry & Acting Research Director.

Dr. Ramadasan Kuttan, Ph. D. Associate Prof. of Pharmacology.

Dr. K. Nirmala Ph. D., Lecturer in Immunology.

Dr. R. Krishnakumar Ph. D., Research Officer.

Mr. P. N. Reghunath M. Sc., Research Officer.

Ph. D students :	Full time	:	12
	Part time	:	2



Joseph Varghese

Extension Programme of Amala Hospital

AMALA RURAL MEDICAL MISSION

Being a developing country, India has many health problems peculiar to it. 85% of the people live in rural areas of whom 60% are very poor and illiterate. Rural Health Development, therefore, becomes an essential component of the socio-economic development of this country. This cannot be achieved unless we go down to villages, families and the individuals.

Realising the importance of rural health care extension programme, this hospital had from the very beginning adopted two villages – Ponnore and Kottekad - for this Mission. In January 1986 a massive community health and development programme was launched in the interior rural areas of the Trichur District where basic facilities for health, education and sanitation are lacking. After a socio-economic health survey, two backward panchayats-Vettilappara and Varandarappilly–were selected for this purpose. A total of 2400 families have been chosen for this programme.

Programme of work.

1) Medical Service: In the project areas, free clinics are attached to each centre and sub-centre where one trained doctor, two nurses, two health workers and one village level worker render free medical service to the people. Medicines are given at concessional rate. The medical staff of the Centre conducts immunization, health education, family planning education, environmental sanitation, school health programmes and other motivational programmes.

2) House visit: The community health workers visit the families of the beneficiaries at least once a month and identify their problems and help to solve them.

New Health Centres

The hospital is planning to start new health centres at Vadakkumcherry of Palghat District and Ponnani of Malappuram District.

AMALA FELLOWSHIP

Amala Fellowship is a service organisation for the promotion of the welfare af cancer patients who are likely to seek medical aid from Amala Cancer Hospital & Research Centre. It is a non-profit making association of members whose services will be extended to all, irrespective of caste, creed or community.

To conquer the invincible oppressor, Cancer. Amala sought the willing service of the men of genuine goodwill, charity and social concern,

prepared to act as benevolent promoters and contact personnel taking our message to the public and carrying their needs back to us. The members of Amala Fellowship are chosen strictly by invitation. Only persons with a real aptitude for selfless service are admitted to the Fellowship that covers the whole of India. The Fellows are invited to illuminate the public regarding the humanitarian motives of the hospital, its scope of service and its facilities. They may, under their direct sponsorship, conduct conscientization campaigns, lecture programmes and free cancer detection camps in their areas of service. They also direct patients and persons suspected of malignancy to the hospital and recommend the deserving for financial benefits and concessions. The Fellows will be in contact with the cancer Centre and will always be kept informed of its latest developments and facilities. They will be invitees of all the Centre's major functions and meetings. Since they are distinguished members of the Amala Fraternity, their suggestions and recommendations will always be given due care and respect. As members of Amala Fraternity, they are looked upon as partners in the service programme of this cancer centre.

Fellowship groups have been started in 11 towns of Kerala, namely, Chalakudy, Irinjalakuda, Kodungalloor, Guruvayoor, Kunnamkulam, Pavaratty, Ponnani, Wadakkanchery, Vadakkumchery, Palghat and Perintalmanna.

In addition to this, Amala Krebeshilfe, Bonn, W. Germany and Amala Help Society, USA are members of Amala Fraternity rendering all possible help to this hospital to serve cancer victims of this country.

MOBILE DENTAL AMBULANCE PROJECT

Studies show that the incidence of oral cancer is very high in Kerala, especially in the rural and coastal areas of Trichur District. About 35% of cancer in Kerala is found to be seen in the head and neck and 30% is oral cancer.

The project Mobile Dental Ambulance:

Early detection of oral cancer and its prevention in the rural areas was one of the major concerns of Amala from its very beginning. The project Mobile Ambulance for Dental Care and Cancer prevention is a product of mutual co-operation between Amala Cancer Hospital & Research Centre on the one hand and Amala Krebeshilfe e.V Bonn and West German Government on the other.

Aims and objectives of the project:

a) Early detection of mouth cancer through examination and care of the conditions of teeth and mouth.

b) Complimentarily, the after-care service of cancer cases can be improved.

c) Cancer prevention programmes are planned and realised.

Project target:

To screen 3 lakhs of people in Trichur District for oral and dental examination within a period of three years.

Equipment for the project:

A Mobile Dental Ambulance (Benz Unimog 1300 L) with all fittings have facilities for oral examination, dental check up and service and for the detection of oral cancer The equipments in the ambulance van include Dental Chair and appliances, Dental x-ray, Automatic x-ray developer, Autoclave, Endoscopy set, Dental Camera, stabiliser and ultrasound scanner etc.

Personnel:

A qualified doctor with experience in dental care and detection of oral cancer, 2 nurses one technically qualified driver, other supportive staff like social worker and public relations officer.

Project implementation and target coverage:

The scheme has been implemented as an extension programme of Amala Cancer Hospital in cooperation with the Government and other service organisations like Amala Fellowship Groups, Lions, Rotary, Y. M. C. A, Vincent-de-Paul Society and others. Oral clinics and oral cancer detection camps are conducted in different parts of the district and neighbourhood.

Mobile Dental Ambulance - Statistics:

Total No. of camps.	: 136
Total No. of patients screened	: 67,486
Total Dental patients given service in the ambulance	: 5,182
Total Biopsy	: 223
Total No. of Leukoplakia	: 147
Mouth Cancer detected	: 24

Impact of the programme:

The rural people and organisations showed an overwhelming response to these camps More and more organisations came up for conducting camps, doing preparatory work and educating public regarding the ill-effects of smoking, tobacco chewing and alcoholism. Since many people turn to the hospital at the last stage for cancer treatment the prognosis is very bad. But through conscientisation programmes people are increasingly aware about the need for early detection and now they are voluntarily coming forward to attend the camps for medical check up and follow up activities.

Sincere thanks are due to Amala Krebeshilfe e.V, Bonn and West German Government.



Fr. George Pius CMI

Amala After A Decade

Amala which started its saga of service 10 years back with 90 beds, 6 doctors and 40 nursing and paramedical staff has grown into a banian tree giving shelter to 380 in-patients in the Oncology, Pathology, Medicine, Surgery, Obst & Gynaecology, Paediatrics, ENT, Anaesthesiology, Imageology, Orthopaedics, Dentistry, Dermatology & Cardiology departments in the course of 10 years. The diagnostic laboratories of clinical pathology, Biochemistry, Virology, Histopathology etc has contributed to the proper diagnosis of the diseases. The Cardiology section of the medicine department is well-established with intensive care rooms, 2 cardiac monitors, Treadmill for exercise ECG, Ultrasound scanner for echocardiography etc.

The Radiology department with 700 MA x-ray and 2 other portable x-rays, the ultrasound scanner, Endoscopy equipments, Colposcope, Treadmill for exercise ECG, foetal monitor etc have added much to the modern methods of investigation.

All the departments manned by well-experienced, highly qualified dedicated specialists attract the patients from far and near places.

The Department of Oncology headed by the veteran Dr. C.D. Joseph MD, DABR, and his team of cancer specialists, Dr. Sudheeran, Dr. Willie George, Physicists, Radiology technicians and nursing staff, counselling and social workers give asylum to hundreds of cancer patients every day. They have treated 18,375 patients in the year 1987. The two teletherapy machines Gammarex-R and Theratron 780 is working from morning 8 a.m to 9 p.m giving radiation to about 120 cancer patients everyday. The need for a third one preferably a Linear Accelerator is an immediate necessity. Steps have been initated to acquire it. The Brachytherapy section with Caesium 137, Cobalt 60, tubes and needles and Iridium 192 wires give intracavitary and high dose radiation to the localised tumour. The other two modalities of treatment other than radiotherapy namely cancer surgery and chemotherapy is used in planned sequence for the cure and control of cancer.

Amala has 93360 sq.ft Hospital building, 38640 sq.ft of Sisters quarters and nursing school, 13600 sq.ft of family quarters 5600 sq ft of canteen, 4200 sq.ft Annexe & Shopping complex, 9420 sq.ft of Ayurveda hospital, with an asset of Rs. 3,25,00,000/-

As a part of cancer control programme, the well-equipped Dental ambulance vehicle meant for the detection of oral cancer has till now conducted 136 camps in different places screening 67486 people in different parts of Trichur district and neighbouring districts.

The cancer education programme for motivating the people for early detection of cancer conducted a number of exhibitions in different parts of Kerala and published a number of leaflets giving information and guidance and produced four video cassettes and slides and charts as part of the move to educate the schools and colleges. Thus our Oncology department is a well-established cancer centre which could do lot for the control, prevention and cure of cancer.

Our Research Section is one of the outstanding research centres for cancer research approved by Govt. of India and Kerala, Dept. of Science & Technology, ICMR, Calicut & Mahatma Gandhi Universities. A team of eminent scientists do meaningful research in the field of Immunology, Biochemistry, Radiobiology, Pharmacology, Virology Physiology, Cytogenetics and tissue culture. A team of students has registered for Ph. D. with the sophisticated machines and airconditioned animal house and other infrastructure it does marvellous work in the field of cancer research.

The Research Centre has 4800 sq.ft area in ground & I floor with a 500 sq.ft seminar room 2000 sq.ft auditorium, 500 sq.ft for animals besides the space for beds set apart for research. Equipments worth Rs. 20 lakhs are installed for pure research and, Rs. 21 lakhs for applied research.

The Ayurveda Unit with its research, treatment, medicine preparation, herbal garden, green house has established itself well in Kerala, India and abroad. The 40 beded hospital manned by 5 doctors and Panchakarma technicians, nursing and other staff give real contribution in the field of indigenous medicine. It is now a well-known centre in India and attracts foreigners from abroad Two airconditioned cottages with living rooms and treatment rooms etc have already been completed. It will enable us to make the Westerners realise the antiquity, heritage, of India's aged old system of medicine.

The complex is built in a 40 acre campus with well-laid roads, garden. Coconut and other trees numbering more than 5000 established, itself to a health resort. Water supply has become self sufficient by digging 5 bore wells and lifting water from Peechi canal some $3\frac{1}{2}$ kms away and filtering by slow sand filtering method. With 2048 cft filtering tank. Main reservoir has a storage capacity of 65,000 gallons Besides the 3 emergency tanks having a storage of 15,000 gallons add to the efficiency of water supply system.

Solar thermal system installed by the Convention Energy sources, supplies continuous supply of hot water in 4 wards and Gynaecology section for bath. Additional 3 units with a storing capacity of 1500 litres each will be installed shortly will meet the requirement of hot water in the whole complex.

To meet the emergencies of power failure and power cut by electricity board which is very common these years, we have installed one 100 KVA Generator which will enable us to switch on to D. G supply when the power faills.

Two generators of 9 & 6 KVA serve as stand-by units.

Two ambulances attend to the needs of patients in transporting them.

As a charitable hospital committed to serve the sick and poor Amala was from its very beginning, very generous in giving concessions in treatment. During 86-87 more than 25% of the income; ie Rs. 10,96,028-18 of Amala Hospital and 45% ie. Rs. 2,25,400-40 from research were given as free and concessions.

A separate department with one priest and 2 qualified sisters give counselling and pastoral service to the patients. The prayer team visits patients everyday, listen to them and give spiritual support. They also organise prayer groups in wards.

The rural medical mission started by the hospital has made tremendous progress in providing timely medical care to the interior villages and tribesmen of Vettilappara and Varandarappilly panchayats

A quarterly Bulletin entitled Amala News is being published regularly from the hospital. Amala Research Bulletin is periodically published from Research Section and Ayurvedic Bulletin from Ayurvedic Research.

School of Nursing, situated in a fourstoreyed building and functioning from 1980 has 45 students. Very good training is given to them. They excell in service and win distinctions in their examinations.

This is what Amala today. The growth has been achieved by the benevolence and grace of the Almighty God our patron Amala, the blessed Virgin Mary mother of God, by the goodwill of Kerala Cancer Society, by the patronage of Government and the public, by the guidance of Trustees of Amala the Devamatha Provincial Council and by the leadership of Rev. Fr. Gabriel, the founder, first Trustee-in Chief and the present Director of the hospital and by the cooperation of all our staff and goodwill of our patients. I bow my head before all of them with gratitude and solicit the continued patronage and support to make Amala an outstanding institution in the service of suffering millions. ●

ABSTRACTS & REPORTS

Research Centre Seminar

Ayurvedic Seminar

Nurses Seminar

IMA Meeting

Amala Fellowship

SCIENTIFIC SEMINAR

A scientific seminar was conducted on 23-4-'88 as part of the Decennial Celebrations of Amala Cancer Hospital & Research Centre. We had invited Scientists from Universities and Research Centres of Kerala to present papers. and they responded very well. All the participants were welcomed and introduced to the audiance by Dr. K. R. Panikkar. Seminar was inaugurated by Dr. Paul A. Vatakkancherry, Prof. & Head, Department of Applied Chemistry, Cochin University of Science & Technology. In his inaugural address he appreciated our work and the recognition we got in conducting National Seminars, Indo-US workshop and Group Monitoring workshop of DST. Three sessions of the scientific seminar were conducted under the Chairmanship of Paul A Vatakkancherry. Dr. M. P. Asokan, Deputy Director. Rubber Research Institute and Dr. Kaleysaraj, Prof. & Head of the Dept. of Biochemistry, University of Kerala, Trivandrum. Dr. Ramadasan Kuttan proposed the vote of thanks to the scientists.

ABSTRACTS

Alpha-Galactoside Specific Lectins from Artocarpus species

Debkumar Basu
Sree Chitra Tirunal Institute for Medical Sciences & Technology, Trivandrum 695 011

The significance of carbohydrates in cell-sociology is well documented in the literature. Our laboratory is working on Structure - and - function relationship of glycoproteins of various mammalian sources. This has led us to work on lectins, saccharide specific cell agglutinating (glyco) proteins of non-immune origin. Lectins agglutinate normal and trypsinised erythrocytes and also various cells. They recognise malignant cells and also specific blood group substances. Although mono – saccharide specificities are widely reported, the oligosaccharide structure determination is greatly helped by lectins.

We have isolated two homogenous glycoproteins of galactose - specificity from *Artocarpus* species.

Both the lectins have almost similar physico-chemical and biological properties, In this talk, I shall discuss the purification and properties of the lectins in detail.

The blood platelet system as a model for studying mechanisms and modulations of intercellular interactions

M. Jamaluddin
Sree Chitra Tirunal Institute for
Medical Sciences & Technology Biomedical
Technology Wing, Trivandrum 695 012

Cancer may be regarded, for scientific purposes, essentially as a disease state in which cells have broken loose from regulatory mechanisms operating between normal cells owing to a break-down of their ability to respond normally to external signals or stimuli. Therefore understanding mechanisms and modulations of stimulus-mediated intercellular interactions is important for understanding the pathology of cancer. But scarcity of suitable model systems makes the task difficult. This important area of research, therefore remains largely neglected.

We have initiated work in this area employing the blood platelet system. Platelets can be isolated in a nearly native state, in about an hour, employing only mild methods. They can be activated within seconds by a wide variety of agonists or stimuli to undergo interactions or aggregation.

Two impediments stood in the way of using this system. Firstly there was no swift and sensitive method of quantitating aggregation and secondly there was no theoretical framework within which the data can be rationalized. We have now overcome these impediments.

We have devised a simple spectrophotometric method of following platelet aggregation (Jamaluddiu M & Krishnan L. K. (1987) J. Biochem. Biophys. Methods *14,* 191–200) and have proposed a theoretical model of aggregation and derived a rate equation for aggregation (Jamaluddin, M & Krishnan, L. K. (1987) J. Theor. Biol. *129,* 257-261).

Employing these two tools we have investigated the kinetics of agonist-induced aggregation of gelfiltered calf platelets and their modulations by some antiplatelet drugs like aspirin and ajoene, a compound derived from garlic. The data demonstrated the usefulness of the platelet system as a model to study mechanisms and modulations of intercellular interactions.

Total haemolytic complement (CH50) and its fractions (C3 and C4) in the sera of patients with premalignant and malignant lesions of oral cavity

Dr. R. Rajendran
Dental College, Trivandrum.

Total hemolytic complement (CH50) and its fractions (C3 and C4) were estimated in the sera of 50 patients with oral leukoplakia, 50 patients with oral submucous fibrosis and 50 oral cancer patients. The values were compared with that of 50 normal controls. No significant alterations in the values of CH50, C3 or C4 were observed in the sera of patients either with leukoplakia or oral submucous fibrosis whereas the values were found to be altered significantly in oral cancer (P 0.001). In the case of oral submucous fibrosis the mean complement levels were slightly lower than that of normal controls and leukoplakia. Age and sex had no influence either on the total complement activity or in its fractions (C3 and C4). The serum complement levels may be useful as a biological marker for the early detection of tissue dysplasia.

Immunology of premalignant and malignant conditions of the oral cavity

Prabha, B; Radhakrishna Pillai,
M; Thomas Abraham and Krishnan Nair M.
Regional Cancer Centre, Trivandrum

Cellular and humoral immunity was assessed in patients with premalignant and malignant lesions of the oral cavity and compared with that in the normal controls and chronic chewers of betel quid. The results were as follows. Oral cancer and premalignant lesions:

i) Reduction in total leucocytes and T3 lymphocytes

ii) Reduction in T4 lymphocyts subpopulation

iii) Increase in T8 lymphocyte subpopulation

iv) Increase in circulating immune complexes

v) Decreased natural killer activity (NK) blocked by autologous serum. Chronic chewers showed mpaired immune status as evidenced by increased circulating immune complexes and blocking of natural killer activity by autologous serum.

Cell mediated and humoural immune responses in patients with solid tumours

T. Vijayakumar,
Scientific Officer, Science,
Technology & Environment Dept.,
Secretariat, Trivandrum
and
C. K. J. Panikkar
Dean Faculty of Medicine,
University of Calicut, Calicut.

Cell mediated and humoural immune responses were assessed in 196 patients with carcinoma of the oral cavity, 172 patients with carcinoma of the uterine cervix, 166 patients with carcinoma of breast, 50 patients with benign lesions of breast and cervix and 100 healthy normal age and sex matched controls. The following investigations were carried out in all the subjects:

1 Total and High Affinity Rosette Forming Cells (TRFC and HARFC)

2 Serum Immunoglobulins (IgG, IgA, IgD, IgM and IgE)

3 Serum complement and its fractions CH50, C3, C4)

4 Circulating Immune Complexes (CIC) and the immunoglobulin content in the CIC.

The cell mediated immunity was assessed by enumerating the TRFC and HARFC and the numoral immunity was assessed by estimating the serum immunoglobulins, complement and its fractions (CH50, C3 and C4) and CIC and its antibody contents. Patients with benign lesions of the uterine cervix and breast had no significant immunologic alterations. Even though the TRFC in Cancer Patients had not shown any change, the HARFC was significantly decreased, the decrease being more pronounced in advanced clinical stages. The serum IgA' IgD and IgE as well as the CIC and its antibody contents increased significantly in cancer patients. The values were found to be increasing with the progression of the clinical stages of the disease. The complement and its fractions were found to be increasing upto Stage III and then remained persistantly elevated.

Ninety patients were available for follow up six months after surgery and/or radiotherapy. Of these 67 were clinically cured whereas the remaining 23 were on treatment for residual lesions. The immunological status of patients who had a clinical cure returned to normal level whereas it remained depressed in patients who were still on treatment for residual lesions. This study indicates the importance of the assessment of immune status in the diagnosis and prognosis of cancer.

Association of Herpes Simplex Virus with human oral carcinoma

Kezia Kuruvilla and D. M. Vasudevan
Amala Cancer Research Centre, Trichur 680 553

The role of Herpes Simplex Virus as an etiological agent in oral cancer is being evaluated. The presence of anti-HSV-1 antibody in various cancer groups was studied by passive haemagglutination and the results were confirmed with neutralization test. Results showed neutralizing antibody to be relatively high in oral cancer patients (73%) whereas in normals it was only 51% and in other cancer group 50%. HSV-1 antigen was demonstrated by immunoperoxidase staining in 75% of oral cancer sections tested whereas in normals the percentage was only 33%. Hybridization studies revealed the presence of viral DNA in cancerous tissue which suggests a causative role for HSV in oral cancer.

Production of Extracellular amylase by Marine Bacteria from Cochin Backwaters

A. V. Saramma and Babu Philip,
Marine Biology, Microbiology & Biochemistry
Division, School of Marine Sciences, Cochin
University of Science & Technology, Cochin
and
Rosamma Philip,
Fisheries College, Kerala Agricultural University,
Panangad.

Bacteria isolated from various marine environments viz., Water, Sediment, fishes *(Etroplus Suratensis* and *Liza parsia)*. Prawns *(Penaeus indicus* and *Metapenaeus dobsoni)* and clams *Sunnetta scripta* and *Meretrix Casta)* were tested for their ability to produce extracellular amylase. Of the 859 isolates tested, 455 were amylolytic, (52.28%). Maximum number of amylolytic strains were present in the genus *Vibrio* (85.13%) Genera-wise distribution pattern were found to be

Vibrios Enterobacteriacease Staphylococci Bacillus Flavobacterium Acinetobacter Micrococci Moraxella and Coryneforms Pseudomonas

Further characterization of the enzyme from selected strains is under investigation.

Antitumour and Chemoprotective Activity of Selected Spices

M. C. Unnikrishnan and R. Kuttan

Amala Cancer Research Centre, Trichur 680 553

Cytotoxicity of the extracts from eight different spices used in Indian diet was determined using Dalton's lymphoma ascites tumour cells in vitro and Chinese Hamster Ovary cells and Vero cells in tissue culture. Alcoholic extracts of several spices inhibited cell growth at considerably low concentration in both in vitro experiments and tissue culture cells. However in animal experiments none of the spice extracts inhibited the ascites tumour formation induced by Dalton's lymphoma tumour cells.

The cytotoxic component in the extract of pippali (peper longum) is being isolated using a combination of silica gel chromatography, ion exchange chromatography and paper chromatography. The isolated component reacted with bromophenol blue indicative of its acidic nature.

Extract of garlic protected the animals from the side effects of radiation and chemotherapy. The mean white blood cell count was much higher in garlic treated animals than controls.

Modern Trends in The Study and Control of Filariasis

Dr. R. Kaleysa Raj
Department of Biochemistry, University of Kerala, Kariavattom, Trivandrum 695 581

A biochemical approach to the study and control of various pathogens is to find out an essential metabolic step or a pathway which is different in some respects from that of the host and the try to make use of that difference for the control of the pathogen itself.

The model system selected for the study and control of filariasis is the *Setaria* system. This is a typical lymphatic parasite and is claimed to be very similar to the human filarial parasites, *Wuchereria bancrofti* and *Brugia malayi*.

One of the earlier breaks in the study was the observation that *Setaria* is oxygen dependent and at the same time can tolerate high concentrations of potassium cyanide, under invitro conditions. Mitochondria like particles isolated from *Setaria*showed good activities of succinic dehydrogenase and many other enzymes. The activities of isocitrate dehydrogenase and keto glutarate dehydrogenase could not be detected indicating the absence of complete citrate cycle. But showed good activity of isocitrate lyase indicating the presence of glyoxylate cycle. Cytochrome system was found missing, indicating the absence of a terminal oxidase, thereby explaining the cyanide insensitivity.

This preliminary biochemical study itself clearly shows points which are different in the host and parasites. It is speculated that the study when completed will yield better methods of control of parasitic diseases such as filariasis.

Mitotic Events in Animal Cells are Associated With an Altered Phosphorylation on pp60 src Molecules

Isaac Chackalaparampil
Amala Cancer Research Centre,
Trichur 680 553

Endogenous Proto-oncogene product pp60 src from mouse, overexpressed chicken c-src and viral-src isolated from cells synchronized in mitosis with with or without treatment mitosisarresting drugs, all revealed retarded mobili ties on SDS gels. More than 50% of src molecules showed retardation and this was associated with large increase in phosphorylation or the molecule at its aminoterminal region. The novel phosphorylation occured on threonine and may be on serine also. The altered form of pp60 src, however, disappeared as soon as the cells had undergone mitosis. These results indicate that pp60 src may play a key role in the regulation of cell division.

AYURVEDA SEMINAR

In connection with the Decennial Celebrations of Amala Hospital, the Ayurveda Department organised a one day seminar on Pangu (Paraplegia), a common disease found all over the country. The seminar was attended by eminent physicians and Ayurvedic students from different Ayurvedic Centres of Kerala.

Inaugural Address:

Sri. Vaidya Booshanam Raghavan Tirumulpad, Chalakudy.

The Inauguration of the Seminar was performed by Sri. Raghavan Tirumulpad, a famous scholar and Ayurvedic physician. In his inaugural address he spoke on certain principles of diagnosis and treatment of 'Pangu' (Paraplegia) according to Ayurveda.

Two methods are being used by Ayurvedic physicians for diagnosis and treatment. In one, the Aetiology, Pathology and Symptomatology of the disease are decided according to Ayurveda and the necessary treatment is prescribed using the same principles. The second method is to decide a particular disease according to modern parameters and prescribe its treatment according to Ayurvedic principles. In a book, "The Threedoshas and Homoeopathy", its author discribes another method; the diagnosis of the diseases using the Threedosha theory of Ayurveda and prescribing the treatment according to Homoeopathic principles. He claims that this methodology is very much effective.

In Sri. Tirumulpad's opinion, regardless of the nature of medicine, the principles and methods utilized for the diagnosis of a disease should be purely Ayurvedic Even now medicines like "Rauwolflia serpentina" is being utilized by practitioners of different systems according to their own principles. There is no objection in utilizing the modern methods of diagnosis for involving a clear and correct diagnosis. But at the same time Ayurvedic researchers should be specially aware that no methodology neglecting the Ayurvedic principles of diagnosis and treatment would be fruitful to them. Many methods used in Ayurveda are made unpopular by their own Advocates. Those should be revived and their practical application elaborated.

Continuing, Sri. Tirumulpad strongly emphaised the need to utilize the eight types of methodology collectively known as "Ashtastana pareeksha" in Ayurveda in the diagnosis and treatment of each disease and he also requested the researchers to evaluate their findings on these carefully.

Presidential Address:

Prof C. K. Ramachandran, Retd. Prof. of Medicine, Medical College, Calicut.

Dr. C. K. Ramachandran started his presidential address expressing his high appreciation in the development of Amala Cancer Hospital complex and it's architect Rev. Fr. Gabriel.

As a scholar and famous physician in both Ayurveda and modern medicine Dr. Ramachandran compared the utility of the knowledge of one system to the other. He stressed on the importance of "Kapila Sankyam" and the contribution of the principles of "Sankyam" to explain the "Vata principle" etc.

After touching on the controversial subject of life after death and some portions from Brihatharannyopanishath and Khadopanishath regarding this, the speaker referred to the description of diseases in ancient Egyptian Papyruses. Among 48 diseases discribed in Papyrus of Ebers, one described with the aid of a picture was related to the treatment of Tetanus or Vranayama in Ayurveda. Regarding 'Pangu' (Paraplegia) Papyrus of Edwin Smith has given a fine description. These Papyruses date back from 2600 BC to 2400 BC.

Atharvaveda also belongs almost to this period. In Atharvaveda, the Anatomy of the human body has been described more accurately than in the presently available Ayurvedic Samhitas; for example, urogenital Anatomy. Similarly, the Anatomy of brain and spinal cord have been described in Ebers Papyrus. Hippocrates had knowledge about Ayurveda and he had written 411 Aphorisms. One among these is regarding Pangu or Paraplegia. Hippocrates had clearly explained the urinal and faecal excretion difficulties in Paraplegics. Similarly description regarding various types of paralysis had been described in the Atharvaveda. The description regarding paraplegia is noted in the Ist Mandala 12th Mantra of Atharvaveda. Prof. Ramachandran said that the commentaries of Prof. Whidney and Prof. Griffith of Atharvaveda and commentary of

Sayana put together may help in the proper understanding of the verses in Atharvaveda without much difficulty. Various etiological factors were discussed and the importance of the following varieties were mentioned;

1. Traumatic - including "Kukundara Marmabhighata"
2. Certain localised lesion causing compression on the spinal chord from inside and out side
3. Acute transverse myelitis
4. Cerebral Pareplegia–due to parasagital tumours.
5. Cerebral convulsions due to arterial changes were described and informative slides regarding various other etiological factors were also exhibited. Among them were-Ependymoma pressing the chord cansing Paraplegia, was highly appreciated.

Paper I

The relation of Pakwasaya Vatakopa and Marmabigatha to the disease 'Pangu'

Dr. Sukumaran Nair,
Principal, Ayurveda College, Ollur

Among 'Threedoshas' Vayu got a vital role in keeping harmony or equilibrium of these principles. In other words, Vayu is the controller or activator of other doshas, Pitta and Kapha. The functional and regional classification of Vayu is done on the basis of its action or specific role in each part of the body. Among them prana and apana are situated on the upper position including head and the anal portion of the body respectively. They co-operate with other parts to perform the sensory and motor functions of the body. In the organic distribution 'pakwasaya' or area related to large bowel and 'kadi' (Lumbo-sacral area) are the anatomical part of Apanavayu. In the nervous system this may include lumbo–sacral plexes of spinal chord and pelvic plexes of sympathetic nervous system. Both these are the functional units of sensory and motor functions of the lower part the body below the umbilical level.

Derangement of apana vayu results in Pangu Khanja or functional loss of lower part of the body or paraplegia. Pangu manifests as functional loss of lower limbs retention or incontinence of urine and faeces sensory defects, muscle wasting etc.

Susrutha and Charaka describes pangu in the Adhibala Pravrutha rogas - congenital diseases. This may be due to the defects in germinal stage. Again, faulty habits and diets of pregnant women are also contributing factors of pangu. Inproper body postures, over–indulgence of sex, etc. also may cause Paraplegia or functional loss of lower part of the body. According to Ayurveda these are the manifestations of derranged Apana Vayu which seats in pakwasaya.

He also referred to trauma on Marmas – defect-in the Vital points of the body viz. Kukundaram-Lumbo - sacral area, Nidambam - buttocks, Janu - kneejoint and Gulpha - ankle joint also may cause functional loss of lower limbs fully or partially.

Paper II :

Recent Research On Pangu

Dr. P. Ramachandran, Research Officer,
Panchakarma Institute, Cheruthuruthy.

In this Institute they have conducted a clinical study on Pangu-(Paraplegia) patients with traditionally followed treatment procedures and medicines. The aim and objective of this study was (1). To assess the respond of Ayurvedic medicine on Pangu disease. (2). To evaluate the action of panchakarma therapy on this disease and (3). To derive the most effective group of medicine and treatment procedure among the selected regime.

Criteria of selection :

The cases were selected from the O. P. D. and referal cases from other institutions. The selected cases were of three types of etiology. (1). Traumatic cases (2). Degenerative lesions. (3). Viral or inflammatory origin:-The conditions acceptable were (1). Inability to walk. (2). Retension or incotinence of urine and faeces. (3). Wasting of lower limbs. (4) Sensory changes. (5). Deep tendon reflex changes. These patients were of the age group between 15-70 years.

Treatment :

Was classified into two groups: (1). Sodhana and samana (Elimination with panchakarma and curative medicines) and (2). Samana - curative medicine alone.

Medicine:

The selected medicines were: (1). Sahacharadi. (2). Bhadradarvadi. (3). Prabhanjana vimardanam.

(4). Nirgundi thailam. These were prepared in the form of decoction, oil, ghee, etc. for internal and external use.

In sodhana group the treatment procedures were :

Abyangam (Oilmassage),

Snehanam (Internel use of oil or ghee),

Swedanam (Sweating),

Nasyam (Nasal medication), and

Vasti (Large bowel medication and elimination)

The treatment course was for 2 months.

Laboratory investigations and X'-Ray examination were done before and after treatment. The patients were put into groups in each section. The petients who had undergone sodhana therapy showed good response than samana (curative therapy) alone. Better results were seen in the patients with degenerative changes. Out of the selected medicines Sahacharadi group was more effective in degenerative changes.

Bhadradarvadi medicines showed better response in traumatic lesions, Nirgundi thailam got more action in defects of inflammatory origin.

It was interesting that on X'-Ray examination no radiological change was noted after treatment though clinically the patients improved markedly. Physio-therapy along with medical treatment gave better results.

Paper III :

Classical Treatment of Pangu

Dr. Sr. Austin MD (AY),
Amala Ayurveda Hospital, Trichur.

Nidana parivarjana and samprapti vighatana play an important role in the management of any disease. The main causative factor of Pangu is vataprokopa. This provovation of vata can occur by dhatukshaya and avarana.

Injuries, Pakwashaya vatakopa, Marmabhighata, gambeera vatarakta, Akshepaka vyadhis, prishtavamsa grandi etc. cause or influence the manifestations of the disease pangu. According to modern medicine,multiple sclerosis,(a type of sarvangavatha) sub-acute cambined degeneration of the spinal cord. (Disease caused by dificiency of vit. B_{12}) lathyrism etc. cause the disease pangu. The prognosis of pangu is explained in the classics is as follows. If the disease is new and without complication and the patient is strong enough then this disease can be treated and cured with the prescribed treatments for Vatakopa.

The line of treatment of the disease may be briefly classified as shodhana and shamana types.

Special recipes:

1 The disease which manifests below Nabhi is treated with vasti karma and avapeetaka snehapana (Ref: A. H. Vatavyadi chikitsa)

2 According to the condition virechana, Asthapana vasti, sweda, gulgulu preparations and snehavasti etc. can be effectively prescribed in pangu. (Ref: Bhavaprakasam)

3 Pizhichil, Dhara, Navarakizhi etc. are fruitful in this disease

4 Vaitharana vasti- (Ref: Vangasenam)

5 **Special kashaya yogas:**

a. Balakorandamooladi quatham (Ref: Arogyakalpadrumam)

b. Dasamoolabala Rasnadi quatham (Ref: Chakradatta)

6 The treatment of kanya can also be administered in case of pangu

7 **Thaila yogas:**

a. Ksheerabala Thaila

b. Dhanamtharam thaila

c. Rasa thaila.

8 **Rasa preparations:**

Chintamani Rasa (Ref: Yogendra sarasamgraha).

NURSES SEMINAR

A one day Nurses Seminar was held on 24th April, 1988 in connection with the Decennial Celebrations of Amala Cancer Hospital & Research Centre.

The theme of the Seminar was "Patient Care"-A better approach.

The participants were the Tutors, Staff and Students of different hospitals in Trichur District such as:-

Jubilee Mission Hospital, Trichur
Lal Memorial Hospital, Irinjalakuda
Elite Mission Hospital, Trichur
Bishop Alappat Hospital, Karanchira
St. Joseph's Hospital, Choondal
Govt. School of Nursing, Trichur

The Seminar started at 10.15 a.m with a prayer. Sr. Celestine, our Nursing Superintendent, gave a warm welcome to all. Mr. W. Antony, Deputy Director, Loyola College, Madras, inaugurated the seminar. Rev. Fr. Gabriel, Director of Amala Cancer Hospital, in his introductory speech told about the drive behind conducting the seminar. Rev. Sr. Francis, MSJ (M.Sc Tutor at Lissie Hospital) presided over the inaugural session. In her presidential address, she explained in detail about the holistic approach in patient care. Keynote address was given by Mr. K. R. Gangadharan of Madras. He emphasised that the nurses must possess many qualities like discipline, devotion and commitment to duty. He stressed the point that the goal of a hospital is to satisfy the patient and the staff of the hospital must be aware of this goal.

Miss. Rema Devi, Staff Nurse from Amala, entertained all by a dance. The morning session ended at 1 p.m with the vote of thanks proposed by Sr. Mary Mannarathu, Principal, School of Nursing, Amala.

After lunch the participants were given a guided tour to see the Exhibition set up in premises of the hospital.

The afternoon session started at 2.30 p.m. Dr. C.D. Joseph, Chief of the Oncology Department, talked in detail about the "Care of a terminally-ill patient". It was followed by a talk by Dr. Geevar Zacharia, M.D. D.M. Cardiologist, on "Management of a patient with acute myocardial infarrction".

The seminar ended at 3.45 p.m with tiffin. Variety entertainment programmes were conducted by the students of this hospital at 6 p.m.

I. M. A. MEETING

A clinical meeting of the Trichur IMA was conducted in Amala Hospital auditorium at 7.30 p.m. on 23-4-1988.

The meeting was attended by 70 doctors from Trichur town and the suburbs. Apart from the specialists in different disciplines of medical profession, a good number of general practitioners also attended the meeting.

The proceedings were started with the flag salutation, by Dr. Krishnakumar.

Fr. Gabriel welcomed the gathering. In his speech Fr. Gabriel briefly described the tremendous progress made by Amala Hospital in the short span of 10 years.

Dr. V. J. Jose, Chief Surgeon of Amala Hospital, was the moderator of the proceedings of the clinical meeting.

The following presentations were made during the meeting:

1. Rupture of Sinus of Volsalva into the right Ventricle.
   Dr. Gevar Zachariah MD, DM, Cardiologist.
2. Malignant Histiocytoma
   Dr. K. Krishnakumar MS, Surgeon.
3. Tuberculoma of the Brain.
   Dr. K. C. Mathew, MD, Physician.
4. Central Vein Catheterisation.
   Dr. P. Raghavan MD, Anaesthesiologist.
5. Experiences with Interstitial Iridium implant in Amala.
   Dr.C.D. Joseph MD, DABR,Chief Oncologist.
6. Ten year review of surgical treatment of gastric cancer. Video demonstration of sub-total gastrectomy procedure.
   Dr. V. J. Jose, MS, Chief Surgeon.

AMALA FELLOWSHIP

Annual Convention

The Annual Convention of the members of Amala Fellowship was held at 2 p. m. on 25-4-1988. 52 members representing all the 11 units were present. The Administrative and Medical staff of the hospital were also present.

The inaugural session was presided over by Sri. K. P. John, the President of the Central Committee. Sri. Hormice Tharakan D. I. G. of Police inaugurated the Convention.

Fr. Gabriel, the Director of the hospital welcomed the Chief Guest and all those who were present in the Convention. He pointed out that this hospital has completed 10 years of service since its inauguration on April 25th, 1978. Many of our friends felt that the fast development of the hospital deserve a special commemmoration in the form of a Decennial Celebration.

Sri. Hormice Tharakan, while inaugurating the Convention, appreciated the working of the hospital and the yeoman service it renders to the cancer patients of this country.

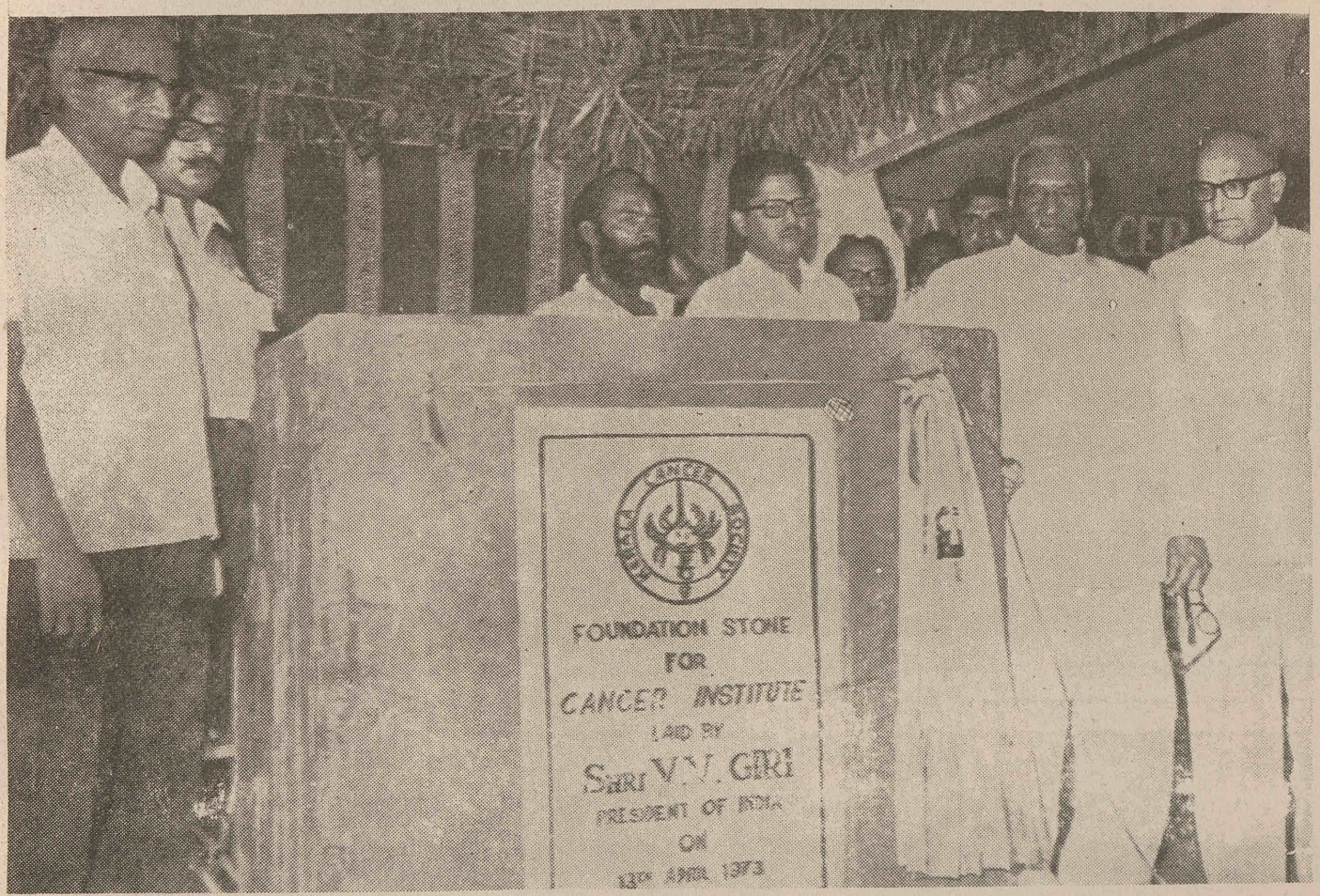
Sri. K. P. John in his Presidential Speech pointed out the spectacular growth of the hospital during the last 10 years and the useful role played by Amala Fellowship.

After this, the General Report regarding the working of the Fellowship was presented by Sri. Joseph Varghese, PRO. The representatives of various units gave short accounts of their activities.

Sri. Hormice Tharakan, the Chief Guest awarded the rolling trophy to Kunnamkulam Unit.



A view of Vilangans



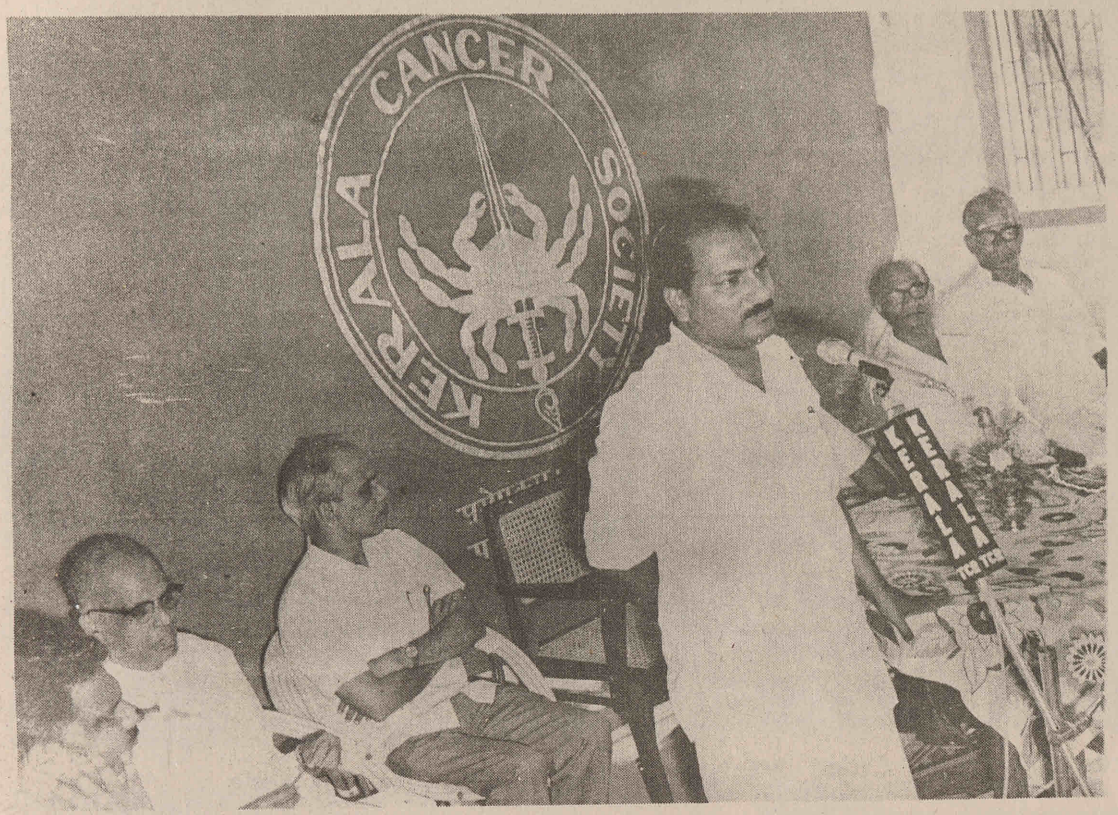
Rashtrapathi Shri. V.V. Giri laying the foundation stone for the Kerala Cancer Research Institute on 13.4.1973



Late Sri. Raj Naraian the then Union Health Minister at Amala.



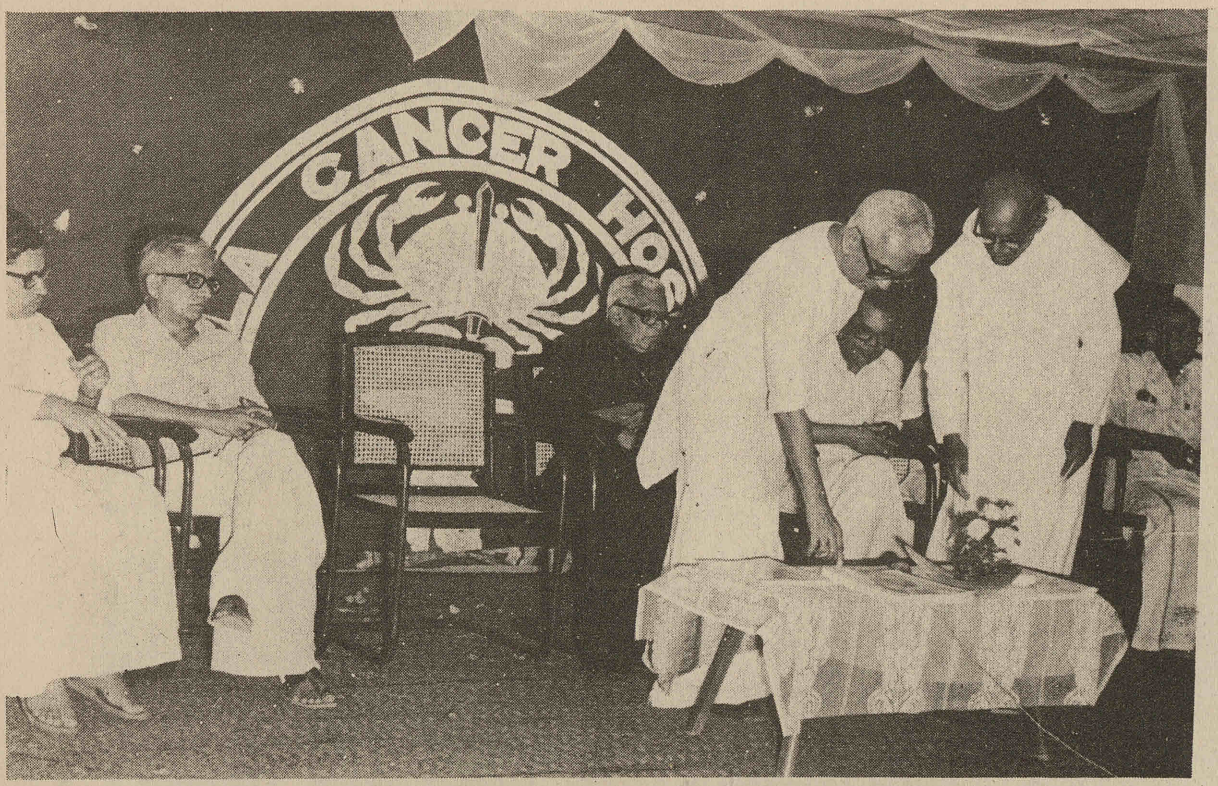
Amala Cancer Hospital & Research Centre being inaugurated by the then President of India Shri. N. Sanjeeva Reddi



Sri. A.K. Antony, then Chief Minister of Kerala speaks on the occasion of acceptance of donation from Dharmmodayam Company, Trichur.



Sri. K.M. Mani, then Finance Minister inaugurating the Fellowship Units



Şri. K. Karunakaran the then Chief Minister inaugurating the Ayurveda Hospital.



Inauguration of Theratron 780 Cobalt Unit by Sri. S. Krishnakumar, Central Deputy Minister, Family Welfare on 23rd Nov. 1985.



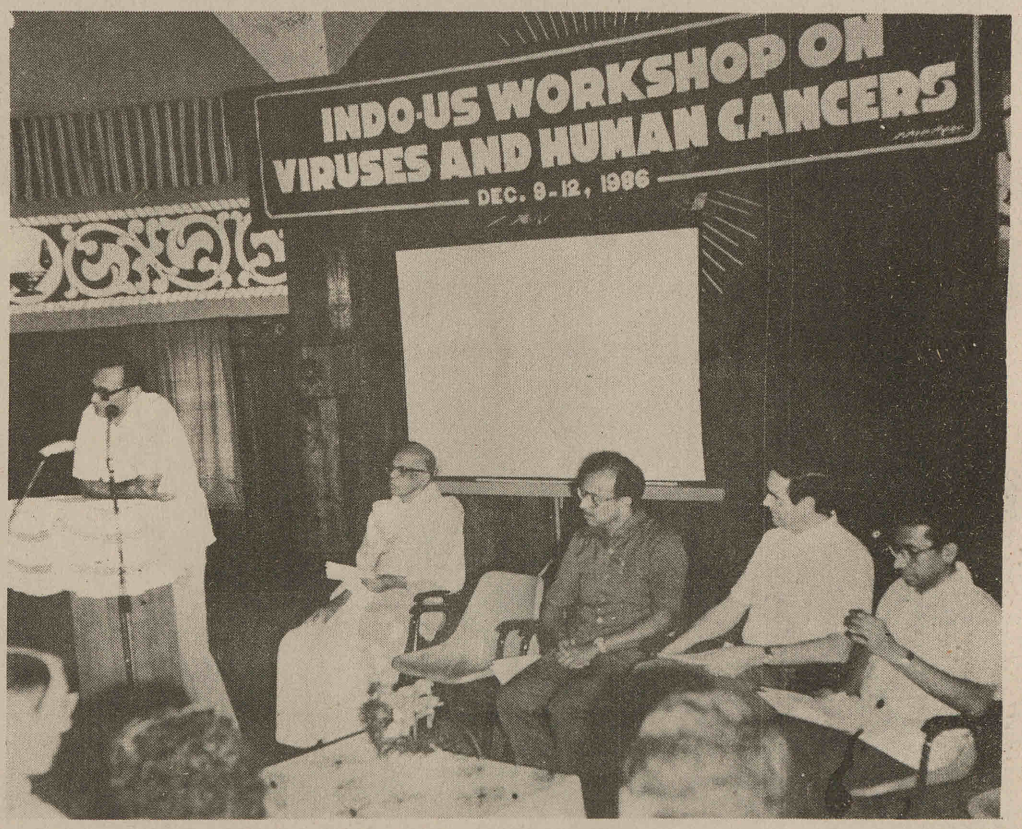
Dr. C.V. Korah, Director of Medical Education, Kerala delivers the Presidential address on the occasion of Indian Immunology Conference on 14th Dec. 1985.



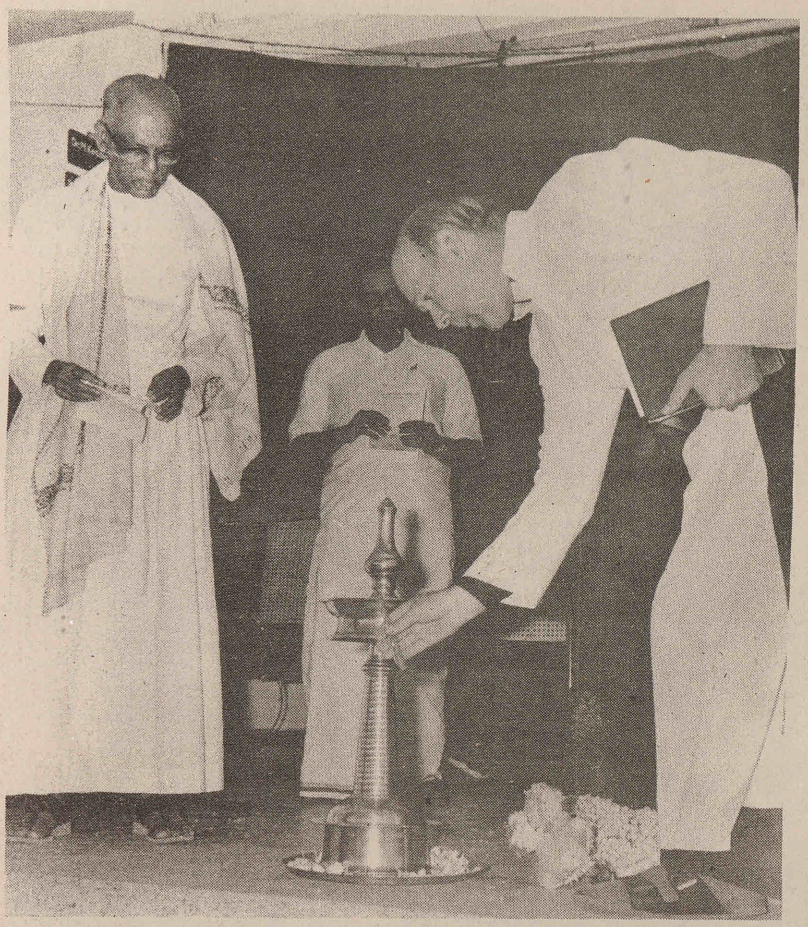
Sri. P.K. Velayudhan, the then Hon'ble Minister for Community Development inaugurates the Amala rural Medical Mission at Vettilappara.



Sri. P.P. George, then Vice Chairman of Khadi Board handling over the medical kits to the doctor in-charge of the Amala Rural Medical Mission.



Dr. D.N. Dhawan delivers the Presidential address on the Indo-U.S Workshop

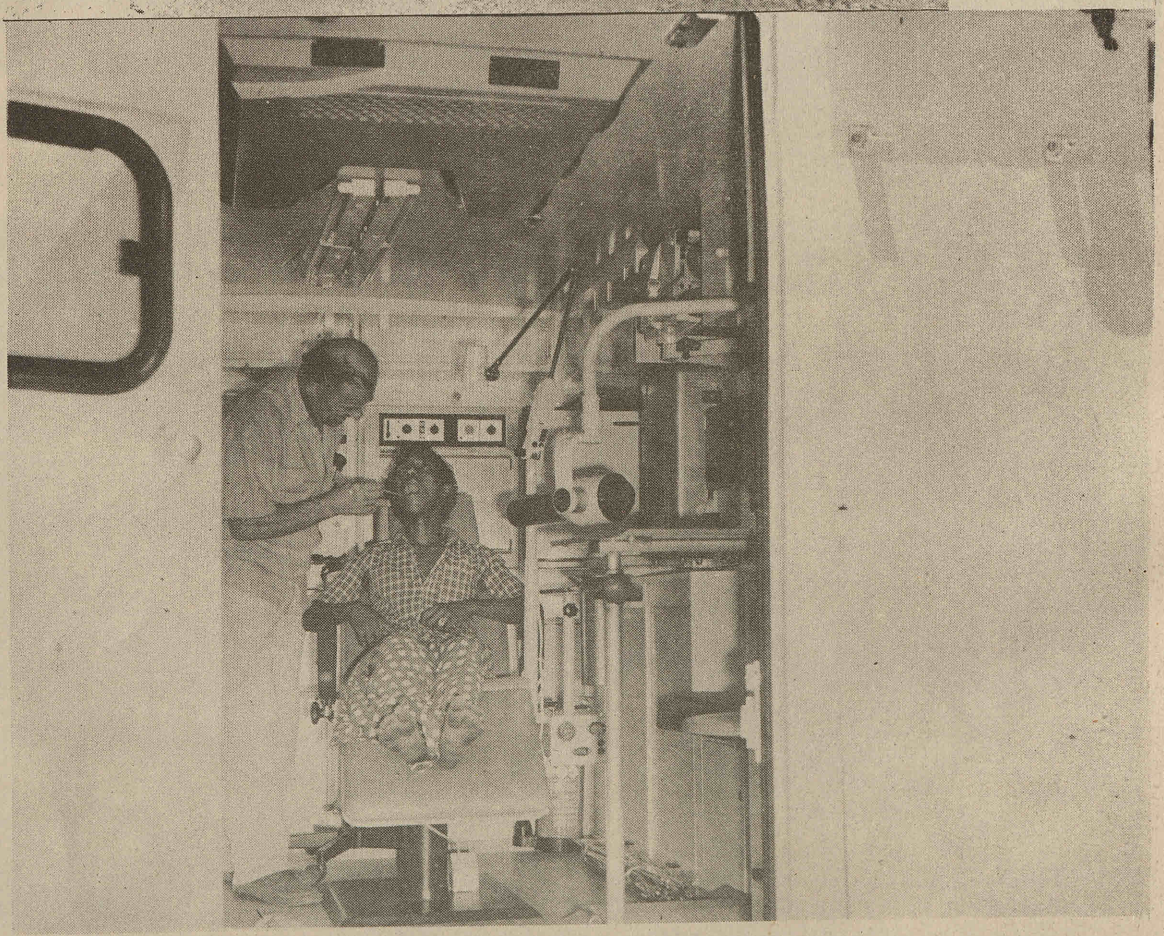


Fr. Rolf Linse of West Germany inaugurating the Western wing of Ayurveda Hospital.

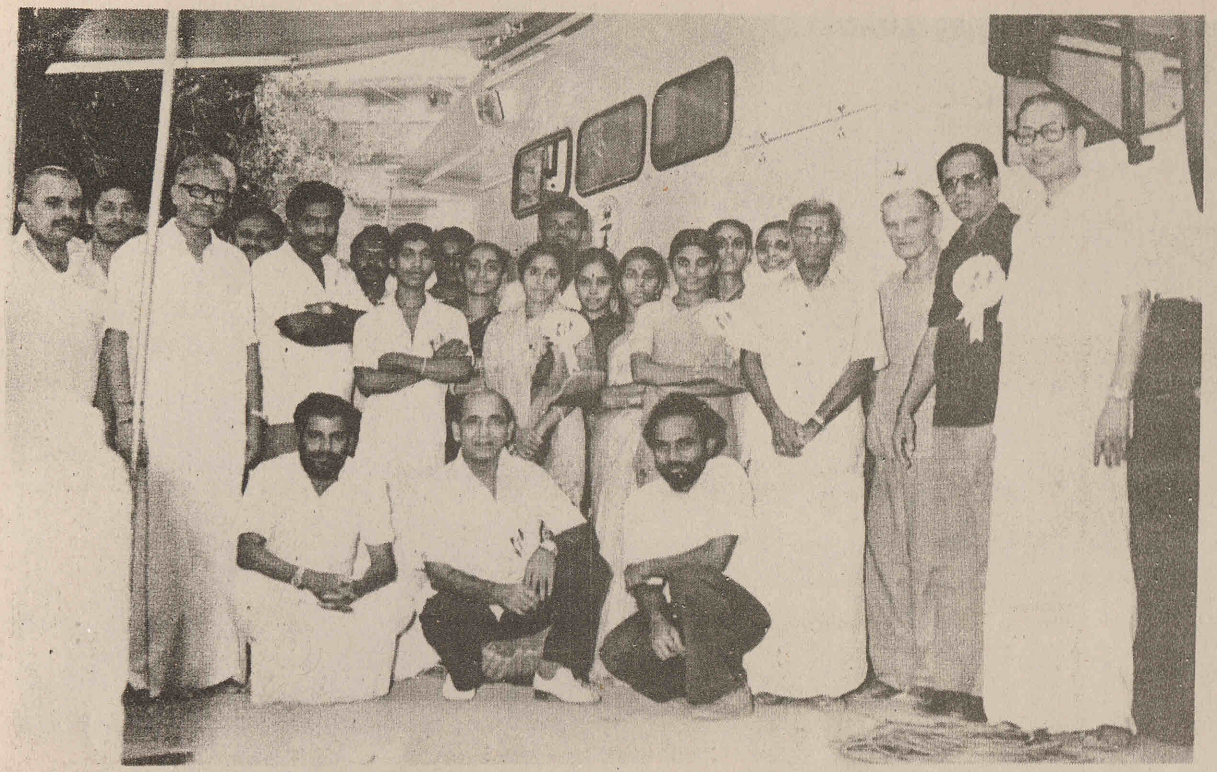


Prof. (Dr) Gerhard Ott, W. Germany handing over the key of the Mobile Dental Ambulance to V.Rev.Fr. Eusebius, C.M.I.





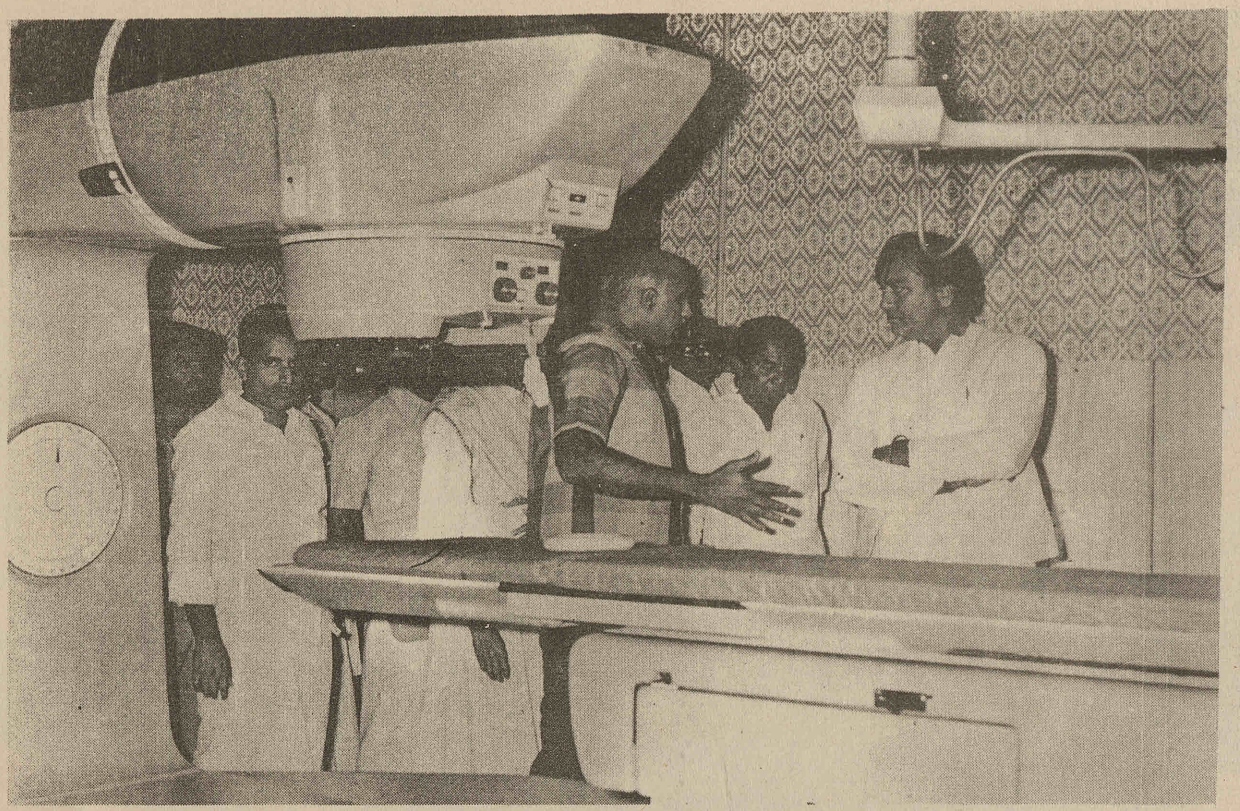
Prof. (Dr) Goegler examines a patient in the mobile dental Ambulance.



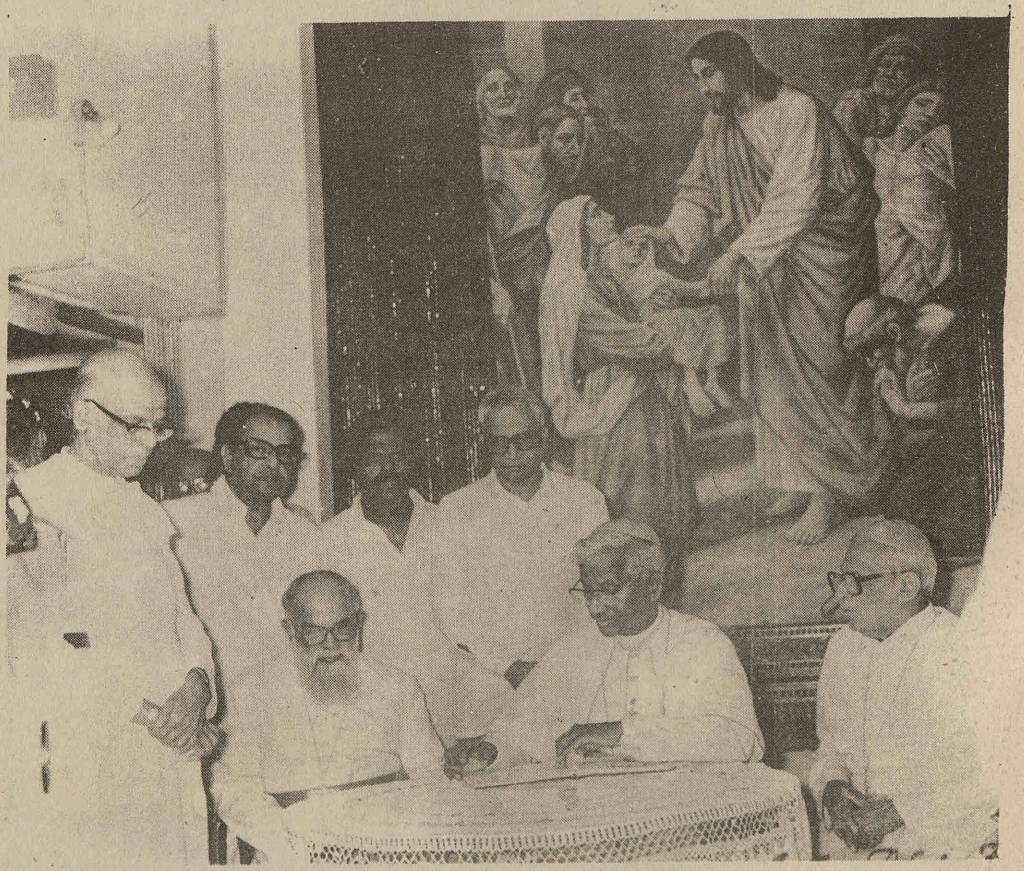
First Mobile Dental Camp at Wadakkanchery.



Sri. Sunil Dutt M.P. inaugurates the Nargis Dutt Cancer Ward.



Dr. C.D. Joseph, Chief Oncologist explains the working of the Cobalt Unit to Sri. Sunil Dutt M.P.



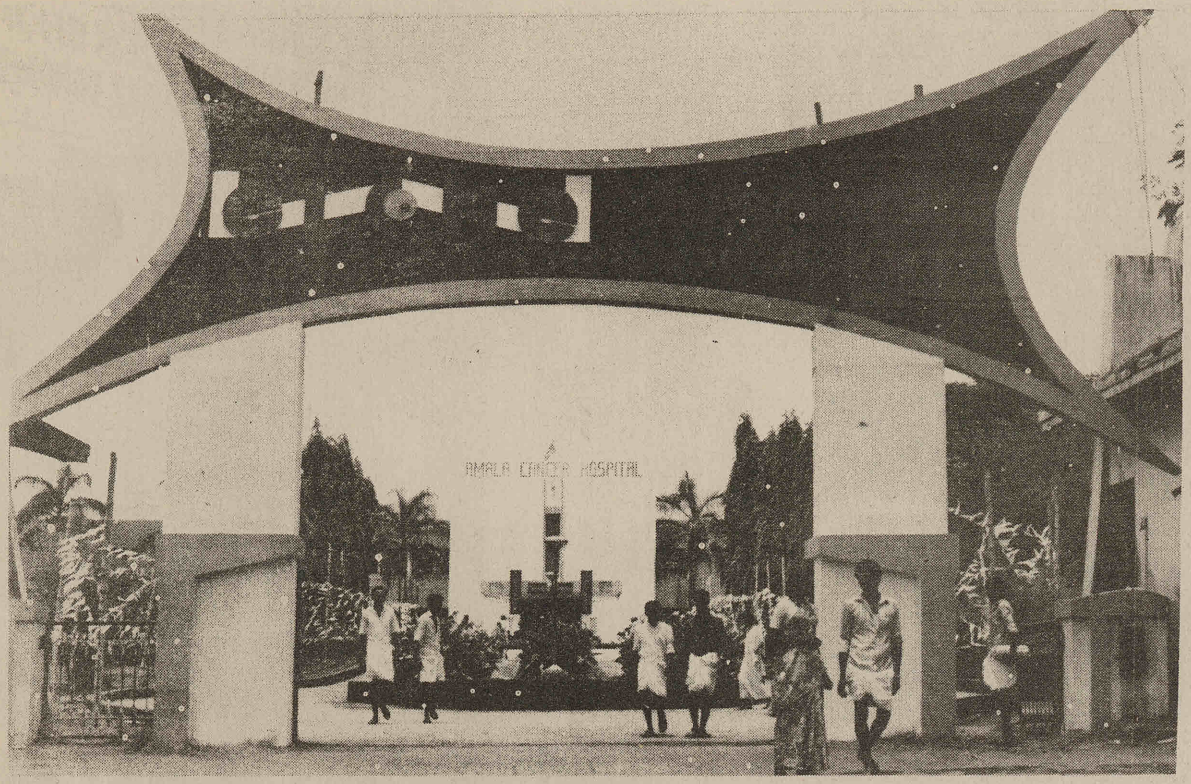
His Eminence Simon Cardinal Lourdswamy at Amala.



Dr. P.J. Lavakare, Head, Science & Technology, Promotion Division inaugurates the Workshop on Medical Biology.



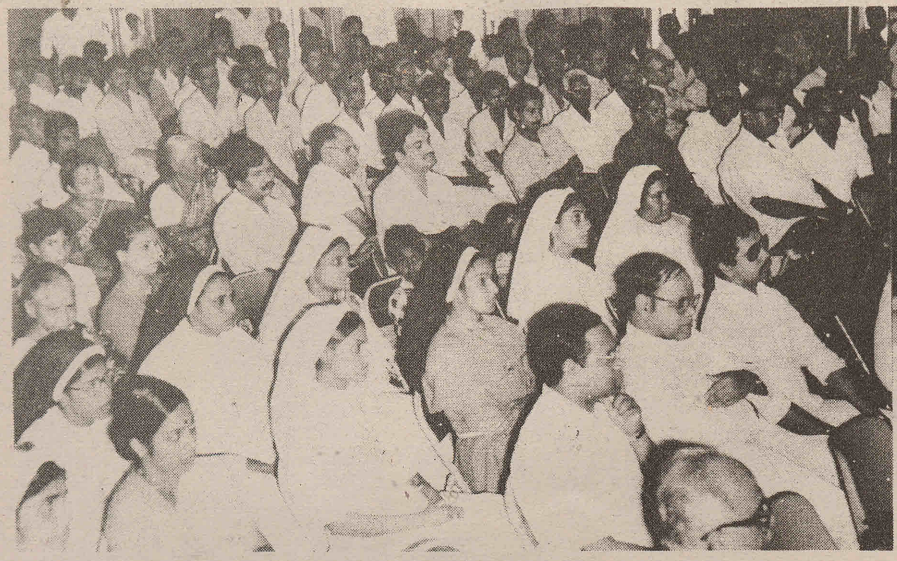
Shri. K.R. Narayanan, Minister of State for Science & Technology, Govt. of India laying the foundation stone of the new Cancer Ward.

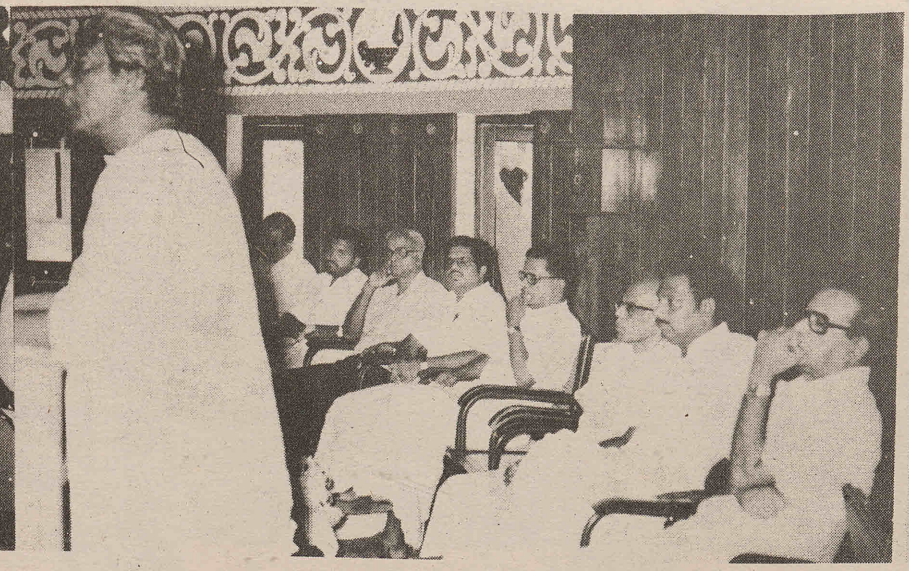


Decennial Celebration - Welcome gate.

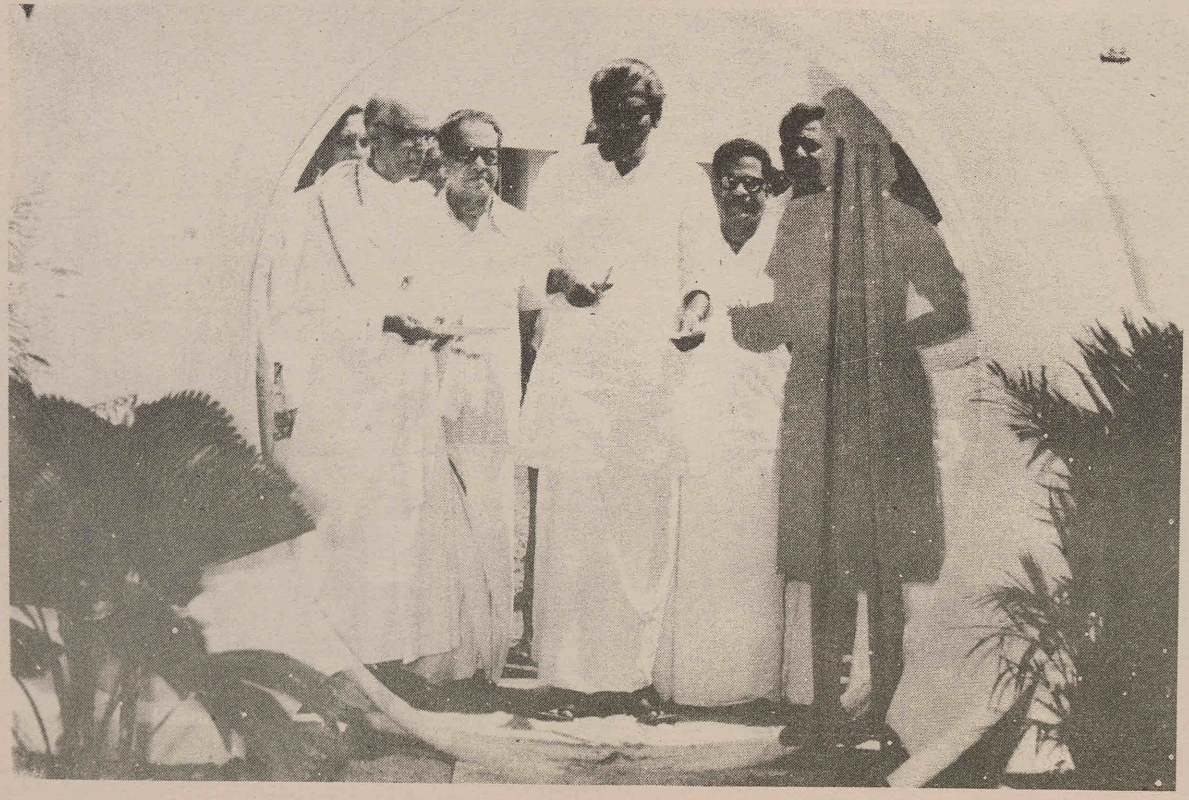


Flag Hoisting - Decennial Celebration by District Collector.

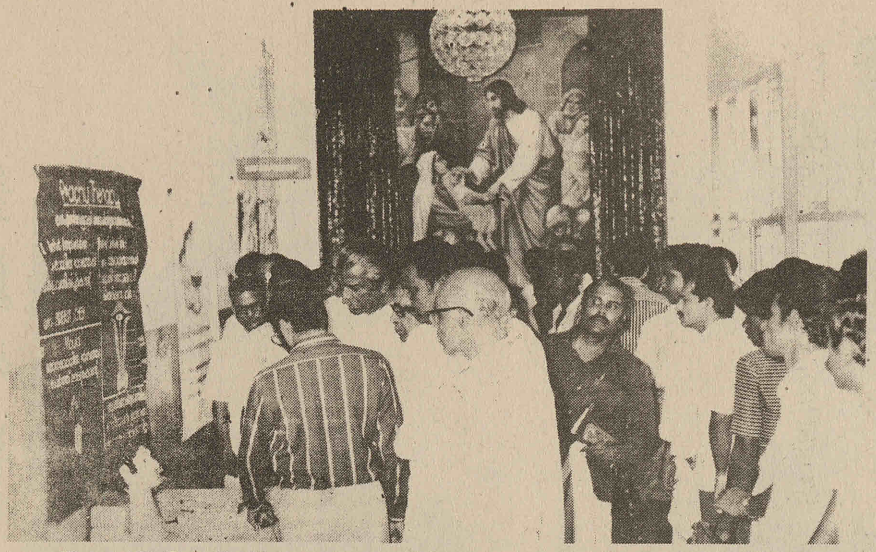




Decennial Celebration inauguration by Sri. Baby John, Hon. Minister for Irrigation, Govt. of Kerala.



Decennial Exhibition
opening - Sri. Baby John.



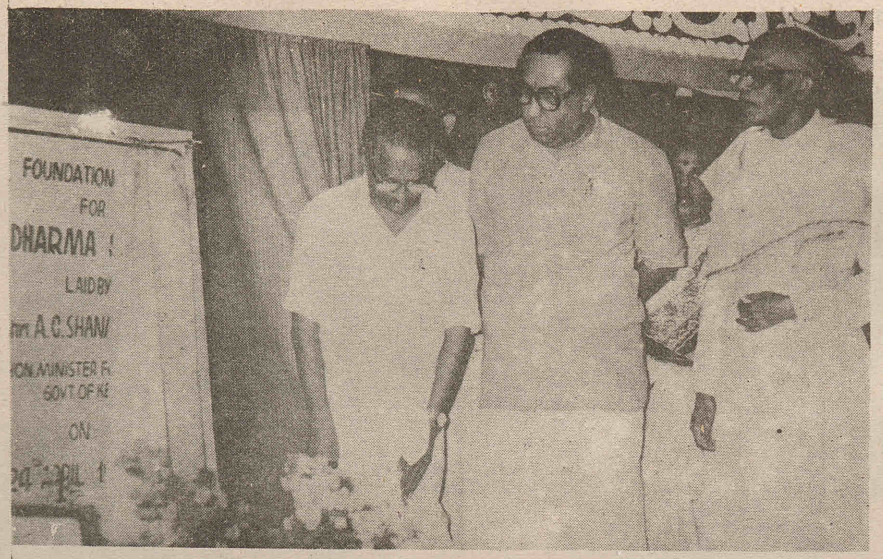
Dr. P.C. Sudheeran explains Iridium Implantation techniques to the guests in the Exhibition.



Sri. Baby John in the Ayurveda Exhibition Wing.



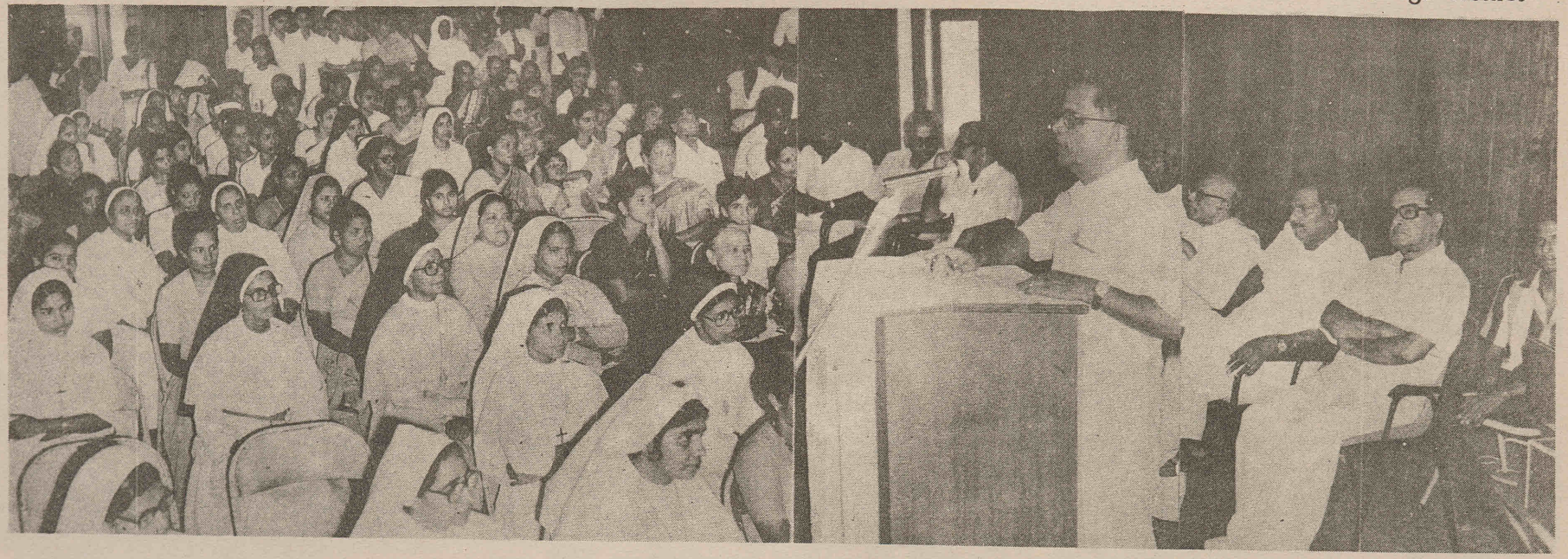
Exhibition - another view.



Unveiling the plaque of the foundation of Decennial Memorial Dharmasala by Hon. Minister A.C. Shanmughadas



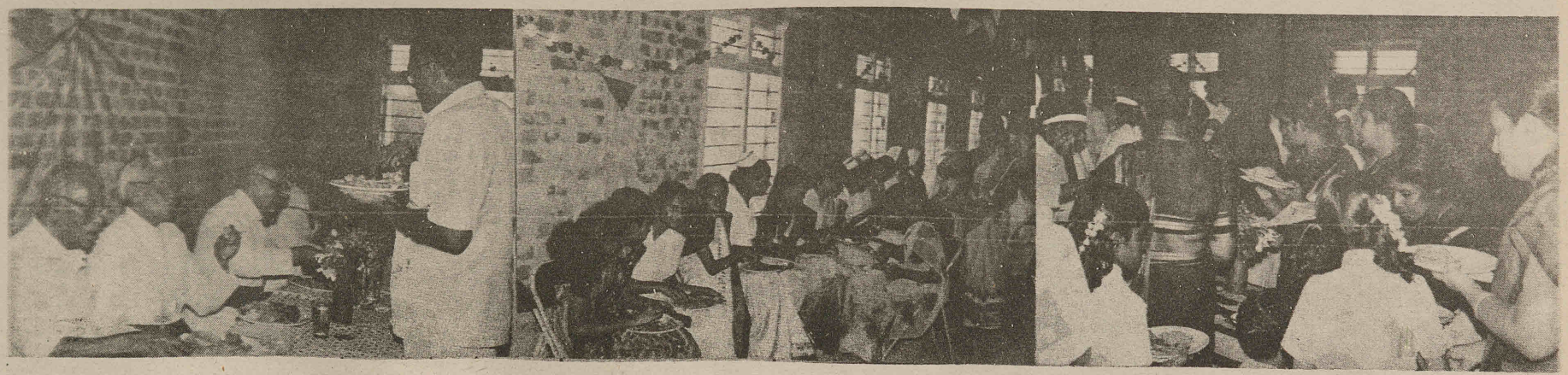
Sri. K. Chandrasekharan, Hon. Minister for Education & Law, laying the foundation stone of Old Age Home.



Presidential address of the Inauguration of Decennial Celebration by Sri. V.V. Raghavan, Hon. Minister for Agriculture, Govt. of Kerala.



Rt. Rev. Dr. Joseph Kundukulam, Bishop Clemens, V. Rev. Fr. Vijayanand, Prior General lead the Concelebration Mass of Decennial Celebration.



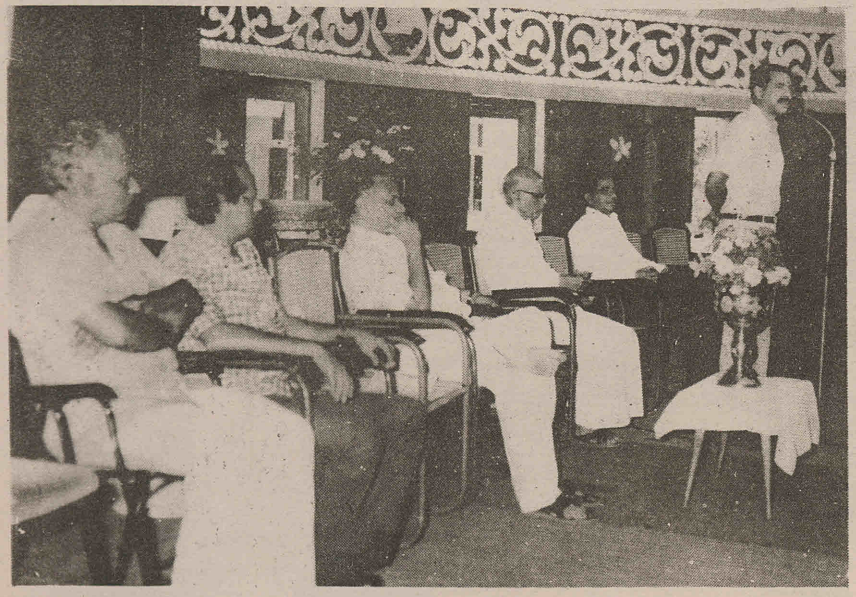
Decennial celebration Lunch.



Decennial Celebration - Nurses' Seminar.



Decennial Celebration - Ayurveda Seminar



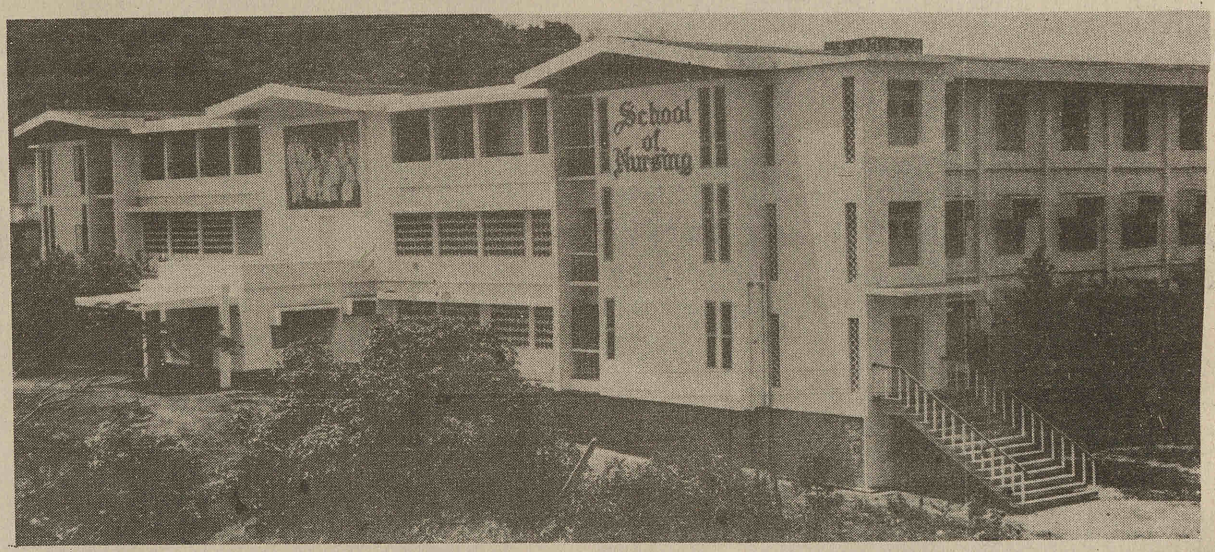
Inauguration of Amala Fellowship Convention
Sri.Hormice Tharakan, D.I.G. of Police



Sri. Hormice Tharakan giving the Rolling Trophy to the Kunnamkulam Fellowship Unit.



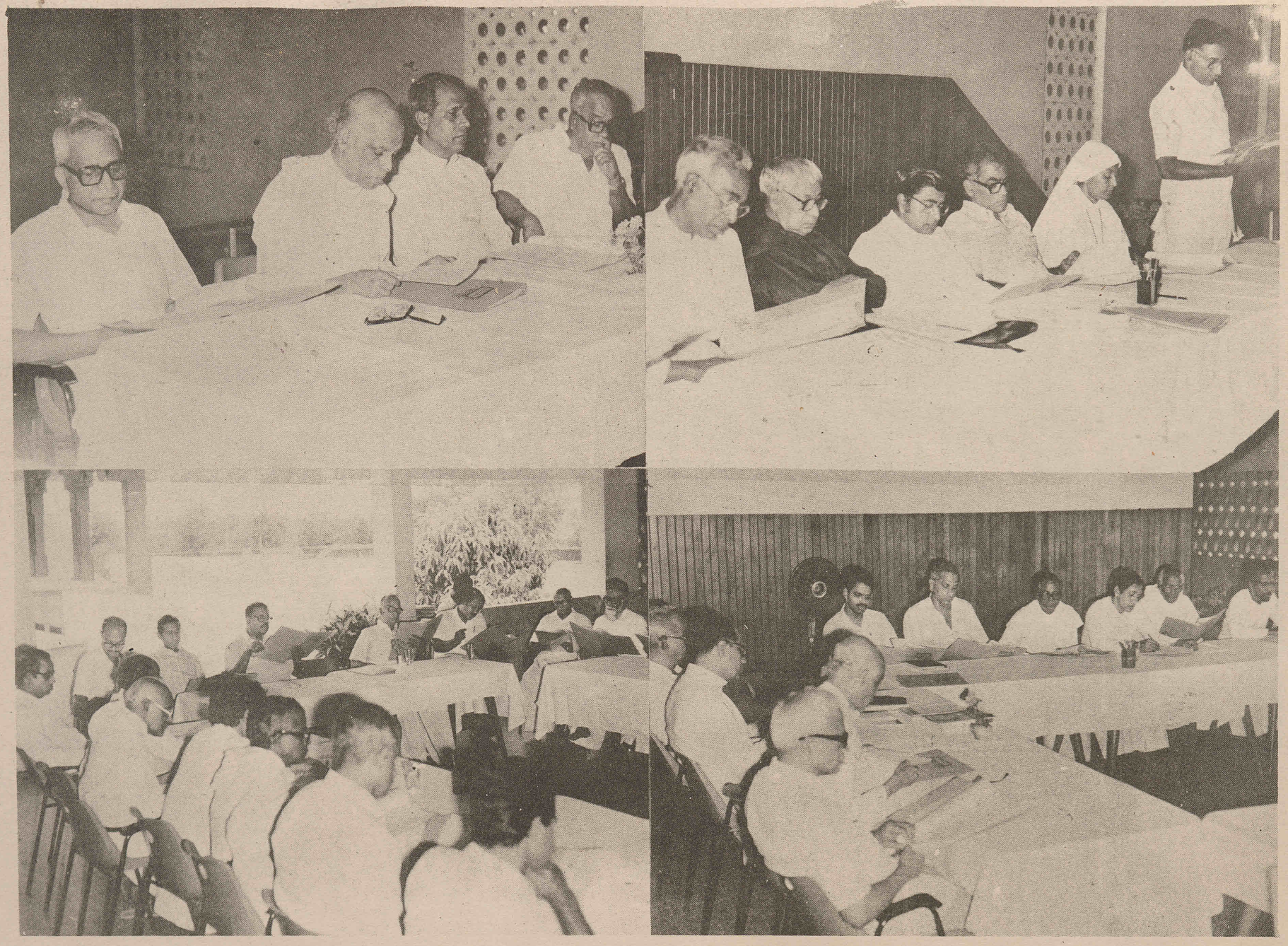
Bird's eye-view of Amala.



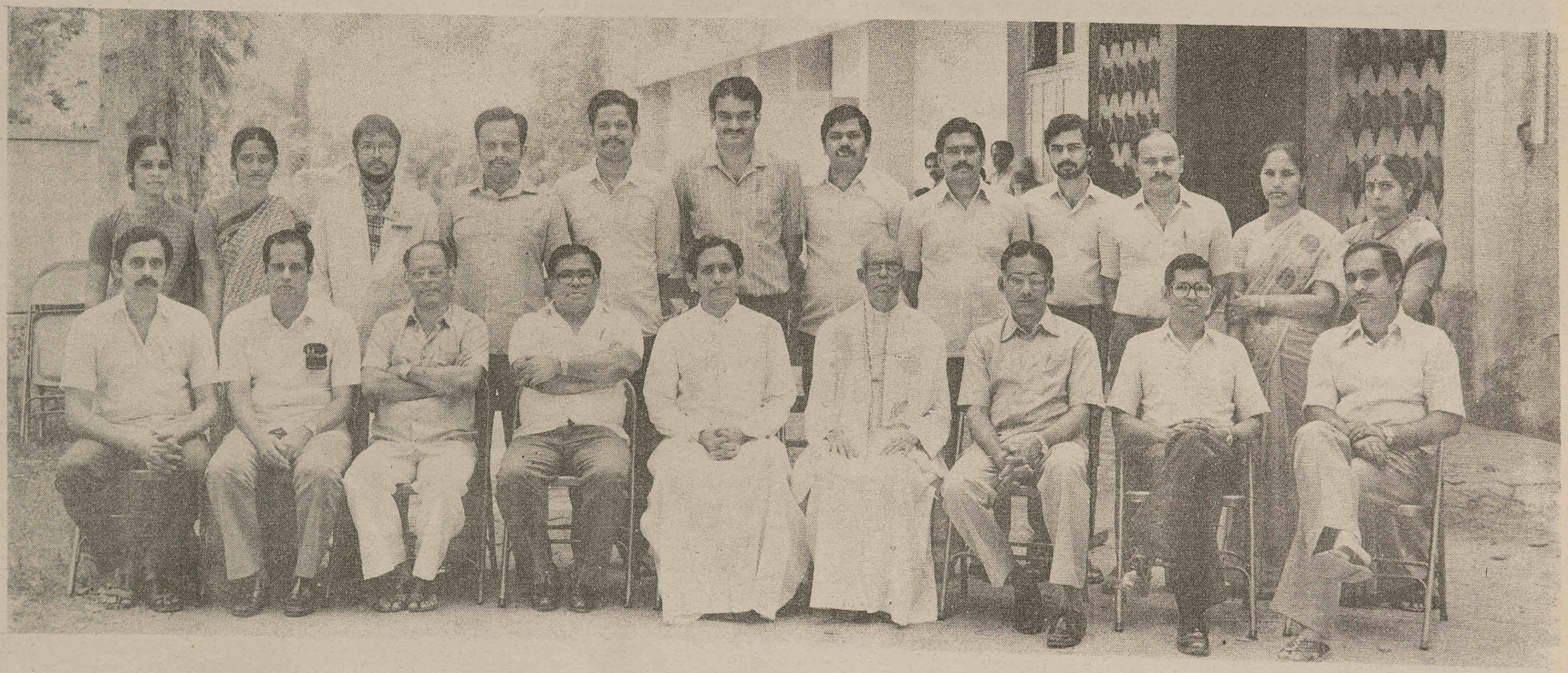
Our School of Nursing.



A view of Ayurveda Hospital



Meeting of the Board of Management



Doctors of Amala



Nursing, Para-medical and office staff - Amala



Doctors & staff of Ayurveda Hospital



Research Staff - Amala



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Tong H.I., (1980), Annals, Singapore Hosp. 9, 66

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Watkins P.J., (1982), BMJ, 285, 493

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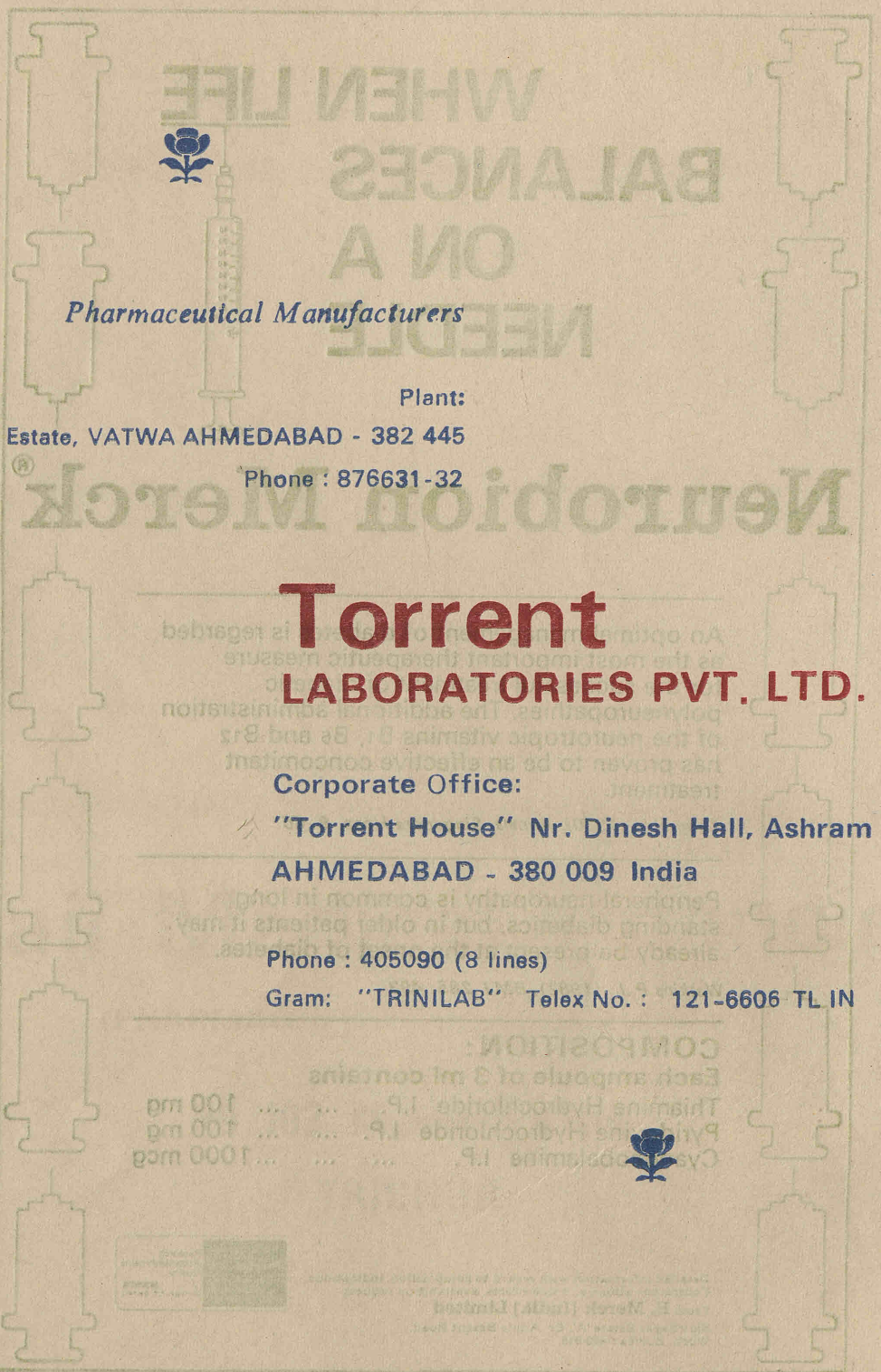
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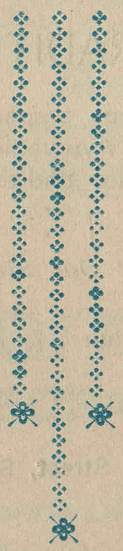
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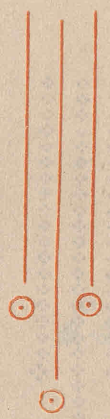


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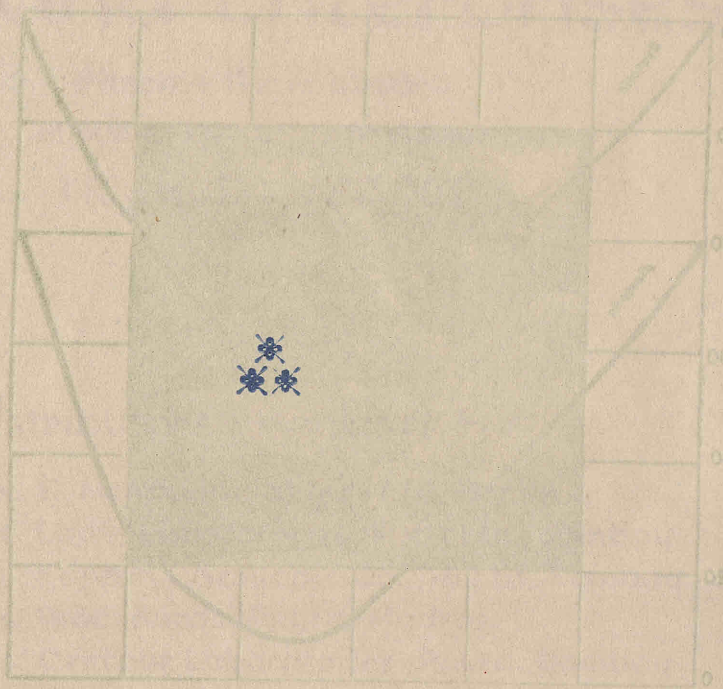


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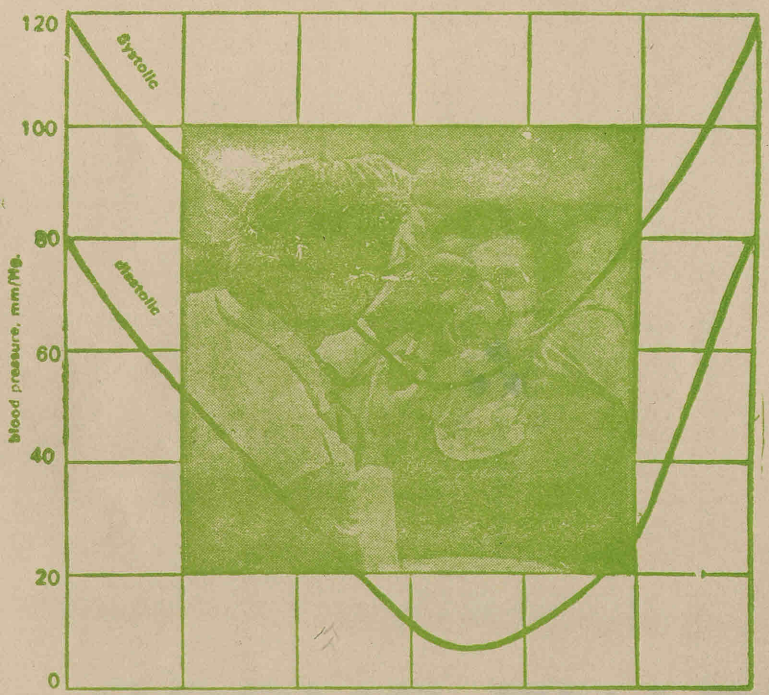
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മാധുര്യത്തെക്കുറിച്ചോർത്ത് ....
വിശാലമായ ആകാശത്തിലേയ്ക്കു അലക്ഷ്യമായി കണ്ണും നട്ടു ....
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അല്ലലൊഴിഞ്ഞ ജീവിതം .....

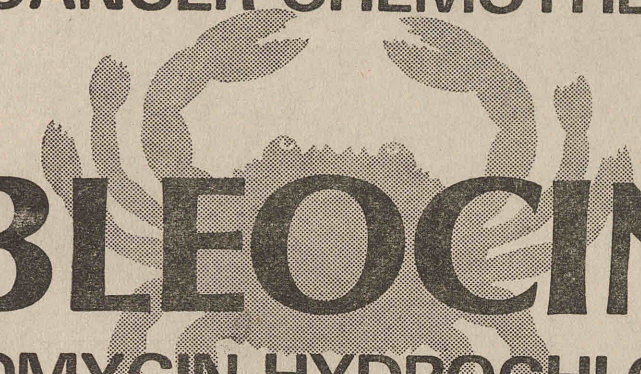
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ബന്ധപ്പെട്ടു കഴിഞ്ഞാൽ നിങ്ങൾക്കു ബോധ്യപ്പെടും.
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പദ്ധതികൾ സൗത്ത് ഇന്ത്യൻ ബാങ്കിനുണ്ട്
എന്നതുകൊണ്ടുതന്നെ.

വരൂ - ഞങ്ങളുടെ ഏതെങ്കിലുമൊരു ശാഖയിലേയ്ക്ക്.
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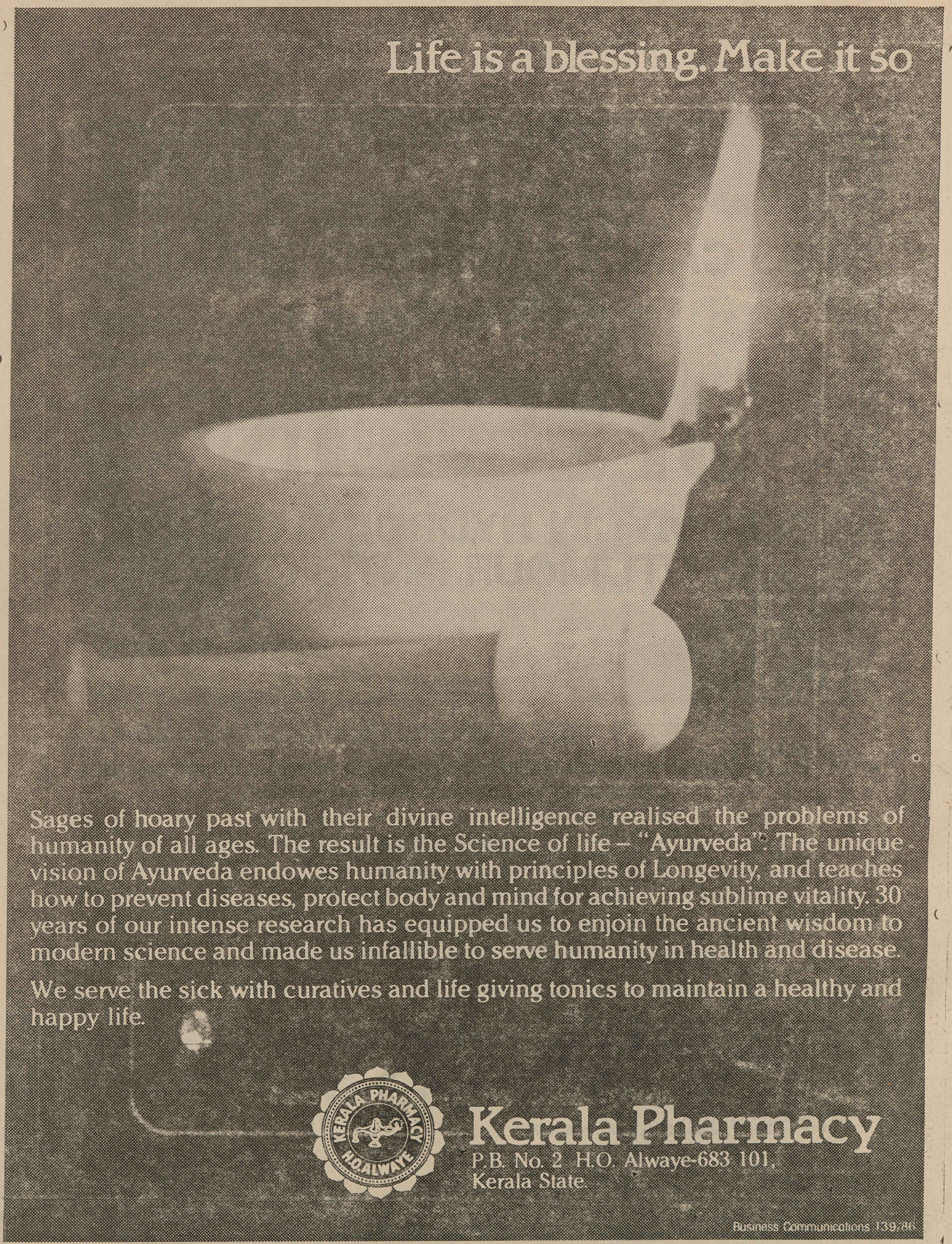
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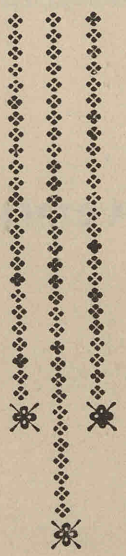
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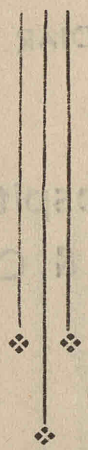
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ഇരിങ്ങാലക്കുട

ശ്രീ. സി. ആർ. കേശവൻ വൈദ്യർ മാനേജിങ്ങ് ട്രസ്റ്റിയായ ശ്രീനാരായണ ചന്ദ്രിക ട്രസ്റ്റിന്റെ കീഴിലുള്ള ഒരു ധർമ്മസ്ഥാപനമാണ് ലാൽ മെമ്മോറിയൽ ആശുപത്രി. ഗ്രാമീണർക്ക് നവീന രീതിയിലുള്ള ചികിത്സാസൗകര്യം ലഭ്യമാക്കുക എന്ന ഉദ്ദേശത്തോടെ ആരംഭിച്ച ലാൽ മെമ്മോറിയൽ ഹോസ്പിറ്റൽ ഇരിങ്ങാലക്കുട - തൃശ്ശൂർ റോഡിൽ മാടായിക്കോണത്ത് സ്ഥിതി ചെയ്യുന്നു.

1979 ഡിസംബർ 27-ന് ഗുജറാത്ത് ഗവർണ്ണരായിരുന്ന ശ്രീ. കെ. കെ. വിശ്വനാഥൻ ശിലാസ്ഥാപനംചെയ്ത ഹോസ്പിറ്റൽ 1978 ഏപ്രിൽ 25-ന് അന്നത്തെ മുഖ്യമന്ത്രി ശ്രീ. എ. കെ. ആന്റണിയുടെ അദ്ധ്യക്ഷതയിൽചേർന്ന സമ്മേളനത്തിൽവെച്ച് രാഷ്ട്രപതി ശ്രീ. എൻ. സഞ്ജീവറെഡ്ഡി ഉദ്ഘാടനംചെയ്തു. സൗജന്യചികിത്സ ഗവർണ്ണർ ശ്രീമതി ജ്യോതി വെങ്കിടാചെല്ലമാണ് ഉദ്ഘാടനംചെയ്തത്. ആരംഭത്തിൽ 35 ബെഡ്ഡുകളും, ഓപ്പറേഷൻതീയ്യേറ്റർ, ഡിസ്പെൻസറി, ക്ലിനിക്കൽ ലാബറട്ടറി, എക്സ്റേ തുടങ്ങിയവയുമാണ് ഉണ്ടായിരുന്നത്.

ഗ്രാമപ്രദേശത്താണെങ്കിലും ആശുപത്രി അതിവേഗം ജനസമ്മിതി നേടി, കൂടുതൽ കെട്ടിടങ്ങളും, സ്പെഷ്യാലിറ്റികളും സൗകര്യങ്ങളുമായി അനുക്രമം വികസിച്ചു.

ഇന്ന് 150 ബെഡ്ഡുകളും 17 ഡോക്ടർമാരും മതിയായ സ്റ്റാഫും ഉണ്ട്. ഒരു മേജർ ഹോസ്പിറ്റലിൽ കാണുന്ന ഡിപ്പാർട്ടുമെന്റുകൾക്കുപുറമെ മാഗ്നറ്റോ ബയോളജി, യോഗചികിത്സ എന്നിവകൂടി ഇവിടെ നടത്തിവരുന്നു.

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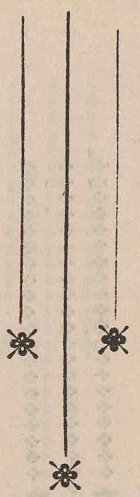
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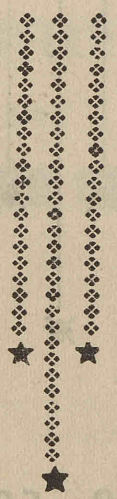
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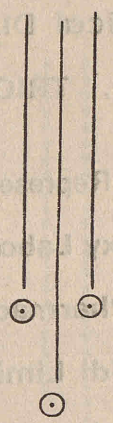
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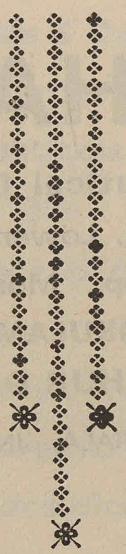
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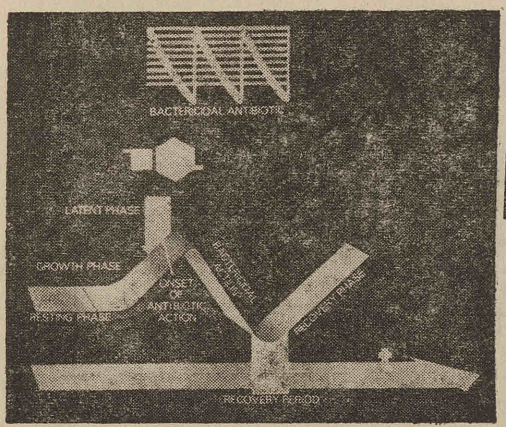
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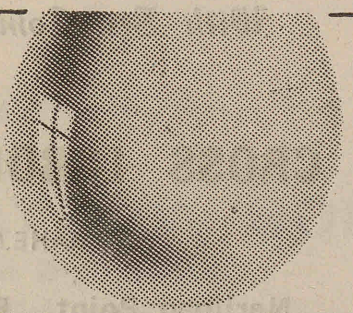
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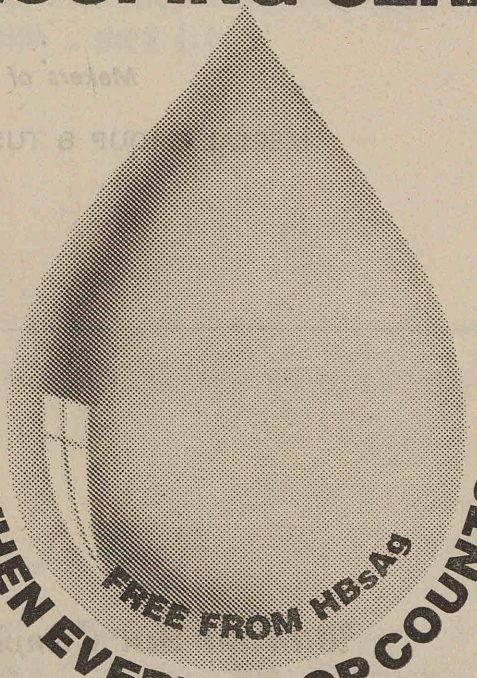
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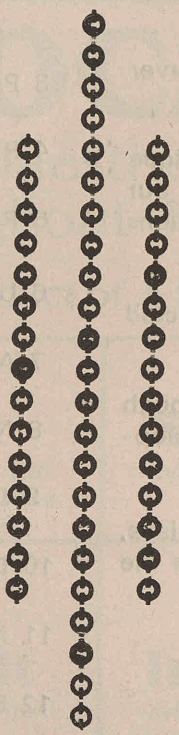
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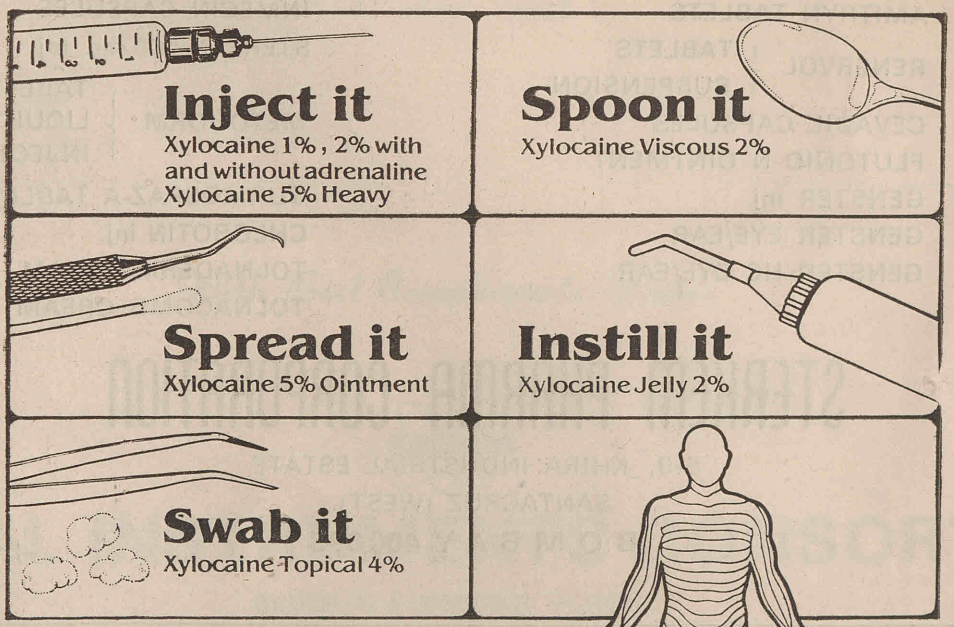
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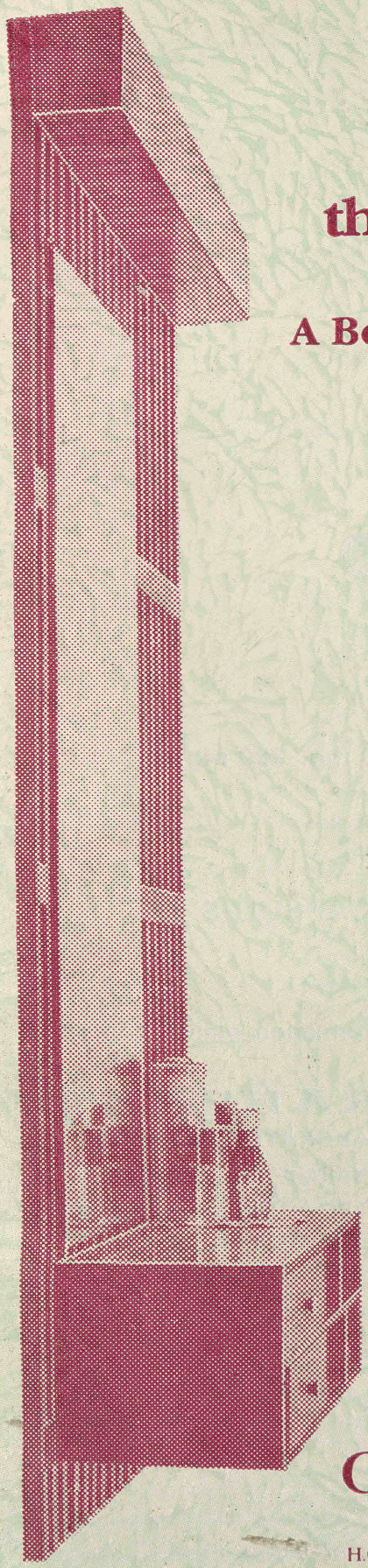
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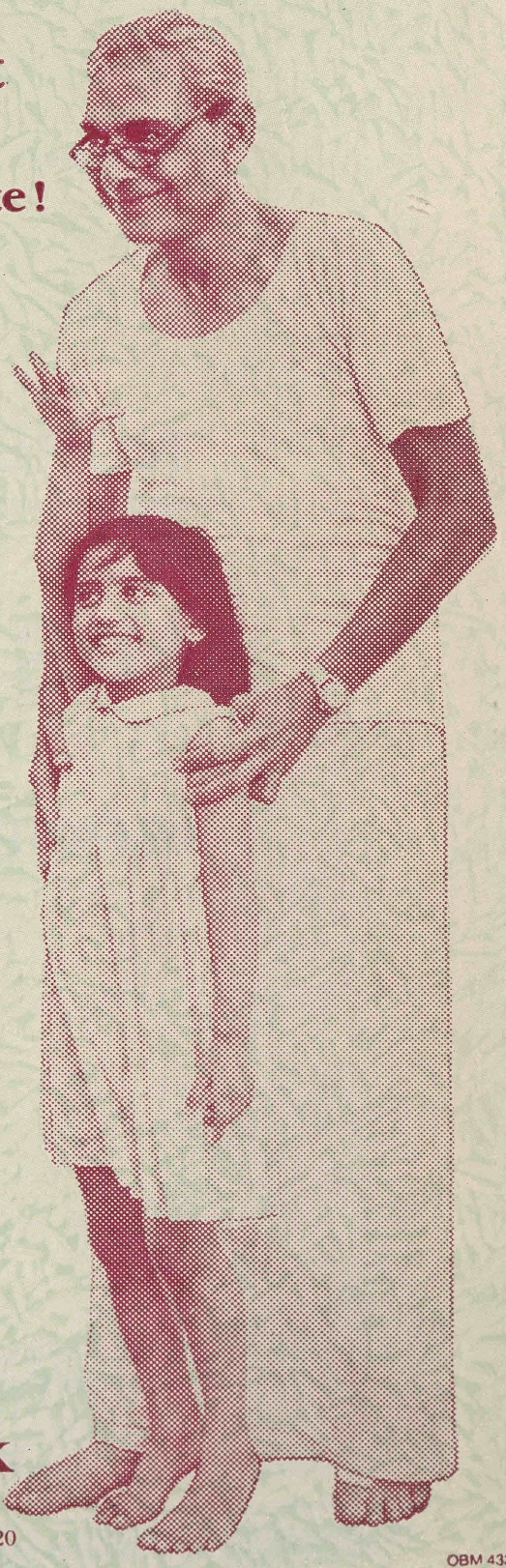
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