

‘C’ VIEW

THE BULLETIN OF THE BOMBAY ‘C’ WARD MEDICAL ASSOCIATION

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A patient walked in last week holding her phone like a piece of evidence. She was 42, fit, no significant history. She showed me a notification from her smartwatch. Her heart rate had been flagged as irregular at 2 a.m.

"Is it AFib?" she asked. Her voice was steady but her hands were not.

The reading was noise. Movement artifact. She had probably turned over in her sleep. I reassured her. She left looking only half-convinced. Three days later she was back — same watch, different alert.

The Device in the Room

We are now seeing something entirely new in general practice: the patient who arrives already monitored. Wearables track heart rate, sleep cycles, SpO₂, stress scores, ECG fragments, and step counts — and increasingly, they flag anomalies and deliver those flags directly to the wearer at midnight.

This is not a bad thing. Wearable-detected AFib has caught strokes before they happened. Continuous glucose monitoring has transformed diabetes care. The Apple Watch has a published sensitivity for AFib detection that no GP can match on a routine visit.

But there is a side effect nobody put in the box. Anxiety.

What the Algorithm Cannot Calibrate

The algorithm does not know your patient. It does not know that she is a light sleeper, that she had an argument with her husband the night before, that she has been anxious about her health since her father's cardiac event last year.

It flags. It does not contextualise.

And so she arrives in your clinic not with a symptom but with a data point — and a fear she has been sitting with since 2 a.m., quietly building a story around it. This is a new clinical skill we were never taught: how to read a patient's wearable data together with them, without dismissing the device and without amplifying the anxiety.

Dr. Chirag Jain

Editor, C-View

PRESIDENT'S MESSAGE

Dear Friends and Colleagues,

It gives me great pleasure to inform you all to EDUCON 2026- BRIDGING GENERAL PRACTICE AND ONCOLOGY CARE, jointly Organized by The Bombay 'C' Ward Medical Association and the Bombay Medical Union in Association with MOC Cancer Care & Research Centre, on 1st March 2026 at the Garware Club House was a great success. We had a very good attendance with over 250 delegates and more than 50 faculty. Our Chief Guest was Dr. Purvish Parekh and he spoke on, **“AI in Medicine: Will It Make the General Practitioner Redundant?”** The talk was well received and was an eye opener for many, with a wakeup call for all of us to become acquainted with AI and to start using it in our day to day practice.

During the conference there was a shower of prizes – lucky draws after every talk, two lucky ones winning a 5 gm. silver coin each, and a bumper prize of 10 gm. silver coin post lunch. 150 early bird prizes – a steel flask and about 150 late bird prizes – an Eveready rechargeable battery, were given. That about 150 delegates remained till the end speaks of the interest the conference generated. Every delegate was given a fashionable and useful shoulder bag. The food was delicious and the arrangements were superb and were appreciated by all.

The conference was designed to update the General practitioners in the field of oncology, in a basic and clinical manner. The General Practitioners are many a times the first point of contact for patient with potential symptoms and signs of Cancer. They play an important role in the early diagnosis and treatment of Cancer, which can reduce mortality and morbidity to a significant extent. They also play a huge role in counselling and palliative care of the Cancer patient.

I am grateful to MOC for supporting this conference in a big way. The whole team of MOC has been very supportive in helping organize this conference.

I am also thankful to Dr. Jawahar Mukhtyar, our Conference Chairperson and Dr. Anil Mehta our Conference Co- chairperson for conceptualizing and organizing this conference. The whole Managing Committee has worked hard to supporting them and I am thankful to them all.

This conference had a special significance as we honored the Bhishmapitama of our Association, Dr. Vibhakar Adhvaryu, with a Life Time Achievement Award.

I am thankful to all the faculty who have shared their time and expertise to enlighten us and A BIG THANK YOU to the delegates, without whom the conference would not have been successful.

I am also grateful all those who have provided educational grant for organizing this conference and all those who have supported this conference by way of booking stalls and advertisement in the souvenir.

Our regular CME was on 5th April, 2026 at our usual venue, The Sir H. N. Hospital, on, “Beyond the Belly: A multisystem Lens on Abdominal and Pelvic Pain” The CME was well curated by our Clinical Secretary, Dr. Jawahar Mukhtyar and was much appreciated.

Our Next CME is on – **Stroke 2026#Rapid Recognition # Decisive Action # Seamless Continuity for GP** Please attend in large numbers.

Dr. Neelang Shah, President.

IMPORTANT NOTICE

- Members are requested to please Whatsapp & email us their Name, address, mobile number and e-mail address to enable us to update the member's list. **Please send your details with the subject – ‘UPDATE MEMBERS LIST’**
- Non- members who wish to get regular information of our CME's and other programs are request to send us their Names, addresses, mobile numbers and e-mail address via Whatsapp and e-mail. **Please send your details with the subject– ‘PLEASE INCLUDE IN NON-MEMBERS LIST’**

The Silence Between Symptoms

She had come in four times in three months.

Fatigue. Mild breathlessness on climbing stairs. A vague discomfort she called "pressure" somewhere behind her sternum. Each time, her ECG was normal. Her blood pressure was 126 over 80. Her blood work was unremarkable. She was 52, non-diabetic, non-smoker, with a family history she described as "nothing serious."

I treated her for GERD the first time. Anaemia workup the second. Deconditioning the third.

The fourth time, I almost did the same thing again.

She sat across from me and said, quietly, "Doctor, I don't think I'm imagining this."

I had not suggested she was. But she had heard it anyway — in the efficient nod, the rapid prescription, the hand already moving toward the next file. She had heard it in the absence of the question I had not asked.

I put the pen down. "Tell me exactly what it feels like. Not the symptoms. The feeling."

She was quiet for a moment.

"Like something is about to happen," she said. "Like the feeling before a faint, but I don't faint."

I referred her for a stress echo that afternoon.

She had a 70 percent stenosis of the LAD.

What the Tests Did Not Show

There is a category of clinical information that does not appear on any investigation. It lives in the patient's choice of words, in the number of times they have returned, in the specific expression on their face when they say "I don't think I'm imagining this."

We are trained — rightly — to anchor our decisions in evidence. But evidence is gathered after a decision has been made about what to look for. And that decision, always, begins with listening.

Her ECGs were normal because resting ECGs are normal in stable CAD 50 percent of the time. Her blood work was normal because it was the wrong blood work. The stress echo was abnormal because I finally asked a different question.

The Bias We Carry

Cardiovascular disease in women presents differently. The classic crushing chest pain is a male-pattern symptom. Women more often present with fatigue, breathlessness, jaw discomfort, nausea — symptoms that map easily onto GERD, anxiety, anaemia, perimenopause. Symptoms that are, individually, entirely non-specific.

This is not obscure knowledge. It is in the textbooks. But in the pace of a busy outpatient clinic, with normal investigations in hand and a waiting room full, the textbook recedes. Pattern recognition takes over — and our patterns were built on a literature that underrepresented women for decades. She was not a textbook case. She was a woman who came back four times because something was wrong and she knew it.

She had her angioplasty in February. She came back to the clinic last month — not as a patient, just to say thank you. She brought mithai. She was walking up four flights of stairs without stopping.

The diagnosis was on the stress echo. But it began the moment I put the pen down.

The Bombay 'C' Ward Medical Association and Bombay Medical Union

Jointly with **Sir H.N. Reliance Foundation Hospital**

Invite you to

Dr. Jaswant Mody Foundation CME on: **Stroke 2026 • Rapid Recognition •**

Decisive Action • Seamless Continuity for the GP

Date: Sunday, 03rd May 2026. **Time:** 09: 00 am to 01: 00 pm

Venue: Convention Hall, Sir HN Reliance Foundation Hospital Prarthana Samaj

09.30 – 09.30 am	Registration and welcome Coffee
09.30 – 09.35 am	President - Dr Neelang Shah - welcome note.
09.35 - 09.45 am	Clinical Secretary - Dr Jawahar Mukhtyar Introduction: stroke update for General Practice
09.45 – 10.15 am	ACUTE STROKE - TIME IS BRAIN - ROLE OF GPs Speaker: Dr Arun Shah - Director Neurosciences
10.15- 10.45 am	Neuro-Intervention in stroke - An Update : Speaker. Dr. Vipul Gupta - Director Neurointerventional Surgery
10.45 – 11.15 am	TIA's: A Missed Opportunity: Speaker: Dr Manish Chhabria - Senior Consultant
11.15 – 11.30 am	Haemorrhagic Stroke Assessment & diagnostic Pathways. Speaker Dr Joy Desai - Director Neurosciences
11.30 – 12.00 pm	Recent Advances in Sub Dural Hematoma Management : Speaker Dr Dhaval Thakkar - Additional Director Interventional Radiology
12.00 – 12.30 pm	Post Stroke Pathways: Speaker : Dr Poonam Bajaj - Additional Director Neurorehab
12.30 – 1.00 pm	Panel Discussion : lead by Dr Vipul Gupta. Moderator Dr Nisha Shenoy; Dr Siddharth Chouhan
1.00 pm onwards	VOTE OF THANKS FOLLOWED BY LUNCH

ADMISSION FREE BUT PRIOR REGISTRATION IS A MUST AS SEATS ARE LIMITED.PLEASE NOTE THE VENUE AND TIME. PARKING AVAILABLE.

President

Dr. Neelang Shah

Secretaries

Dr. Mrinal Shah

Dr. Rushabh Shah

Secretaries

Dr. Jawahar Mukhtyar

For Registration: what's app: +917208189493 Email to bcwma1@gmail.com

Our CME: 1st Sunday of every month

To know details of CME of every month, send your email id to bcwma1@gmail.com

Applied for 1 MMC Credit Hour Certificate (Subject to approval): Rs 50/- (The Bombay

C Ward Medical Association members), Rs 100/- (non-members)

