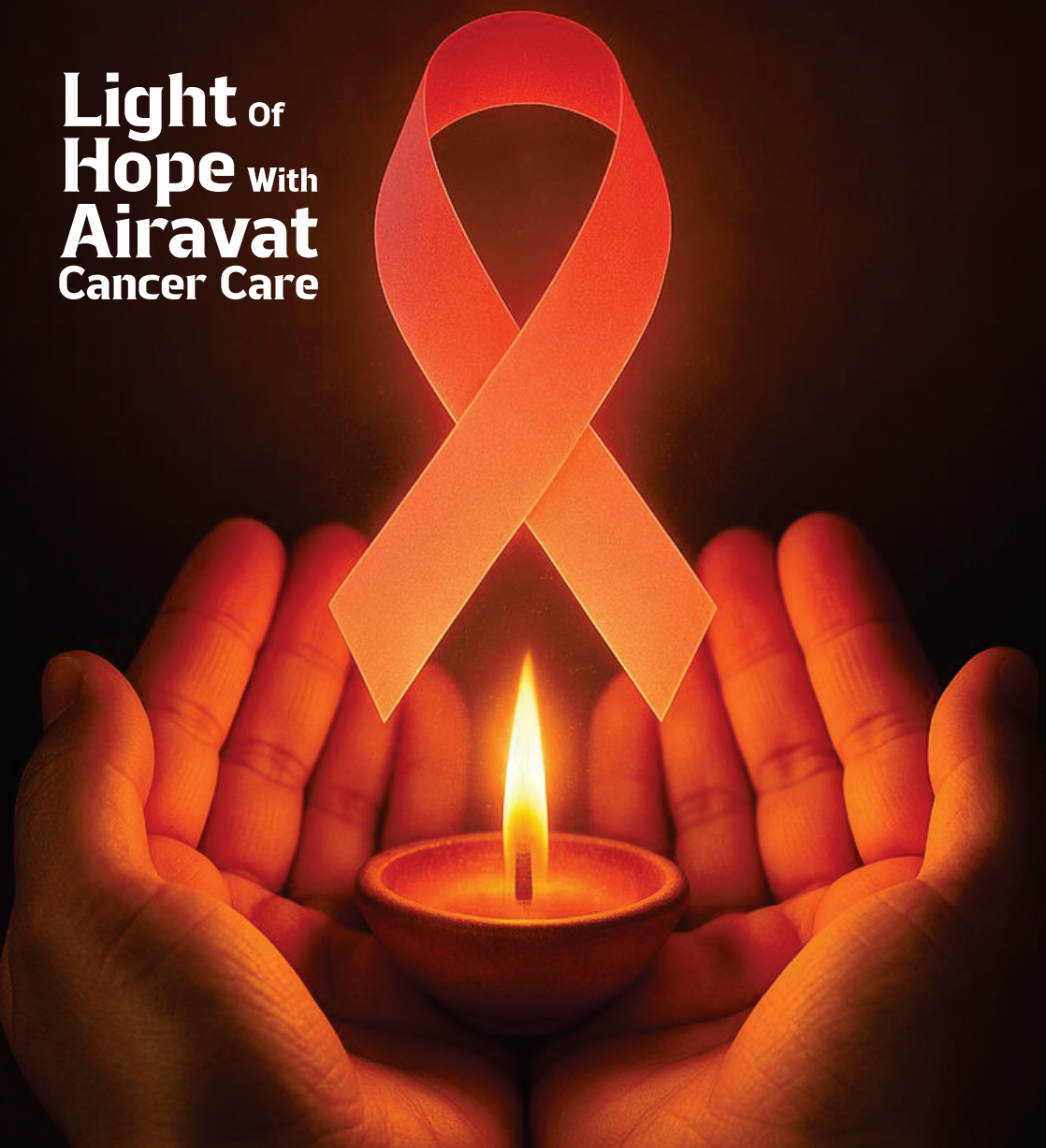


AIRAVAT BULLETIN

MONTHLY CHARTER

OCT-NOV 2025 EDITION

Light of
Hope with
Airavat
Cancer Care



Awareness, Action & The Light of Good Health



As we move through October and November—the months dedicated respectively to Breast Cancer Awareness and Lung Cancer Awareness—we are reminded that the strongest force in healthcare is not medicine alone, but awareness backed by early action. At Airavat Cancer Care, these months are moments of reflection on our mission, our responsibility, and our promise to the community.

Breast cancer continues to be the most common cancer among Indian women, yet its outcomes can be transformed through timely screening. A simple breast examination, regular mammography after 40, and awareness of warning signs can make the crucial difference between early and late-stage detection.

Every October, we honour the resilience of survivors who inspire us with their courage. Their journeys reinforce a powerful truth—early detection is not just a medical step, but an act of self-care and self-respect. Through our preventive camps, awareness talks, and personal counselling, we remain committed to ensuring that every woman in Gujarat has access to knowledge, dignity, and prevention.

As we step into November, our focus shifts to lung cancer, a disease that is rising in India not only among smokers but also among non-smokers exposed to pollution, biomass fuel, and passive smoke. Symptoms such as chronic cough, breathlessness, or unexplained weight loss are often ignored until it is too late.

This month calls on us to strengthen our collective resolve—to promote tobacco cessation, cleaner indoor and outdoor air, safer workplaces, and screening for high-risk individuals. Lung cancer is preventable, treatable, and in many cases curable—but only when we recognise the signs early and act without delay.

Amid this season of awareness, we also welcome the festival that symbolizes hope—Diwali. As the lights brighten our homes and hearts, we extend our warmest wishes to every family that places its trust in us.

May this festival bring good health, renewed strength, positivity, and peace into your lives. At Airavat Cancer Care, Diwali inspires our commitment to dispelling darkness through knowledge, supporting healing with compassion, and celebrating every victory over disease.

KYC with ACC

Know Your Cancer with Airavat Cancer Care

Rectum Cancer

SIGNS AND SYMPTOMS



Change in Bowel
Habits



Rectal
Bleeding



Feeling of
incomplete evacuation



Tenesmus

DIAGNOSIS OF COLON CANCER



Clinical
Examination



DRE



Colonoscopy
& Biopsy



Cect
Scan



Pet Ct
Scan



(Blood) Tumor
Marker Test – S. Cea

Management of Rectum Cancer

MULTI-DISCIPLINARY APPROACH

DEPENDS UPON

LOCATION

- Upper
- Mid
- Lower Rectum

DISTANCE OF TUMOR FROM ANAL VERGE

STAGE OF DISEASE

- Nodal Spread In Mesorectum
- Nodal Spread In Iliac / Obturator / Paraaortic Group Of Nodes

TREATMENT OF RECTUM CANCER



Surgery



Chemotherapy
Immunotherapy



Radiotherapy

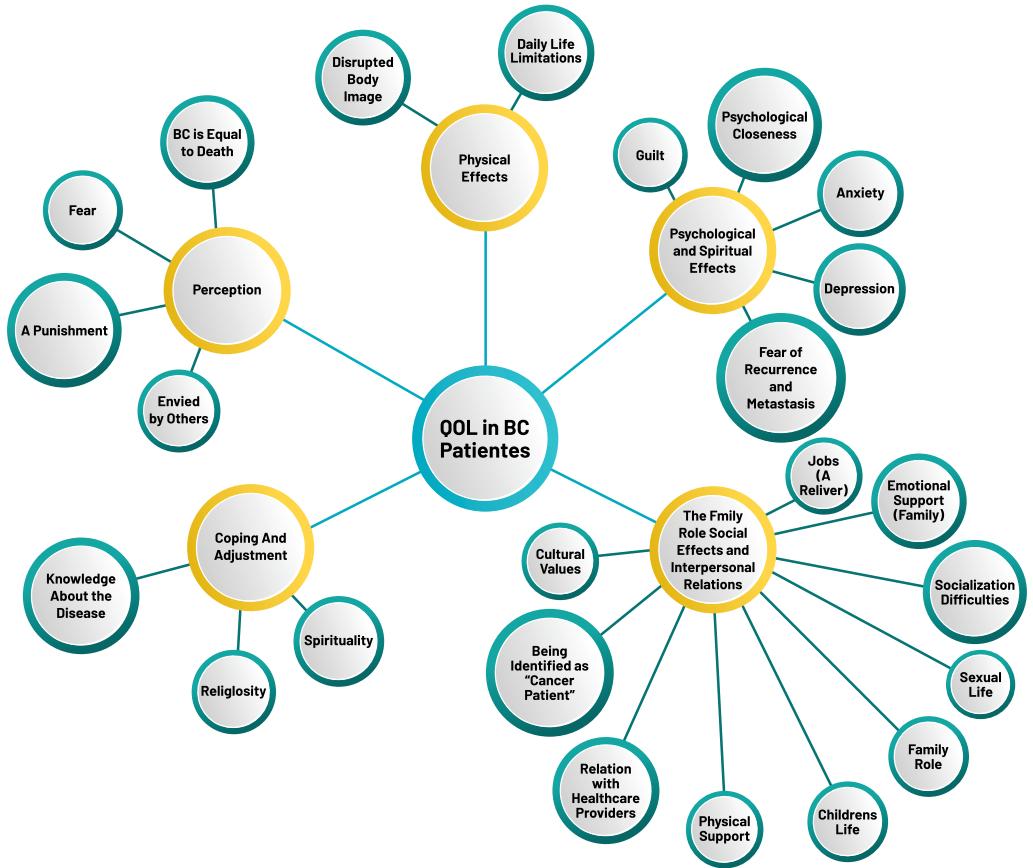
SURGERY FOR RECTUM CANCER

- Endoscopic Mx
- Trans-Anal TME
- ELAPE (Extra Levator Abdomino-Perineal Exenteration) Locally Advanced Anorectum Cancer
- Laparoscopic Surgery Lap AR / LAR Ultra LAR Lap APR
- Robot-Assisted Surgery
- Pelvic Exenteration For locally infiltrating & advanced Ca. Rectum
 - Anterior exenteration
 - Posterior exenteration

2023 VS 2025 SUMMARY

DOMAIN	2023 CONSENSUS	2025 CONSENSUS (KEY UPDATES)
Genetic Testing	BRCA1/2 only, ≤45 yrs, selective testing.	Broadened to ≤50 yrs, TNBC, males, strong family history; PALB2 added for adjuvant olaparib; intensified MRI for ATM/CHEK2.
Risk-Reducing Surgery	BRCA1/2 – consider prophylactic mastectomy.	Contralateral mastectomy advised for BRCA1/2, considered for PALB2; MRI surveillance for moderate-risk genes.
DCIS	Surgery ± RT; endocrine optional.	COMET trial noted; still surgery + RT standard; no genomic assays.
Breast-Conserving Surgery	Preferred; no OS gain with mastectomy.	Reinforced; BCS valid for multifocal disease if feasible.
Sentinel Node Omission	Investigational only.	Endorsed for postmenopausal, ER+, HER2–, G1-2, US–negative (SOUND/INSEMA).
Axillary Surgery (Post-NAT)	Mixed guidance.	Subtype-based: omit dissection for ER+/HER2–micrometastasis; retain for TNBC/HER2+.
RT Omission (Elderly)	May omit >70 yrs low-risk.	RT still advised—EUROPA trial QoL benefit.
Post-Mastectomy RT	Indicated if node-positive/high-risk.	Omit if pCR after NAT in stage I–II; retain for stage III/inflammatory.
TNBC Therapy	Chemo ± pembrolizumab emerging; carboplatin optional.	Chemo-immunotherapy (pembro + AC/T + carbo) now standard; add capecitabine/olaparib if residual.
HER2+ Therapy	TCbHP standard; anthracycline alt.	THP (18-wk, no carbo) validated for de-escalation; HER2DX not yet routine.
ER+ Chemotherapy	Genomic assays guide use; threshold undefined.	≥3–5% absolute recurrence-risk reduction required to justify chemo.

Quality of Life in Breast Cancer Patients



Factors associated with the quality of life of breast cancer survivors. Abbreviation : QoL: Quality of life, BC: Breast cancer

MAJOR FACTORS INFLUENCING QOL:

- **Physical:** Symptoms and treatment side effects frequently interfere with normal life.
- **Psychological:** Patients commonly experience fear, guilt, and anxiety.
- **Social:** Social stigma, job loss, and damaged identity are significant challenges.
- **Family:** Family can be a major support, but a lack of emotional support from partners and worries about children are common.

Coping Strategies: Religion, spirituality, mindfulness, and positive energy help patients cope.

Importance of Knowledge: A lack of information causes fear and anxiety, making knowledge a key factor in coping.

Air Pollution, AQI અને કેન્સર

સામાન્ય લોકો માટે સરળ સમજણ

“જેઓ હવા આપણે શ્વાસ રૂપે લઈએ છીએ, તે જ આપણા આરોગ્યનું ભવિષ્ય નક્કી કરે છે.”

આજકાલ આપણે વારંવાર AQI શબ્દ સાંભળીએ છીએ. શહેરોમાં ધુમસ જેવી સ્થિતિ, ગરબડભરી હવા, અને સતત વધી રહેલી પ્રદૂષણની ચિંતા—આ બધું આપણા રોજિંદા જીવનનું ભાગ બની ગયું છે. પરંતુ પ્રદૂષિત હવા માત્ર તકલીફ જ નથી આપતી—તે આપણા શરીરમાં લાંબા ગાળે એવા ફેરફાર કરે છે જે કેન્સર જેવી ગંભીર બીમારીઓનું જોખમ વધારી શકે છે.

AQI શું છે? સામાન્ય ભાષામાં સમજીએ

AQI એટલે Air Quality Index—એ હવામાનનો રિપોર્ટ કાર્ડ છે. તે બતાવે છે કે આપણે જે હવા શ્વાસ રૂપે લઈએ છીએ, તે કેટલી સ્વચ્છ કે પ્રદૂષિત છે.

AQI 0-50

સારી હવા

AQI 51-100

ઠીક-ઠીક હવા

AQI 101-200

Unsafe for
sensitive people

AQI 200+

ખરાબ હવા – બધા
માટે હાનિકારક

AQI 300+

ખૂબ જ
ખતરનાક હવા

જેટલો AQI વધારે, એટલું પ્રદૂષણ વધારે

AQI શું છે? સામાન્ય ભાષામાં સમજીએ

હવામાં શું પ્રદૂષણ હોય છે?

અમારી હવામાં ઘણી હાનિકારક વસ્તુઓ મળે છે:

PM 2.5

– નાનકડા ધૂળના કણો



PM 10

– મોટા ધૂળકણ



Nitrogen dioxide (NO₂)

– વાહનોથી



Sulphur dioxide (SO₂)

– ફેક્ટરીઓમાંથી



Ozone (O₃)

– ગરમી અને પ્રદૂષણથી બને છે



Carbon monoxide (CO)

– અધૂરા દહનથી



આ બધું આપણા ફેફસાંમાં ઘૂસે છે અને શરીરમાં સોજો (inflammation) અને કોષોમાં નુકસાન કરે છે.

પ્રદૂષિત હવા અને કેન્સર વચ્ચેનો સંબંધ

વિશ્વ આરોગ્ય સંસ્થા (WHO) મુજબ હવામાં રહેલા PM2.5 અને Pm10 કણો “કેન્સર સર્જી શકે તેવી પદાર્થો” (carcinogens) છે.

લાંબા ગાળે પ્રદૂષિત હવા નીચેના કેન્સરનો જોખમ વધારી જાય છે:

ફેફસાનો કેન્સર

PM2.5 કણો સીધા ફેફસાંમાં જઈને વર્ષો સુધી નુકસાન કરે છે. ભારતના મોટા શહેરોમાં ફેફસાના કેન્સરનું પ્રમાણ સતત વધી રહ્યું છે—even among non-smokers.



મૂત્રપિંડ, બ્લેડર અને લિવર કેન્સર

હાનિકારક કણો અને ગેસો રક્ત પ્રવાહમાં જઈને અન્ય અંગો સુધી પહોંચે છે અને કોષોની ગુણવત્તા બગાડે છે.



બાળકોમાં લાંબા ગાળાની સમસ્યાઓ

બાળકોમાં ફેફસાંનું વિકાસ અધૂરું રહી શકે છે, જેના કારણે ભાવિ જીવનમાં કેન્સરના જોખમ વધે છે.



આપણે શું કરી શકીએ? (સરળ પગલાં)

AQI ચેક કરવાની
ટેવ રાખો



AQI 200+ હોય
ત્યારે બહાર ઓછું રહો



માસ્ક પહેરો
(N95/N99)



ઘરમાં શુદ્ધ હવા રાખો



છોડ લગાવો



વાહનનો
ઓછો ઉપયોગ



આપણે સૌની જવાબદારી

● પ્રદૂષિત હવા એક Silent Killer છે. તે તરત અસર નથી કરતી, પણ વર્ષો સુધી શરીરને અંદરથી નબળું બનાવે છે. ● જો આપણે આજે પગલાં નહીં લઈએ, તો આવનારી પેઢીઓને વધુ જોખમનો સામનો કરવો પડશે. ● જો આપણે સૌ મળીને જાગૃતિ લવીએ, નાના-નાના પરિવર્તન કરીએ અને હવાની ગુણવત્તા સુધારવાના પ્રયાસમાં ભાગ લેવા માંડીએ—તો કેન્સરનું જોખમ નોંધપાત્ર રીતે ઘટાડવું શક્ય છે.

અંતમાં એક સરળ વાક્ય યાદ રાખો: “સ્વચ્છ હવા એ આપણો હક્ક પણ છે અને આપણી જવાબદારી પણ.”

Does Supra-Major Surgery And Geriatric Age Poses Risk?

NOT ALWAYS....!!

CASE 1

A 74-year-old "young female" with low-grade mucinous adenocarcinoma and gross ascites, operated for supra-major cytoreductive surgery – Total peritonectomy + Total Omentectomy + Staging Laparotomy + LN dissection.

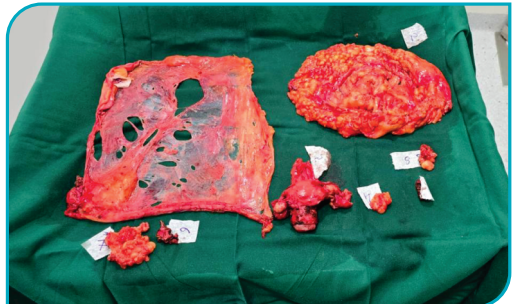
After ups & downs for few weeks of hypoproteinemia, dyselectrolytemia, arrhythmia – she came out victorious.



CASE 2

A 67 year old "Fighting Spirit" for locally advanced high-grade Ca. Ovary. She has taken induction chemo for her Stage IIIC Ca. Ovary.

She was undertaken for a marathon, complex secondary cytoreductive surgery – Total peritonectomy + Diaphragmatic stripping + Total omentectomy + Mesenteric deposit resection + BPRND.



Activities & Engagement

Breast Awareness and Screening Program

Dr Manish Sadhwani and Dr Pranjal Banthia didn't just give a lecture; they also provided valuable insights. They demonstrated. They answered the awkward questions without judgment. They busted myths that have been passed down for generations. They showed every woman in that room exactly how to examine her own breasts - with the right pressure, the right pattern, the right frequency.



Dr. Manish Spread the awareness about cancer on Fever FM 95



On National Cancer Awareness Day, 7th November, Dr. Samarth Dave participated in panel discussion with eminent doctors of Gujarat, telecasted live in prime time show on TV 13 Gujarati News Channel.

Dr. Samarth Dave broke the myths around common misconceptions on TV 13 Gujarati news channel.



ચર્ચા
છડેચોક
લદ્દેશ સરવૈયા સાથે
કેન્સરને કરીએ કેન્સલ..!

- રાજ્યમા વધી રહ્યા છે કેન્સરના કેસો..!
- દરરોજ સરેરાશ 212 નવા દર્દીઓ..!
- 3 વર્ષમાં 2.25 લાખ કેસ નોંધાયા..!
- કેમ રાજ્યમા વધી કેન્સરની ઘાતકતા ?



જુઓ આજે રાત્રે 8:00 કલાકે

FOLLOW US ON

www.tv13gujarati.com



ચર્ચા
છડેચોક
લદ્દેશ સરવૈયા સાથે
વ્યસનનું વિષયક...!

- રાજ્યમા ચિંતાજનક રીતે વધ્યા કેન્સરના કેસો...!
- તમાકુના વ્યસનને કારણે કેન્સરના કેસો વધ્યા..!
- યુવાવર્ગ, સ્ત્રીઓ, પુરુષોમાં વધ્યા કેન્સરના રોગ
- નશીલા પદાર્થોના વ્યસનથી બચવા શું ઉપાય ?



જુઓ આજે રાત્રે 8:00 કલાકે

Team Airavat conducted a meaningful RTM with a young and dynamic group of ENT surgeons.

We discussed many avenues around the head and neck cancers; practice of ENT & current clinical state.

It was indeed a great networking opportunity for our doctors.



Diwali celebration

During Diwali our team celebrated the energy of hope, ignited the spirit of light and filled the color of joy in form of beautiful Rangoli in hospital facility. Sweets and gifts were shared to celebrate the festival.



Outreach OPDs

AMRELI

Raghavendra Hospital, 2nd Floor, Keriya Road, Nr. Railway Underbridge, Amreli.

HIMMATNAGAR

Shankus Cancer Hospitals, 1st Floor, Ashwamegh Complex, New Civil Hospital, Hadiyol Road, Himmatnagar.

VISNAGAR

Nutan General Hospital (S.K.), Visnagar.

PALANPUR

Parikh Hospital (Mahajan Hospital), Near Delhi Gate, Baradpura, Palanpur.

SURENDRANAGAR

- Krishna Hospital, Bus Station, Road, opp. M. P. Shah Arts & Science College, Ambedkar Nagar, Surendranagar, Gujarat 363001
- Life Care Super Speciality Hospital, Old Jct Rd, Opposite District Library, Vadipara, Surendranagar, Gujarat 363001

OUR ASSOCIATIONS



Narayana Hospital,
East Ahmedabad



Shaleen Cancer Hospital,
Ahmedabad



Shankus Cancer Centre,
Himmatnagar



Namostute Hospital,
Gandhinagar



VIMS Hospital,
Chandkheda

ABOUT US

- Highly motivated team of Cancer Specialist; aim to deliver Protocol backed, Result oriented Cancer Surgical care to our patients.
- We aim to provide advanced, ethical, quality cancer care to our patients in most affordable and empathetic way.
- Looking after premiere organizations; committed to raise the bar of our working institutes.
- More than 30+ Years of cumulative experience in Onco-Surgery.

EXPERT TEAM OF CANCER SURGEONS



**DR. RUSHIT
DAVE**

MS, M.Ch. (GCRI)
Consultant Cancer Surgeon



**DR. RONAK
VYAS**

MS, M.Ch (GCRI), F.MAS
Consultant Cancer Surgeon



**DR. MANISH
SADHWANI**

MS, M.Ch (GCRI)
Consultant Cancer Surgeon



**DR. SAMARTH
DAVE**

M.Ch., Surgical Oncology
Consultant Cancer Surgeon




**DR. PRANJALI
BANTHIA**

MS (BJMC), MCh (AIIMS Delhi)
Consultant Cancer Surgeon

CONTACT US

FOR APPOINTMENT CALL:  +91 91044 62944

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Kargil Petrol Pump Cross Road,
SG Hwy, Ahmedabad - 380060.**



Scan for location



Scan for review

