



Krishnan Ganapathy, President NSI 2006

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Introduction:

It all started at 9 am on Wednesday Aug 3rd 1966. I was in my XI standard class. An attender mumbled something to the class teacher, who in turn asked me to meet the Headmaster. I was told that my elder brother, a 25 year old electrical engineer had been involved in a fatal two wheeler accident. Not yet sixteen, that moment I decided to become a doctor and save the world. The scene next shifts to Nov 7th 1972 midnight. I was a fourth year MBBS student preparing for my pathology exams. I received the news that my eldest brother, again riding a two wheeler (also not wearing a helmet) had been involved in a RTA. A year ago Prof. S Kalyanaraman had offered me Rs 60 per month to help him collect data for a Head Injury paper. I now requested his professional services. My brother was deeply comatose, with multiple injuries. I was told that he had a “Primary Brain Stem Injury”. That night, I decided to become a neurosurgeon. During the last 45 years, Prof SKR (as he is popularly known) has been a guide, mentor and an elder brother and an object of continuing hero worship.

Family Background:

Having lost two elder brothers and with another elder brother settled in the USA, I instinctively decided that I could not leave my devastated parents and so never went overseas for a job or specialised training. A few years later, my brother in law also passed away and I had to look after my elder sister, widowed very young, as she had no children. Even today I honestly believe that it was my parents and elder sister who “looked after me” till I was 55 (my father passed away when he was 94, my mother at 84 and my sister at 75). Living in a joint family with four generations in the nineteen eighties, was an incredible experience. The tremendous family support enabled me to be a guest at home and concentrate on neurosurgery.

To the best of my knowledge, I was the only Secretary of the NSI (for two terms) who was not employed in an academic institute. Most of my contemporaries know the stellar role played by my wife Vijayalakshmi who helped me bring out and post 24 newsletters to 2400 members without an office or departmental support, conduct the NSI elections from 1997 to 2002 and of course run the Society. My children “detest” medicine because I hardly spent any time with them. My son, a PhD from University of Chicago (best outgoing student in Mathematics from IIT Kanpur) is a staff engineer at Google HQ, Mountain View California. His wife is a chartered accountant. They have a daughter and a son. My daughter, an Electronic engineer, with two sons is now a home maker. My son in law is a software specialist at Tech Mahindra in Chennai.



*The President, with the world at his feet with Parents & siblings
19/04/1952*



With Family 2011



With grandchildren in 2015

Undergraduate Medical Education:

Awarded Louis Mathias Archbishop Memorial Gold Medal for best outgoing student in the Anglo-Indian high school examination 1966. Winner of numerous prizes, medals, cups and certificates throughout schooling period. Represented Madras Medical College in numerous inter collegiate debates, essay competitions, quiz programmes etc., and won many prizes. After seeing my performance in an intercollegiate drama

competition at the USIS, I was offered admission to BA dramatics course in Chicago! Awarded certificate of merit for highest mark in the University of Madras in Obstetrics and Gynecology and the RSRM Gold medal in Obstetrics and Gynecology. Awarded First Prize in the All India Essay competition for final year M.B.B.S. Students organised by the T.B. Association of India, (1973) for the essay “Differential diagnosis of Pulmonary Tuberculosis.” Awarded First Prize in the intercollegiate Science Quiz (Postgraduate level) in 1972.

I had submitted a “research project’ in the pre university class in 1968 and had obtained the National Science Talent award. This made me dabble in research, even as a II yr MBBS student and for the next four years got the I prize in Life Sciences, every year, from the Madras Science Association. While representing Tamilnadu at the National Science Fair in Delhi. Indira Gandhi visited my stall and I showed her white mice on whom I had done skin grafts. This was my first paper in a national journal - the Indian Journal of Medical Research. For a III yr MBBS student in 1971 this was unusual! I also produced a double headed chick by injecting pilocarpine in a fertilised egg For several years Prof B Ramamurthi addressed me as ‘Muttai Ganapathy’ (Muttai = egg in Tamil). At that time we had two introductory classes in Neurosurgery and Prof BRM personally took these classes. Needless to say I was inspired. I once went to IIT Madras to attend one of his lectures. I requested him for a lift to drop me in the main road. On learning that I was a medical student, he dropped me in my house. Like Prof SKR, he had a major influence in my growth and development.

Postgraduate medical education and initial training:

In 1975 when I was selected for the second 5 year batch, there was no stipend for post graduates. As a resident there was very little time for even a modest “private practice” From 1976, Dr Kalyanaraman employed me as his assistant to look after his private patients admitted in Rama Rau Clinic in Chennai. In addition to Rs 500 a month initially, I was also paid for assisting him in surgery, initially as a second assistant and then as first assistant. Gradually he entrusted me with doing lumbar punctures, myelograms and even carotid angiograms for his private patients. There were no “special nurses” at that time and following a craniotomy I would be the “special duty doctor” for the individual patient. Considering that I was a neurosurgeon in training, it meant an outstanding level of care in a

small nursing home in the seventies. I would leave home at 5.15 am, take two buses, do rounds in the nursing home, review about 10 patients, make entries in the case records and reach the Institute of Neurology, Madras Medical College by 7.45 am. Dr Ramamurthi had only one assistant cum PG Dr Reginald (who was six years senior to me and taught me to do my first burr hole!) and me as a PG, to look after about 40 patients, many of them unconscious. A few weeks after I had just joined his unit, he wanted to know the Na level of a drowsy patient. I pointed out that the previous evening, I had to see 7 new patients, that I was personally looking after 20 patients and that it was impossible for me to go to the lab and get the results before rounds. Deploying terminology which would make a sailor blush, various other occupations were suggested for me!! I just managed to stop lacrimating. An hour later, I was asked to report to his room. I had started preparing to face the consequences. I was instead asked by his secretary to review a file marked “Multi Institutional Collaborative ICMR Project on Head Injuries” – “Principal Investigator Prof B Ramamurthi”. The staff sanctioned for this project included a Sr. Research Fellow. Knowing that I had dabbled in research projects, to my utter surprise Dr BRM offered me the post. With a twinkle in his eye, he asked, “Do you think you can look after my patients also?” For the next three years I held three positions concurrently – PG, SRF and Private Asst to Dr Kalyanaraman. I would be working almost 90 hours a week including most Sundays and sleeping at home four to five days a week. My research job included ensuring that the brain was collected during post mortem for detailed histological studies. Once on a holiday, I informed the mortuary attender that a “case” would be coming and that I must get the brain before *he* leaves. The relatives got to know of this and all hell broke loose!

Humour was ingrained in Prof Ramamurthi. At the “Kasi Yatra”, during my wedding, he told my father-in-law – “Sir, please give him your daughter, otherwise he will remain in Kasi and there will be no one to look after my patients”. Married on a Friday, I requested leave just for the weekend. “You are already married to neurosurgery and why do you want leave anyway”, was the reply. The Wednesday morning clinical meeting at the Institute of Neurology, Madras Medical College would start at 0730 hours. Once I entered at 0733. The rear door had been closed. On opening the front door I was told by the chief that I was 6 days 23 hours and 57 minutes too early

for the next meeting and was asked to go away. Cruel, some may say, but then we learnt to be obsessed with punctuality. He was at his very best in the operation theatre. On one occasion, while doing a particularly difficult ANF excision, he suddenly took off his gloves and sat on a stool chanting some Sanskrit slokas. There was pin drop silence and a palpable tension in the atmosphere. After a few minutes he looked at me and said, “Now will you kindly assist me normally. I am not accustomed to such brilliant assistance”. Time management was his forte. He always had something to read. He would thank Indian Airlines and the various government offices for providing him with unexpected time!

What made Dr. B. Ramamurthi so special? Medicine is replete with tales of the brave. There have been dozens of outstanding surgeons, scores of superb teachers and hundreds of brilliant diagnosticians. Several have made noteworthy contributions to research. A few are blessed with the gift of the gab and have even influenced public thinking. Others have truly been trail blazers. Adversity has brought out the best in them. The word impossible does not exist in their lexicon. The greater the difficulties the greater their determination to overcome them! A miniscule number are truly erudite – at home with Homer’s Iliad and the Bhagavad Gita. However for the same individual to possess every one of these exceptional attributes and more is something unique. This, in a nutshell was Prof. B. Ramamurthi. He will always be a hero and role model to those of us privileged to have been associated with him. Truly great men are neither born nor do they die. They visit the planet earth. The greatest compliment he paid me was when several decades later he once remarked “if only my grandson had been older, he would have been your son in law”.

On one occasion Dr Ramamurthi wanted an immediate carotid angiogram in an unconscious patient. I pointed out that there was no power in the angio room. He said “In 90 minutes I want to see the pictures in my room. Is that clear?” Using all the skills of clinical localisation, I deduced that this was a ‘local’ problem, in the angio room, went to the Govt General Hospital stores, got it opened, got the fuse, got a ladder and managed to have the fuse changed. The percutaneous direct angio revealed what I thought was a meningioma blush. Excited I went to his room 2 hours later. He looked at his watch, at the films and asked, “Why did you not loosen

the oily hair before doing the angio?” Crestfallen, I apologised. Years later I heard that he had related this story to several others though he never directly complimented me. On two other occasions I did an accidental direct vertebral angiogram. He would tell his Asst, “Ask Ganapathy to do the vertebral angio, but don’t tell him you want a vertebral angio, ask for a carotid angio”.

On one Diwali day we had seven mortalities in 17 hours. I was devastated but even more so when Dr Abdul Khader Sait, Asst Professor, insisted on going to the mortuary to see a body which had been removed before he could confirm death. My ego was bruised. After four years as a PG was I not capable of certifying death ? 40 years later I am not sure!!! The 4 weeks posting at CMC, Vellore in Oct 1979 was truly an eye opener. One Saturday morning during the neuroradiology session I was shown a series of pictures, myelograms, PEG, ventriculograms and angiograms. The “visiting PG” was then the guest of honour! and usually torn into bits. I described the findings but was unable to make a diagnosis. This went on for almost 20 minutes. I was feeling miserable, letting down the Institute of Neurology, MMC. Then Prof Jacob Abraham asked me how many years I had been a PG. I replied “Four years 9 months”. He remarked, “why are you taking so much time, why don’t you confidently say that all these images are normal”. Diagnosing pathology is easier than asserting that the image is normal!!

Dr T S Kanaka was at that time regarded a terror. Today she would have been reported to the SPCA and the National Human Rights Commission! Behind this extremely stern façade was a heart made of gold. Decades later we realised that what she taught us with her extraordinarily strict discipline had stood us in good stead. Prof V Balasubramaniam was the exact antithesis of BRM. Small built, diminutive, never ever wanting to be in the limelight he was erudition personified. He was indeed “Knowledge Incarnation”. Dr R Narayanan was pragmatic, worldly wise and would let us operate even when *we* did not have the confidence. Late Profs. K. Jaganathan and Krishnamoorthy Srinivas, G. Arjundas and Zaheer Ahmed Syed taught us the fundamentals of clinical neurology and ensured that we become surgical neurologists and not just neurosurgeons! They truly believed in Sir William Osler’s adage, “Listen, Listen, Listen – the patient

is telling you the diagnosis.” This approach indeed made a remarkable difference in our life.



*With SKR, Mrs. SKR and BRM
at Panmujom, N.Korea/S.Korea border*

The relationship with Dr. Kalyanaraman was/is even more special. Professionally he has hand held me for decades and played a significant role in most of my “achievements”. Instrumental for encouraging me to register for a part time PhD, my active involvement in helping him bring out Neurology India and organising

the CME programmes stood me in good stead throughout my life. Now I realise that I am unconsciously aping him in many non-professional matters also. Such is the influence of a true Guru – who can forget his coming on Sundays at 7am just to take classes for us. In April 1980, I was shocked when I did not pass the M.S. (Neurosurgery) exam. I had never expected to fail. I met Dr SKR at his residence and told him that if after 5 years of very hard work I was still not considered suitable I would join govt service as an assistant surgeon and requested his help in getting a posting near Chennai. I had expected him to commiserate and sympathise with me, encouraging me and reassure me that in the next exam, in a few months I would qualify. Instead he commended me on an excellent decision. He pointed out that if I could not face a single major setback I could never ever be a good neurosurgeon. He then gave me a list of names (including some examiners!!) and pointed out that some who had not passed in the first attempt, later on had become President of NSI!! I accepted the challenge and the rest as they say is history!!

As DANS (Duty Assistant Neurosurgeon – I did this night duty for 15 years after my MS (Neuro), MNAMS (Neuro) and a PhD in Neurosurgery.) We would telephonically present the problem to the consultant. Whether it was midnight or 4 am, Prof SKR would patiently listen to the whole story, and clinical findings as if it was a presentation in a Grand Round. He would then ask “what do you want to do and why”. It was a teaching

session *par excellence* in a real life situation. This would happen several times in one night. I often wondered later who had done the duty!

During my MNAMS exam at KEM Mumbai in April 1981, I had CV anomaly as my long case. Diagnosing and managing specifics of CV anomalies was particularly difficult then. Prof Gajendra Sinh was one of the examiners. On being asked what I would do, I said, “I will refer the patient to you, Sir. While I have some idea of what to do, I have not operated on any patient. Your Presidential address to the NSI was on “85 cases of CV anomaly”. You have the maximum experience. I am interested in the patient’s welfare”. The facial expressions of all the examiners suggested that I had passed !

Association with NSI:

The first NSI conference I attended was as a first year post graduate (general surgery posting) at Chandigarh in 1975. A group photograph of all the attendees was being arranged. I was late and was wondering how to go to the back. An elderly individual very rudely ordered me to go to the very back. Dr Ramamurthi reprimanding the individual and said “One day this boy will sit in the middle of the first row”. He obviously could spot dormant talent!!! For the next 33 years, I attended 30 NSI annual conferences and gradually made my presence felt, presenting papers at every conference. Awarded a special prize for the best poster “Post traumatic Giant Cystic Meningioma” at the 38th Annual Conference in Dec. 1988 at Chandigarh. Became Member, Executive Committee, 1990-92, Faculty Member, CME Programme on ten occasions. Co-convenor and Convenor CME Programme. Vice President in 2004, President-elect in 2005 and President in 2006 and ex-officio member of the World Federation of Neurosurgical Societies (India) Trust. On reaching emeritus status, I am now Member, Arbitration Committee, NSI and Editor, Monograph on Past Presidents!!

Actively assisted Dr Kalyanaraman from the very first CME programme held at Pune in 1978. Read hundreds of articles, made abstracts of them, corrected the proofs and re- corrected them. All this was in addition to the exacting work as a resident, as a SRF for ICMR and assisting Dr SKR in his voluminous private practice. There were no computers available then.

At the Cuttack conference Dr SKR, and I waited in the platform at 3 am as the train in which the books were sent was late. We got the books to the conference hall, unpacked dozens of cartons and ensured that at 7.30 am the books were available. For six years as “Local Associate Editor” I corrected most articles published in Neurology India. Dr Sudha Ramachandan and Dr Dharmarajan shared this responsibility. One day in the early eighties, Prof Ramamurthi called Prof SKR and asked him the recommended dose of Bromocriptine which had just been introduced. Dr SKR suggested that I would probably know as I was making abstracts. My wife answering a call from Dr BRM informed him that I was not available and sought details regarding the call. Dr BRM gave the details. My wife gave the answer immediately quoting the vol no, page no and authors from an article published in Surgical Neurology! By an incredible coincidence, she was correcting that particular abstract then!!

Dr M. Sambasivan and Dr A K Banerji persuaded me to stand for Secretary, NSI in 1996 though I did not have the slightest inclination at that time. Dr Sanathan Rath also supported them. Rather reluctantly I agreed. However on being elected unopposed (perhaps nobody wanted to do the arduous job then) I put my heart and soul into the job. Dr Mathew Chandy was taken aback when I stood outside his office at CMC, Vellore four months before I was to take over and requested him to explain my duties and responsibilities! At the very first conference when I was the Secretary (December 1997) I made a website for the society. **NSI was probably the first professional medical society in India to have its own website.** Persisted in attempts to introducing electronic voting and arranged for a few demonstrations but this did not pass muster with the then EC. Retrospectively, some of the ideas suggested were perhaps ahead of the time. Twenty years later it is most reassuring and fascinating to see how NSI is today embracing and deploying state of the art ICT (Information and Communication Technology).

I was probably the first Secretary of the NSI who was not working full time in an academic institution and thus did not have asst professors and postgraduates to fall back upon. In 1995, 15 years after qualifying as a neurosurgeon I had resigned from the Madras Medical Service in frustration when my student’s student was promoted (they were senior to me in government service!). Prof B S Das of NIMHANS always used to

refer to me as the world's senior most Asst Professor of Neurosurgery!! It is difficult for members in 2017 to understand how difficult it was to bring out a newsletter 20 years ago. With the enormous support of my wife we brought out a newsletter in time, every quarter for 6 years. The size content and looks was totally changed.

An abstract (No. 862) was published in the August 2002 issue of Neurosurgery. The paper had been accepted for a platform presentation at the 2002 Annual meeting of the Congress of Neurological Surgeons at Philadelphia, USA. The abstract stated - *Medical awareness among inpatients in India is very poor. Doctors in India do not help their patients. Shady, unethical practices of and advice provided by the medical fraternity in India leave patients confused. The Indian government does not care at all. This situation, compounded by economic conditions and socio-cultural beliefs makes it very hard to provide proper and ethical medical care. Taking umbrage, a two page rebuttal of every sentence in the 300 word abstract was sent by me to the Secretary and President of the CNS in the USA.* The paper was not presented. The rebuttal was printed in the newsletter of the Neurological Society of India and the writer apologised.

Development of Stereotactic Radiosurgery:

Started the first Stereotactic Radiosurgery Unit in South Asia in May 1995 at the Apollo Speciality Hospitals Chennai and helped set up a few new



*1st Stereotactic Radiosurgery
South Asia*



*Shifting patient 4km across Anna Salai,
Chennai in heavy traffic with stereotactic
frame after DSA in 1995*

radiosurgery units. There was no precedence. In Nov 1994, I remember asking Dr Prathap Reddy, Chairman, Apollo Hospitals, what I should do regarding import licence etc. In his characteristic way he replied, ‘Ganapathy, do not come to me for everything, You take decisions. I will support you. Does not matter if the decisions are wrong, so long as it is for the right reasons’. Total confidence in you from the boss does wonders to your morale. Setting up the first SRS unit in 1994-95 was indeed a great experience. Though I personally treated about 800 patients with cerebral AVMs, I was unable to extensively publish papers. Introducing an academic culture in a corporate hospital in the twentieth century was more than a challenge. It was almost impossible.

First neurosurgeon from South Asia to become a Member of the International Stereotactic Radiosurgery Society in 1996, the Cyberknife Society in 2008 and to be formally trained in Robotic Radiosurgery. Organised the national conference of the Indian Society for Stereotactic and Functional Neurosurgery in 2011 at Chennai and was elected President of ISSFN (2011 to 2013).



Memento for Presidential Oration Indian Society for Stereotactic & Functional Neurosurgery

Contribution to Neurosciences in India and overseas:

Secretary General Asian Australasian Society of Neurological Surgery for two, four year terms 1995 to 2003. First Indian neurosurgeon to be elected to this post. Was a faculty member for several WFNS PG Education programmes, Member, World Federation of Neurosurgical Societies Radiosurgery Committee 2013-2017. However due to unexpected developments was not able to justify the latter position.

Academic achievements:

Fellow, Madras Medical College 2010, Fellow, National Academy of Medical Sciences 2007, PhD in Neurosurgery from Madras University in

1990 for thesis “CT Numbers in Intracranial Space Occupying Lesions and its diagnostic significance” - Sixth Neurosurgeon in India to be awarded a PhD and first in Neuroimaging, Fellow, International College of Surgeons since 1987, Fellow, American College of Surgeons (only Neurosurgeon from India to be awarded FACS in 1986 and one of the youngest from India), MNAMS (Neurosurgery), Certified by the National Board of Examinations in Neurosurgery in April 1981 - third neurosurgeon in India, the only one in 1981 and the second in India to be certified in the first attempt. Awarded M.S (Neurosurgery) degree of the Madras University in Sep 1980 after five years of post-graduate training from April 1975 to April 1980 @ The Institute of Neurology, Madras Medical College. Awarded the M.B.B.S. Degree of the Madras University in January 1975.

Delivered 159 guest lectures overseas and 414 in India (mostly in Telemedicine), authored 76 papers in peer reviewed journals, 16 chapters in text books, 175 articles in magazines, newspapers. Personally organized three major national neurological conferences and played a major role in assisting in the organization of 17 national and international conferences. Supervised 9 dissertations including 2 PhD – examiner for PhD. Member of 23 National / International Committees at various times including Dept of Science and Technology and Dept of Bio Technology, Govt of India.

Teaching experience 35 years (1980 to 1995) M.Ch, MS, MBBS, DM and then DNB Neurosurgery from 1996 till 2014, PhD Guide and examiner The Tamil Nadu Dr. MGR Medical University and Anna University, External Mentor, MBA programme Harvard Business School, Ross School of Business, University of Michigan, Yale Institute of Management. Attended 3 courses at Indian Institute of Management, Ahmedabad even as a senior citizen. Emeritus Professor, The Tamil Nadu Dr. MGR Medical University from July 2016 onwards and formerly adjunct professor, IIT Madras and Anna University. Visiting professor four other universities. Examiner and Inspector, National Board of Examinations. Overseas External examiner in Neurosurgery to Universiti Sains, Malaysia and MRCS examiner Royal College of Surgeons, Edinburgh. In a 42 year span participated in 65 International conferences and 193 National Conferences dealing with neurosciences. Published 137 articles in Journals, Textbooks and Magazines.

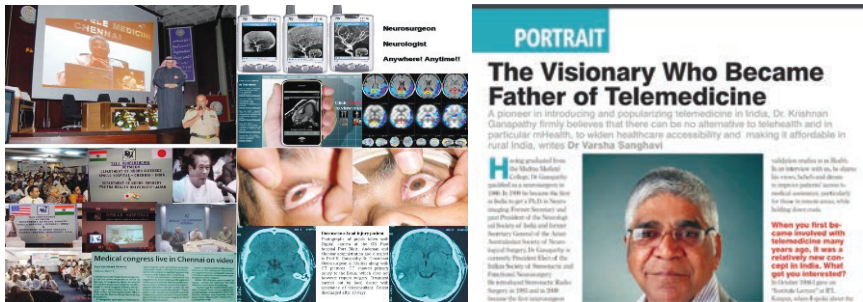
Orations

2nd Dr Sanathan Rath Oration “ Health care in 2025 – A Peep into the Future” Bhubaneswar Feb 2015 ; National Academy of Medical Sciences 2009 Achanta Lakshmipathi Oration Award Lucknow mHealth the Reinvention of Healthcare; 27th Dr Achanta Laxmipathi Oration delivered at Madras Medical College, Madras August 2008 – “ Telemedicine and Neurosciences”; A.D. Seghal Oration – “Telemedicine in Neurotrauma” on August 2006 at the 15th annual conference of the Neurotrauma Society of India. New Delhi; University of Madras Dr A L Mudaliar Endowment Oration – August 2002; International College of Surgeons, Indian Section, Dr H Karmakar Oration Award, 1999.

Publications, Lectures delivered - Full details available on www.kganapathy.com

Development of Telemedicine:

First in South Asia to start and develop Clinical Telemedicine (2000) Responsible for initiating Telemedicine in the Armed Forces of India. Member of 13 Hi-level Govt of India committees in telehealth. Member of 3 international committees in telehealth. Nationally and internationally recognized as one of the pioneers who played a major role in the growth and development of Clinical Telemedicine in India. Played an important role when the world’s first VSAT enabled village hospital was formally commissioned by Bill Clinton on March 24th 2000 at Aragonda in Andhra Pradesh. As Founder and Head of the largest and oldest telemedicine network in South Asia (Apollo Telemedicine Networking Foundation), have overseen over 127,000 teleconsultations in 25 different specialties

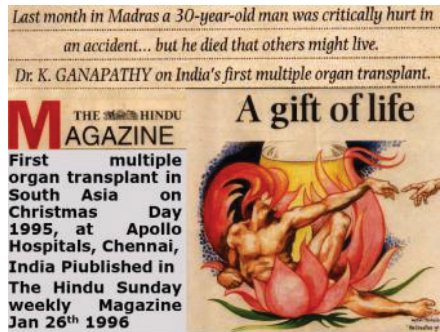


Telemedicine and Neurosurgery

particularly for suburban India. Featured as case study by Center for Health Market Innovations, Indian School of Business, Hyderabad, India. Singapore Government Technology Awards 2007 – Runner-Up Award for Project ‘VSAT Enabled Rural Telehealth in a Developing Country’. Elected **President, Telemedicine Society of India 2011.**

Social Contributions:

- a. Cadaveric Organ Transplant:** Facilitated 1st multiple organ Transplant in South Asia on Dec 1995 & was an active crusader for first 10 years. Featured in documentary the “Gift of Life” produced by Films Division, Ministry of Information and Broadcasting, Government of India – *as the one responsible for facilitating the first multiple organ transplant in India on Dec 25th 1995.* Actively promoted the concept of brain death recognition from 1996 till about 2007 facilitating a large number of organ transplants in Chennai.
- b. Helmet Use:** Have been a relentless campaigner, for the last 42 years to make Helmets mandatory in Tamil Nadu. Measures have included being a co respondent filing a PIL on behalf of NSI and appearing before the Madras High court and getting a Government Order passed to enforce helmet use.
- c. Others:** Honorary Neurosurgical consultant to the Armed Forces of India for two terms of 3 years each and to the Madras branch of the Spastic Society of India from 1993 to 2008; delivered lectures to school children and college students to make them aware of medical sciences, helmet use; scores of popular medical lectures delivered at Rotary Clubs, Lions Clubs, Tamil Nadu Science Foundation, etc. Honorary visiting consultant to Madhuram Narayanan Center for exceptional children; several lectures given to parents of mentally challenged children.



*The Gift of Life: The Hindu,
21 January 1996*

Reminiscences and Take Home Message:

My philosophy has been and will continue to be to have “a little of everything”. I have been fortunate to have dabbled in academics, in organised neurosciences, to have a little private practice, to have started two new disciplines (Radiosurgery and Telemedicine), to have worked in public and corporate hospitals, to have treated the richest of the rich and the poorest of the poor and to have travelled extensively. Our membership has individual beacons of light. Through their personal efforts they have demonstrated to the outside world that the centers of excellence in neurosciences in India are truly world class. Today we should no longer talk of achieving world class in neurosciences. The world should talk of achieving India class. We should not *follow* high standards – we should *set them*. As a society we have commenced projecting our image overseas. “Made in India” is on its way to becoming a superbrand. The NSI can and must become a superbrand. Rome was not built in a day. We must never forget that we have to keep running to stay where we are. *Coming together is a beginning, staying together is progress, and working together is success*. The starting point of success is to move away from the comfort zone. Unhappiness alone makes one move. An innovator is one who does not know, that it cannot be done. An innovator is also the one, who sees what everyone sees, but thinks of what no one else thinks. We the members of NSI, truly have the potential to be great innovators.

Today, though we constitute less than 2.5% of the world’s neuroscientists we look after the neurological afflictions of every sixth human on this planet – thousand three hundred million people. Our activities should *not* be confined to just improving our individual professional competence. We are part of the community. *The community’s problems therefore are our problems*. It has been my privilege to have been an active member of the NSI. I once again place on record my gratitude to all of you who have been responsible for my personal growth and development. Looking back it has been a wonderful journey. Having been trained in the BC era I sincerely hope that technology will only be used as a means to an end and not an end by itself. Tender Loving Care should continue to be the neurosurgeon’s mantra. ■