



Dear Friend:

December 22, 2007

We wrote to you last—and first as well—on November 17. We had meant to issue this letter on Dec 17—so as to avoid our month becoming longer than 30/31 days. We are late by five days. Five days: that was what remained between my last visit to M S Rugmini and her end.

Rugmini had been introduced to us by a colleague, Dr Gopinathan Nair. She was a media person, retired as All India Radio's deputy director general. When our team met her first, she had been braving a terminal disease for about two years. Killer cells had taken hold of part of her lungs. They choked her speech, but hardly dampened her fortitude. If they did, it did not show.

In fact, during my last visit on a dull December evening, Rugmini spoke at length even as she was short of breath. As she spoke, remarkably animatedly, she seemed gaining strength. It is possible she had an intimation of the nearing end but it changed her visage no more than a non-event would.

Five days. And, she was gone. If she were still around, Rugmini, a student of literature, would have hummed her Dylan Thomas: And death shall have no dominion!

OOO

Our last e-letter drew a few responses, some customary, some more than so. One was from Dr C J John, a psychiatrist, identifying a parallel between palliative care and suicide prevention. He should know. His friends are wont to say, if in jest, that anyone who plans suicide may call Dr John or his colleagues in an organization called Maithri.

Once he calls, and stays on to talk to a Maithri worker for some time, the caller may well defer or drop his suicide plan. Someone being around to take a call, listen, offer a note of goodwill and show concern, however limited and verbal: that can make a difference between death and life.

Nothing could be more self-evident. Our home care teams come back from laid-back villages every evening with a resounding endorsement of this truth. What Valsala, a volunteer from a distant village, told us about Thankappan was a familiar experience. Thankappan is a skeleton, braving a festering wound and struggling to survive absolute poverty.

Worse, Valsala told us, he and his diminutive wife were suffering from friendlessness. We are perhaps his only regular visitors other than his daughter who has her privations to share. Our team felt good to be a link between Thankappan and the world. He is sick, sicker, since he has little human contact. Then something else struck us. Valsala will be sick too if she cannot run around helping people of his lot whichever she can, in this case, guiding us to Thankappan's hut every week.

OOO

Good news from Lucknow , Uttar Pradesh. There are signs of palliative care becoming a movement there. King George Medical College in the state capital had started a palliative care unit about a year ago. Since then Pallium India and Cancer Aid Society have decided to work together in certain areas. As part of this collaboration, a workshop for doctors and nurses was conducted at Sanjay Gandhi Institute of Postgraduate Medical Studies on December 1. Pallium India Vice-chairperson Poonam Bagai took part in the event which was held under the leadership of Piyush Gupta. An important subject for deliberation was how to simplify narcotic rules in the state in keeping with the directions of the Union Government.

OOO

We had three courses for professionals and volunteers held in Thiruvananthapuram. As a volunteer who attended the course felt, it not only gave him an insight in palliative care but taught him to look at life's problems in a different way.

It was heartening to see more volunteers coming forward to attend the course than we could really accommodate at a time. The four-week course for professionals yielded encouraging results. Three doctors, one nurse and a medical social worker attended the course.

The three-day basic course also drew enthusiastic response. Dr Meena Vijayaraghavan, professor of Anaesthesiology, SUT Medical College, inaugurated it. It was a joint programme of TIPS and the Thiruvananthapuram Chapter of the Indian Society of Anaesthesiology. Reviewing their experience, Dr S Sobha and Dr P Anoop said: "At the end of the course, we realized, almost suddenly, how a casual word or a callous gesture could devastate a person writhing in pain. We discovered the vital significance of words and gestures we make rather mechanically."

OOO

Prateeksha is hope. That indeed is what it is, that student body of Thrissur Medical College . The students have thoughtfully named their organization **Prateeksha**. **Prateeksha** has taken it upon itself the onerous task of helping poor patients every way it can. Such ventures have been seen earlier as a limited group activity but it is for the first time it is done with such impressive student participation.

Pallium India had its representative at a **Prateeksha** function last month. There were one hundred fifty young faces, full of resolve and kindness. As they shared their views and experiences, they radiated, let us say, *prateeksha*, hope for the future.

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We welcome Ms Susanna Griffith (USA) who has arrived in Kollam for voluntary service in palliative care. She will be there for a few months, training nurses at the palliative care centre run under the leadership of Mohanan Pillai.

Dr Saleem, a cancer specialist who was in England for a couple of decades, had been to Pallium India to study how he can use his expertise to offer palliative care to needy people. Pallium India felt rewarded through that dialogue. Dr Saleem has chosen Tamil Nadu as his area of service.

Dr Shalini Vallabhan, Director, Asia Programme of the American Cancer Society, also visited Pallium India. It was she who released the inaugural issue of this e-letter and *Sahayatra*, Pallium India 's Malayalam journal. The interaction she had with renowned cancer specialist Dr M Krishnan Nair and SUT Hospital chief Dr Bharat Chandran was illuminating, she told us later. Dr Shalini realized that the problem Pallium India had on hand was much more complex than she had imagined.

Dr Mhoira Leng who divides her time between her native Scotland, India and East Africa is here again to work with Pallium India. She will be an illustrious partner of our team in the coming months. In the course of a light chat, someone from among us asked her what made her do what she was doing, coming down to India to do this kind of work for this kind of people. This was her response:

"I recently arrived in Thiruvananthapuram as part of a relationship between Cairdeas International Palliative Care Trust and Pallium India. I first met Dr Rajagopal in 1999 and since then have visited India every year to support education and training programmes. I am a palliative medicine specialist. For ten years I was head of the department in Aberdeen,

Scotland. Two years ago I left that role to begin an NGO, Cairdeas (pronounced *cardis*), with the aim of facilitating the development of palliative care through supporting education and training. Cairdeas is Scottish for "friendship".

We share many of Pallium India's goals and programmes. Which has made it possible to build a strong partnership. I will be actively involved in running the Refresher Course in Palliative Care on February 15-17 as well as day- to-day activities and mentoring. We are planning visits to Lucknow, Aizawl and Imphal in the New Year. Judith Smith, a palliative nurse specialist from the UK will also be joining as faculty in February.

For more information about Cairdeas please see my BLOG or our website www.cairdeas.org.uk Before I sign off, my warmest greetings for Christmas and New Year to all Pallium India associates.

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The Sunday Magazine of the Hindu carried a survey of the palliative care scene in India in general and Kerala in particular by its reporter, Maya Nair. Some excerpts:

"The stench of stale fish and sewage was overwhelming as we walked through the narrow pathways separating the fishermen's houses in the Erikkaravila colony along the Poovar cost, near Thiruvananthapuram. Daami(45) lay on a rubber mat spread on a bare cot, inside one of the houses. Tears trickled down his emaciated cheeks as he spotted the ever-smiling Valarmathi, a local volunteer, and the palliative care team from Pallium India at the doorway. And the relief on his wife's face was palpable....

"At Karumkulam, Michael, another volunteer, was waiting to accompany the team to the house of Rajan, a 58- year-old suffering from cancer inside the cheek...

"Though he underwent radiotherapy, the disease is so advanced that only symptomatic management is possible. A manual labourer, he has tears in his eyes when he speaks of the love and care that Dr. Rajagopal has given him. His only son, 22-years-old, who had been a student of civil engineering, had to quit his studies after his father's illness. When the boy tried to commit suicide, Pallium India decided to step in with a rehabilitation package for the family. The cow that was tethered near the house is Pallium India's gift to the family. "We do not offer monetary assistance. Our aim is to give the family a sustainable livelihood so that even when Rajan is no more, they need not depend on others," says Vijayakumaran, who opted to be a volunteer with Pallium India after working for 28 years in a nationalized bank."

OOO

A correspondent has drawn our attention to what she thinks is a strange new link between obesity and cancer as identified by the World Cancer Research Fund. It turns out that tips to ward off cancer, obesity and heart disease can be similar. This is what Prof Michael Marmot, WCRF Panel Chief, says: "We are recommending that people aim to be as lean as possible within the healthy range, and that they avoid weight gain throughout adulthood.

"This might sound difficult, but this is what the science is telling us more clearly than ever before. The fact is that putting on weight can increase your cancer risk, even if you are still within the healthy range.

"So the best advice for cancer prevention is to avoid weight gain, and if you are already overweight then you should aim to lose weight."

We can't think of any advice more authoritative than Prof Marmot's.

OOO

We have received, in response to our last e-letter, another quotation which is useful and appropriate to reproduce. It sums up the spirit of palliative care. The quotation is from the ancient Sanskrit poet, Kalidasa: "We have watered the trees that blossom in the summer-time. Now let's sprinkle those whose flowering time is past. That will be the better deed, because we shall not be working for the reward."

How true and touching! No one can possibly say it better than that great master of words. So let us now, as he says, water those whose flowering time is past. And, may this be our thought for Christmas and New Year!

K Govindan Kutty

Editor