

ALUMNI INTERNATIONAL SYMPOSIUM

Pages with reference to book, From 107 To 109

King Edward Medical College, Lahore Pakistan in collaboration with King Edward Medical College Alumni Association of North America held an Alumni International Symposium at King Edward Medical College, Lahore, on March 29, 30, 31, 1980 entitled "UPDATE IN MEDICINE AND SURGERY".

On that occasion K.E. Medical College graduates from all over the country and abroad presented their papers.

The present staff of K.E. Medical College irrespective of their mother institution along with KEMOCOLIANS scattered all over the world participated in that International Symposium.

As a large number of foreign participants took part in the symposium, it was the first venture of its type to be undertaken by the K.E. Medical College in order to establish liaison with our graduates spread all over the globe and to extend the benefit of their varied experiences to the local graduates in order to raise the standard of medical teaching as well as patient care within the country.

BANGLADESH MEDICAL CONFERENCE

The Seventh National Conference of Bangladesh Medical Association was held from April 18 to 20. The Conference included scientific meetings, symposia and free paper sessions, scientific exhibitions besides entertainment programme and other social events. It was held at the Institute of Engineers, Dacca.

CROHN'S LINK TO REFINED SUGAR INTAKE

Results recently published indicated that Crohn's disease may well be connected with dietary trends. Thirty consecutive newly-diagnosed patients with classical Crohn's disease were studied at the department of medicine, Bristol Royal Infirmary, UK. Each patient was interviewed about his or her habitual pre-illness diet and compared with 30 healthy controls matched for age, sex, social class and marital status.

The intake of refined sugar of patients was considerably greater than that of the controls. They also consistently took more sugar in food and drinks than the controls. The other significant finding was that the patients ate considerably less vegetables and raw fruit than the healthy controls.

Following up this study, 32 patients with established Crohn's disease were treated with a high-fibre, unrefined carbohydrate diet in addition to the conventional management of the disease. This diet was followed for an average of four years and four months before the situation was reviewed.

The clinical course of the patients was compared retrospectively with that of 32 matched patients who received no dietary instructions. Hospital admissions were significantly fewer and shorter in the diet-treated patients.

Whereas five of the controls required intestinal surgery (for obstruction, perforation or persistent severe symptoms) only one of the diet-treated patients underwent surgery and that was for stricture of the common bile duct which was present before treatment started.

RESEARCH ON SLEEP

Ninety persons, mostly students, have been monitored in more than 500 sleeping sessions in a research project at the University of Tasmania, Hobart. Psychology lecturers Dr. John Trinder and Mr. Ian Montgomery are studying the type of sleep needed to restore bodily strength after exercise. Dr. Trinder said two stages of sleep occurred. The first was rapid eye movement sleep, when dreaming occurred, and the second was slow-wave sleep, usually early in the night. He believed the physiological processes during slow-wave sleep were primarily restorative. The research had shown that the process occurred more in younger, physically fit people, and decreased as they become older. "Fit adults in their early 20s average about 120 minutes of slow-wave sleep a night, and unfit ones about 100 minutes",

Dr. Trinder said. Athletes were being studied to see if increased need for restorative sleep was due to exercise or to their constitution. Dr. Trinder said the research did not support the belief that exercise helped people's ability to sleep, particularly for those over 35. The research could help understand disorders such as insomnia and depression, characterised by decreased levels of slow-wave sleep.

AUSTRALIA MAKES SURGERY SAFER

A Sydney specialist in anaesthetics, Dr. Dick Stephens, has been named Australia's Inventor of the Year for developing a device which gives surgeons early warning of patients going into shock on the operating table.

Called a tissue perfusion monitor, it derives information on the circulation of the blood by means of a transducer placed on the skin.

This indicates activity in tiny blood vessels or mucous membrane and transforms the information into electrical impulses which are registered on the machine.

The monitor gives warning of a patient going into shock before the skin colour changes or other signs of shock can be seen.

Dr. Stephens, who is director of the Clinical Research and Development Unit at Sydney's Mater Misericordiae Hospital, began work on the monitor more than 10 years ago after he had seen a young boy die on the operating table.

Text Box: art design to provide complex performance simply. The knobs and pushbuttons of earlier models are replaced by a sealed flat keypad.

Dr. Stephen's monitor was chosen from among six finalists in the Australian Broadcasting Commission's television series. The Inventor on November 15, as well as gaining The Inventors' Trophy and \$35000, he won a trip to Geneva at the end of November to attend the annual International Exhibitions of Inventors. His invention is already being used in some Australian hospitals.

Other inventions to reach the finals were:

- * a plastic container to simplify hygienic disposal of scalpel blades during surgery.
- * a multi-purpose circular saw stand.
- * a machine which bends pipe bars or rods by means of an hydraulic ram.
- * cone-shaped, stackable clothes pegs which have a hole in the centre so that water can drain out.
- * a pliers-like tool to speed up and simplify the ear-tagging of animals.

All six finalist inventions are to be manufactured.

"In the 10 years the show has been running we have featured nearly 700 inventions, but more than 2000 others were rejected because they failed to meet our criteria," she said.

"The inventions are judged on originality, practicability of manufacture and marketing, whether they offer a solution to a problem worth solving, whether they are the best of their type, and whether they would improve our living standard".

CORNING PHOTO 1463.78

The flat, sealed keypad on Corning's newest "tall" meters hints at the microcomputer technology incorporated in the new Corning Model 135 pH/ion meter. All instrument control is performed through the keypad. Direct readout of concentration when using ion-selective electrodes provides fast, simple and accurate measurements. Microprocessors used in the instrument enable it to minimize calibration steps, to automatically compensate for variations in sample temperature when temperature affects results, and to double as a controller. The Model 135 functions in six modes and operates on standard 115 VAC power supplies. It can also be specified for operation on 100 or 230 VAC supplies. Additional information is available from Corning, K.K., No. 16 Kowa Bldg., Annex 3F, 9-20 Akasaka, 1-chome, Minato-Ku, Tokyo, Japan.

CORNING INTRODUCES MICROCOM-PUTER-CONTROLLED METER

Corning's new Model 135 pH/ion meter uses microcomputer technology and state-of-the-art design to provide complex performance simply. The knobs and pushbuttons of earlier models are replaced by a sealed flat keypad.



M-135 pH/Iron Meter

The latest innovation to the "tall" pH meter design introduced by Corning in 1976, the Model 135 enables direct readout of concentrations and is faster and less error-prone than conventional methods. It has memory capability and can remember calibration points for each of the instrument's six operating modes. Thus, users can shift from one mode to another without re-calibrating between measurements. The instrument can also accept setpoints in any mode and will sound alarms when setpoints are exceeded, thus doubling as a controller. Measurements affected by sample temperature variations are automatically compensated for by the instrument. Sample temperature can be entered either by the keypad or directly from a temperature probe available as an optional accessory. This probe also enables direct readout of temperature in degrees centigrade.

Instrument control is done entirely through the keypad. The operator uses it to enter calibration standard values or to enter information procedures, to select modes of operation, or to enter information for concentration measurements by "spiking" procedures (i.e., by known addition/subtraction or by sample addition/subtraction methods).

The M-135 pH/ion meter operates on standard 115 VAC, 50/60 Hz power supplies and can also be specified to operate on 100 or 230 VAC supplies.

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