SPINEWS
Est. 1998
THE SPINE FOUNDATION NEWSLETTER

The story so far

1988
- Dr Shekhar Bhojraj sets up the first spine surgery specialty unit in the country at KEM Hospital in Bombay

1993
- Dr Shekhar Bhojraj sets up the first dedicated private spine unit in India at Hinduja Hospital in Bombay

1998
- Dr Shekhar Bhojraj and Dr Shilpa Bhojraj establish The Spine Foundation on May 19

2003
- Dr Shekhar Bhojraj's first visit to Gadchiroli, in rural Maharashtra, to see the work being done there.

2004
- First OPD in Gadchiroli in association with SEARCH
- Paediatric spine unit set up at Wadia Hospital for Children, Mumbai

2006
- Dr Shekhar Bhojraj starts a low cost spine-care program at Dr HV Tilak Hospital, BDD Chawl, Worli, Mumbai

2007
- First rural spine surgery at a surgical camp in Gadchiroli, Maharashtra

2009
- The Spine Foundation opens its spine unit at VN Desai Hospital in Mumbai to reach out to the poor urban population

2014
- First scoliosis surgery at Nirmal Ashram Hospital, Rishikesh.

2015
- Specialised physiotherapy department for spine patients opens at VN Desai Hospital in Mumbai

2016
- Completion of 100 surgeries at Gadchiroli
- First OPD and surgical camp in Dhule, Maharashtra, at
- Shri Bhausaheb Hire Government Medical College & Hospital

2017
- First OPD and surgical camp in Ambajogai, Maharashtra at Swami Ramanand Teerth Rural Medical College
- First OPD and surgical camp in Aurangabad, Maharashtra at Government Medical College
- First OPD and surgical camp in Akola, Maharashtra at Government Medical College & Hospital
- First OPD and surgical camp in Ratnagiri, Maharashtra
- First OPD in Sittilingi, Tamil Nadu in association with Tribal Health Initiative

2018
- First surgical camp in Sittilingi, Tamil Nadu in association with Tribal Health Initiative
- Signing of Memorandum of Understanding with the DMER/ MUHS of Government of Maharashtra to replicate their model throughout the state.

2019
- Launch of Comprehensive Spine and Musculoskeletal Care Centre concept at Gadchiroli
- MOU with Public Health Department of Government of Maharashtra to initiate comprehensive spine care programs at Ratnagiri and Nandurbar civil hospitals
- District-wide training programs for Asha workers and rehabilitation teams
- Started RSCCs at Hans Foundation, Dharampur and HIMS Dehradun

2020
- Started online OPDs at Gadchiroli, Akola, Kolhapur and Sittilingi

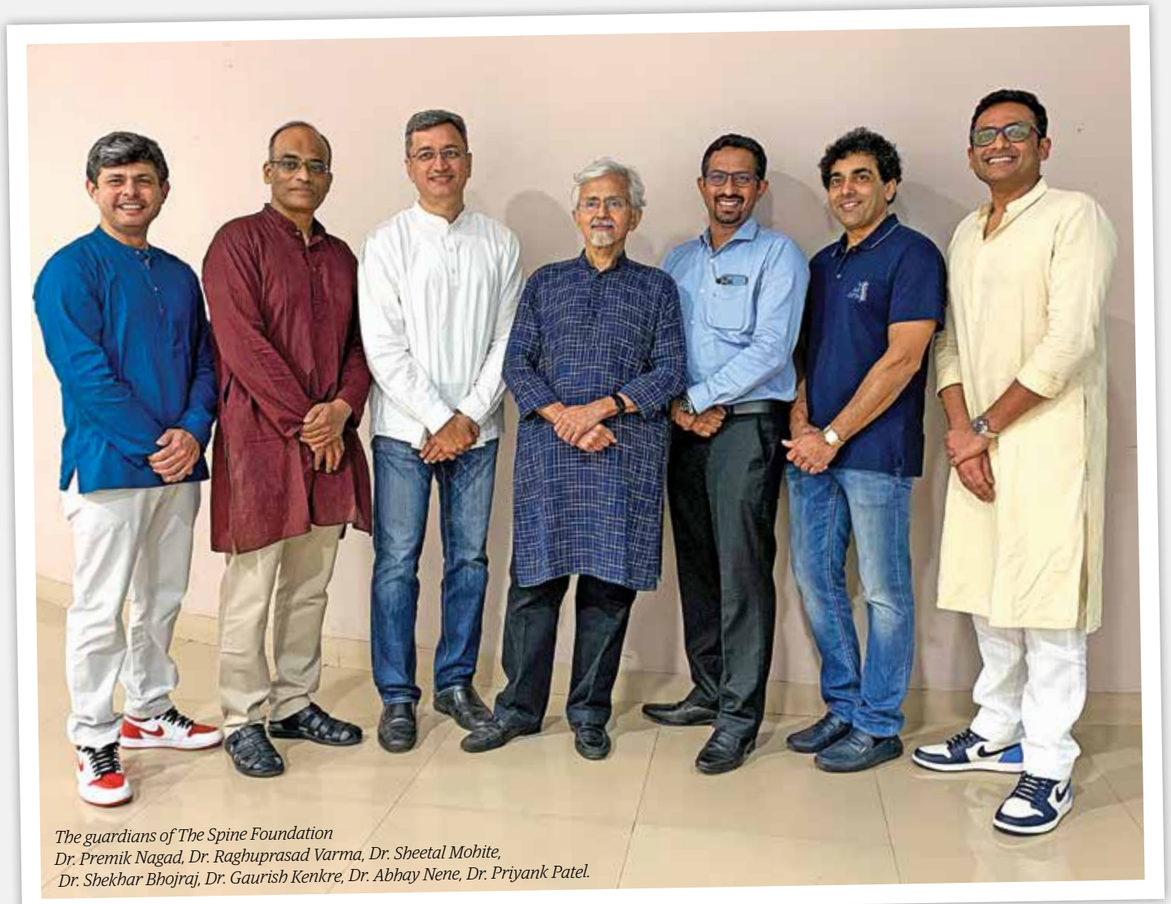
2021
- New modular OTs commissioned at Ambajogai and Nandurbar.
- Conducted Scoliosis surgery at Dr DY Patil Hospital in Kolhapur.
- Mobile physiotherapy launched in Gadchiroli.

2022
- Started new RSCC centre at Swami Vivekananda Charitable Hospital in Uttarakhand
- 21st September. TSF completes 1000 spine surgeries at VN Desai.

25 YEARS OF SERVICE
THE SPINE FOUNDATION
Est. 1998

DREAM BIG

Dr Shekhar Bhojraj, Founder Trustee of TSF, looks at the way forward for the next 25 years



The guardians of The Spine Foundation
Dr. Premik Nagad, Dr. Raghuprasad Varma, Dr. Sheetal Mohite,
Dr. Shekhar Bhojraj, Dr. Gaurish Kenkre, Dr. Abhay Nene, Dr. Priyank Patel.

IT WAS A fine Sunday morning not long ago when I was cycling along with my fellow trustee Dr Premik Nagar when he casually told me that The Spine Foundation was flush with more funds than we could spend. The fact hit me like a sledgehammer. We had spent our days, weekends and months for the past 25 years treating and operating on poor spine patients without once stopping to think about funds! While some would regard it as good news, it was a worrying sign to me. Donor's money lying unused in the corpus was not a comfortable thought, and in my opinion, it reflected a degree of inefficiency and inadequacy on our part.

A social service organisation must maintain a critical balance between income and expenditure. It is a sign of complacency if you haven't. It was a wake-up call for me. If we have to make our dreams come true, we must step back, introspect and analyse, and course correct if necessary.

AN ORGANIC GROWTH.

The Spine Foundation started in 1998 to deliver quality spine care to people caught in the web of poverty. Just a small team of people determined to make a difference. As time passed, we could serve more patients, across more places, with more people joining the team. We got more support from our donors and well-wishers, who saw consistent results over a quarter of a century and extended their support. Our growth had been organic without the need for any publicity or marketing. Seeing our work, the Government of Maharashtra approached us in 2018 to replicate our model across the state through Government Medical Colleges in interior Maharashtra. We responded, and The Spine Foundation is reaching out to many more people today through the GMCs at Akola, Ambajogai, Aurangabad and Dhule.

That brings us to how we managed to have surplus funds despite scaling up our operations over the years. There are two reasons for this. First, we have directly linked our donors to Gadchirolli, Ambajogai, Kolhapur, Nandurbar and VN Desai projects. It covers all operational costs like investigations, medications, surgeries, implants, and anaesthesia, as well as the travel and boarding costs of the team. This leaves us to do what we do best, lending clinical know-how and surgical expertise to these projects.

The second reason is that we use the underutilised state and national government health schemes that help subsidise and fund our projects and programs, especially in government-run medical colleges and hospitals. The Rajiv Gandhi, Jyotiba Phule, and Ayushman Bharat schemes are good examples. Using these two things, we have been able to get the maximum out of the money coming to the foundation. And it ended with more funds than we could spend.

That brings us to the question. What are our plans going forward for the next 25 years? The first is to widen the quality, span and depth of our operations. To ensure better quality care is available across a wider geographical spread, even in the remotest parts of the country. To achieve this, we must create self-sustainable projects that run on their own funding with locally available talent. The foundation will empower these projects through training and knowledge transfer. The other task is to raise awareness about the availability of free spine care so that more people can benefit from this.

MAKING MONEY WORK HARDER.

Looking forward to the next 25 years, how will the foundation utilise its funds best? The Spine Foundation's basket of expenses can be put under four heads: manpower, infrastructure, creating awareness and centrifugal expansion of activities. These can be scaled to a state, national, or international level.

The need for manpower is inexhaustible, with requirements for different specialists. Nursing staff in clinics, wards and OTs, physiotherapists, Rural Spine Clinical Fellows and assistants, and support specialists like anaesthetists, physicians, neurologists, and rheumatologists. We also need academic researchers and health economists to help forge the way ahead.

The Spine Foundation needs to invest in better infrastructure: instruments for minimally invasive techniques; imaging equipment like X-rays, C-arm, CT and MRI; operation theatre tables, lights, laminar flow, burr, headlight, cord monitoring etc.

Next comes investment in creating awareness about the work done by the foundation. This awareness is important for poor patients who suffer in quiet desperation since they do not know that help is available. Word also gets out to people who want to contribute to the cause of providing quality spine care for all. Also,

it encourages the team who are working tirelessly around the clock.

For this, we need to increase our social media activity on platforms like Instagram, Facebook and Twitter. We need to establish our presence on Ortho TV and YouTube. We should also explore media like radio that can broadcast our message to a focused audience. We also need a stream of publications that include newsletters, books and monographs tailored for the relevant audience. Exhibitions are another platform we have used successfully and can be an effective communication tool.

The Spine Foundation's final spending head is the centrifugal expansions of its activities. At a state level, we look at Akola, Ambajogai, Chiplun, Dapoli, Gadchiroli, Kolhapur, Nandurbar and Ratnagiri. On the national level, we need to expand our footprint from Dehradun, Dharampur and Sittilingi to states like Chattisgarh, Himachal, Karnataka Orissa, Rajasthan and Uttar Pradesh. Our experience and expertise can best help African countries and neighbouring countries like Bangladesh, Myanmar, Nepal and Sri Lanka.

THE NEXT 25 YEARS.

25 years ago, we started a small effort trying to make a difference in our own way. However, our journey has taught us that anything and everything is possible if you have the right intention and are willing to put in the effort. Our dream of a day when no person suffers from a back problem due to a lack of money and resources is a feasible and achievable task. We at The Spine Foundation are taking this as an opportunity to rededicate ourselves in making this possible.

DIVING TAUGHT ME TO BE A BETTER SURGEON

By Dr Priyank Patel

SCUBA DIVING IS a sport that can be dangerous because of the low margin of error when you are diving 40 metres underwater. However, it has the least mishaps and a very good safety record. That is because of the strict process of training and certification you need to qualify for before being allowed to drive. You also need to follow strict guidelines when you go diving.

Diving is a surreal experience. You are alone with your thoughts in a massive ocean. And you realise that a human is not even a speck in this vast blue expanse. With the crushing weight of the water above, you have to be focused on your every breath while keeping watch on your depth and equipment. A moment's lapse can have serious repercussions. It's a feeling impossible to describe but can only be experienced.

Let me share with you two of my most memorable diving experiences. The first one was to Fuvahmulah in the Maldives. During the Covid pandemic, my dive buddy and I decided to go diving to escape the stress. Fuvamulah is a rock in the middle of the open ocean. The island is surrounded by thousands of sharks and pelagic creatures all year round and is an ideal location if you want to dive with the sharks. Sharks have developed a bad reputation that has been perpetuated by Hollywood movies. However, diving with sharks is not for the faint-hearted, especially when no cages protect you from an ill-mannered shark. So, my first encounter with a tiger shark was terrifying.

Watching this mega predator, nearly as long as a BMW sedan, swim towards me made me try to bury myself in the sand. I questioned the sanity of leaving behind a cushy life for this insanity. However, you have to remain calm and not panic in these situations. As the shark swam past, I could not help but marvel at its majesty and grace. You understand and respect these beautiful sea creatures after such an encounter. I also realised my dive training helped me become a better surgeon. If you lose your nerve underwater, you die. Not panicking when you encounter a complication during surgery and acting calmly is the mark of a good surgeon.

After diving at the Equator, we decided to go for the other extreme. Diving in the winter in the Arctic Circle. We wanted to catch the Orcas following the herring migration from the deep ocean to the coastal areas of the Norwegian Sea in December. Yes, the same Orca that was the star of the movie 'Free Willy' that I had seen as a child. Orcas are known as Killer Whales, but they are not whales. They are part of the oceanic dolphin family. These highly intelligent creatures live in particularly complex and stable social groups. Unlike any known mammal social structure, resident whales live with their mothers for their entire lives. These family groups are based on matrilines. They communicate with each other through distinctive vocalisations. Each individual also has a distinctive 'name'. NASA is said to be studying how to communicate with Orcas since this could help them learn to communicate with aliens when and should the time come!

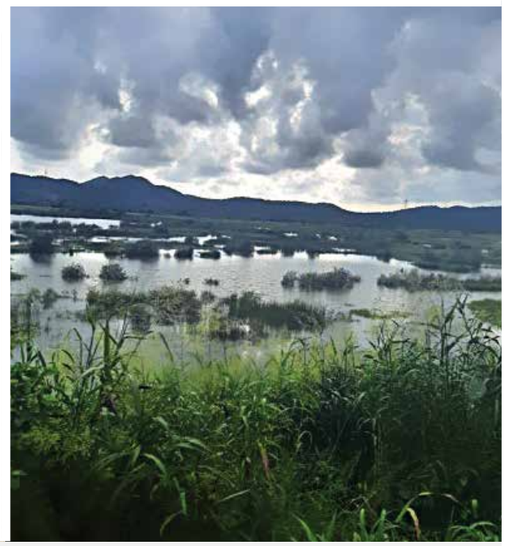
To dive with these creatures, we stayed in a fishing boat for seven days following these apex predators. You cannot use scuba gear, but rather free dive when diving with these huge creatures. We would dive when they were feeding. The pod hunts as a well-organised team, each individual playing a distinct role. They herd the herrings together into a bait ball. Then one individual will feed, followed by the second and third. No squabbling, like you see in a lion pride. It's all well planned till suddenly, a Humpback Whale jumps up from the bottom for the bait ball. To see two colossuses of the ocean competing for food is a sight that will stay etched in my memory forever.

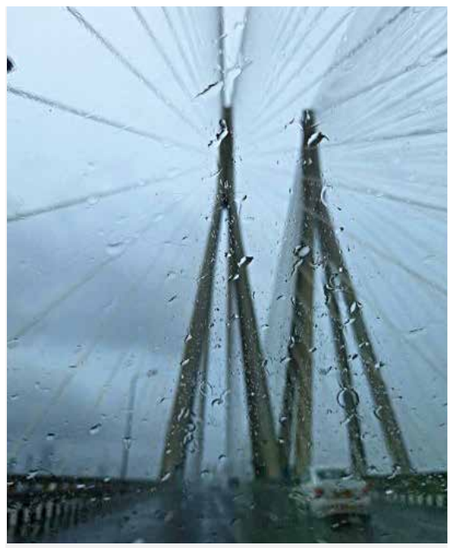
If you too want to dive, take an exploratory course, available at many beach resorts. You can then decide whether to do a more advanced course. Give it a try. You will discover a new world.

THE COLOURS OF HAPPINESS

By Dr Tejasvi Agarwal

TODAY, WHENEVER I want to relax, I pull out my sketch pad. While the end result might or might not be appreciated by others, it gives me much happiness. And is a stress buster. When I was in school, it was my elder sister who was my inspiration to draw. The colours in her paintings fascinated me, and I followed in her footsteps. I remember that my paintings were a riot of colours. Over the years, with the mounting work pressures, it took a back seat. That is until Dr Bhojraj came along and pushed me to continue my hobby. From him I learnt to find art in everything. Now my weekends are dedicated to my art. And I realise the importance of putting aside some time for yourself to follow your passion. You too can draw. Just pick up a pencil and paper. Dont worry about the result. And you will find happiness.





THANK YOU FOR THE MUSIC

By Dr Abhay Nene

MUSIC IS DEVOTION, a form of meditation, and it resides within the soul. Music is both an indulgence and an art, as well as a skill, almost akin to a science, much like surgery. Therefore, it comes as no surprise that surgeons worldwide often engage in music.

It's a common practice; most operating rooms across the globe have music playing during surgeries.

Coming from a Maharashtrian family with a musical background, I was introduced to music at a very young age. I learned to play the harmonium early on, although I resisted my family's insistence on it at the time. However, I now realise the value of such early initiation—it's much easier to acquire these skills as a child, and the benefits last a lifetime.

After a hiatus during medical studies, I rekindled my passion for music during my residency. There was always a guitar hanging in my room in the residents' quarters, to the chagrin of my colleagues.

The pulse of music. Hand percussions help improve hand strength.

One of the reasons we are drawn to music is its ability to act as a powerful stress reliever. You don't need an audience, a studio, or fancy equipment—just an instrument or your own voice. When you immerse yourself in music, you enter another world that boosts your serotonin levels, the "happy hormone," making the indulgence addictive.

Simply listening to music is also captivating and relaxing, particularly if you have an ear for notes and rhythm.

Moreover, creating music can provide a unique high, much like discovering newer ways to perform surgery.

I pursue music because it sets goals for me and fuels my curiosity. Learning new skills keeps you youthful and helps develop focus and holistic improvement.

The bass guitar – like percussion with melody – helps build the non-dominant hand.

The accordian is the ultimate romantic instrumentand works on bilateral coordination of hands.

My personal musical journey involves trying my hand at various instruments—guitar, vocals, keys (branching out from my harmonium training), harmonica, rhythm, hand percussion, djembe, and Cajun. Most of this is self-taught. You might wonder how? Well, once you've learned one instrument, you develop a musical sense—a "musical ear." The nuances push you to break through obvious barriers.

Later in life, I sought out schools and teachers whenever and wherever possible to learn new tricks.

In the midst of a busy surgical career, it's crucial to allocate time for music. It's easy to become engrossed in work and find work-related excuses. My advice is to carve out time and consider your life as a whole. You weren't sent to Earth solely to be a spine surgeon; you were born to lead a 360-degree, well-rounded life!

Playing music also offers indirect benefits by enhancing your manual dexterity. While, as doctors, we emphasise left-brain functions like logical sequencing and linear thinking, we must also nurture our right-brain skills and artistic abilities.

For instance, playing the guitar helped me refine the dexterity in my left hand, allowing precise control over finger movements and pressure on each joint and all 22 muscles in the hand.

As a surgeon who moonlights by performing in prominent Mumbai clubs with bands, I've had some amusing moments. Particularly when patients who have had surgery with me see me on stage, leaping into the role of a performer. Initially, it used to perturb me to the extent that I would hide away. Thankfully, society has evolved, and I'm proud to share my musical pursuits openly today. Patients and colleagues of all ages and backgrounds appreciate and compliment me for this.

So, follow your passion; it will reward you abundantly. Listen, learn, and play music. Stay curious and eager to learn. Continuously improve and indulge in life skills and the arts. It's your life—make it Kingsize!

THE LIFE OF A MARATHONER

By Dr Sheetal Mohite

I HAVE PURSUED running as a hobby since my school days at Loyola High School and junior college in Pune. We were blessed with a 400mts running track, a football field in its midst, and a small range of hills behind our campus. So sports and events like cross country runs were always encouraged.

Though there was a long pause due to studies in my graduate and post-graduate days, the interest rekindled during my days of Assistant Lecturership at Pravara Rural Medical College, Loni. My close friend Dr Yatin Kirane, encouraged me, as we used to train together. Doing multiple rounds of the ground became monotonous, and that is when we started to train by going onto the road. That was my first exposure to road running.

The hobby continued after coming to Mumbai, but the distances were not more than 5 km. During my Spine fellowship days (2002) with Dr SY Bhojraj, I learned that he was very much into running. He and Dr Abhay Nene encouraged me to pursue my hobby over longer distances. The trend of marathon running had just come to Mumbai, and their encouragement got me into running my first half marathon at Standard Chartered Mumbai Marathon in 2004. Since then, I have been a finisher in two half marathons and sixteen full marathons in Mumbai. Over the years, I have developed a liking for endurance sports, be it running, cycling, swimming etc. The sense of achievement and the high we get on completion probably gets us back year after year despite the rigorous training we have to undergo for it.

In addition to being blessed with great genes and having a basic liking for running, the support of family, friends and colleagues has been instrumental in my perusal of road running.

Running outdoors is a great workout - it can be done anywhere, at any time of the day, in any climate, is not time-bound, requires no membership fees, is a great calorie burner, and is fantastic for cardiorespiratory fitness.

Marathon running is no mean task. It is a lot of training, and discipline, is time-consuming, physically challenging and exhausting, torturous, injury-prone, and unphysiological, if I may call it. It is difficult to find time for our professional and family commitments. But training for a marathon offers a goal and does bring discipline in our training and, eventually, our lifestyle.

The Mumbai Marathon started in 2004 and is held on the third Sunday of January. It is credited to be the largest marathon in Asia and the largest mass participation event in the continent. The course of the marathon has changed over the years, and it was in 2010, the iconic Bandra -Worli sea link was thrown open for the participants.

It is a well-organized event, and arrangements have improved with each passing year. Bib collection, early morning trains/bus to reach the venue, quick security check, well-marked entries and starting group, well-marked route, positive and vibrant atmosphere all along, water and Electral stalls, medical aid stations, finisher medal and goodies collections point, post-run physiotherapy aid centre.

While running, to see the spectators cheer you on gives a lot of positive energy. At two places enroute it makes a huge difference; Mahim to Shivaji Park and again at Peddar Road. To hear your name or number shouted out gives you the added boost to run harder and better.

TRAINING FOR THE MARATHON.

Marathon training is building a schedule of training, eating and sleep habits - to bring some discipline to achieve a goal. So do not look at it as only race day, but the effort you put in over the months. Enjoy the process.

- Preparation should feel like an elective joy rather than a cut-out task.
- You may decide to train alone or be a part of a group.
- You should train the year-round before participating in an event. Train for at least five months according to a coaching plan before participating in an event.
- Maintain good nutrition - nutrient-dense, whole and natural, unprocessed foods like vegetables, lean proteins, fruits, whole grains, nuts, eggs, legumes etc.
- Sleep at least seven hours to give adequate rest to your body.
- Invest in a good pair of shoes.
- Maintain good hydration. Every 20 mins of run, drink 200ml of water. Do not wait till you start to feel thirsty.
- Get used to eating small portions like chocolate/ date/ jaggery on the run to keep yourself fueled.
- Make small increments in running. Calculate your goal weekly mileage 10 to 15% of this is what you can increase the next week. Rapid increments are prone to lead you to injuries.
- Train sincerely and put in the miles. No replacement for that.
- Take rest days. It helps recovery and prevents injuries.
- Alternate week, drop your weekly mileage to recover .
- Don't miss long runs.
- Should reach your longest runs 3 to 4 weeks before race day. Then taper down.
- Cross training aims to increase your endurance by doing low-impact activity.
- Strength training very essential. Spare two days a week if possible.

ON RACE DAY.

- Carb load. 3 to 4 days before race day.
- Sleep well. It's easier said than done.
- Keep your running dress with bib/spray/ shoes etc. ready the night pbefore.
- Have a fruit/dates in the morning.
- Don't try any new attire than what you trained in.
- Use shoes that you trained in.
- Pay attention to hydration.
- Don't try to race or pace with someone.
- Run at your own pace.
- Take it easy till half distance.
- "Hit the wall". At 32 -35 km, you will experience cramps, dehydration, and heat exhaustion. Let the mind take over.
- After 35km, take it one km at a time. It's a mental fight now.

PHILOSOPHICALLY SPEAKING.

- Like a marathon, maintain your goals and pace in life. Don't race with others, run your own.
- Like a marathon is a race between you and the road, life is a race between you and your goals. So enjoy the journey.
- Like a marathon, break up difficult parts of your run in small intervals. The difficult times will end. Accept that and take it one day at a time.

CYCLING MY WAY TO HEALTH

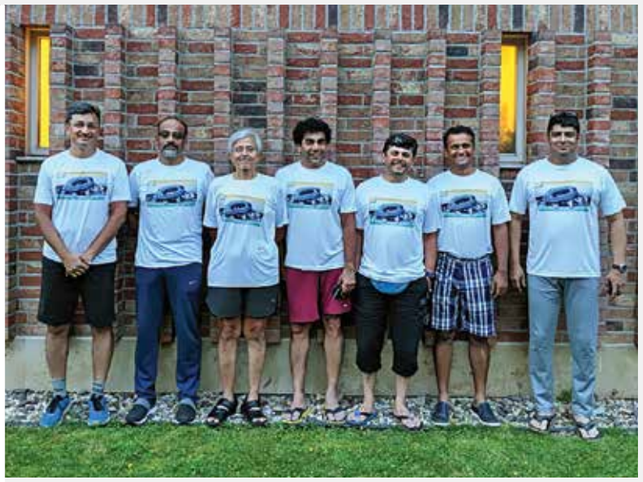
By Dr Premik Nagad

A DOCTOR IS SUPPOSED to be a flagbearer of health. However, in 2014, I was anything but healthy. Years of indulgent living fuelled by the stress of medical studies had left me overweight and diabetic. This was when my Mentors, Dr Shekhar Bhojraj and Dr Abhay Nene stepped in and urged me to join them on their cycling trips. Both were avid cyclists with years of kilometres under their belt. Dr Bhojraj even gifted me a cycle, a Scott Aspect 670 mountain bike, to start me off on my journey. I recall that I could barely ride 20 km without numerous breaks. However, I persisted and started joining the cycling group on their rides. The group includes Dr Bhojraj, Dr Nene, Dr Mohite, Dr. Raghuprasad Varma and other friends and colleagues. Yes, we had a number of doctors in our cycling group but there were other professionals too. I began with rides in and around Mumbai. Then came the longer rides, including a 600 km ride on the coastal road to Goa that took us six days to cover. We also cycled across Europe, through Italy, along the Danube and the Adriatic coast. While these were exhausting, they were also a lot of fun. Today I can cycle for over 50 km without a break. I no longer require insulin or medication. And I have maintained my weight at 66 kg for the past few years. Cycling has become a part of my routine, and I look forward to the weekend when I can roll out my cycle, strap on my helmet and pedal away. The only thing that will make me miss my cycling is the TSF camps that are held on weekends. However, it's a small sacrifice when looking at the bigger picture. The only high that is more intense than cycling is watching a suffering poor patient return to his or her feet and back to work.

The classic before/after picture. Before I took up cycling, and me today.

When you share a common cause, or interest, you forge deep and lifelong bonds.

You need to stay strong on these long trips.



At the end of a long tiring day of cycling.

Turning our back to our day to day responbililities to go cycle.

The Spine Foundation team at one of our rides, somewhere in Europe.

Can you guess the place this photograph was taken? The first person who messages me with the right answer might get a prize from me.

EXPLORING THE GREAT OUTDOORS:
A SPINE SURGEON'S TREKKING TALE

By Dr Tarak Patel
Fellow of The Spine Foundation & TSF Member

AS A SPINE surgeon, I've been into trekking for over five years, and it's become a huge part of my life. I'd love to share my trekking journey with you and how this hobby has brought joy and balance to my busy life.

So, how did I get into trekking in the first place? Well, hiking in the big, beautiful Himalayas was on my wishlist for years. After reaching the top, the breathtaking scenery and the sense of accomplishment inspired me a lot. I was hooked on my very first trek!

Being a spine surgeon can be tough with a demanding schedule, but I believe in making time for things I love. To fit in trekking, I plan and choose vacation time or weekends for my adventures. Balancing work and fun is essential for a happy life.

Trekking has brought so many wonderful benefits to my world. Physically, it's like a refreshing exercise that keeps my heart healthy and boosts my stamina. But it's not just about the body; it's also great for the mind. Trekking in nature helps me relax, clear my thoughts, and reduce stress, which is super important for a busy surgeon. Plus, it taught me important life skills like never giving up, working together as a team, and adapting to different situations.

I've had some amazing experiences during my treks. I once led a group of friends on a challenging journey through the unexplored Kedarkantha trek. The weather was wild, and the terrain was tough, but we stuck together and defeated those tough moments. Our bond grew stronger.

For anyone thinking about giving trekking or any hobby a try, go for it! Taking that first step into something new is always exciting. Start with easier treks and work your way up to more difficult ones. Remember, it's not about reaching the highest peak; it's about enjoying the journey and having fun along the way. Our next two treks are already finalised. In Feb 2024, we are going on the Kilimanjaro expedition, and in 2025, we are going to Everest Base Camp.

Trekking has changed my life in ways I couldn't have imagined. It's taught me to appreciate nature's beauty and the importance of caring for our environment. To all my fellow spine surgeons and busy professionals, I encourage you to explore the outdoors and find a hobby that brings balance and happiness to your life.

I hope my trekking tale inspires everyone to embrace nature, follow their passions and enjoy the great outdoors. Happy trekking!

THE REWARDING PATH OF A MEDICAL DOCTOR
IMPACT, CHALLENGES, AND CONSIDERATIONS

By Dr Premik Nagad
Senior Spine Surgeon and Trustee of The Spine Foundation

THE JOURNEY TO becoming a medical doctor is an extraordinary one, marked by dedication, perseverance, and an unyielding passion for healing. For those who dare to tread this path, the rewards are as numerous as they are profound. Let's delve into the reasons why individuals choose to embark on this noble journey while also considering the important factors to ponder before taking the plunge.

1. MAKING A DIFFERENCE: At the heart of the medical profession lies the remarkable ability to touch lives in profound ways. As a medical doctor, you become a beacon of hope for those in need. The privilege of diagnosing, treating, and preventing illnesses empowers you to directly impact the well-being of individuals, families, and entire communities. The joy that emanates from witnessing patients recover and flourish is beyond measure – it's a testament to your skill, empathy, and commitment to making the world a healthier place.

2. INTELLECTUAL CHALLENGE: The field of medicine is an ever-evolving landscape where innovation and discovery are constant companions. Becoming a medical doctor means embarking on a lifelong journey of learning. You'll embrace the thrill of unravelling medical mysteries, staying abreast of the latest advancements, and adapting to emerging technologies. The intellectual stimulation and the sheer joy of solving intricate medical puzzles keep the profession exhilarating and ever-rewarding.

3. JOB SECURITY: The demand for healthcare professionals, especially doctors, continues to surge due to changing demographics and advances in medical care. This translates into enviable job security, offering a multitude of opportunities across various specialities and regions. The stability and competitive compensation of a medical career provide a strong foundation for personal and professional growth.

4. RESPECT AND PRESTIGE: Within society's tapestry, doctors hold a revered position. Your expertise, your dedication, and your unwavering commitment to the well-being of others set you apart as an esteemed authority. Patients place their trust in your hands, and the respect you earn from your peers and the community reflects your tireless pursuit of excellence. The title of "doctor" carries not just a responsibility but a badge of honour.

5. PERSONAL FULFILLMENT: The essence of being a medical doctor extends beyond professional accomplishments. It intertwines with personal fulfilment in ways that are deeply rewarding. The sense of purpose derived from aiding others, the heartfelt gratitude that emanates from your patients, and the enduring relationships forged within the medical fraternity lead to a life rich with meaning. The journey becomes the reward, as the knowledge that you're making a positive impact on the world becomes your compass.

CONSIDERATIONS

However, as with any significant life choice, the path of a medical doctor has its own set of considerations. These points warrant thoughtful reflection to ensure that your passion aligns with the realities of the profession.

1. TIME-INTENSIVE EDUCATION: The road to becoming a doctor is paved with extensive education, demanding years of dedicated study and training. This extended commitment can delay entry into the workforce, amass substantial student debt, and potentially limit other life experiences during those formative years.

2. EMOTIONAL AND MENTAL DEMANDS: The practice of medicine, while deeply rewarding, carries emotional weight. The responsibility of critical decisions, exposure to pain and suffering, and high-stress situations can lead to emotional strain and burnout. Navigating the challenges requires a robust support system and effective coping mechanisms.

3. ADMINISTRATIVE BURDEN: The modern medical landscape often includes administrative tasks that can detract from direct patient care. Insurance paperwork, regulatory compliance, and electronic record management can consume valuable time that could otherwise be spent with patients.

In closing, becoming a medical doctor is an honour, a privilege, and a calling that demands both dedication and introspection. It's a journey brimming with opportunities to transform lives, stimulate your intellect, secure your future, earn respect, and cultivate personal fulfilment. As you contemplate this path, consider not only the remarkable rewards but also the challenges that come with the territory. Ultimately, the decision should resonate with your heart's desire and your aspirations for a life dedicated to service, impact, and growth.

TREATMENT OF SPINAL CORD INJURY IN RURAL INDIA

By Dr Raghuprasad Varma, Senior Spine Surgeon and President of The Spine Foundation

AMBAR PANDEY, a 40-year-old farmer from Shivpur village in Uttar Pradesh, faced a debilitating disease after a fall from a height in the field. Multiple falls thereafter led to further spinal cord injury with progressive weakness in his limbs, including urinary and bowel control issues. Imbalance and fear of falling plagued him, along with dysfunctional hands. Numerous attempts at medical care, both private and government-based, yielded no solution.

One day, an individual who had experienced a similar condition shared their journey of recovery with Ambar. This marked his introduction to The Spine Foundation's Rural Spine Care Centre— staffed by top-tier doctors in Mumbai, providing free treatment for the less privileged. This led Ambar to VN Desai Hospital in Mumbai. There, doctors diagnosed his condition with traumatic Craniovertebral instability—an issue where severe compression occurred at the head and cervical spine junction. He underwent a complex surgery called occipitocervical fusion, covered entirely by the foundation. Remarkably, Ambar showed signs of recovery within the first day after surgery. In two months, he had fully recuperated, regaining the ability to conduct daily activities without hindrance. The lesson learnt here is that prompt intervention helps recovery, but how many in a developing country like ours get this opportunity?

Rafi Shaikh, a 22-year-old from interior Maharashtra, encountered a road accident in August 2021 leading to a three-month ICU stay with paraplegia. He was operated upon locally but no postoperative rehabilitation was instituted due to lack of facility. After his discharge from the hospital, persistent pain and limited movement remained. Upon evaluation by the spine rehabilitation centre under the auspices of The Spine Foundation diagnosed the need for adequate rehabilitation. Signs of recovery surfaced within two months, and Rafi regained significant neurology markedly improving his quality of life. The lesson learnt is that even if well done, surgery necessarily doesn't mean a good outcome unless it's followed by adequate rehabilitation.

Had their issues gone unaddressed and lacked specialized diagnosis and treatment, the lives of Pandey and Shaikh might have taken a drastically different turn.

Spinal Cord Injury (SCI) is a debilitating neurological condition with a tremendous socio-economic impact on affected individuals and the health care system. More than 90% of SCI cases are traumatic and caused by incidents such as traffic accidents, violence, sports, or falls. Strong inconsistencies in data were noted when analyzed especially in developing countries like India, but the incidents could be in alarming numbers.

A diagnosis can be made through a thorough history and examination. By performing a neurological examination, if possible to participate in a reliable physical neurological examination, for the sensory and motoric functions of the body in the corresponding area of complaints. After the examination, we can make a judgment of the severity and the location of the injury, which is corroborated by relevant imaging like X-rays and MRI.

Timely intervention, medically or surgically whenever warranted has to be Instituted without delay for optimum results and neurological recovery. The lag in this contributes significantly to the failure to achieve the expected goals.

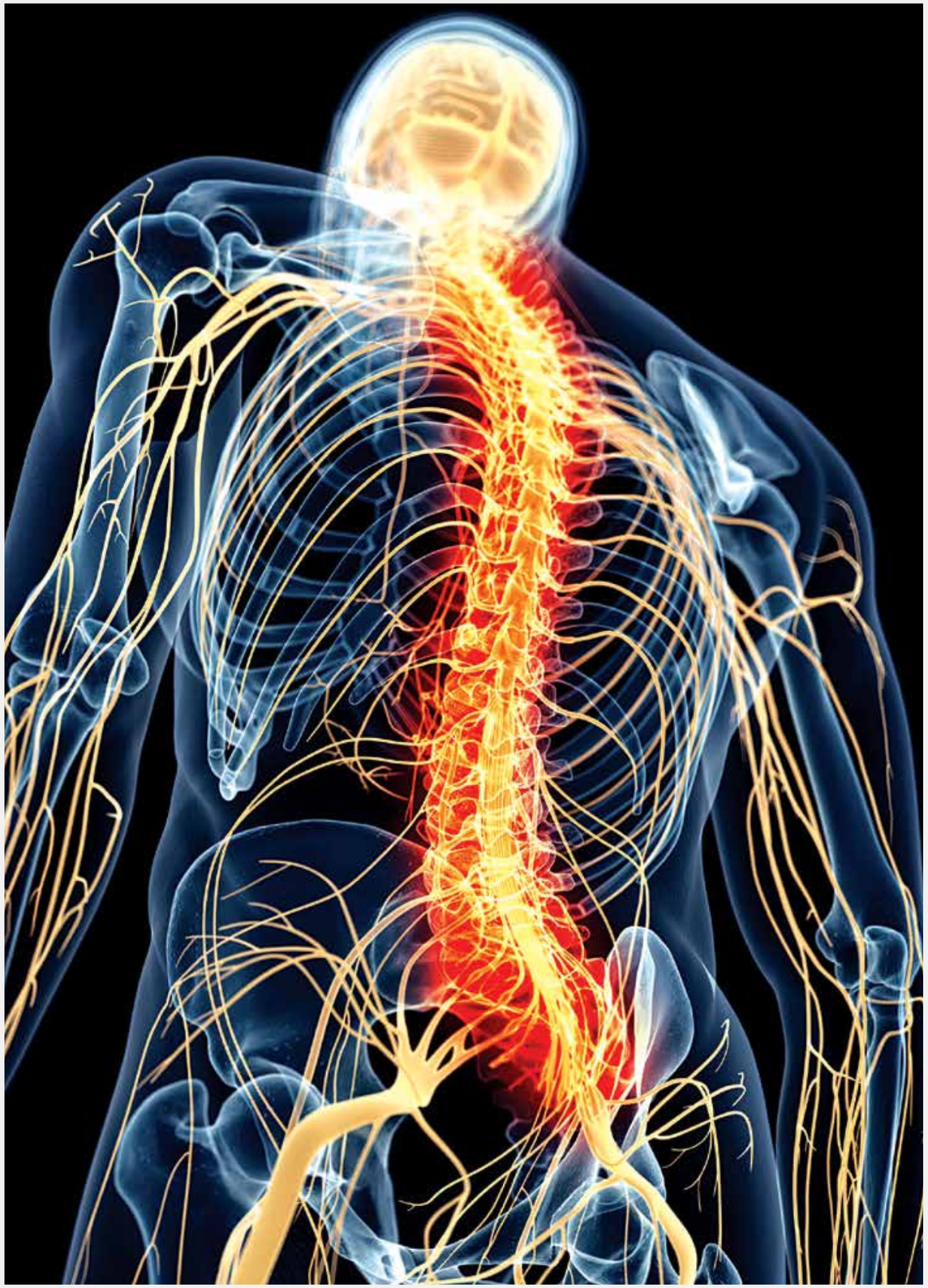
In the absence of timely diagnosis, treatment and rehabilitation, most of these persons are rendered physically, emotionally and financially vulnerable. It is this lacunae that makes the treatment pathway for SCI very ineffective.

Rehabilitation by the use of physiotherapy either manual and/or machine-based is the need of the hour in the period to follow.

September 5th every year, is recognised as World Spinal Cord Injury (SCI) Day. With the overarching theme of access to SCI services, it is worth taking stock of where we stand in India in terms of various spine ailments as well as the availability of and access to spine-related medical care, including in rural and tribal areas.

Furthermore, policymakers and governments should be prepared to invest resources into centres specializing in multidisciplinary care for people with SCI because available systems are likely to become overburdened. This may entail infrastructural changes at a health-care-systems level to establish appropriate clinical care pathways and improve timely access to quality care, especially for the underprivileged rural and tribal population.

Our 20 years of experience in treating spinal cord injuries in rural areas has shown us that there's a need for a practical and self-sustaining healthcare system in underserved rural and tribal regions. We've found success with a method that involves training local health workers in these areas to identify critical medical situations (referred to as 'red flags'). They then refer patients to nearby health centres, district hospitals, orthopaedic units, or specialized spinal cord care centres, providing immediate care when necessary. This approach has proven effective in our network of 13 Rural Spine Care Centers run by The Spine Foundation, and it can be adapted and used in other regions as well.



DIVINE DESTINY

Dr Ketna L. Mehta, PhD
Founder Trustee & Editor, Nina Foundation

"PLEASE PAGE DR SHEKHAR BHOJRAJ urgently". Even through the jagged waves of unbearable pain pulsing through my writhing body, I could hear my rescuer Dr. Riten Pradhan's voice. It was the 12th of February 1995. I had crash-landed my paraglider during an adventure training camp. Dr Pradhan, an orthopaedic surgeon who managed his orthopaedic hospital in Virar (outskirts of Mumbai), had quickly assessed my condition and administered Methylprednisolone. I was being stretchered to the Hinduja Hospital in Mahim, accompanied by kind-hearted Dr Pradhan (on my appeal), on a local train that was the fastest way to get me to the hospital. My luck was good as Dr. Bhojraj was in his chamber despite a Sunday evening. He had come down to prepare for a spine conference the next day. Dr. Bhojraj rushed to the Casualty as soon as I was wheeled in. My sister Nina, brother Dhaval, Dr Himanshu Doshi, Rupal, Manasvibhai and the rest of my family were already there. X-ray, MRI and other tests were quickly done, and I was wheeled into the OT. Dr. Bhojraj, our

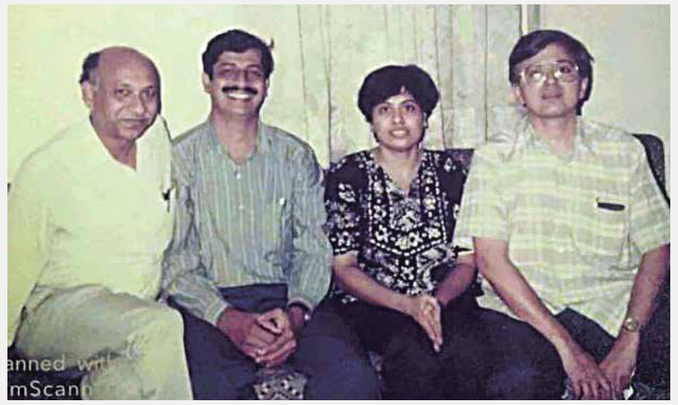
country's first and finest spine surgeon, operated on me and stabilised my spine.

I was in Hinduja Hospital for one month and interacted with Dr. Bhojraj, Dr. Sashin Ahuja and Dr. Mohan. When my sister Nina celebrated her birthday on 9 March 1995 in my hospital room, I ensured that a piece of the cake was kept for Dr. Bhojraj. As soon as I was allowed to sit in a wheelchair, I took permission and visited Dr. Bhojraj in his consulting chambers in the evening. He was stunned because he had never come across such an adventurous patient, ready to explore her new world, immediately after surgery.

After returning home, I would call Dr. Bhojraj every week to ask him innumerable questions about my journey ahead. I asked him to connect me with someone with a spinal cord injury to talk to, and he connected me to Arvind

Dr Shekhar Bhojraj post T12 stabilisation with Ketna in hospital Feb 1995.

Celebrating our elder sister Nina's birthday (9th March 1995) in the hospital with my family; brother Dhaval and SIL Rupal.



Dr VC Jacob, Dr Riten Pradhan, Ketna and Dr SY Bhojraj at Sion home in 1995.

ASSICON Wheelchair Dance with Dr Bhojraj's daughter Pooja.

Nina Foundation SCI Awareness Day 2014. Dr Bhojraj and Dr Manu Kothari..

Nina Foundation's ' Project Nirmaan OPD' team, along with TSF surgeons.

Prabhoo, a young, educated quadriplegic whose rehabilitation was at one of the best -Kessler Institute for Rehabilitation, USA.

On my sister Nina and Dr Milka Vivek's pleas, Dr VC Jacob, Senior, renowned Physiotherapist from Sion Hospital and a sunny, positive, father-like expert started visiting me. Nina, a practising Homeopath, taught me self-catheterization. My brother-in-law, Hemubhai, made me understand the value of focused and consistent exercising. And astute and communicative Dr Pradhan from Virar constantly through STD calls, solved all my daily medical and mobility obstacles. Remember, in those days, a call from Virar to Mumbai was not a local call! He also innovated the walker height to act as my rehab aide to negotiate the first floor of my building staircase, as there was no elevator. Slowly the reality of a person living with a devastating, incurable, lifelong disability-spinal cord injury in our Maximum City, Mumbai full of barriers was sinking in.

Dr Jacob, Hemubhai, Nina, Dhaval, Rupal, Meera Bhabhi, Dr Pradhan, Milka and several others orchestrated my steps to freedom. I connected my entire medical team to each other and started having meetings in our house, planting the seed of our future NGO, Nina Foundation. We were all connected by the common purpose of care and compassion for the Spinal Cord Injured (SCI) community and to improve rehabilitation facilities and a better quality of life for the survivors.

The tragedy of losing Nina, my inspirational anchor, soul sister, and my universe, at the young age of only 39, within five years of my spinal cord injury on 25th June 2000,

Never one to miss any function or event of The Spine Foundation.

Nina Foundation Trustees with Chief Guest Dr HS Chhabra, Nekram Upadhyaya and Rockstar Awardee, Arlene Dsouza, 2010

Nina Foundation's 'Project Nirmaan OPD' launch at AIWC Community on 5th March 2014; Dr SY Bhojraj, Dr Ketna L. Mehta and Mrs Niveditaben Sheth (Past President AIWC, Santacruz east branch).

completely devastated me. But the inspiration and encouragement that Nina had given me during this brief period stating that my accident had happened for a purpose and that I could make a difference with my management talent to a larger community, spurred me to share her philosophy, wisdom and solutions through the Nina Foundation in 2001.

Within a year of editing 'One World' our Nina Foundation publication, I was nominated by ADAPT and conferred with the prestigious NCPEDP Shell Helen Keller award as a Role Model with a disability, and I was extremely privileged that Dr. Bhojraj, on hearing this news, decided to grace the award ceremony in Delhi with my brother Dhaval, Mr G Shanker my senior management consulting associate from Chennai and my young friend with spine injury Nitin Goyal (who alongwith Arlene D'souza made us trio sci survivors at the same time in Hinduja Hospital in Feb 1995). In fact, at my request, Nitin dropped Dr Bhojraj to the airport in his hand-operated car, and it was an eye-opener for him to realise how independent Nitin based in N. Delhi was.

Dr. Bhojraj regularly visited our Sion home on Wednesdays, and we exchanged developments and explored new ideas and possibilities for better Spinal cord injury rehabilitation. In those days, I had a Personal Computer and would draft and send letters collecting new information. One

On Nina's 'punyathithi' 25th June 2009, the Nina Foundation ideated and initiated the first Spinal Cord Injury Awareness Day

such wild idea resulted in Mr Suresh Mullick, doyen of Indian advertising, renowned Creative Director of O&M, an award- winning veteran professional of the most memorable advertising campaigns, including the popular social film 'Mile sur mera tumhaara', especially flying down from Delhi and visiting us at our Sion home for a meeting to discuss a possible social campaign for Spinal Cord Injury rehabilitation. Even today, I pinch myself to think of such audacious, out-of-the-box ideas and 'Making them Happen' while undergoing rigorous physiotherapy six hours a day.

Meanwhile, Dr. Jacob introduced me to the world of underprivileged patients at the Paraplegic Foundation (PF) in Sion. It was an unseen, unheard world for me. In turn, I involved Dr. Bhojraj (who too was unaware of PF), and the three of us started putting in our contacts, money and executed ideas to make a difference in the lives of poor farmers, labourers, housewives, youngsters and daily wage earners living there. We all believed in action and results. Dr. Bhojraj gifted a staircase that taught many how to climb stairs there, which was previously missing. I involved a reputed architect, the late

The Trustees of the Nina Foundation. (Dr SY Bhojraj, Dr Parinaz Humranwala, Dr Ketna L.Mehta, Dr VC Jacob, Mr Dhaval L. Mehta, Dr Himanshu Doshi, Dr Riten Pradhan.)

Mr Uttam C. Jain to redesign special private rooms and better wards for a more human-centric approach for the residents and caregivers, which he promptly did absolutely free of cost. Simultaneously we realised Mumbai needed a rehabilitation centre for all classes of friends with spinal cord injuries. Dr. Bhojraj, with his wide social network, took us to explore possible spaces for a potential rehabilitation centre on weekends. Dr Jacob, Dr Parinaz Humranwala, the saintly urologist Dr Sharad Sagade, Dhaval, Hemubhai and Dr Riten Pradhan, who was now practising in the UK, we must have visited and scouted more than 30 places in and around Mumbai to set up a world-class spinal cord injury rehabilitation centre. We never gave up hope and visited every new place with optimism and laughter.

Not daunted by our project for a rehabilitaion centre in Mumbai not materialising, I decided to pursue my PhD, choosing my topic as my life purpose "Market potential study for a world-class spinal cord injury Rehabilitation Centre in Mumbai." Dr. Bhojraj would visit international conferences and bring brochures, magazines and books about new rehabilitation techniques like the treadmill, adaptive clothing, aqua therapy and more. He would constantly call and visit me to know my PhD progress. He also invited me to one of their ASSICoN Meetings in Mumbai, where I announced my PhD topic and requested all spine surgeons to fill my questionnaire. With the respect he commanded, all complied the same day! I was Editor & Associate Dean of Research at Welingkar Institute of Management (2003-2019). Once the PhD degree was awarded to me in 2008, I collaborated with the Institute and Nina Foundation to establish a series of Wellness Seminars for spinal cord injuries, the first in Mumbai. I invited all Trustees to conduct awareness sessions and convinced all classes of spine injured friends to attend, learn, interact and become empowered exactly as Nina had made me! The focus was on us as persons with spine injury taking responsibility for our health and well-being.

On Nina's 'punyathithi' 25th June 2009, the Nina Foundation ideated and initiated the first spinal cord injury awareness day. Over the years, with our combined connections, mainly Dhaval, eminent names were also sourced by Dr Bhojraj, like Mrs Rajshri Birla, Dr Habil and his daughter Zahabiya Khorakiwala, and Dr Armieda Fernandes, who have been our Chief Guests for the function. The film, corporate and healthcare presence has meant more awareness for SCI rehabilitation. I also planned a bold comprehensive spinal cord injury camp on 25th June 2012 with 25 spine injured survivors from all parts of India, including 12 from J&K. We had a multidiSCIplinary team of medical and specialised professionals. This was a revelation of the possibility of what a 'noble thought' with selfless teamwork can achieve.

Dr Bhojraj though extremely busy with his surgeries, agreed to participate with other trustees, and the camp outcome was truly magical. My PhD research was translated into action with measurable outcomes in one day in a management institute. We were transforming lives without a centre!

Dr Bhojraj had asked me to read, write and publish a Book review in 2017 for the book 'A Journey Within' for which he had drawn illustrations in his early KEM Years. I thus came to know his hidden talent. I requested him to create a special illustration for our Nina Foundation's 10th SCI Awareness Day advertising campaign. Despite his busy schedule, in two days, he emailed me his coloured sketch. I recall admiring his concept and praising it. Our Nina Foundation advertisement campaign was thus collaboratively developed. This was published in one World, and the campaign Hope, Relive, Rejoice in multiple languages was widely circulated. This was the very first time in India that the population of people with spinal cord injury was formulated and communicated to highlight the gravity of the problem and the lack of rehabilitation facilities and trained manpower.

Project Nirmaan, our weekly OPD, also came about with Dr. Bhojraj inviting me to VN Desai Santacruz Hospital. Coincidentally my cousin Mrs Niveditaben Sheth offered their AIWC (All India Women's Conference) Community Hall for free every Wednesday. Dr. Bhojraj graciously provided the TSF spine surgeon team, and over 200 underprivileged friends with spinal cord injury beyond Mumbai were counselled, guided, assessed and supported by our ace multidiSCIplinary team led by Mrs Anupama Ganesh, ably supported by Peer Mentors Madhu Singh and Bhavna Chheda. (https://www.moneylife.in/article/a-free-opd-for-spinal-cord-injury-completes-a-century/43575.html) Project Nirmaan has since been expanded as virtual and tele-rehabilitation too. Several meaningful projects, like the Mumbai Marathon, ASSICON and wheelchair dance, where Pooja Bhojraj, his daughter too had rehearsed, participated and performed, all have been memorable milestones.

I have always made an extra effort to attend all the TSF meetings and functions at VND and Nehru Centre since inception. My prayers and good wishes for a happy silver anniversary and heartiest congratulations to the TSF team.

AIWC lady members listening with rapt attention to Dr SY Bhojraj elucidating the devastating impact of a spine injury due to accidents, falls, cancer or tumour.

THE POWER OF SOCIAL MEDIA

By PepMedia Service

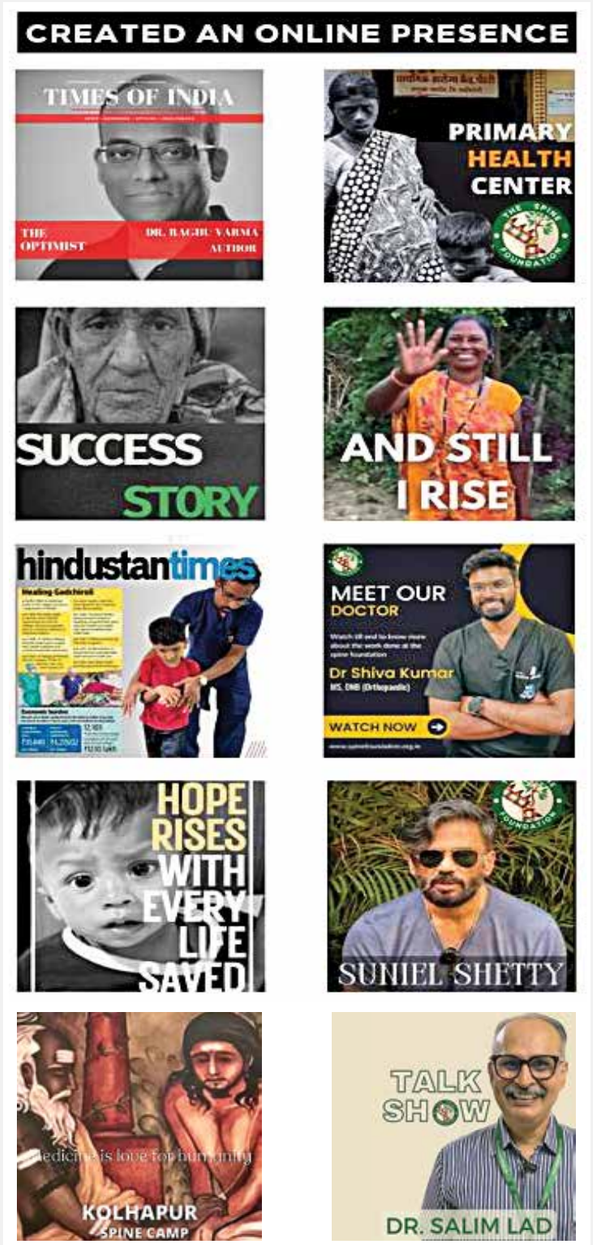
Discover a World of Innovative Solutions and Timeless Creations

THE SPINE FOUNDATION'S mission to provide comprehensive spinal healthcare and support to those in need has touched countless lives across India. Their commitment is to improve the quality of life for individuals with spinal disorders. However, even the noblest of causes requires visibility and effective communication to make a lasting impact. This is where PepMedia stepped in as a crucial media partner.

One of the key avenues through which PepMedia contributed significantly to The Spine Foundation's success is through social media. PepMedia has used all social media platforms to raise awareness, share success stories and mobilise support for The Spine Foundation through carefully crafted content, engaging visuals, and live broadcasts that educate and inspire. The agency has effectively harnessed the power of storytelling to convey the impact of the foundation's work.

EXPANDING REACH AND IMPACT

Beyond raising awareness, PepMedia has played a role in expanding The Spine Foundation's reach. By leveraging targeted advertising and community-building strategies, they have connected with a diverse audience, fostering a sense of belonging and encouraging people to support this noble cause.



PEPMEDIA

Email- pepmedia.service@gmail.com
Phone No- 8591907317
Thread- @pepmedia.servicethreads.net
Instagram- pepmedia.service

THE SPINE FOUNDATION SCHOOL OF MANAGEMENT

Joy Chaudhuri, partner at The BrandBook Company, shares what makes working with The Spine Foundation an incredible experience

MY PHONE BEEPED, indicating another WhatsApp message. Dr Bhojraj, my partner Mamata Desai and I had formed a Group for the first project we were doing for The Spine Foundation—a book documenting the organisation's journey over the past two decades. The first copies had just been printed and had gone out in the world. Dr Bhojraj had been receiving feedback from everyone who had received the book. Thankfully, the messages were all encouragingly positive. And he was forwarding all the messages to us. However, this message wasn't a Forward. It was a message from Dr Bhojraj, and he had just one simple question. 'Did you enjoy making the book?'.

I had spent nearly three decades in advertising and publishing, working with some of the best colleagues, bosses and clients with whom I had worked closely in many national and some award-winning projects and campaigns. But nobody, not one person, in my three decades of work life had ever asked me whether I had enjoyed the process. I was stunned. Gobsmacked. And let me confess, a bit teary-eyed. I just did not know how to react.

My phone rang. It was my partner Mamata Desai. "Did you read Sir's message?" I knew exactly what she was talking about. "Yes", I replied. We both kept silent. Mamata and I had run our professional lives parallelly over the decades and knew exactly the full value behind these words.

ENJOY WHAT YOU DO.

Let me explain. Everything that you do is judged whether it meets certain objectives or metrics. Success or failure is judged by the result. Until now, nobody had bothered to ask whether or not we had enjoyed the process.

And that was the first important lesson I learnt working with The Spine Foundation.

Remember, all the doctors working with the foundation are volunteers. They are all successful doctors working with some of the biggest private hospitals. They have earned money, recognition and success with nothing left to prove. Yet, they sacrifice their time with friends and family to go and operate on poor patients during the weekend. What drives them?

They enjoy the process. The long drives into the hinterlands on broken roads are not a cause for complaint but an adventure. The long hours in the OT are not drudgery but a joyous celebration of healing. A patient is not a case number but a person.

Dr Shekhar Bhojraj has nurtured and built a team not based on the results but on the process. And when you enjoy what you are doing, the results speak for themselves. Today TSF has performed over 1800 free surgeries, treated over 60,000 patients and operates out of 13 centres across India.

MAKE TIME, NOT DO TIME.

The second thing I learned working with TSF is the value of time. Dr Bhojraj is a demi-God in his profession, and there is always a huge queue outside his chamber. In spite of his busy professional commitments, he finds time to run and grow The Spine Foundation. That's not the end of the story. Even after this, he makes time to follow his passion for art. Two artbooks, five solo exhibitions and a couple of group shows are proof of his creative fecundity. Yet send him a message, and you will promptly get a reply. If he is in the OT, it might take a couple of hours, but he will reply. He never says that he Is too busy. He will always make time. Everyone gets the same amount of time every day. How we decide to spend this currency defines who we are. If something is important to you or something you love, you will make time for it. So next time someone says that they don't have time, it means that they are not interested. It's that simple.

FOCUS ON THE MESSAGE.

The third thing that I learnt from him is focus. When I first worked with Dr Bhojraj in making a book about The Spine Foundation, I discovered his creative persona. I broached the topic of exhibiting his art to a larger audience, and he promptly turned it down. Art was something personal that he did for himself and not for public recognition. You could call this humility, but it went deeper than that. His focus was on creating awareness about TSF so that they would reach out and help more people. And nothing could dilute that.

However, when we pointed out how his art could generate funds for TSF and also spread the message at the same time, did he relent and agree to the first art exhibition at the Nehru Centre in 2018. The message was more important than the messenger.

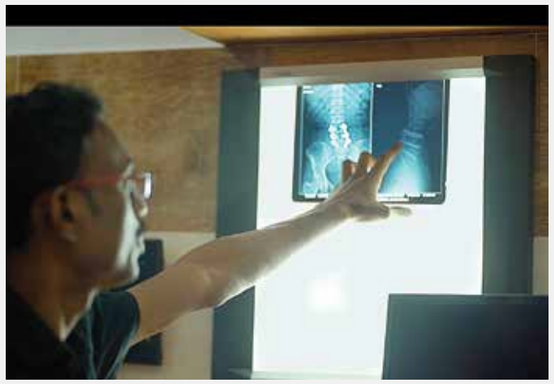
My partner Mamata Desai and I set up The BrandBook Company to tell the incredible stories that are happening all around us that deserve to be documented and told. With The Spine Foundation, we found not just a story that deserves the spotlight but a way of thinking about how we go about our lives. And a family of believers.

The Spine Foundation family continues to grow every year. It's not just doctors, medical staff and surgeons who make up the team. There are lawyers, broadcasters, administrators, marketing experts, researchers and other professionals who are putting in their time and expertise to expand the message of The Spine Foundation. And if you too wish to contribute your expertise to this initiative, our contact details are at the bottom of this page. And I promise you, it will be an eye-opener.

The Spine Foundation family has grown over the past 25-years. Here are the Fellows who have joined the team since 1999 during a function at Alibaug.

Dr Raghuprasad Varma, the current President of The Spine Foundation, attends to patients at the Tribal Hospital in Sittilingi, a village 250 km from Chennai.

Dr Abhay Bang with Team TSF during one of the early visits to Gadchiroli.



Dr Dattaram Bhalavi helped TSF deliver improved spine care at Gadchiroli.

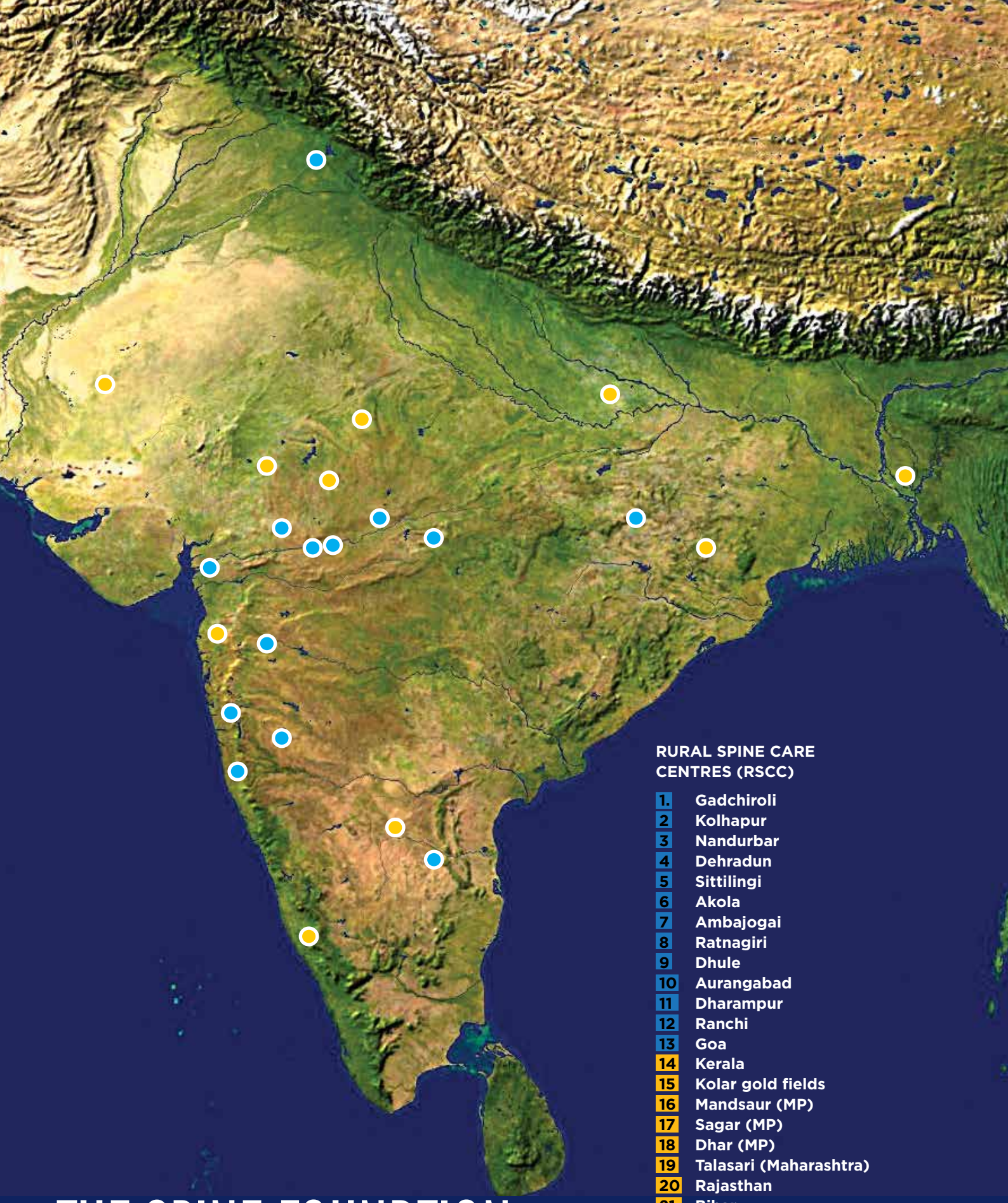
Doctors at TSF will travel into the interiors to follow up on their patients.

All treatment, including surgery is done free by The Spine Foundation.

Dr Shekhar has put up five exhibitions of his art at Mumbai, Pune, Kolkata and Kolhapur to raise funds and create awareness of The Spine Foundation.

TSF operates at 13 Rural Spine Care Centres across India.

The men's ward for spine patients at VN Desai Hospital in Mumbai.



RURAL SPINE CARE CENTRES (RSCC)

1. Gadchiroli
2. Kolhapur
3. Nandurbar
4. Dehradun
5. Sittilingi
6. Akola
7. Ambajogai
8. Ratnagiri
9. Dhule
10. Aurangabad
11. Dharampur
12. Ranchi
13. Goa
14. Kerala
15. Kolar gold fields
16. Mandsaur (MP)
17. Sagar (MP)
18. Dhar (MP)
19. Talasari (Maharashtra)
20. Rajasthan
21. Bihar
22. West bengal
23. Tripura

Established RSCC

Planned RSCC

THE SPINE FOUNDTION OUTREACH PROGRAMS

A project by THE BRANDBOOK COMPANY www.brandbookcompany.in