



Ali
Medical
ISO 9001:2015

CONTENT

- CHILDREN WITH SPEECH AND LANGUAGE IMPAIRMENT
- EPILEPSY
- HEALTH CARE QUALITY
- CONGENITAL KYPHOSIS
- NURSING TRIP

NEWSLETTER

MAY-JUNE | 2018

📍 Kohistan Road, F-8 Markaz, Islamabad.

☎ +92-51-8090200 📠 +92-51-8449944

📘 www.facebook.com/alimedical.org/

✉ info@alimedical.org

🌐 www.alimedical.org

Speech-Language Pathologist recognized by several designations, people mention to these specialists most often as speech therapists. They work with children with a variety of delays and disorders covering from mild articulation delays to more complex disorders such as Autism, Down syndrome, Hearing impairment, Motor speech disorders, Learning disabilities and other Developmental delays.



Aqsa Malik
Psychologist & Speech Therapist

What is Speech and Language Impairment (SLI)?

Language is the building block of knowledge & an important tool for thinking & communication. School-aged children with SLI cannot communicate with others effectively. Their academic performance, emotions and social development will also be affected.

An SLP's, as they are titled for short can help your child with...

1. Articulation Problem

Articulation problem refers to mispronunciation of words due to several reasons to the extent that other people cannot recognize what is being said, such as mispronouncing "say" as "day". SLP's can work with your child to teach them how to produce the specific speech sounds or sound patterns that he is having difficulty with, and thus increasing his overall speech intelligibility.

2. Language Problem

Children may fail to understand fully the information conveyed in a message, which leads to misunderstanding or even communication breakdown. Children with weak organization skills or limited vocabulary would have difficulties in conveying their messages. Speech-language pathologists can help your child learn new words and how to put them together to form phrases and sentences (semantics and syntax) so that your child can communicate to you and others.



3. Fluency Problem/ Stuttering

Fluency problem, also known as stammering, refers to the condition in which the flow of speech is interrupted by repetition of syllables or words or prolongation of sounds or the speech rate is too fast or too slow or blocks. We may also see secondary behaviors, typically in more severe cases of stuttering such as tension in the neck, shoulders, face, jaw, chest; eye blinks, nose flaring, other odd facial movements; clenched fists, stomping of feet; jerking or other unusual motor movements in arms, hands, legs, feet. SLPs can teach your child strategies on how to control this behavior and thus increasing his speech fluency and intelligibility.

4. Voice Problem and Resonance

Voice problem refers to hoarseness, loss of voice, excessively high/low pitch, difficulties in controlling the loudness of voice, hyper- or hypo-nasality, etc due to various reasons. A common voice disorder in young children is hoarseness caused by vocal abuse. Vocal abuse refers to bad habits that lead to strain or damage of the vocal folds such as yelling, excessive talking, coughing, throat clearing, etc. Speech-language pathologists with experience in voice and resonance disorders can work with children to decrease these behaviors and repair the strain/damage of the folds.

5. Social/Pragmatic Language

Social/ pragmatic language refers to the way an individual uses language to communicate and involves three major communication skills: using language to communicate in different ways, hanging language according to the people or place it is being used, and following the rules for conversation. SLPs can work with your child to teach them these social language skills so that they can more appropriately participate in conversations with others.



6. Cognitive-Communication Skills

Cognitive-communication disorders refer to the impairment of cognitive processes including attention, memory, abstract reasoning, awareness, and executive functions (self-monitoring, planning and problem solving). These can be developmental in nature (meaning the child is born with these deficits) or can be acquired due to a head injury, stroke, or degenerative diseases. SLPs can work with your child to help build these skills and/or teach your child compensatory methods to assist them with their deficits.

7. Swallowing/Feeding Issues

Speech-language pathologists can be trained in pediatric swallowing and feeding issues in addition to speech and language issues. This is because, as SLPs, they have intimate knowledge of the structures and functions of the oral cavities and beyond. In fact, some SLPs have training in myofunctional disorders including tongue thrust.

Educating and Empowering YOU on how to best help your child

Hands down, the best thing an SLP can do for your child, is to educate you and empower you on how to best help your child.

When you are equipped with the knowledge, skills, and confidence YOU can be the best "speech therapist" your child will ever have. So ask questions, take notes, do the homework, and work closely with your child's SLP. Together you can make an amazing team and change your child's life, one word at a time.

EPILEPSY

What is epilepsy?

Epilepsy is a chronic disorder that causes unprovoked, recurrent seizures. A seizure is a sudden rush of electrical activity in the brain. There are two main types of seizures. Generalized seizures affect the whole brain. Focal, or partial seizures, affect just one part of the brain. A mild seizure may be difficult to recognize. It can last a few seconds during which you lack awareness. Stronger seizures can cause spasms and uncontrollable muscle twitches, and can last a few seconds to several minutes. During a stronger seizure, some people become confused or lose consciousness. Afterward you may have no memory of it happening.

There are several reasons you might have a seizure. These include:

- high fever
- head trauma
- very low blood sugar
- alcohol withdrawal

Epilepsy is a fairly common neurological disorder that affects 65 million people around the world. Anyone can develop epilepsy, but it's more common in young children and older adults. It occurs slightly more in males than in females. There's no cure for epilepsy, but the disorder can be managed with medications and other strategies.

What triggers an epileptic seizure?

Some people are able to identify things or situations that can trigger seizures.

A few of the most commonly reported triggers are:



lack of sleep



illness or fever



stress



bright lights, flashing lights, or patterns



caffeine, alcohol, medicines, or drugs



skipping meals, overeating, or specific food ingredients

What causes epilepsy?

For 6 out of 10 people with epilepsy, the cause can't be determined. A variety of things can lead to seizures.

Possible causes include:

- traumatic brain injury
- scarring on the brain after a brain injury (post-traumatic epilepsy)
- serious illness or very high fever
- stroke, which is a leading cause of epilepsy in people over age 35
- other vascular diseases
- lack of oxygen to the brain
- brain tumor or cyst
- dementia or Alzheimer's disease
- maternal drug use, prenatal injury, brain malformation, or lack of oxygen at birth
- infectious diseases such as AIDS and meningitis
- genetic or developmental disorders or neurological diseases



How is epilepsy diagnosed?

In order to diagnose epilepsy, other conditions that cause seizures should be ruled out. Your doctor will probably order a complete blood count and chemistry of the blood.

Blood tests may be used to look for:

- signs of infectious diseases
- liver and kidney function
- blood glucose levels

Electroencephalogram (EEG) is the most common test used in diagnosing epilepsy.

Imaging tests can reveal tumors and other abnormalities that can cause seizures. These tests might include:

- CT scan
- MRI
- positron emission tomography (PET)
- single-photon emission computerized tomography

Epilepsy is usually diagnosed if you have seizures for no apparent or reversible reason.

How is epilepsy treated?

Most people can manage epilepsy. Your treatment plan will be based on severity of symptoms, your health, and how well you respond to therapy.

Some treatment options include:

- Anti-epileptic (anticonvulsant, antiseizure) drugs
- Vagus nerve stimulator
- Ketogenic diet
- Brain surgery

Medications for epilepsy

The first-line treatment for epilepsy is antiseizure medication. These drugs help reduce the frequency and severity of seizures. They can't stop a seizure that's already in progress, nor is it a cure for epilepsy.

Common epilepsy medications include:

- levetiracetam (Keppra)
- lamotrigine (Lamictal)
- topiramate (Topamax)
- valproic acid (Depakote)
- carbamazepine (Tegretol)
- ethosuximide (Zarontin)

Some potential side effects may include:

- fatigue
- dizziness
- skin rash
- poor coordination
- memory problems

Is there a cure for epilepsy?

There's no cure for epilepsy, but early treatment can make a big difference.

Uncontrolled or prolonged seizures can lead to brain damage. Epilepsy also raises the risk of sudden unexplained death. The condition can be successfully managed. Seizures can generally be controlled with medication. Two types of brain surgery can cut down on or eliminate seizures. One type, called resection, involves removing the part of the brain where seizures originate. Although there's no cure at this time, the right treatment can result in dramatic improvement in your condition and your quality of life.

NEED OF AN HOUR



Ms. Asma Mughal

Manager
Quality Management Department

What is Quality Healthcare?

Quality can be simply defined as *doing the right thing, at the right time, in the right way, for the right person—and having the best possible results.*

Specifically it can be defined as *"the degree to which health care services for individuals and populations increase the likelihood of desired health outcomes and are consistent with current professional knowledge."*

Properties or Domains of Quality

Ali Medical specifically striving for covering the following 6 major domains or properties of the Health Care Quality.

- 1. Ultra Safe Health Care Services:** Avoiding harm to patients from the care that is intended to help them.
- 2. Effective:** Providing services based on scientific knowledge to all who could benefit and refraining from providing services to those not likely to benefit (avoiding underuse and misuse, respectively).
- 3. Patient-centered:** Providing care that is respectful of and responsive to individual patient preferences, needs, and values and ensuring that patient values guide all clinical decisions.
- 4. Timely:** Reducing waits and sometimes harmful delays for both those who receive and those who give care.
- 5. Efficient:** Avoiding waste, including waste of equipment, supplies, ideas, and energy.
- 6. Equitable:** Providing care that does not vary in quality because of personal characteristics such as gender, ethnicity, geographic location, and socioeconomic status.

Why Quality Health Care?

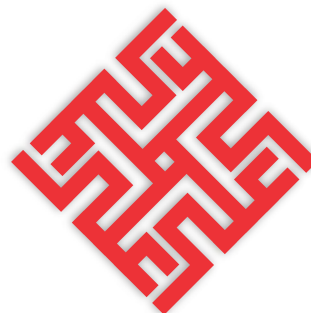
The biggest plight in our society for the patients and their families is the lack of quality health care services. In our daily life, we do wish for best quality food, branded clothes, quality shoes and most of the times we get these quality things in our society. But when we talk about quality in health care, the big question comes in our mind about the services we get from most of the government and private sector hospitals. We need quality health care in order to enjoy the healthy life. In Pakistan the health sector has been badly neglected and the policy makers have shown a callous lack of concern towards providing the quality health care. So, it has become need of an hour for every member of the society. Institute of Medicine's (IOM) report *To Err is Human* revealed that between 44,000 and 98,000 Americans die each year as a result of medical errors. Medication errors alone are estimated to cause more than 7000 deaths annually, compared with 6000 annual deaths from workplace injuries. That is why we need quality health care in our hospitals.

AMC Journey towards Quality

Keeping in mind the needs of the patients and catering the wish of every individual for getting quality health services AMC started its formal journey towards achieving the quality standards' certification since 2016. Our hospital achieved the ISO 9001-2015 certification within record period of only one year in 2017 with full scope. AMC is the first hospital that achieved ISO 9001-2015 standard in twin cities. We are doing every possible effort in order to provide the quality health care services to all our clients.

Our leadership and top management in coordination with Quality Management Department (QMD) and all other departments is committed towards getting excellence in providing the best possible services at affordable price.

QMD is very thankful to our top management, Consultants, Nurses and all hospital staff for their contribution towards giving the quality services to the each and every individual. I will end up my discussion with this single line: Quality is shared responsibility and every single individual needs to work selflessly for providing the quality health services.



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Dr. Syed Junaid Ismail
MBBS (Pb), MCPS (Surg.), FCPS (Ortho)

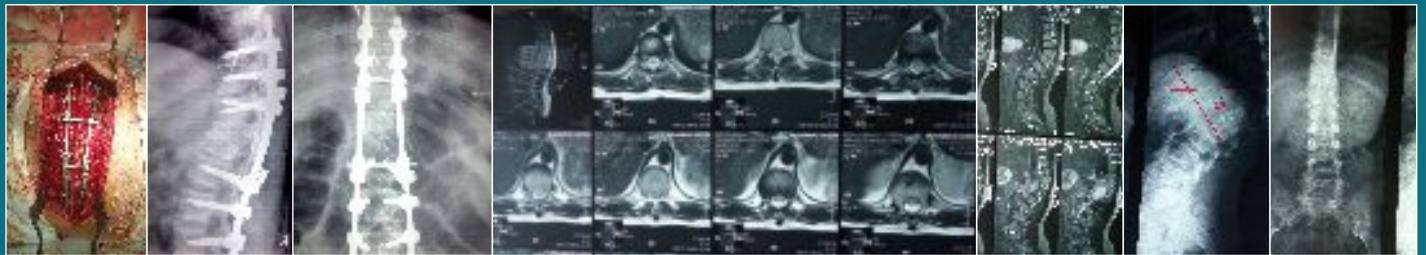
Dr. Ahmed Bilal Khalique
MBBS (NUST), FCPS (Ortho)



Dr. Syed Junaid Ismail and Dr. Ahmed Bilal Khalique are orthopaedic and Spine Surgeons who have been practicing together since couple of years as a team. The following is a case of congenital kyphosis which was done few months ago.

A young boy of 17 years presented with backache and increasing kyphotic deformity and neurogenic claudication distance of 50 - 60 meters. He was a case of congenital kyphosis whose deformity had progressed due to his recent growth spurt. He had congenitally fused, TV-12 and TV-11 vertebrae. His Cobb's angle was 60 degrees and fixed. MRI showed severe narrowing at this level. He was operated under Total Intravenous Anaesthesia (TIVA) since intra operative neuro monitoring. (IONM) was to be done. Consultant Anaesthetist Dr. Khurram Liaqat helped in providing TIVA and IONM was done by Mr. Kaleem Safdar. It was a six hour long surgery done through a posterior approach. Smith Peterson Osteotomy was performed at two levels and final correction was achieved with Pedicle Screw Fixation.

The boy was kept in ICU for a day and moved to ward on the close of first post op day. He was mobilized from second post op day with no neurological deficit and discharged on fifth post op day. His pre op, per op and post op X-Rays, MRI and pictures are as follows.



TRIP TO SWAT VALLEY AND AZAD KASHMIR

Nursing department of Ali Medical Centre visited Swat valley and Azad Kashmir in the month of May 2018. Staff enjoyed the break from daily hectic routine.



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