

harmony

celebrate age



- Eat right, stay cool this summer
- Tea time recipes

SPOTLIGHT
A delicious lunch service for silvers in Thrissur

TRADITION
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ENCOUNTER
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CRUEL SUMMER

It's official: summer is here.

Summers are traditionally family time, a time to bond with the grandchildren over games, storytelling sessions, and excursions to both old and new destinations. But all this fun and excitement needs to be tempered with awareness of the heat, and our vulnerability to it.

Today, India is in the grip of a heat wave. Temperatures are alarmingly high, heralding a summer that is not just early but unconscionably cruel. With age, we all become more susceptible to dehydration and heatstroke owing to a decline in the body's ability to regulate body temperature through reduced efficiency of sweat glands and circulatory changes. Conditions like hypertension and cardiac disease—and the medications taken for these—only exacerbate the problem.

The key to staying cool is being aware. I recently read about 'Beat the Heat', an initiative by TXU Energy, a power company in Texas, in collaboration with the state authorities to support the health and wellbeing of silvers and children—the most susceptible demographics—during summer. The programme comprises educating consumers on energy conservation to reduce the cost of AC bills, and distributing leaflets on summer safety tips: the best times to step outdoors and the need for protection in the form of loose clothing, hats, umbrellas, sunglasses and sunscreen. What's more, they have assured silvers (over the age of 62) that their power connections won't be disconnected if they fail to pay their bills, offering them a deferred payment plan instead.

Clearly, we have a long way to go. In the absence of such initiatives and collaborations between government and



Donald Woodrow

civil society, we need to be proactive about our own health and safety this summer. Indeed, this proactivity needs to extend to every facet of our lives: physical, intellectual, spiritual and, most crucial, financial. With this in mind, we organised 'Reverse Mortgage—A Step Ahead', a seminar in partnership with Central Bank of India and Star Union Dai-ichi (SUD) Life Insurance last month in Mumbai (see 'Orbit'). It's heartening that Reverse Mortgage schemes now promise even greater security, allowing silvers an income for a lifetime.

I thank Kishori Udeshi, chairperson of the Banking Codes and Standards Board of India, S Sridhar, chairman and managing director, Central Bank of India, and M Balachandran, chairman, Star Union Dai-ichi Life Insurance Co. Ltd, for sparing their valuable time to share their perspectives with a receptive audience. I would also like to congratulate the silvers who received their loan sanctions at the event. These trendsetters who have taken a decisive step to empower themselves must be lauded, and emulated. You too can drive your own destiny—just step up and take the wheel.

Tina Ambani

A Harmony for Silvers Foundation Initiative

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Joint replacement surgery is set to improve the quality of life of silvers

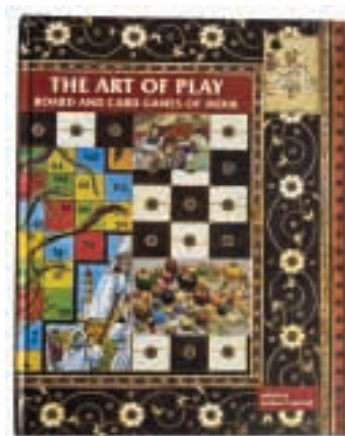
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column one

As you silver, add freedom of movement to your list of rights. Osteoarthritis might well be the result of lifestyle mistakes you made when you were young, but it could even be a consequence of ageing bones and injuries and, therefore, out of your control. Painful and debilitating joints can no longer stop us from leading normal lives. Joint replacement surgery is a promising breakthrough; it helps people get back on their feet within days. The last time we featured the technology in August 2007, we were way ahead of the times in promoting it as a healthcare cause. The past three years, though, have seen several new advances. So we are back with another feature on the subject ("Flexible Strategies") to add bounce to your step. A word of advice: though there's assured relief from joint problems, keep up the lifestyle precautions that *Harmony* promotes every month.

In the wake of unanticipated situations, all doors seem to close. That should be reason enough to heed preventive measures. This month, our 'Legalease' section ("Trustworthy") deals with a query from a distant relative of an elderly gentleman who is in hospital, unable to sign a cheque to pay for his medical expenses. It's an unfortunate case but definitely one that should be heeded. Preparing for unforeseen circumstances is wisdom.

On a lighter note, this issue takes you back in time when entertainment comprised board games. Modern-day 'snakes and ladders' and 'ludo' are versions of 'chausar' and 'pachisi'. A new book by Marg Publications has researched the subject so thoroughly that there's no scope for ambiguity. *Harmony* presents excerpts and some brilliant photographs. Enjoy!

—Meeta Bhatti



Mahatma Gandhi was 78 at the time of his assassination. In 1947 at the age of 77, he went to Noakhali, West Bengal, to quell the violent riots there. The people of Noakhali didn't know Hindi, Gujarati or English, the languages in which Gandhiji was conversant—they spoke only Bengali. To communicate with them and feel one of them, he started learning Bengali, irrespective of his age. That spirit should be a lesson to us all.

R K Jain, Meerut



It's always a pleasure to read *Harmony* and every issue of the magazine is eagerly awaited. Your cover story on Shaukat Azmi ("The Colours in Her Life", April 2010) made for nostalgic reading. She is indeed one of the pillars of Hindi cinema and a woman who gives and receives love in the belief that true religion is humanity. Further, the excerpt from *Kaifi and I* is a testament to the magnificent love story of revolutionary poet Kaifi Azmi and his lady love Shaukat. Their relationship underlines that the secret of a successful marriage lies in mutual understanding and compromise.

Vinod C Dixit, Ahmedabad

I am a regular reader of *Harmony*. My wife is 75 and I am 78; by God's grace both of us are in good health and active. We are inspired by the articles in your magazine about active silvers. Recently, we had the privilege of attending the 80th birthday celebration of an eminent lawyer and friend Soli Sorabjee. It is well known that he is fond of jazz music. I was delighted to see the 80 year-young Soli dancing vigorously with his equally agile wife! It is a matter of shame that some silvers keep complaining about their health right after they cross the age

of 70. They should draw inspiration from active octogenarians like Fali Nariman, Soli Sorabjee and Viren Shah.

M L Bhakta, Mumbai

I write this with reference to "Reason above Religion", an excerpt from the work of Robert Ingersoll ("The Last Word", April 2010). Who are religious people? Those who follow religion strictly or only to some extent? In today's materialistic world, there are hardly a few religious people in the strict sense. People do the wrong things in the blind pursuit of money. Further, power corrupts so many. Yet, they perform rituals, perhaps in order to absolve their sins, and continue to call themselves religious. What's even worse are the crimes committed in the name of religion. I believe that religion is a deeply personal matter and that one must maintain a balance between religion and other departments in life. In the Hindu tradition, *vanaprastha* is the time for full-time religious activities. But nowadays, do we come across a single person who goes in for *vanaprastha*?

Mahesh Kapasi, New Delhi

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O»NEWSWORTHY

SOUTHERN COMFORT

Chennai's destitute silvers will soon find safe haven—at least for the night. The city's municipal corporation announced that it will build a series of **night shelters across the city for homeless elders**. Also on the anvil are two eye-testing centres and two dialysis centres each in north and south Chennai and two diabetic centres in the corporation's blood-testing laboratories. What's more, the civic body will spruce up its two geriatric centres, which are currently languishing, with regular health camps and yoga training sessions.



Project *Internet*

America's tech giants have a goal, literally. Companies like Facebook, Microsoft, Verizon, Comcast, AT&T, T-Mobile and Time Warner Cable have come together to float 'Project to Get Older Adults on-Line' (GOAL), which will work with ageing groups to communicate the importance of **getting more silvers on the Web**. Only 35 per cent of people over the age of 65 in the US have broadband at home and the numbers drop considerably among older Americans. The group aims to provide a new platform to promote the adoption of broadband services for silvers; advance the benefits of broadband services; connect national and local community organisations working on issues related to broadband; and address barriers. "While most of us have a hard time prying our fingers off our computer keyboards and mobile devices, recognising the Internet's relevance to daily life is an important part of getting older adults to start adopting broadband," writes Debra Berlyn, executive director of Project GOAL, on popular networking site Facebook. "While 'cutting and pasting' is second nature to most of us, my 87 year-old father thought such a task required scissors and Elmer's glue!" Aware that silvers are often the victims of online scams, GOAL will also offer tools and information regarding online safety, security and privacy.



WINGS *of care*

If **Bhubaneshwar's** silvers want to talk, there's someone to listen. HelpAge India has launched a **helpline for silvers—1800-345-1253 (toll)**—that they can call for information, help or protection. Through a dedicated network of computers and other telecom apparatus, caller's records will be systematically maintained and updated with the help of experts and volunteers. The helpline is part of the NGO's Agecare Programme in Orissa, which includes the establishment of a **physiotherapy care centre** at its Bhubaneshwar unit. A team of qualified physiotherapists from HelpAge will interact with silvers and diagnose their problems to assess physical abilities, vital signs, activities of daily living and emotional status.

25% THAT'S THE PERCENTAGE OF AMERICAN SILVERS WHO LACK THE CAPACITY TO MAKE THEIR OWN MEDICAL CARE DECISIONS AT THE END OF LIFE. THE FIGURE COMES FROM A STUDY CONDUCTED BY THE UNIVERSITY OF MICHIGAN AND PUBLISHED IN THE *NEW ENGLAND JOURNAL OF MEDICINE*.

Naughty boys!

It's a well-established fact that silvers remain sexually active for many more years than ever before. But researchers at the University of Chicago have now established that **elder men are having a little more fun in the bedroom than women.**

As they report in the *British Medical Journal*, they base their finding on two major studies; while one survey covered 3,000 people aged 25 to 74 in the mid-1990s to investigate midlife, the other, which was carried out a decade later among 3,000 people aged 57 to 85, focused on old age.

At the age of 55, men have almost 15 years of sexually active life ahead of them on average

Among 75 to 85-year old men, 38.9 per cent said they were sexually active

Another 41.2 per cent of the men were interested in sex

Among those men who were sexually active, 70.8 per cent rated their sex life as good



At the age of 55, women have about 10 years of sexually active life ahead of them

Among 75 to 85-year old women, 16.8 per cent admitted to being sexually active

Another 11.4 per cent of the women were interested in sex

Among the sexually active women, 50.9 per cent expressed satisfaction



TELE GAINS

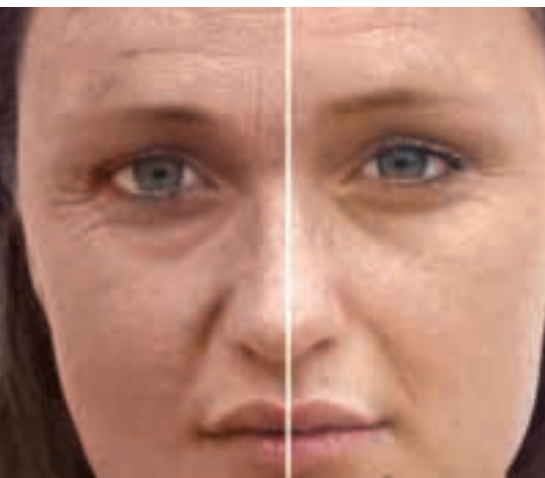
THE LACK OF SILVER ON TELEVISION is a subject that has been hotly debated in the West. Delve deeper into the issue of ageism and you find sexism, the fact that women in the visual

media are often sidelined as they grow older. Things may be changing though. A study by London-based magazine *Radio Times* has found that the **average age of female present-**

ers appearing in prime-time slots on British television has jumped eight years, from 32 years and seven months in the 1950s to 40 years today. In comparison, the average age of men on TV has fallen slightly from 46 years and nine months in the 1950s to 46 years today. The study looked at 800 presenters who have appeared on BBC1 and ITV in the 7 pm to 10.30 pm slot over the past six decades. "What we see is that although women on TV are generally fewer and younger than men, there has been a gradual convergence in numbers and age," a spokesperson for the magazine tells newspaper *Daily Mail*. "We conclude that we are making progress towards equality." This should come as welcome news for silvers' groups in the UK, who have criticised television programming variously for being 'out of touch with the tastes of an ageing audience' and its 'reluctance to show grey hair on screen'.

O» ANALYSE THIS

‘Old’ genes



REMEMBER DAF-16. That’s the name of a **gene found in worms that is inextricably linked to the ageing process**, affirm scientists from the University of Birmingham in the UK. The team compared longevity, stress resistance and immunity in four related species of worm. They also looked for differences in the activity of DAF-16 in each of the four species—these corresponded to differences in longevity, stress resistance and immunity between the four species, with higher levels of DAF-16 activity correlating to longer life, increased resistance and better immunity against some infections. “The fact that subtle differences in DAF-16 between species seem to have such an impact on ageing and health is very interesting and may explain how differences in lifespan and related traits have arisen during evolution,” writes study leader Robin May in journal *Public Library of Sciences (PLOS) One*. “As the DAF-16 gene is found in many animals and in humans, the finding could open up new ways to affect lifespan, immunity and disease resistance in humans.”

SOFT TARGETS: POLICE OFFICERS IN THE UK ARREST 40 SILVERS EVERY DAY, MOST FOR TRIVIAL OFFENCES. THESE PETTY CRIMES COULD RANGE FROM FAILING TO PAY A FINE TO EVEN CHOPPING A NEIGHBOUR'S HEDGE WITHOUT PERMISSION! ADVOCATES FOR SILVERS ALLEGE THAT THE POLICE DEPARTMENT IS USING HAPLESS SILVERS TO BOLSTER ITS OWN CRIME-BUSTING STATISTICS.



Older = wiser



We’ve told our kids this for centuries; now there’s **actual proof that older is wiser.**

This was established by researchers at the University of Michigan in the US, who recruited three groups of people based on age: 25 to 40 years old; 41 to 59 years old, and over 60 years old. Each group was presented with fictional geopolitical reports regarding inter-group and interpersonal conflicts in foreign countries. They were then rated on their ability to analyse these reports and search for solutions that incorporated compromise, flexibility and conflict resolution skills. “We found that relative to young and middle-aged people, older people made more use of higher-order reasoning schemes that emphasise the need for multiple perspectives, allow for compromise, and recognise the limits of knowledge,” writes study leader Richard E Nisbett in the *Proceedings of the National Academy of Sciences*. “The fact that they show better competencies for reasoning about social dilemmas demonstrates a major benefit that accrues with ageing rather than the mostly cognitive loss-based findings generally reported by scientists.”

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O» MEDIA WATCH

Star-crossed silvers

How's this for a contemporary twist on a Shakespearean classic.

In April, director Tom Morris's *Juliet and Her Romeo* played to packed houses at the Bristol Old Vic in the UK. His lovers weren't teenagers in Verona but octogenarian residents of a care home in the UK. So here's the new story: Juliet lives in a private ward. Her daughter, who is finding it tough to pay the mounting bills, wants her mother to marry a wealthy bachelor,



Paris. But Cupid strikes when Romeo, who's in the public ward of the same care home, spots Juliet at a tea dance. And while the tale plays out

to its inevitable ending, the play simultaneously raises serious questions about the healthcare system and the right to age with dignity. "In a youth-obsessed culture, the thought of people falling in love as they inch towards death is practically taboo," Morris tells London newspaper *The Guardian*. "But why shouldn't people who are 80 have the same life-trans-

forming experience when they fall in love as a 14 year-old? This is a story about people falling in love. And you can apply that to any age."

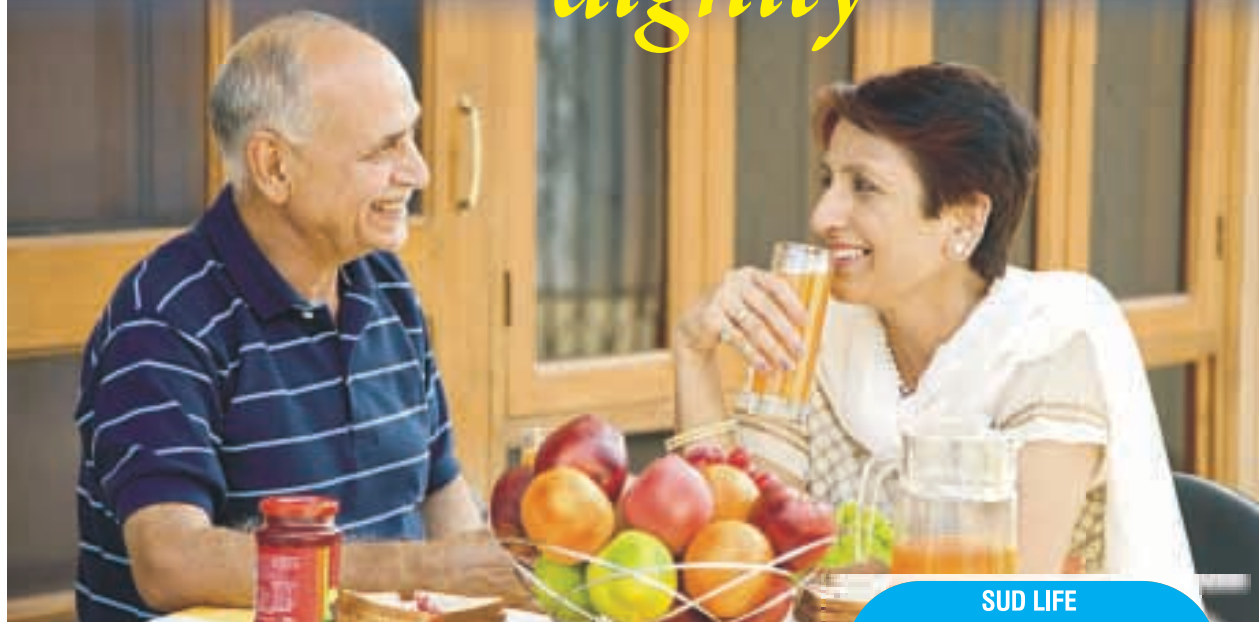
O» INNOVATION

Furry FRIEND

THE JAPANESE have always excelled in providing virtual comfort. Now, here comes a spanking new robot in an old-fashioned avatar to steal your heart: the teddy bear. Fujitsu Corporation recently unveiled its **prototype cuddly teddy robot** at a tech exhibition in Tokyo. While a camera in its nose can detect human faces and actions, sensors inside its head and limbs can detect touches and caresses. Teddy responds with over 300 actions of its own—it giggles, laughs, waves, even snores. Fujitsu plans to test the product in nursing homes to soothe and entertain silvers in a bid to prevent depression and dementia. It will also use the bear in schools to aid children to communicate and gain self-confidence. "We want to offer an object that can become part of the family, nursing home or school and that can benefit humans," a spokesperson for the company tells AFP.



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Sunahra Kal, Suraksha Har Pal

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Sentinels of time

Many of them are centenarians. But the trees at **Westbourne Woods in Canberra** continue to stand proud and tall, defying the passage of time. The famed arboretum of exotic and indigenous trees in the Australian capital was designed by English-born horticulturist Charles Weston in 1914 as part of the Royal Canberra Golf Club. And as newspaper *Canberra Times* reports, it contains one of the largest and oldest collections of tree species in Australia: 30 pines, 26 exotic conifers, 63 exotic hardwoods, 51 eucalypti and

10 other Australian species. The Canberra government recently introduced a walking tour through the arboretum, where retired horticulturist Franz Grossbechler leads visitors through species like the liquidambar, Japanese pagoda tree, sophora, Queensland bunya pine, Chinese pistachio, and the torrey pine. "You get to see a very interesting collection of trees in one location and it's a wonderful feeling that they're being protected and preserved," he says. "I just wonder why we didn't start a walk like this sooner!"



Snared by the Web

They've been immortalised in cinema and literature for their intrepid ways. But after tackling the Russians and the IRA with aplomb, the **veteran spies of the British MI5 appear to have finally met their match in the Internet**. Indeed, as the BBC reports, their difficulties in coming to terms with a Web-driven world have become so acute that the government has de-

cided to replace many of them with new—or younger?—of cers who can handle information technology and possess other 'deployable' skills. "We will introduce a programme of voluntary and compulsory redundancies," Jonathan Evans, the director-general of MI5, told a Parliamentary committee. "I think some of the staff perhaps aren't the ones that we will want for



the future. We wish to improve the skills profile of the organisation and increase the number of staff that can be deployed on active operations."

O»EVENT

HOME SECURE HOME

It's a strange situation we silvers are in; we are asset-rich but income poor," said Kishori Udeshi, chairperson of the Banking Codes and Standards Board of India in her speech at 'Reverse Mortgage—A Step Ahead', a seminar organised by Harmony for Silvers Foundation in partnership with Central Bank of India and Star Union Dai-ichi (SUD) Life Insurance on 9 April in Mumbai. Udeshi's words were met with rousing applause, perhaps because they succinctly summed up the state of India's elderly—most of whom have a house in their name but not enough income to maintain it. The seminar was the first of its kind to promote Cent Swabhiman Plus, a new Reverse Mortgage scheme that can help anyone over the age of 60 (individually or with spouse of 55 years and above) to unlock the value of their home equity. The reverse mortgage loan is now even more attractive as it is coupled with SUD Life Insurance. Translated into simple terms, this means that silvers can now look forward to a lifetime income, instead of returns for just 15 years as it was earlier.

Cent Swabhiman Plus assures lifetime annuity for a senior couple along with revision of loan/annuity after every three years based on revaluation of property and options of annuity with or without a lump-sum loan. The seminar was flagged off by Tina Ambani, chairperson, Harmony for Silvers Foundation, who urged banking of cials present at the event to explain the terms as simply as possible to silvers. "Not all of us are good with complicated financial jargon, so it's essential that we spell out the intricate financial terms clearly and lucidly," she said.

For his part, S Sridhar, chairman and managing director, Central Bank of India, touched upon aspects like property valuation, inheritance and a traditional Indian mindset that may have prevented many silvers from using the home as equity, following which M Balachandran, chairman, Star



Union Dai-ichi Life Insurance Co. Ltd, underlined that silvers should also fully size up their obligations before they take the decision to go in for a reverse mortgage.

Seven silvers received their reverse mortgage loan at the event—three of them with annuity. Many senior citizens in the audience also raised queries on insurance, inheritance, general apprehensions and valuation, which were addressed by Star Union Dai-ichi of cials.

Further, a toll-free helpline—1800 100 1111—was re-launched at the event, under the aegis of Central Bank of India and Harmony for Silvers Foundation. Interested seniors can call the number anytime to know more about Reverse Mortgage and understand the intricacies involved.



COOL CARD: DBS BANK IN SINGAPORE HAS LAUNCHED A NEW DEBIT CARD THAT OFFERS DISCOUNTS AND PERKS TO PEOPLE AGED 45 YEARS AND ABOVE. THE BANK ALSO RUNS AN 'ACTIVE NEIGHBOURS PROGRAMME' WHERE SENIORS ENGAGE THEIR PEERS TO TELL THEM HOW TO USE ATMs AND INTERNET BANKING.

O»H PEOPLE

Flying colours!

After a fulfilling career as the head of the planning and international relations department of Air India, 62 year-old **Aruna Mascarenhas** slipped into yet another interesting role after her retirement: artist. She held her first exhibition,



Tranquil Spaces: A Historical Journey of Buddha, at the Circular Art Gallery in Mumbai in early April. Having had a deep interest in art all her life, Mascarenhas was also fortunate to have a career that offered her opportunities to travel extensively and visit art galleries around the world. She started work on her paintings on 26 November 2008—the day that Mumbai witnessed the gruesome terrorist attack. “Living within earshot of the incessant sound of rifle shots, I sought refuge at the easel,” she says. One of the paintings *The Inward Gaze* was completed the same day. It shows Buddha withdrawn deep into himself in search of peace. In fact, all her works were a recreation of different renditions of Buddha in the forms he is worshipped in Cambodia, Nepal, Thailand, Tibet and Japan. “Painting has come to me like meditation, of reaching deep within,” says Mascarenhas. Proof that our true purpose lies where we rarely look for it: deep within our hearts.

GIVE AND GET.



Help children in your neighbourhood with their studies and you will get tonnes of love and significant physical and cognitive benefits in return. These benefits have been documented among volunteers who work with the Experience Corps (www.experiencecorps.org), a programme operating in 22 cities in the US that trains volunteers over 55 to tutor and mentor elementary school students. At present, the Corps comprises 2,000 volunteers who work with 20,000 students. As 73 year-old Rosetta Handy who teaches second-graders in West Baltimore, Maryland, puts it: “You give them your time and learning. They give you energy. You learn psychology all over again.”

IN PASSING

American impresario, performer and manager of punk rock band The Sex Pistols **Malcolm McLaren** died in New York on 8 April. He was 64.

Polish president **Lech Kaczynski** died in an air crash on 10 April. He was 60.

MILESTONES

Appointed. India-born, Harvard-based geneticist **Dr Raju Kucherlapati**, 67, to US President Barack Obama’s Presidential Commission on Bioethical Studies. The Commission will explore bioethical issues emerging from advances in areas like cloning, embryonic stem cell research and robotics. Kucherlapati, whose research on gene mapping and gene modification could open the door to a new age of personalised medicine, is director emeritus and Paul C Cabot Professor at the department of genetics at Harvard Medical School, and a founder of many cutting-edge research companies.

BIRTHDAYS

- African-American poet **Maya Angelou** turned 82 on 4 April
- Former US Secretary of State **Colin Powell** turned 73 on 5 April
- Actor **Jeetendra** turned 68 on 7 April
- Martial arts hero **Jackie Chan** turned 56 on 7 April
- Sitar maestro **Ravi Shankar** turned 90 on 7 April
- Actor **Jack Nicholson** turned 73 on 22 April

O»H PEOPLE

Say cheese!

In western Jerusalem, near the Sataf springs in the magnificent Judean hills, Shai Seltzer, 64, runs a goat cheese dairy that follows time-honoured methods of cheese-making. Despite winning several awards and innovating on medicinal varieties of cheese, Seltzer prefers the cooperative spirit over commerce. On a visit to India, the man who is known as Israel's godfather of goat cheese-making tells Neha Bhatnagar why he likes to keep things simple

So when did you hit upon the idea of making cheese?

It's been 37 years now. When I was doing my Master's, I began questioning the purpose of my life. I asked myself whether the university degree I was pursuing would help me achieve what I wanted to. It struck me then that I was lucky to be born into this wonderful world, and I could make it even better. So I quit university and headed to the mountains. I started rearing a few local goats. Then I got some Zangabi goats from Syria and Nubian goats from Africa and later on an Anglo-Nubian sire [a breed developed by mating goats from Britain and British Columbia], which I crossbred with the Zangabi. The result was a wonderful goat highly adapted to the local habitat, one that produces 600 to 800 litres of milk per year!

Why did you specialise in goat cheese?

Goat milk is closest to human milk in composition in terms of minerals, fat and sugar. In fact, goat lactose is very easily digested by humans. Research conducted in Germany shows that free fatty acids present in milk are very important for producing male testosterone; nearly 97 per cent of goat milk is composed of such acids.

Your cheese is purported to have medicinal properties. Is that true?

I believe cheese is an expression of a deep understanding of the science of life on earth. From climate to bacteria, everything counts. It is an ecosystem, an art. Cheese-making is not just about putting something in milk and getting the desired results. When we send our goats to feed on pasture, we do so keeping in mind the kind of cheese we will ultimately produce from their milk. In winters, our goats eat a plant called pitoe, which constitutes 60-70 per cent of their diet. Laboratory tests on rats in Napoli University have shown that the insulin balance was maintained after eating our cheese. Then, there is a variety of pine in Israel that releases perenic acid in goat milk and it is found that cheese made from that milk cures asthma. All year long



they eat a kind of wild asparagus, and three weeks of such eating helps create an aphrodisiacal cheese!

What makes your cheese so unique?

It's the process we follow. Some varieties are coated with powdered coal while others with grape leaves and wine barrel residue to get different tastes and desired characteristics. The cheeses are then matured in a natural limestone cave from a few months to even a couple of years to fully develop their unique flavour and aroma.

You never stock your cheese at retail outlets or supermarkets. Why is that?

I have a herd of 170 goats. I enjoy every bit of work that I do and I do it all on my own terms. I have no faith in bank loans or credit systems. And I never think of cheese-making as a commercial endeavour, nor do I believe in corporatisation or market forces. I sell my cheese either directly at my farm or through cooperatives. That way, no middlemen are involved. I have no regrets. I have been on the jury panel at various international cheese exhibitions. In 2008, I attended a world conference of cheese where 8,500 varieties were displayed and we got the 308th position.

You are rather exclusive in one way. Yet you are always willing to share your cheese-making secrets with the rest of the world.

Yes, I have been conducting workshops at various places to help people—especially women—learn the art of cheese-making and become self-sustainable by setting up their own cooperative dairy units.

HAVE SOMETHING TO SAY?

THIS IS THE PLACE TO DO IT. REACH OUT TO FELLOW READERS WITH INTERESTING ANECDOTES, INSPIRING STORIES AND HEARTWARMING MOMENTS FROM YOUR LIFE. WRITE IN WITH FULL CONTACT DETAILS, AND MAKE THIS SPACE YOUR OWN.

FORGIVE AND FORGET

My grandson Atharva, my daughter's six year-old son, is a naughty little boy. He lives with his parents just 5 km away from my residence. One evening, my daughter left him with me while she was out on an errand. I live on the third floor of my apartment. Atharva had gone down to play in the building compound. A couple of hours after he left, a group of four children came up to me.

They had a complaint against Atharva—he had knocked down the sandcastle they had built in the compound. They were rightfully angry and sulking. I knew my grandson was a naughty boy and capable of some nasty pranks. As all four children started talking simultaneously, I could not make sense of their aggrieved chatter. To pacify the gathered group, I asked them to wash their hands. They were



Grandma knows best

puzzled at my request but nevertheless they shuffled their way to the washbasin and followed my instructions. I gave them some lemonade, biscuits and chocolates. And then I sat across the four pouting tykes and apologised for my grandson's misdeemeanour. I assured them that as

soon as Atharva's parents came home, I would inform them about his wrongdoing, so they could chastise him. As soon as I mentioned the chastisement, one of the girls quickly interjected, "We are sorry grandma; we did not allow him to play with us. We too didn't behave properly with him. So please do not punish him. He too is a little child like us. Please don't tell his parents about his mistake." Soon, the other three children joined her plea. I couldn't help being amused at their innocence. After I assured them that I would not complain about Atharva to his parents, the four left.

I was touched by their naiveté and forthrightness. I wondered why it's so easy for us to forgive and forget when we are children. And when exactly do we lose the ability to let go of grudges? Each one of us has a child inside. When we are at our most judgemental and hateful, probably, all we need to do is get in touch with that.

—Jyoti Joglekar, Mumbai

RIPPLES OF CHANGE

I believe only the blessed become teachers and it is this belief that has taken me to remote areas in Jharkhand, to reach out to the rural people, especially children.

My story goes back to 1974, when my husband received a posting in Jharkhand with Tata Steel. Unfamiliar with the world beyond a small town in Kerala, I remained blinkered for eight years, till my children began their schooling. I first qualified as a librarian, and then as a school teacher joined the Kerala Samajam Model School (KSMS). In 2000, I finally became the trustee-director of Kerala Public Schools. What I saw around me were villages terrorised by Naxals and Maoists; children, instead of going to school, were slaving under the hot sun as young food gatherers. I had to reach out.

Over time, along with the KSMS students, we adopted various villages in Jharkhand and initiated vocational training like making candles and incense sticks and organic farming. Next, along with the KSMS management, we opened a school for slum children and pooled our income to provide these malnourished children with free lunches.

All these experiences came together when, in 1995, my dream of running my school as a model came true. We formed the Kerala Public Schools Trust and began running six schools and two tribal residential schools for the government. Starting with 90 slum children, we have taken 5,000 deprived children plus 15,000 regular students under our wing. It was a milestone when our model of educating underprivileged children caught the attention of UNICEF and the World Bank and they urged others



Kartha (right): the true mascot for 'education for all'

to replicate it! But there was still work to be done. We set up eco clubs in all our schools and have been able to ease the acute water crisis in Mango with our rainwater harvesting system. It is with a deep sense of satisfaction that I say that the Kerala Public School (KPS), Mango, has bagged top positions in the Green School Project conducted by the Centre for Science and Environment, consecutively for four years.

I am now 56 and when I look back, I wonder whether any of this would have been possible without the encouragement of my family and friends. I owe them my achievements like the Bharatiya Vidya Bhavan's Sarvothama Acharya Award in 2000; Vijaya Gujral's Award for Best Social Worker in 2002; National Award for teachers in 2008; and the FICCI FLO Award for Outstanding Woman Social Worker in 2009.

—Vijayam Kartha, Jharkhand

SUMMIT OF DREAMS

Since childhood I have always dreamt of paying a visit to Rajasthan. Flipping the pages of history books, I had encountered stories of courage and valour of kings and wanted to see the land that produced and glorified them.

When my daughter told me she was planning a trip to Udaipur and Chittorgarh, I was excited to join her. I didn't want to miss the weekend trip from Delhi where my daughter works, as I stay alone in a suburban area of Kolkata and visit her every few months. I couldn't ignore the hurdles though. Being a 78 year-old woman suffering from osteoarthritis and high blood pressure, I wondered whether I would be able to bear the strain of the journey.

However, my daughter comforted me saying, "Don't take much tension Ma, you will enjoy the journey!" She was right—when I reached Udaipur city station on the morning of 7 April, I was full of energy and anticipation. After freshening up at the hotel, we stepped out on our day-long sojourn. We visited the Rana Pratap Smarak (a huge statue of the valiant king placed atop a hill); enjoyed the view of the beautiful lakes; boated in blue waters dotted with palaces; relaxed at the water park Sahelion ki Bari; went on a buggy ride; and shopped at Hathipole market

for traditional handloom. We also went to see a puppet show and a folk dance at Lok Kala Mandal auditorium in the evening. But my spirited soul hungered for more!

The next morning was the tour of Chittorgarh, the fort town that served as the capital of the erstwhile kingdom of Mewar. Studded with a series of palaces, gates, temples and two prominent commemoration towers, it is the largest fort in India and the tour—mostly on foot—was unforgettable. As our guide mixed history, mythology, legend and dramatics to weave the stories associated with the valour and grandeur of the historical place, I felt transported to the Rajputana era. I had temporarily forgotten about my frail health as I climbed and descended the stairs to see the Meera temple and several other temples besides the holy Gomukh Kund in the fort.

The main attraction and challenge of the day, though, was the Vijay Stambh or Victory Tower, which symbolises Chittor. It was a sight to behold. My companions—my daughter, her friend and her mother—wanted to climb but were hesitant to take me along as I was already visibly tired. I was advised by them not to attempt it, but I wanted to at least give it a try. *Chance pe dance!*

I climbed the dark, steep and narrow staircase and reached the first landing. Someone getting down from the top announced there were 157 steps! The news was enough to make my daughter miss her heartbeat for taking me further. But I climbed a few more steps to reach a considerable height. It was an exhilarating feeling when tourists, all young, saw me there, few mumbling "Aunty ji, what a spirit!" The inside carvings in the tower complemented the outside panoramic view of the entire town and the ruins in the vicinity. As the rest of the flock climbed up, I sat on a marble sill. Though I could not reach the top, I was elated and proud.

I was happy that I had not only enjoyed my time but also learnt a lesson—physical hardship becomes a non-issue if the mind is willing.

—S Dipti Gupta, Kolkata



Gupta with her daughter



Dr Jane

Barratt

Age-friendly practices:

Community, connection, contribution and control

Around the world, populations are rapidly ageing. By 2050, the global population of people aged 60 years and over is expected to reach almost 2 billion, with the proportion of older people doubling between 2006 and 2050. Less-developed countries such as India and China will experience the most dramatic change; by the middle of the 21st century, about 80 per cent of older people will live in what are now low or middle-income countries.

A holistic approach to ageing well requires a focus on wellbeing in its financial, physical, emotional, social and spiritual dimensions. Older people play a crucial role in communities—in paid or volunteering work, transmitting experience and knowledge, or helping their families with caring responsibilities. These contributions can only be ensured if older persons enjoy good health and if societies address their needs.

The Age-Friendly Environments Programme is an international effort by the World Health Organisation (WHO) to address the environmental and social factors that contribute to active and healthy ageing in societies. Making cities age-friendly is one of the most effective policy approaches to respond to demographic ageing.

An 'Age-Friendly City' is an inclusive and accessible urban environment that promotes active ageing. As cities

have the economic and social resources to undertake the necessary changes to become more age-friendly, and are in the position to lead the way for smaller communities, most of WHO's initial work in this area has focused on the urban environment. Cities wishing to become more age-friendly can take part in the WHO Global Network of Age-Friendly Cities®. The network will serve as a mechanism to link cities and ensure that the label 'Age-Friendly City' reflects a common global understanding.

The goals of the network are to...

- Provide support and training
- Link cities to WHO and each other
- Facilitate the exchange of information and best practices
- Ensure that interventions are appropriate, sustainable and cost-effective.

To become a member of the Network, a city must undertake a process of continually assessing and improving its age-friendliness. It is essential that older residents are involved in a meaningful way throughout the process. The city must also complete an application form and submit a letter from the mayor and municipal administration indicating a commitment to undertake the WHO Global Network of Age-Friendly Cities® process. A city that becomes a member of the network is able to use the designation 'Member of the WHO Global Network of Age-Friendly Cities'.

Its membership allows:

- Connection to a global network of ageing experts, including senior officials, programme managers, research-

ers and older people themselves

- Receipt of the latest news and material on Age-Friendly City projects, meetings and events through the 'Community of Practice AFC'
- Guidance on approaches for developing and implementing Age-Friendly City approaches
- Participation in discussions of best practices for implementing and overcoming challenges to building an age-friendly city
- Facilitation of partnerships or collaborative activities between cities
- Dissemination and sharing of project results.

Silvers and age-friendliness: where do they fit?

Harnessing the energy, enthusiasm and expertise of old people is part of age-friendly approach. In 2007, the UK Audit Commission undertook a large-scale study of best practice in older peoples' services in 10 local authorities. It showed that increased awareness, better engagement and innovation could help many older people without significant expenditure.

Best councils adapt mainstream services and work with public and private-sector partners to drive improvements. The study also identified that there are many older people ready to contribute to community life and that local authorities should mobilise this resource. International best practice for older people now identifies that more service interventions should be positioned upstream and enable people to learn about and have time to manage their own conditions. Services should compliment what older people want to continue to do and how they

want to continue to live. Services should tap into naturally occurring responses. The American AdvantAge Initiative framework helps define an approach to age-friendly community by organising interventions into four categories: addressing basic needs; optimising health and wellbeing; promoting social and civic engagement; and supporting independence.

This approach builds on the theme of supporting older people to build on individual, familial and community strengths and find their own solutions to the problems they face. International experience demonstrates that older people in communities have strengths that can be developed to lead to better health and lifestyles. In Aceh, Indonesia, the government is being called upon to make age-friendly community health services a priority. A study by HelpAge International in 2007 positioned older people at the centre of policy changes.

Age-friendly primary healthcare

Age-friendly primary healthcare services should be available, accessible (physically, socially and financially), appropriate (facilities and staff, knowledge, skills and attitudes), affordable (equitably financed), and integrated with other health and social service providers (M Tsao, 2006). Thus, primary healthcare workers need to be sensitised and informed about the various specific needs of older people when providing care in communities.

Community-based healthcare refers to health services, staff, volunteers and facilities located within a community. Community-level healthcare refers to health services provided for—but not necessarily located in—the community (for example, health providers in mobile clinics). In Indonesia, in 2005, people over the age of 60 accounted for 8.4 per cent (18.7 million) of the population. This is the 10th largest older population in the world. In 2004, the Department of Social Welfare estimated that 18.7 per cent of older Indonesians were living

on less than \$ 1 a day. By 2020, an estimated 11.4 per cent of Indonesians (29.2 million) will be older than 60, and by 2040 (a span of three decades) this number will increase to 19.7 per cent (55.5 million)—this is when the



An 'Age-Friendly City' is an inclusive and accessible urban environment that promotes active ageing and leads the way for smaller communities

proportion of Indonesians older than 60 will be larger than the proportion of Indonesians younger than 14.

There is now a strong compatibility between consumer and government goals in the area of supporting people to age well. Both want people to remain as independent as possible, for as long as possible. Services that deliver these will tap into strong consumer demand and receive government funding and support.

The City of Boroondara, Australia, also aims to be an age-friendly city (<http://boroondara.vic.gov.au/>). Boroondara has strong relationships with older community members. Within the municipality there is a broad range of innovative and responsive services

provided by the council, the community and other service providers. In developing a strategy for healthy ageing, the council has sought to build on existing partnerships with services, groups and community members to develop a whole of council approach for Boroondara to become an age-friendly city.

Some of the issues being addressed through the strategy include social isolation—it affects a diverse group of people and the complexity involved in addressing the issue should not be underestimated—and emotional wellbeing, which is directly connected to social wellbeing [depression is strongly associated with perceived social isolation (Hawthorne, 2008)].

Research shows that social isolation among silvers leads to poor health and increased demand for services ranging from home help to institutional care (Bridge, Phibbs, Kendig, Mathews and Bartlett, 2006). Preventative approaches that increase social connections of older people are both beneficial for the individual and cost-effective for the community. Feeling valued by family, friends and community plays a crucial role in ageing well. Research into happiness and wellbeing highlights that 'giving back' is vital to many people's self-esteem (Cattan, White, Bond and Learmouth, 2005).

Increasingly, studies on how to age well conclude that we must remain connected spiritually (in its broad sense) to the things we regard as important. The Mayo Clinic's work on healthy ageing notes that being connected spiritually leads to better health, a longer life and quicker recovery from illness (Mayo, 2002). There are proven strategies that can change the future picture from overburdened health and social systems to older people living longer, more healthily and more productively.

Dr Jane Barratt is Secretary General, International Federation on Ageing

Comfort food

A DELICIOUS LUNCH SERVICE BRINGS CHEER AND DIGNITY TO SENIORS IN THRISSUR, REPORTS **NISARY MAHESH**
PHOTOGRAPHS: **SIVARAM V**

It's a hot, sunny day in April and the mercury continues to climb. But the sweltering heat is no deterrent for a motley group of silvers in Thrissur, Kerala. Hurrying out of the Thrissur Brahmin Sabha at Punkunnam in the heart of the city, they kick-start their two-wheelers and set off on their mission. These elders—volunteers with the Thrissur Brahmin Sabha—are making sure other silvers who live alone get their daily lunch and, in some cases, their independence.

Armed with tiffin boxes packed with hot rice, *rasam*, *sambar*, curd, *papad* and pickle, these volunteers have been doing the rounds for the past 15 months. The service is an initiative of the Brahmin Sabha, which already has 80-odd homes on its delivery list. "We discovered the need for this service in a rather curious and ironic way," says Anantharaman Moorthy, Thrissur district secretary for the Kerala Brahmin Sabha. "When we began constructing our seniors' home in 2008, we noticed that it drew an unusually enthusiastic response. When we dug deeper, we found many seniors had signed up to stay there only because they couldn't cook for themselves."

Loneliness is not new to the elderly in Kerala, and Punkunnam is no excep-

tion. Thanks to a real-estate boom and mushrooming nuclear families in the region, the younger generation is migrating to bigger cities and overseas for lucrative employment. "The experiences we hear are heart-rending," says Ramani Sreenivasan, a retired professor and Sabha volunteer. "Daughters who lock up the kitchen before leaving for work, fearing their parents may have an accident with the stove; widowers who live alone and are unable to open, heat and serve the meals left by their busy children; parents tired of eating refrigerated food; and silvers who have no one and are fed by kind neighbours."

Naturally, the lunch programme was a godsend. It not only brought the elderly home-cooked meals, it also meant they could live alone and with dignity. Volunteers not only deliver lunch, they sometimes serve it to those who have serious mobility problems. Often they even book and get gas cylinders changed and run other errands for the elderly. "We realised we could offer them love and affection and that is very satisfying," says T S Viswanathan Iyer, a volunteer and former regional assistant director with ESI Hospital.

The lunch service, which was Moorthy's brainchild, began as a small-scale initiative at the Sabha's office complex.



As more and more seniors signed up, it was shifted to the senior citizens' home run by the trust nearby. Raising funds was not easy and the money came from the trust's own coffers as well as other members' endowments, pensions and, of course, donations.

Faced with such limitations, the Sabha had to use its resources judiciously. The lunches are prepared by two cooks employed by the



Sabha's empowerment programme. But volunteers were needed to cut vegetables, pack lunches and take care of home delivery. "We were not sure whether it would work but we were surprised to see so many of our senior members volunteering for the cause," beams Moorthy. And, thus, the roster of volunteers keeps growing. Today, retired teachers, bank managers, government employees and businessmen pitch in wholeheartedly. "We deliver

free of cost," explains 71 year-old N S Raman, who once worked with Remington in Kolkata. "The seniors are charged only for the meal, to cover costs. Some, who cannot pay, get their lunches free."

Today, the service has gone beyond its basic mission. It has touched the volunteers themselves, empowering them with a deep sense of empathy. After delivering lunch, many volun-

teers serve the meal with love and affection, wait till it's eaten, clear away the dishes, and leave only after making sure there's a warm smile on the seniors' faces.

N Sreeram, a retired postmaster, recounts a particularly touching experience. "Many youngsters signed up for our service as they themselves were out of the home all day, working, and needed to get lunch for their parents.



Volunteers—Professor Ramani Sreenivasan, N Sreeram, T S Viswanathan Iyyer, N S Sharma and N S Raman—exchange ideas and banter

Some seniors are simply happy to see us as they have no other visitors.”

Volunteer T S Viswanathan Iyyer has a similar story to share. “The daughter of a senior who came to the Brahmin Sabha left with tears of repentance. It was only after she came to us that she realised how lonely her mother was.” And N S Sharma, former manager of the Kerala State Financial Enterprises, voices a bitter home truth when she says, “Many of these seniors cannot be called abandoned but in fact they are.” Take, for instance, the 72 year-old wid-

Volunteers not only deliver lunch, they sometimes serve it to those who have mobility problems. Often they even book and get their gas cylinders changed

ower who receives meals from his son who visits twice a week. “He told us with tears in his eyes that he was tired of eating refrigerated food and was so happy to eat our lunches,” recollects Sharma. The volunteers too have bonded with each other and look for-

ward to meeting at the Brahmin Sabha at 9.15 am every day. After picking up the tiffin in the evening, there’s a lot of banter as they clean up, share a cup of tea and exchange experiences. “We don’t have official meetings,” says T S Balasubramaniam, a retired professor



Volunteers at the Sabha help with chopping vegetables, cooking, packing, and quality control

who is happy to volunteer his time for silvers. “We discuss everything during these informal sessions.” The tiffin service has indeed changed the temper and outlook of the volunteers. Ramani Sreenivasan, who had open-heart surgery, remarks, “It has taken away that gnawing sense of uselessness during retirement.” S Suryanarayanan, a retired professor, agrees: “After I retired, I became gloomy as I suddenly felt useless. I became very short-tempered. Now I am not only busy but feel I am doing something worthwhile.”

The Sabha occasionally prepares snacks and meals for small gatherings at the homes of their members and any surplus money collected from related activities is pumped back into the lunch programme. Members are also brainstorming on innovative ideas and fund-raising. Among the ideas being discussed, one is to widen the programme with a breakfast service for seniors. The new senior citizens’ home is the Sabha’s other priority. This cosy residential facility, which they call “a place to live with pride”, boasts of air-conditioned rooms, tele-

vision, Internet connection, dining hall, prayer hall and proximity to major temples. The Sabha is also building another home at Moorkanikkara in Thrissur. Slated to be complete in two years, it will offer free accommodation, food and medical service. For now, there’s much excitement over the thriving lunch service. A 71 year-old volunteer best sums up the spirit behind the service, as he huffs and puffs his way up to the eighth floor of an apartment as the elevator isn’t working. “Time is so precious; the next senior is waiting.”

Experience

A second childhood

Wouldn't it be great to have a second childhood? To start life afresh? Because at Harmony, a magazine for people above fifty five, we believe that age is in the mind. Which is why, you should live young.

Visit us at : www.harmonyindia.org


celebrate age **harmony**
the magazine

Tea time

ENJOY YOUR EVENING SNACK WITH **DR PUSHPESH PANT'S** QUICK-TO-MAKE RECIPES

Matthi

Flaky, savoury biscuits

Preparation time: 45 minutes

Cooking time: 30 minutes

Yield: 30-35

INGREDIENTS

- Plain, mixed-grain, high-fibre flour: 1 kg
- Cooking oil: 1 cup
- Black peppercorns: 2 tbsp; ground coarsely
- Oil for frying
- Salt: just enough for a salty taste

METHOD

Sift the flour and salt in a bowl. Rub oil in the flour with fingertips. Add pepper and mix well. Gradually, add water and make stiff dough. Divide the dough into 16-18 equal parts. Roll out each ball into a thick disc, about 3 inches in diameter. Prick on one side with a fork. After rolling out all the discs, fry them on low heat. Turn them over. When golden brown, remove and drain excess oil on absorbent paper. Don't overindulge!



FRESH FACT

Wholegrains are rich in magnesium, manganese, B Vitamins and Vitamin E, which help lower the risk of cardiovascular ailments and diabetes.



Dahi Papri Chaat

Crispies dressed with yogurt and relish

Preparation time: 45 minutes to 1 hour

Cooking time: 10-15 minutes

Serves: 6-8

INGREDIENTS FOR PAPRI

- Refined flour (*maida*): 500 gm
- Ghee: 2 tbsp
- Cumin seeds: 1 tsp
- Oil/ghee for frying
- Salt to taste

INGREDIENTS FOR DAHI

- Yogurt: 500 gm
- Red chilly powder: 1tsp
- Cumin seeds: 2-3 tsp
- Sweet *sonth* chutney
- Salt: Just a pinch

METHOD

Whisk the yogurt. Roast cumin seeds and powder. Add sweet *sonth* chutney. To make *papri*, sieve flour and salt together. Add cumin seeds and enough cold water to make stiff dough. Knead thoroughly, blending melted *ghee* into dough. Roll out thinly and cut out circles 1 inch in diameter. Prick *papri* with a fork. Heat ghee in a pan and fry *papri*, few at a time, until golden. Drain and keep aside.

In the yogurt, add cumin and salt to taste. Keep aside. Just before serving, arrange *papri* in a platter; pour seasoned yogurt and *meethi sonth* on top. Sprinkle with powdered, roasted cumin seeds, red chilly flakes and *chaat masala*.



FRESH FACT

Yogurt is packed with protein and calcium. It eases digestion by virtue of its high lactobacteria content, which also facilitates absorption of minerals and synthesis of Vitamin B. Apply it to your face for an instant glow.



Adrak Nimboo Ka Sherbet

Ginger lemonade sherbet

Preparation time: 20 minutes

Serves: 8-10

INGREDIENTS

- Fresh ginger: 300 gm
- Sugar-free sweetener: 250 gm
- Juice of 12 limes

METHOD

Wash, scrape and grind ginger to a thick paste. Bring 2 cups of water to boil in a pan. Add sweetener and stir. Pour in the lime juice and keep stirring. Add ginger paste and mix the concoction well. Dilute with water before serving.

FRESH FACT

Ginger originated in the Middle East, where it is known as *zan-zabil*. It is used as a stimulant and a carminative and is favoured in home remedies across the world to treat dyspepsia, cough and cold.



flexible strategies

In August 2007, *Harmony* ran a cover feature on joint replacement technology and its potential to revolutionise the treatment of arthritis. Three years on, with easy availability of minimally invasive procedures and sophisticated implants, more silvers are exchanging pain and immobility for enhanced quality of life. An update by **Anjana Jha** and **Swati Amar**

Though its incidence increases with age, arthritis is an ailment that can strike anyone, anywhere, at any time. Literally meaning joint inflammation, arthritis includes over 100 rheumatic conditions, with osteoarthritis and rheumatoid arthritis being the most common. Some are extremely debilitating; if left untreated, they can result in life-threatening complications.

Until about two decades ago, patients of osteoarthritis and rheumatoid arthritis suffered for years before considering surgery. Not only was the procedure prohibitively expensive, quality of implants, lengthy post-operative recovery period and risk factors served as major deterrents.

But times are changing. Take the case of Kiran Modashia in Bharuch. In the past two years, the 57 year-old, who suffers from rheumatoid arthritis, underwent corrective surgeries in both feet for deformity in her toes. She had barely resumed her routine when the disease attacked her left hip. She discovered that the cartilage had deteriorated extensively, leaving no gap between the ball and socket in her hipbone. A total hip replacement on the left side was the only solution.

Unfortunately, her right hip is now beginning to show signs of degeneration but Modashia is ready to face this new challenge with confidence. Still conscientious about her daily 30-minute walk, she acknowledges that hip replacement has empowered her to lead a fairly normal life.

UNDERSTANDING OUR JOINTS

The key players in joint replacement are joints—the ends of two or more bones connected by a tissue called cartilage. Serving as a protective cushion, cartilage allows smooth movement of the joint. If it is damaged, tissues around the joint become inflamed. More pain is caused when cartilage wears out and rough edges of bones rub against each other. In the hip joint, a layer of cartilage allows the ball of the thigh bone (femoral head) to move smoothly within the hollow socket (acetabulum) of the pelvis. The knee joint, the largest in the body, is formed where the lower part of the thigh bone (femur) joins the upper part of the shin bone (tibia) and the kneecap (patella). Shock-absorbing cartilage covers the surfaces where the three bones touch.

When only a part of the joint is damaged, a surgeon may repair or replace





just the damaged part. But when the entire joint is damaged, total hip or knee replacement is done by removing the diseased or damaged parts and inserting artificial parts called prostheses or implants. Osteoarthritis is the most common reason for hip or knee replacement. This degenerative joint disease, marked by breakdown of the joint's cartilage, can be caused by excess weight, joint fracture, ligament tear, or injury. In rheumatoid arthritis, inflammation of the joint lining damages bone and cartilage. Loss of bone caused by poor blood supply (avascular necrosis) and bone tumours are other reasons for osteoarthritis and consequent joint replacement.

A road accident in 1959 left Arati Matilal with a fractured pelvis. She recovered from her injuries but suffered occasional pain that increased over the years; osteoarthritis was diagnosed in 1982. By the time she was 50, walking and standing became unbearable. She underwent an alignment procedure on both knees in 1992 at Howrah Orthopaedic Hospital in Kolkata. Joint replacement was not common then and her surgeon Dr M S Ghosh informed her that the effects would last a decade. He was proven correct and knee replacement became critical only in 2008 when she was 66 years old. She was operated upon by Dr J P Jain at Jaggivan Ram Hospital in Mumbai and now leads a normal life in Delhi.

"With improving longevity, more and more seniors are seeking long-term solutions for their joint problems," says Dr Suryanarayan P, consultant orthopaedics and joint replacement surgeon at Apollo Hospitals in Chennai and president of the Indian Society of Hip and Knee Surgeons. "The field of orthopaedics is increasingly becoming sophisticated in terms of procedures, instruments and prostheses."

THE SURGICAL OPTION

"Joint replacement surgery has been around since the 1980s," says Dr Nilen Shah, consultant orthopaedic

and knee surgeon, Bombay Hospital in Mumbai. "During the initial years, only the hip joint was replaced for end-stage arthritis and sequelae [consequence] of trauma. Awareness about knee replacement began to rise about a decade ago."

Pioneering the mini-invasive subvastus technique in 2005, Dr Shah has carried out around 1,300 knee replacements by this method so far. "The quadriceps splitting parapatellar approach [where an incision is made in the quadriceps muscles] used earlier provided a good exposure of the knee but resulted in painful and delayed recovery," he explains. "However, the mini-invasive subvastus technique [which involves a four-inch cut on the side of the knee to implant an artificial metal joint, without touching key muscles and tendons] is difficult and all surgeons are still not following it."

"The past three years have witnessed a change in technology, material and approach," says Dr Ashok Rajgopal, chairman of Medanta Bone and Joint Institute, Medicity, Gurgaon. "The saga of minimally invasive surgery has been revisited. Sensibility has now prevailed in the understanding of minimally invasive knee replacement. The surgeon has reconciled to the fact that we need to use incisions that allow for adequate exposure, good visibility and optimal cementing. A large number of failures seen with small incision surgeries ensured that all these techniques were consigned to the archives." This is because manoeuvrability is essential.

However, according to Dr Raj Chakravarty, head of department and consultant (orthopaedics) at Manipal Hospital in Bengaluru, minimally invasive techniques are the order of the day. "They are cosmetically effective and cause minimum blood and tissue loss. Instruments have become smaller and computer-aided surgeries have resulted in better practices. Only the techniques need skill and expertise or else the results would be drastic."

"Joint replacement is growing in popularity," says Dr Niraj L Vora, consultant orthopaedic joint replacement and trauma surgeon at Kokilaben Dhirubhai Ambani Hospital, Mumbai. "The incidence of knee arthritis is quite high among Indians and knee replacement surgery is now as routine as a tonsil or appendix operation. About 4,000 joint replacements are done in Mumbai annually. Hip arthritis is relatively uncommon but treatment for it is also joint replacement. In fact, total hip replacements have been around longer than knee replacements."

Sharing some statistics, Dr Gurinder Bedi, senior consultant-orthopedics,

about **30,000**
replacement surgeries
done annually, when
the need is
20 times more

Fortis Hospital in Delhi, says, "Around 90 per cent of joint replacement surgeries in India are performed on the knee and 10 per cent on the hip. New implants offer greater choice. In fact, most surgeons prefer imported implants." Agreeing with Dr Bedi, Dr J P Jain, head of the orthopaedics and joint replacement centre at Jagjivan Ram Hospital in Mumbai, adds, "The price difference between Indian and imported implants is narrowing considerably. Implants are an integral part of joint replacement and no compromises should be made." Dr Shah puts the ratio of imported to Indian joints at around 9:1.

THEN AND NOW

Earlier, implants were made of plastic on metal. Metal on metal and ceramic on ceramic implants are now being used for their better shelf life. With newer biomaterials entering the arena

MANDAKINI BHAGWATI, 69
Ahmedabad



For former state-level badminton player and businessperson Mandakini Bhagwati, fitness is a way of life. In December 2007, while on a treadmill, she experienced discomfort and slight pain on the left side of the hip and back. Astute enough not to dismiss it, she underwent an X-ray and learnt that the ball in the left side of her hip was degenerating. Her brother-in-law, neurosurgeon Dr S N Bhagwati, told her to consult Dr Javahir Pachore who advised hip replacement surgery. However, she delayed the decision and remained on painkillers.

Business entailed frequent travelling; but soon, the mounting pain made it difficult for her to climb the aircraft steps. After a battery of preliminary tests, Dr Pachore performed surgery on her left hip in June 2008. She was allowed to walk a little on the fourth day and discharged from the hospital after 10 days. Bhagwati was cautioned against sitting on the floor and going out for at least three weeks. Recovering steadily, she could soon move around independently with the help of a stick. She often went out to the garden, but it was four months before she ventured out of her home to resume work at the family-owned manufacturing company. She also resumed her activities at Sarwar Mandal, a social service organisation for the poor.

Finally back to her old routine, Bhagwati has included a stationary bicycle in her exercise regime; she also walks 20 minutes every day. She suffers no pain and has conquered her fear of hip replacement surgery. She even encourages friends who require similar surgeries. "There is nothing to worry about," she says with a smile. "You have to be completely free from pain to perform all your activities properly. And that is what I did—I conquered pain."

—Swati Amar



of implants, cross-linked polyethylene (a polymer resin used in synthetic fibres) prostheses are also available.

“Earlier, we only performed hip replacements where a metal ball touched a plastic liner,” says Dr S K S Marya, chairman, orthopaedics and joint replacement department at Max Healthcare in Delhi. “Now hip replacements allow us to put metal ball against metal liner or metal ball against more durable plastic. The availability of advanced materials, such as titanium and ceramic prostheses, and new plastic joint liners with highly cross-linked polyethylene, provides orthopaedic surgeons with options that may help increase longevity of the prosthesis.”

According to Dr Bedi, implants coated with hydroxyapatite (an inorganic calcium) have many benefits. Integrating rapidly into the human body, the hydroxyapatite will bond to bone, forming indistinguishable unions. “The renewed interest in the use of ceramic as a bearing surface in hip replacement is owing to a better understanding of its superior resistance,” says Dr Vora.

“The earlier joints were universal, not separate for left or right,” says Dr C J Thakkar, Joint Masters and consultant joint replacement surgeon at Lilavati Hospital & Breach Candy Hospital, Mumbai. “The rotating platform high flexion knees give greater range of movement and with the use of computer navigation for surgery, alignment, size selection and ligament balancing can be done with far greater precision. We are looking to increase longevity so patients are not required to undergo surgery again during his or her lifetime.”

“The advent of high flexion implants has significantly increased the number of people opting for this procedure,” says Dr Vora. “These allow up to 150° of knee flexion [standard flex knee implants usually provide up to 120° flexion] in patients who are regular with post-operative exercises.”

COST-WISE*

Implants

Indigenous knee implants	Rs 45,000 to Rs 50,000
Imported knee implants	Rs 65,000 to Rs 80,000
Hip implants	Rs 40,000 to Rs 160,000

Procedures

Cemented knee replacement surgery	Rs 200,000 to Rs 300,000
Uncemented knee replacement surgery	Rs 325,000 to Rs 400,000
Cemented hip replacement surgery	Rs 200,000 to Rs 250,000
Uncemented hip replacement surgery	Rs 300,000 to Rs 400,000
Hip resurfacing surgery	Rs 300,000 to Rs 350,000

**All rates are indicative*

Dr Marya adds that though there was a movement towards high flexion knee for all, the implant has been increasingly seen as beneficial only when used in appropriate indications.

150° knee flexion

is possible with the new, flexible implants

Joint replacement procedures can be either cemented or uncemented. “In cemented replacement, the socket and stem components are held in place using acrylic bone cement,” says Dr Hemant Wakankar, joint replacement surgeon at Deenanath Mangeshkar Hospital, Pune. “While this procedure is advisable for patients above the age of 65, younger patients are advised to opt for uncemented replacement.” In an uncemented procedure, the components are specially designed so that the joints either press into the bone for a tight fit (press-fit) or allow new bone to grow into the porous surface of the implant and hold it in place (biological fixation). “Uncemented systems for hip replacements are gaining popularity despite higher cost as they do away with the potential complications associated with the use of bone cement in traditional hip replacements,” says Dr Vora. Further, uncemented knee implants have a surface topography conducive to at-

tracting new bone growth. Most are textured or coated so that the new bone actually grows into the surface of the implant—early results have been encouraging.

“Hip resurfacing is another procedure where only the arthritic cartilage is taken away and a new surface of metal is applied,” he adds. In this sophisticated technique, resurfacing prosthetic designs allow the femoral head to be preserved and reshaped and not replaced. The resurfaced bone is then capped with a metal prosthesis. “The focus today is to preserve as much bone as possible,” says Dr Chakravarty. “Artificial joints last for a definitive period and preserving the bone becomes an overriding issue for revision surgeries.”

According Dr Rajgopal, there is far greater acceptance of joint replacement by patients at large. Trepidation has reduced considerably as surgeons can now give examples of patients who underwent replacement years ago. “Patients I operated upon even 20 years ago are still doing well,” he says. “As surgeons do more primaries, revision surgeries will happen in future,” adds Dr Suryanarayan pragmatically. “Revision surgeries [that require the old prosthesis to be removed] are more complex, expensive and need more expertise. Bone loss, infection, older age and morbidity make joint replacement more complicated. In Apollo Chennai, about 30-35 per cent of surgeries are revision surgeries of cases done in the 1980s and

Women are different and so are their knees

Knee replacements have been a highly successful surgery for more than 30 years. There are more than half a million people who undergo Knee replacement surgery. Out of them 70% patients are women and that number continues to grow. For the first time, there is a knee implant designed especially for women. The new Gender Solutions Knee is the first and only knee replacement shaped to fit Women.

Women and men are different in many respects, including their knees. Traditional knee replacements are sized and shaped to fit an average of men's and women's knees. As more and more women have knee replacement surgery, it's become apparent that traditional knee replacements, while highly successful in alleviating pain, may not feel or move like your natural knee. Studies show that Woman knees tends to be narrower than a man's and their hips are wider. The Gender Solutions Knee is designed to accommodate those differences and is the only knee replacement shaped to fit a woman's anatomy.



**"Everybody should go for surgery,
rather than suffering from pain"**

Mrs. Pushpa Bhargava, 70 yrs

**Individual results depend on many factors,
such as patients' physical condition, activity
level, body weight etc.**



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KRISHNA BAI IYER, 76

Chennai



Wife of a merchant navy officer, Krishna Bai Iyer continues to involve herself in social welfare activities—something she did wherever her husband's postings took them. It was in Chennai, where they settled after retirement, that dull pain in her left knee first troubled her in 1996. Doctors at the Military Hospital (MH) detected degeneration of the knee joint. Medicines were prescribed to stop further degeneration and exercises advised. The possibility of future surgery was indicated. Blaming her hypothyroidism for hastening the development of osteoarthritis, she made lifestyle changes—balanced diet, yoga, walking and exercises—that helped defer surgery by a decade.

However, the knee pain kept increasing till she reached a point when it became unbearable and interfered with her regular activities. Referred to Dr Suryanarayan at Apollo Chennai by MH doctors, she underwent total knee replacement surgery in her left leg in August 2006; it cost Rs 300,000. She was made to walk the day after surgery but asked to be careful for the next three weeks. Exercising frequently was also advised. Three months later, she walked more than 3 km in Sandakan forest when she joined her daughter's family for a holiday in Malaysia.

Her right knee is now giving Iyer trouble but *pranayama* and exercising both legs are helping to keep another knee replacement surgery at bay. "Deep breathing exercises and physiotherapy keep me pain-free most of the time," she says. A 40-minute walk is part of her daily routine. Cooking and taking care of her home keep her busy. Fruits and vegetables comprise her primary diet and she doesn't consume fried foods. Continuing her long-standing habit of raising funds for social causes, she recently persuaded a donor to renovate the kitchen at the Cancer Institute, Adyar. "The improvement in the quality of my life energises me to erase the pain and sufferings of others."

—Swati Amar



V Ramesh

I chose to lead a normal life again. Why don't you?



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The small things in life delight me. Simple pleasures like playing with grandchildren, going for a healthy morning walk and cooking for the family. Till a few years back I did it all.

With age, arthritis started hurting my knees and the smallest movement became painful. Initially I managed with conservative treatment, until it became severe. I led a compromised life, till I met a Joint Replacement Specialist and on his advice decided to undergo Joint Replacement. Today I play daily with my granddaughter in the park and lead a normal life. I am independent, once again.

If you are suffering from knee or hip pain due to arthritis, you need not suffer in silence anymore.

Joint Replacement is one of the many options for arthritis treatment. It may not be suitable for all, so consult a Joint Replacement Specialist to know what's right for you.

*Call toll free (10 am-6 pm), Monday to Saturday.



DER NA KAREIN



**Arthritis
Foundation
India Trust**

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INDRAJIT DESAI, 59
Mumbai



Early last year, everyday activities like walking, sitting and standing for long started to become difficult for Indrajit Desai. Added to the misery was acute, persistent pain in the hips. "I tried to ignore the stiffness and pain I suffered while changing sitting and standing positions," says Desai, who used to swim and take part in athletics extensively in his younger days. "However, within four or five months, walking became really difficult and I had to use crutches." He decided to go in for tests; MRI and X-ray reports revealed extensive deterioration in both hips. The left hip joint had eroded about 80-90 per cent; the right hip between 60 and 70 per cent. When he consulted Dr Niraj Vora at Kokilaben Dhirubhai Ambani Hospital, he learnt that he suffered from osteoarthritis and needed bilateral hip replacement surgery to save his hips. "I was petrified as I never had any major ailment in my life," he recalls.

Desai underwent bilateral hip replacement, which required surgery on both hips. In June 2009, the left hip was operated first while the second surgery was performed after a gap of six days. "The doctors have put a titanium metal ball on the original hip joint that moves 360°, making mobility easy." Though he had to take it easy for the next two months, he began moving around the house, initially using a stick. Physiotherapy and walking helped him increase muscle flexibility and walk normally.

Today, he can walk at a brisk pace—and is also pain-free. "I just ensure that I don't sit on the floor, and I use a chair with a minimum height of 1½-2 ft and a western toilet. I also have to be careful about falling." Back at work six months after surgery, he travels to his workplace in suburban Bhayandar by bus every day.

—Dhanya Nair Sankar

Vilas Kalgutkar



1990s. Though these have been done primarily to overcome debility, deformity and pain, surgeons are able to restore a high degree of functional activities today."

THE PROCEDURE

Dr Suryanarayan explains that in total hip replacement, the ball of the joint is cut, replaced and attached to a stem wedged into a hollowed-out space in the thigh bone. Damaged cartilage and bone are removed from the socket and a cup-like component is inserted.

Depending on the nature and extent of the arthritis and other patient-related factors, knee replacement could be total or partial.

Simultaneous bilateral knee replacements can be carried out in a select group of patients who are otherwise fit and well. In total knee replacement, damaged parts of the thigh bone, shin bone and kneecap are removed, while ends of the remaining bones are smoothed and reshaped to accommodate the prostheses. The artificial knee is typically held in place with bone cement. According to Dr Vora, "Knee replacement usually involves four days of hospital stay. Recovery depends on the patient's health and age, but many people can resume normal life within four to eight weeks of surgery."

POST-OPERATIVE CARE

"Choose quality of life and age gracefully," advises Dr Shekhar Agarwal, executive director and joint replacement surgeon at Delhi Institute of Trauma and Orthopaedics, Sant Parmanand Hospital, Delhi. "It's safer than crossing the road, and there is no age bar for joint replacement surgery if the person is healthy. I have a patient who is 90 years old."

Infection is a possible post-surgical complication but the risk is less than 1 per cent in a good hospital. Deep vein thrombosis (clotting of blood in the legs) is another risk factor but the odds of a blood clot travelling to the heart or lungs are less than one in a 1,000. The risk of fracture or hip dislocation is 1-2 per cent. According to Dr Agarwal, one can take precautions to prevent such complications. Besides starting early exercises to prevent deep vein thrombosis, stockings are prescribed and foot pumps are used to massage legs. Blood thinners also help prevent clotting. Moderate speed walking, climbing stairs, gentle tennis and swimming help tone muscles, but hardcore aerobics or yoga should be avoided. "Just like your car, taking care will ensure that your joint lasts longer," quips Agarwal.

RECENT ADVANCES

"With the use of computers, the accuracy of placing the new knee is much higher, and therefore the joint can be expected to function better and last longer," says Dr Vora. According to Dr Marya, minimally invasive surgery means less trauma and faster recovery. "A technology called iFit™ uses design to convert CT and MRI scans into individualised, minimally invasive articular resurfacing systems for the knee," he says. According to Dr Chakravarty, bigger size of the head of implants has resulted in less dislocation of the ball and socket joint in hip replacement surgeries.

Pain management has also improved dramatically. "Oxinium [oxidised zirconium] is a new material used for knee joints," says Dr Suryanarayan. This combines abrasion resistance and low friction of ceramic with the toughness of metal. "Though some consider polyethylene implants old-fashioned, they are time-tested and probably 40 per cent cheaper than conventional implants."

According to Dr Chakravarty of Manipal Hospital in Bengaluru, mobile bearings are becoming popular by

the day. "In earlier bearings, the plastic would remain fixed on the upper end of the metal plate. It was believed that as the knees only bend backward and sideways, mobile bearings were not essential. However, besides providing a greater degree of knee rotation, they are stronger and not prone to intense wear and tear." A favourable advancement in knee design is in sizing. "With manufacturers giving more size options for knee joints—size 1, 1.5, 2, 2.5 and 3—the fit is better," says Dr Suryanarayan. "Robotic knee replacement surgery is another new modality on the anvil," informs Dr Marya. "A robotic assistant called Acrobot could improve surgical outcomes for patients undergoing partial or total knee replacement. It works by helping the surgeon align replaced knee parts with existing bones. Robodoc is another robotic system being used for hip and knee replacement surgeries."

THE MARKET

Powered by the growing number of silvers, the demand has induced manufacturers to introduce new products that minimise prosthetic wear, enhance biocompatibility and simplify surgical procedures. A report from Medical Insight, publisher of global market studies, envisages that the global joint reconstruction market will contribute 45 per cent of the overall orthopaedic devices market value by 2012. The substantial increase in joint replacement surgeries has resulted in the orthopaedic implant market becoming competitive. Despite the presence of some indigenous manufactures, three companies—Zimmer, Stryker and DePuy—have emerged as dominant players in the field.

"We have strived to make technologically superior devices available in India almost at the same time at which they are being introduced in the developed world," says

FAQs

DR HEMANT WAKANKAR,
JOINT REPLACEMENT SURGEON
AT DEENANATH MANGESHKAR
HOSPITAL, PUNE, ANSWERS
SOME QUESTIONS:

Why is joint replacement surgery performed?

When the cartilage cushioning the joints completely wears out, the bones rub against each other causing pain. A replacement procedure is performed to implant an artificial joint in its place.

What causes joint deterioration?

Joint deterioration is part of the ageing process. Over the years, the daily stress on joints causes wear and tear till it reaches a point when deterioration is beyond recovery.

When does surgery become essential?

The key words are 'quality of life'. Joint replacement becomes vital when it becomes increasingly difficult for a person to carry out activities of daily living.

Is there any age limit?

Chronological age is not important; medical fitness is the real issue. I have operated on a patient who is 90 years old. If the person has no major health problems, joint replacement can be performed at any age. Of course, hospital infrastructure should be good.

Can a person with diabetes, high blood pressure or cardiac problems undergo joint replacement?

Like any surgery—even coronary bypass—a person with diabetes, high blood pressure or cardiac disorders can undergo joint replacement under medical supervision. Diabetes or blood pressure level has to be controlled before any surgery.

UMA PANT, 68

Lucknow



Sociable and active, Uma Pant learnt how to swim and drive when she was in her 40s. Her daily schedule included 3 km of fast walking. However, one day in 1995, she suddenly couldn't climb the stairs, an incident that traumatised her. "I was diagnosed with osteoarthritis and began physiotherapy and exercises immediately," she recalls. Her usual dose of calcium was increased and Vitamin D prescribed. She even bought a stationary cycle to exercise at home. "But my condition gradually deteriorated to a point when getting up from the sofa or standing for more than three minutes at a time was excruciatingly painful. I became increasingly inactive and gained almost 15 kg."

On the advice of her family physician Dr S P Kharey, she travelled to Mumbai in September 2009 and consulted Dr J P Jain at Jagjivan Ram Hospital. After looking at her X-ray report, total knee replacement surgery was scheduled

for November. Following her doctor's instructions, she managed to lose 6 kg. First, her right knee was operated upon. On the third day, she was made to wear braces and walk with the help of a walker. By the time she could walk comfortably—which was one week—the second knee surgery was done.

Exercises started on the third day after surgery—lifting the leg 45° and bending the foot. She gradually resumed climbing stairs and her half-hour daily walks. "I was advised to exercise at least twice a day," she shares. "I would do the 30-45 minute exercises as often as possible. And within three months of surgery, I was driving again." Her surgeon is understandably delighted with her progress. Instead of the accepted international standard of 110° after a replacement, her knees can bend 125°.

Now, the self-appointed family chauffeur is busy planning a visit to the US next month; it's a trip to celebrate her husband's 80th birthday with their children who are settled there. With her new set of knees, she's just raring to go.

—Anjana Jha



Ajay Kumar Singh

Sanjay Banerjee, managing director, Zimmer India Pvt Ltd. Besides minimally invasive solutions, Zimmer has the Gender Solutions Knee designed specifically to fit a woman's anatomy.

According to Kaushik Ray, head of strategic alliances and communications, Stryker India Pvt Ltd, "Stryker is the only maker of single radius design that flexes, extends and even rotates slightly, from a constant centred point." The Scorpio NRG Knee is claimed to not only offer the greatest range of motion but also conserve bone and increase implant longevity.

Joining the Johnson & Johnson fold, DePuy is another global leader in devices for joint replacement and trauma. While Pinnacle Hip Solutions provides a more fluid range of movement, DePuy offers a wide range of high-function and wear-resistant to-

tal knee replacement implants. "Our PFC Sigma knee implants have a rich clinical heritage and have enjoyed the trust of surgeons over the years," says Anil Nayak, director-corporate communications, Johnson & Johnson Ltd.

KEEPING TRACK

"In India, the number of replacements performed last year ranges between 25,000 and 40,000," says Dr Javahir Pachore, director of hip surgery at Shalby Hospital, Ahmedabad, and president of Indian Society of Hip and Knee Surgeons (ISHKS). "The current trend indicates that in about five years, the need will be for nearly 100,000 knee and 75,000 hip surgeries." To see which products are working best, there is an urgent need for a database that monitors procedures and results. "The ISHKS set up a registry for the first time in India in 2006," Dr Pachore informs us. The

idea behind the registry is to create a record of the procedures, implants and demographic details of patients who have undergone joint replacement. A follow-up of the implants used by Indian surgeons will help establish which ones are effective in terms of longevity. This database will help reduce the number of revision surgeries that have been increasing at an alarming rate.

"There are many claims but the proof will become evident only after 20 years of use," adds Dr Suryanarayan. "New materials and designs have not been validated by clinical experience. Success will have to be consistent in all patients who have had the implants. At this point it may be advisable for such implants to be performed by more experienced surgeons and introduced gradually to others with proper training and understanding."

promotion

Total hip replacement and total knee replacement in one sitting

Total hip and knee replacement is a well-established treatment for severe arthritis where the bone rubs on bone and causes pain and deformity. Arthritis is a leading cause of disability across the world. In India, as the number of people above 60 rises, they form a big pool of patients where arthritis is a predominant cause of musculoskeletal disability.

There are many causes of arthritis. Osteoarthritis is due to age-related wear and tear of joints which can be accelerated by heavy stress on the joints. Arthritis occurring after traumatic fractures of the joint is common in India due to road accidents. Rheumatoid arthritis is also a major cause of arthritis and disability and can involve many joints.

Rheumatoid arthritis (RA) is dysfunction in the autoimmune mechanism of the body where the synovial lining of the joint gets inflamed and attacks the lining cartilage of the joint. Hence there is swelling and deformities in late stages of arthritis. If untreated, the joints can get fused due to adhesions and this severely limits mobility. Pain is severe; as a result, the patient is incapacitated and loses independence.

When all measures fail, joint replacement surgery is indicated. In this procedure, the worn out lining surfaces of the joint are replaced with metal which has a polyethylene spacer in between to allow easy gliding without friction. This alleviates pain and allows better mobility.

Arthritis can simultaneously affect both hip and knee joints together. In such cases, simultaneous single-sitting bilateral joint replacement surgery can be performed by an experienced surgeon supported by an efficient team in a well-equipped hospital with good operating theatre infrastructure. Sometimes arthritis can affect the joints on the same side of the body. For instance, the right hip and right knee may be arthritic. In such situations, the joint above should be replaced first. Thus a hip replacement would take priority. This can be then followed by knee replacement.

Replacing the same side hip and knee is not common. However, Dr Kiran Kharat performed Pune's first such surgery where a 51 year-old patient underwent single-sitting, same-sided hip and knee replacement at Aditya Birla Memorial Hospital.


Dr Kharat says, "Mr Rajesh had severe pain in the right hip and knee which did not respond to painkillers and anti-inflammatory medication. He was also on steroids, but the pain and deformity increased over time and his mobility was severely restricted. Walking even for short distances was not possible. Pain was of equal severity in the right hip and right knee. Replacing the hip only would have hampered his postoperative rehabilitation, as his knee had severe pain and flexion deformity. It was decided, therefore, to proceed with hip replacement, followed by knee replacement under the same anesthetic."

According to Dr Kharat, joint replacement surgery is a boon for such patients. It is important that surgery be performed in a well-equipped hospital with good rehabilitation services. It is also imperative to have a good anesthetic team who can give a combination of epidural and spinal anesthesia. The patient was conscious throughout the procedure and even had sips of water in the recovery bay after the five-hour procedure. Moreover, because of the epidural the patient had a painless post-operative recovery period and this allowed early mobilisation.

He went home on the 8th postoperative day and had his stitches removed on the 14th day. He is walking with the help of a walker independently and without pain! He is now looking forward to have his left knee replaced soon.



— Dr Kiran Kharat is director and senior consultant, department of arthritis and joint replacement surgery, Aditya Birla Memorial Hospital, Chinchwad, Pune, Ruby Hall Clinic, Pune-1



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JOINT REPLACEMENT SERVICES AT SIR GANGA RAM HOSPITAL, NEW DELHI

With a highly experienced team of surgeons, Sir Ganga Ram Hospital's (SGRH) state-of-the-art Joint Replacement Centre undertakes over 500 surgeries annually. Though joint replacement has become common and is carried out across the country, the unique technical knowhow developed by the team at SGRH has taken the procedure to a different level. Joint replacement at SGRH has shown excellent results in knee, hip, shoulder and elbow replacements. The team routinely performs surface replacements in relatively young patients as well.

Knee arthroplasty: This is meant for cases where quality of life is affected due to instability of the joint following degenerative osteoarthritis of the knee or osteoarthritis secondary to trauma, gout, psoriasis etc. The total knee joint is replaced with an artificial joint with metal and polyethylene components. While the cemented procedure involves prostheses fixed with bone cement, the uncemented variant is coated for effective bonding with the bone. Many types of knee implants are available on the market; however, the hyper flex types provide better movement. About 30 per cent of arthroplasty undertaken at SGRH are revision surgeries, where the implants have failed because of or mal-alignment or septic or aseptic reasons. To reconstruct this joint, bone grafting is mandatory—for this, SGRH has a bone bank facility in place.

Unicondylar joint replacement: In this procedure only the medial or lateral half of the knee joint is replaced. This procedure is done in early stage of arthritis of knee where only one compartment is involved.

Total hip replacement (THR): This procedure is performed to improve the quality of life for those with painful hip joints following degenerative osteoarthritis; osteoarthritis secondary to rheumatoid arthritis, trauma; and ankylosing spondylosis. THR is done using artificial prostheses, made of metal and polyethylene components.

Bipolar hemi-arthroplasty: Only the femoral prosthesis is inserted; no prosthesis is fitted to acetabulum. This procedure is done in fractured neck of femur in elderly patients.

Minimally invasive surgery and minimal injury surgery: With more and more patients demanding minimal scar surgery, minimal invasive surgery is also being applied in hip and knee replacement. Prof. Nagi envisaged this possibility about two decades ago. He has developed his own concept of minimal injury surgery, a unique modification of the conventional anterolateral approach to the hip, and also devised some special instruments for refinement of the technique. His technique involves reaching the hip joint without any muscle damage. He has also developed the innovative capsule suturing technique by which successful hip replacement can be done in patients with low muscle power like in cases of polio or paralysis. The blood loss during operation is negligible and there is minimal post-operative pain. Patients start walking on the first day after surgery and leave the hospital within a week. The team under the guidance of Prof. Nagi has conducted more than 1,500 surgeries. They are regularly invited to other countries to teach and demonstrate.



Professor O N Nagi, senior consultant- orthopedics, is one of the leading joint replacement surgeons in India. He did his post-graduation in orthopedics at Oxford University. He worked as Professor and head of department-orthopedics and Joint Replacement Unit at PGI Chandigarh for over 18 years, before joining Sir Ganga Ram Hospital in 2005. Prof. Nagi's MIS technique has been recognised worldwide and video clips of this technique are used to teach students of orthopedics. With wide experience in joint replacement surgery, he has performed more than 10,000 joint replacements. Dr Nagi has been performing revision surgeries for more than a decade. At present, one-third of the arthroplasty done at SGRH by Dr Nagi are revision arthroplasty.



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Dr Anjali

Mukerjee

Simply Summer: Don't suffer this season; follow *Harmony's* guidelines to battle the heat

I suffer from listlessness and fatigue during summer. My energy levels seem perpetually low and I feel dehydrated despite drinking sufficient water. My skin also breaks out in prickly heat rash causing a lot of discomfort. Please suggest a diet that will help alleviate these problems.

During the summer months, perspiration helps the body cool down and maintain normal temperature. As hard work is required to maintain this internal balance, a person feels tired and fatigued. Elderly persons are more prone to the ill-effects of summer heat as mechanisms to regulate body temperature become less efficient with the years. Further, they tend to be on medication for various illnesses and the heat can spell serious trouble unless care is taken. Prolonged exposure to sweltering heat without replenishing the body with adequate fluids can lead to heat stroke. Initially, the person experiences muscle cramps followed by dizziness and palpitation.

Summer-related problems depend upon individual tolerance level. Skin infections like prickly heat, boils and rashes in areas like armpits, groin and joints owing to heat and humidity are fairly common.

Upper respiratory infections, including sore throat, fever, breathlessness, cold and tonsillitis, are also common.

Gastrointestinal infections like diarrhoea, nausea and loss of appetite are experienced by a few individuals.



Chilled water provides temporary relief but nothing beats the goodness of foods that act as natural coolers.

Coconut water (*nariyal pani*) is the all-natural and undisputed king of oral rehydration. Dabbing it on the skin can prevent prickly heat.

One cannot drink water all day and eating **fluid-dense foods** like watermelon, muskmelon, cucumber, oranges and grapes is the next best thing. Besides keeping the stomach full, they prevent acidity and skin eruptions.

Sabza (*falooda*) used in popular sherbets and desserts is very effective in reducing body heat. Although tasteless, a tablespoon of the black seeds added to fresh

juice, rose sherbet, fresh lime drink, cold milk or even *kulfi* gives another textural dimension to these regular cold treats.

Panna is an amazing raw mango drink ideal for expelling body heat and preventing heat stroke and diarrhoea.

Common **spices** like poppy seeds (*khus khus*), fennel (*saunf*) and saffron added to sherbets, salads or lemonades create refreshing coolers.

In Ayurveda, **raisins** hold a special place for healing a range of *pitta* problems and cooling the system. Soaked black raisins consumed with an equal mixture of milk and water are particularly beneficial. Compared to milk, **curd** is easier to digest and helps maintain **water** levels of the body. It is equally beneficial in the form of *chhas*

Elderly persons are prone to ill-effects of summer heat as mechanisms to regulate body temperature become less efficient with age. Prolonged exposure to heat without replenishing the body with fluids can lead to heat stroke. Initially, the person experiences muscle cramps, dizziness and palpitation.

or *lassi*. Exceeding the recommended eight to 10 glasses of water daily helps in staying hydrated. Opt for *matka*-cooled rather than fridge water.

If **water** is not a favourite choice, drink fresh fruit **juice**, **buttermilk**, **jal jeera** or water flavoured with mint leaves or rose water. Thirst is a poor indicator of water requirement. Drink about one to two glasses of water every two waking hours.

Light dinner is good for digestion, especially for silvers whose metabolism is sluggish. Start the meal with a light soup, followed by a cup of vegetables and chapatti with sprouts, curd, *dal* or *paneer*.

Small meals eaten through the day keep energy levels going without feeling worn out, tired or fatigued.

To maximise the benefits of cooling foods:

- Cut down on foods that contain caffeine such as coffee, tea and energy drinks. They can cause general toxicity, palpitation and high blood pressure, and decreased bone density.
- Reduce intake of spicy and oily foods that aggravate heat stroke symptoms and lead to prickly heat rashes. They are drying foods and nullify the effect of water.
- Avoid alcohol in any form. It aggravates symptoms of heat and makes the body lose water through excessive urination.
- Avoid chilled beverages, colas, ice creams, slushes and *gola*. They douse the digestive capacity of the body and slow the metabolism. The outcome is heartburn, weight gain, pimples and poor bowel movement.

Nutritionist Dr Anjali Mukerjee is the founder of Health Total, a nutrition counselling centre
Website: www.health-total.com



WEIGHT WATCH

DR JOE LEWIS ANSWERS YOUR QUESTIONS ON DIET, WEIGHT AND EXERCISE

Q I was overweight, so I went on a crash diet and lost about 10 kg. However, instead of feeling energetic and active, I feel more tired and lethargic. How can I keep my weight down and yet feel fitter?

A Weight loss methods like crash diets, induced water loss through thermal wraps and spot reductions are unscientific and unsafe. While visible consequences include fatigue, loss of skin tone and dark circles, the unseen ones are more dangerous. Rapid weight loss from crash diets can lead to formation of gallstones. Evidence suggests that very low calorie diets also lead to hair loss.

To lose weight sensibly, meal plans should not be less than 1,200 calories for women or 1,400 for men. Lower calorie diets result in fatigue and listlessness. What's worse, semi-starvation diets slow down metabolism and rate of weight loss leading to health complications.

Another popular misconception is that diet can reduce weight without exercise. In fact, absence of exercise is the precise reason for feeling listless and lethargic, and for loose skin and a hollow look. Loss of subcutaneous fat (fat below the skin) without improvement in muscle mass through exercise causes loss of skin tone. A good exercise programme of 20-30 minutes every day improves strength, flexibility and endurance, giving you energy, health and confidence. A loss of more than 1-2 kg per week indicates loss of lean body mass accompanied by water loss.

Reducing weight in a sensible manner necessitates burning about 3,800 calories (or about 500-600 calories a day) to lose half a kg of fat. To maintain a healthy diet and good metabolic rate, you should not aim for higher calorie reduction. To remain healthy and energetic, make sure you lose weight sensibly.



Dr Joe Lewis is head of research and development at Kaya Life, a chain of professional weight-control centres (SMS Life to 54646)



If you have a question for Dr Mukerjee or Dr Lewis, write to contact.mag@harmonyindia.org



Shameem

Akthar

Natural manicure: Yoga tackles the root causes of brittle nails

Brittle nails are more than a cosmetic problem. Unless triggered by obvious causes like the constant use of hands in chores where nails are wet or cut, brittle nails may well be a red alert to unnoticed medical conditions. These include malnutrition, malabsorption, overreaction to stress, hypothyroidism, breathing problems and skin diseases. If the cause is established, a yoga programme can be drawn up to deal with the specific trigger. However, even a general yoga programme can be therapeutic in all the above symptoms.

Forward bends like the seated forward bend (*paschimottasana*), hare pose (*shashankasana*) and the psychic union pose (yoga *mudra*) are helpful in skin problems. For hypothyroidism, victory breath (*ujjayi pranayama*) and

psychic union gesture (*viparita karani mudra*) are effective while the sun salutation series works for endocrine problems. Calming and grounding forward bends and balancing poses like the one-legged tree (*vrkasana*) and crescent (*ardha chandrasana*) soothe away stress. And for breathing problems, the prayer pose (*pranamasana*) and breathing practices (*pranayama*) like the skull-cleanser (*kapalabhati*) and alternate nostril breathing (*anulom vilom*) are curative. Further, the stress-gut-endocrine link wields a powerful influence on our well-being and should not be overlooked. This way, the main culprit—stress—can be tackled through a regular and grounding practice that includes short meditation like sleep of yoga (yoga *nidra*) or belly breathing (*apanasana*) that also facilitates healing.

YOGIC MOVES

Lying warrior pose (*supta vajrasana*)

Sit on your knees so your big toes are touching, heels flared. Keep knees close together. If you are new to the pose, you can keep them apart and place a bolster or large cushion where your head is likely to touch when you lie back. (Such props can be dispensed with once your body gets used to the pose and becomes more

flexible.) Now, prop your elbows, one at a time, on the ground. Using elbow support, lie back gently. Fold hands as shown, to grasp the opposite elbow with each hand, so the crossed lower hands cushion the head. Or place hands straight out behind the head, bringing palms together in a *namaste* gesture. Keep the back arched and off the ground, as shown. Close your eyes, holding the pose as long as you can. Relax to sit back up, using elbows to prop yourself up into the

starting position. Avoid if you have a knee problem or suffer from extreme stiffness. This pose requires that you already have a regular yoga practice.

Benefits: The powerful stretch along the torso has a toning effect on the gut, which is rejuvenated back to youthfulness and more efficient digestion, absorption and metabolism. This pose reduces fat by helping move food faster through the gut and is extremely relaxing as it provides a complete body stretch.



Haresh Patel

Shameem Akthar is a Mumbai-based yoga acharya



If you have any queries for her, mail us or email at contact.mag@harmonyindia.org
(Please consult your physician before following advice given here)



Gimme YELLOW

Curcumin—the substance responsible for the yellow colour of turmeric—has been used for centuries to treat gastrointestinal ailments in Ayurvedic medicine. Studies in the past have found it to be an effective antioxidant with anti-inflammatory qualities. Now, researchers from the US and Austria have revealed that **curcumin may decelerate the progress of liver disease**. In a new study published in medical journal *Gut*, experts have written about how progressive inflammation caused chronic liver conditions such as primary sclerosing cholangitis and primary biliary cirrhosis. These diseases cause the small bile ducts in the liver to become inflamed, scarred and blocked. Permanent damage to the tissues can lead to liver cirrhosis. After comparing blood samples of mice with chronic liver inflammation before and after the addition of curcumin to food for

about four to eight weeks, fewer blockages of the bile duct were seen with less scarring and damage to liver cells. Mice on a normal diet did not reveal these changes.

“Curcumin is known to have anti-inflammatory, antioxidant, antifungal, antibacterial and anticancer properties,” Dr Ashish Kumar, associate professor, department of hepatology, Institute of Liver and Biliary Sciences in Delhi, affirms to *Harmony*. “Its ability to inhibit several factors like nuclear factor-kappa-B, which plays a key role in regulating the immune response to infection, provides a rational molecular basis for use in liver disorders. Curcumin attenuates liver injury induced by alcohol, iron overdose, sub-chronic and chronic carbon tetrachloride (CCl₄) (an organic compound) intoxication among others, and reverses CCl₄ cirrhosis to some extent.”

Stability PAYS



Contrary to the present belief that occasional high readings of blood pressure do not require treatment, **variability of blood pressure is a strong predictor of stroke, heart failure, angina and myocardial infarction, irrespective of the mean blood pressure.** Recent findings by researchers in the UK and Sweden have revealed the importance of proper diagnosis and treatment of high blood pressure to facilitate prevention of stroke and cardiovascular complications. According to them, a reading of high blood pressure once in a while should not be ignored and the patient should monitor it regularly to ensure that the level is not repeatedly high. Episodic hypertension or occasional high readings carry a high risk of stroke as rapid fluctuations can cause violent flow of blood, which can stiffen and damage arteries. “With the years, the mechanisms become less effective and result in rapid blood pressure fluctuations,” Dr Sameer Shrivastava, associate director, non-invasive cardiology at Delhi’s Escorts Heart Institute and Research Centre, explains to *Harmony*. “Any reading showing fluctuation beyond permissible limits should be treated as a warning signal.”

IMMUNOTHERAPY

The use of **dendritic (immune system regulatory) cells holds the promise of secondary prevention of cancer.** In this unique procedure, devised by Noida-based Institute of Cellular Therapies (ICT), mononuclear cells from a patient’s blood are processed and transformed into cancer-fighting dendritic cells before being re-infused back into the patient. Optimally activating the immune system, the therapy targets cancer cells without affecting other cells around the cancerous part of the body. As the patient’s own cells are transformed into cancer-fighting cells, this customised treatment has minimal side-effects and effectively controls micrometastases—the phenomenon through which cancer cells are disseminated in various organs of the body. After its success with cancer patients in India, the therapy—Denvax—is now being exported to Malaysia. “Dendritic cell therapy is a targeted add-on treatment for cancer patients,” Dr Jamal A Khan, director of ICT, tells *Harmony*. “It helps revive failed immune surveillance and teaches the immune system to recognise and kill cancerous cells. Safe and effective, the therapy delays the progression of cancer to other parts of the body and reduces the chance of relapse. ICT is now exporting the Denvax therapy to Malaysia’s National Cancer Institute so it can customise treatment for individual cancer patients, which will be monitored by its own oncologists. The Malaysian Ministry of Biotechnology has also asked us to set up a clinical base to conduct research in this field.”

In addition to the Rs 39.75 billion approved earlier under the Pradhan Mantri Swasthya Suraksha Yojana, **the Cabinet has approved an additional amount of Rs 93.07 billion to set up six medical institutions in Bhopal, Raipur, Bhubaneswar, Patna, Jodhpur and Rishikesh—these have been designed on the lines of the All India Institute of Medical Sciences (AIIMS) in New Delhi.**

HEART CONNECT

CHRONIC KIDNEY DISEASE (CKD) can lead to total renal failure, besides being a potential cause of hypertension, anaemia, acidosis (excessive acidity of body fluids), cholesterol, and bone disease. Data compiled by the National Chronic Kidney Disease Registry (NKDR) shows that **96 per cent of kidney patients develop cardiovascular complications.**

According to NKDR, cardiac problems increase with the progression of the disease. While a little over 3 per cent of patients in initial stages of CKD developed heart problems, figures reveal that 19.7 per cent suffer from heart problems in the third stage of the disease, 28.7 per cent in the fourth stage and 48.5 per cent in the

last stage. "With the progression of kidney disease, cardiac problems also increase and by the time the patients reach dialysis stage, it is seen that 75 per cent of them have an evidence of heart failure," Amit Gupta, professor of nephrology at Sanjay Gandhi Postgraduate Institute of Medical Sciences in Lucknow (SGPGIMS) and president of the Indian Society of Nephrology, tells *Harmony*. "The situation works in reverse too. Patients with cardiac problems have heightened risk of developing kidney ailments as blood supply is compromised, eventually affecting all parts of the body including kidneys."

India's first specialised Department of Interventional Neurology was recently inaugurated at Max Hospital in Saket, New Delhi. The department boasts a core team of doctors using the most advanced neuro-interventional techniques in the Asia-Pacific region. Launched with an investment of Rs 50 million, the department provides a 20-bed facility, including a nine-bed intensive care unit.



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Implantologist
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Q1. Today, in the field of dentistry, there are many options available to replace a missing tooth. So why should I choose an implant over other options?

When missing teeth are replaced with implants, the adjacent teeth do not need to be trimmed to support the crowns. Also, with the help of dental implants people who have multiple missing teeth do not need to make do with removable dentures. The third and the most important reason is that with dental implants the bone is preserved.

Q2. I am a 72 year-old patient with no teeth. My local dentist has advised not to go for dental implants. I have heard much praise for implants and therefore I am contemplating visiting a hospital. What are the advantages of going to a hospital instead?

Dental implants done in a hospital ensure greater safety, as hospitals are fully equipped to deal with any medical emergency that may arise. The available infrastructure allows the dental surgeon to deliver care of the highest quality. Besides, hospitals have all the diagnostic facilities under one roof—this saves the patient's time.

Q3. I have read about minimal invasive dentistry, Is it better?

Minimal invasive surgery for dental implants with the help of Nobel Guide permits the dental surgeon to place implants with greater precision and accuracy. Then, Nobel Biocare can produce a surgical template so that the entire surgery can be done without separating the gums. This facilitates minimum post-operative pain and swelling; it also facilitates faster healing of affected area. In some clinical situations, a temporary prosthesis can be fabricated and fitted immediately after the implant is placed. This helps avoid second visitation.

Q4. Why have you decided to use Nobel Biocare implants in your hospital?

At Kokilaben Dhirubhai Ambani Hospital, all the equipment is state-of-the-art. Nobel Biocare was our obvious choice when it came to dental implants. Nobel Biocare is the pioneer in manufacturing dental implants. They have been in the business since 1965. Their implants have been designed and manufactured after extensive research and development. Implants from Nobel Biocare are used across the world.

Finding a balance

Equality is the only truth that finally prevails, insists **Frank L Hammer**

Inequity, the product of undeveloped minds, has filled the world with untold sorrow and suffering. It has brought penury, poverty, privation, destitution, hunger, distress and anguish to millions of people, whose daily life is a crucifixion and a martyrdom of a struggle for existence. For this is an age of avaricious rapacity and sordid covetousness; an age of hypocrisy and commercial traffic, where the great ambition of men and nations is to try to overreach and rob the other half. Human life has no more sanctity than that of insects. Wholesale slaughter has become the outstanding profession, and wholesale killers the outstanding personalities.

Yet, strangely, there are those who believe such an order of life is worthy of perpetuation. Recently, a short-sighted editorialist in his defence of this system opined: "What will happen to the institutions for the poor, if the rich, through excessive and unjust taxation, will no longer be able to contribute to their maintenance?" We ask: "Why not abolish them by eradicating their cause? Why are these monuments of man's degradation of man necessary or even tolerable?"

There is something radically wrong with a civilisation that measures a man's equality by the size of his pocketbook. We can have no ideal society or better world until men are governed by brotherly love instead of selfishness and greed. Just as Nature's ways are equal, so must become the ways of men. Most men are beginning to doubt that God created this world and everything in it for the private property and the enjoyment of a few,



Who ever achieved lasting fame because he monopolised the world's money?

but to be equally shared by all. And, in the new order dawning upon the horizon, man will have to do something more besides accumulate wealth to be an object of respect and admiration.

Service will be the future badge of distinction. Contributing to the enlightenment and enrichment of other lives will be the hallmark of greatness. Cooperation and not competition will prevail. The heartless desire to outsmart the other fellow exists only on the earth plane where material things are concerned. Nor is there any competition in spiritual things where service to humanity is involved. When two men love the same gold mine or oil well, entirely different feelings

ensue, and it has not been unknown for one of them to dispatch the other into eternity.

The world's masterpieces of literature, art, science and music were not created through the force of competition. It was the love of the work the artist was doing, or the desire to benefit humanity. Milton, Dante, Shakespeare, Emerson, Plato, Wagner, Brahms, Beethoven, Michelangelo and a host of other great men were not trying to compete, and whether or not they accumulated wealth was a matter of minor concern. We know some of them died in poverty and yet, today, are immortal. Who ever achieved lasting fame because he monopolised a large portion of the world's money? Who ever heard of a scientist discovering a cure for a dread disease or alleviation of pain and then locking it in a vault? They give them to the world and share them with all humanity. They know that what benefits one benefits all, for all the human race is one large family indissolubly linked together.

While the greatest of contests is life, the greatest of clarifiers is death, for on the threshold of eternity all men realise that equality is a law of Divine Justice. King and subject, prince and peasant, high and low, rich and poor, stand before the same tribunal and are judged according to their intrinsic worth and the service they rendered on earth. Rank, position, power and possessions count for naught; only spiritual riches enter the kingdom of God. For equality, like all natural laws, is constant, uniform and universal, and cannot be abrogated or suspended during earthly existence.

Excerpt from Life and Its Mysteries by Frank L Hammer (Dorrance Publishing Company Inc; 1945). Hammer was an American author inspired by New Thought, a spiritual movement based on metaphysical beliefs that developed in the US in the late 19th century

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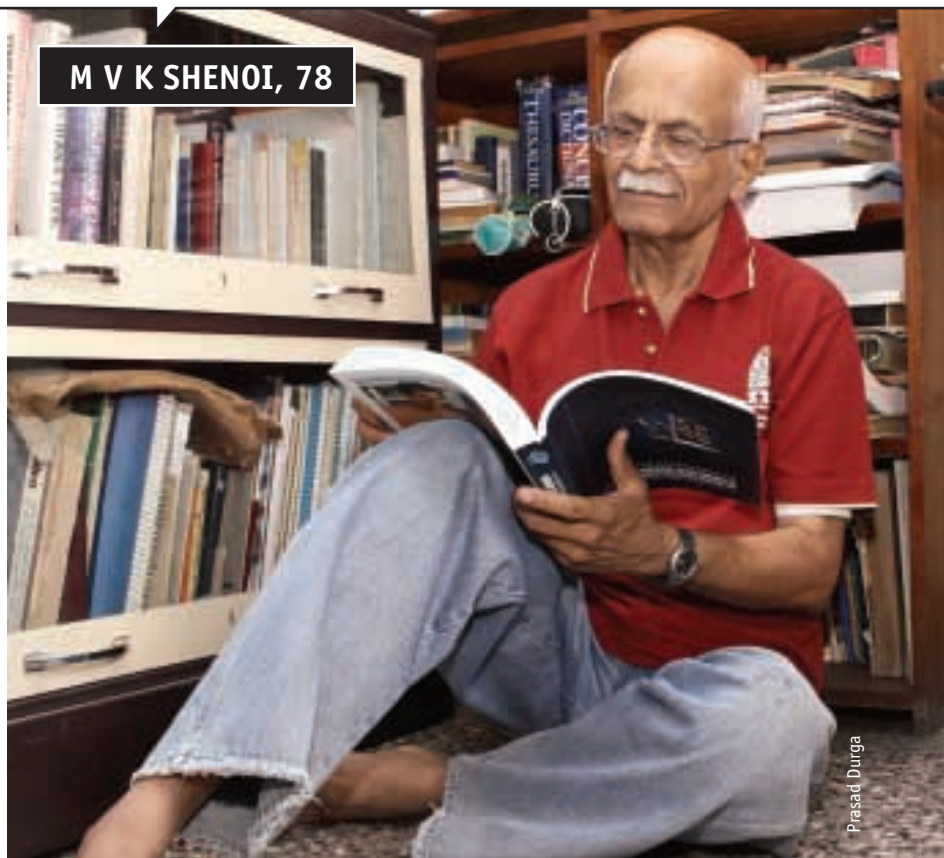
“I want unskilled labourers to be a skilled workforce.”

Urbane PLANNER

The field of urban planning always fascinated me. A civil engineer with an MBA degree from IIM-Ahmedabad, I retired as deputy director-general of works at the Indian Defence Service of Engineers in 1986. As an advisory board member of the Housing and Urban Development Corporation Ltd in 1976-77, I counselled on low-cost and energy-efficient construction, loan procurement, and other policy matters. Being in the advisory panel of the Navi Mumbai planning team from 1971-75 was another opportunity.

The plight of construction workers always bothered me. Besides being given no training or equipment, they are deprived of basic benefits like provident fund and health safety. Together with two of my colleagues in the defence services—S Anantnarayan (65) and brigadier C N S Murthy (73), both engineers—we formed an informal group called Sambhav. We had firsthand experience of overseeing civil engineering projects and maintenance work—from jetties to airfields and factories—for the Army, Navy and Air Force. We knew that the ordinary masons, carpenters and plumbers had very little knowledge even though they were the ones responsible for the foundation of buildings.

By 1991, we started employment-oriented programmes. Guidance and vocational training are imparted to unskilled masons, partially skilled carpenters and plumbers. Architects and military engineers are invited to work with us. Construction experts from



Prasad Durga

abroad are also roped in at times. One regular is Peter Hogenbirk, a Dutch entrepreneur from a family of carpenters specialising in bamboo carpentry. About 30-40 hours a month are reserved for teaching this skill.

It has not been smooth sailing. In this industry, developers and contractors often take advantage of migrant labourers. Persuading them that skilled workers would help complete projects in time with fewer losses was a real challenge. We have worked with NGOs like India Development Centre in Dharwad, Archana Women's Centre in Kottayam and Socio Economic Unit Foundation in Kerala. Corporate houses also approach us for training—we have trained labourers from Grasim Cement on how to use

cement effectively. By endeavouring to increase awareness, we have transformed a large section of unskilled workers into a skilled workforce. In the past three years, around 8,000 workers have been trained.

I write articles on housing, urban settlement, infrastructure, project and facility management for magazines like *The Masterbuilder* (Chennai) and *Real Estate* (Bengaluru). I contribute regularly to Bengaluru editions of *The Times of India* and *Deccan Herald*. I have also written a construction manual: *Trainers Manual for Masons*. What I earn may not be commensurate to my earlier income, but enabling others to earn a better livelihood more than compensates for it.

—As told to Dhanya Nair Sankar

TAILOR-MADE

EXPERTS ANSWER YOUR QUERIES AND CONCERNS ON JOBS AFTER RETIREMENT

I always enjoyed stitching clothes for myself and my family. I would like to start a tailoring unit at home. How should I go about it?

Tailoring is one of the easiest ways a homemaker can earn an income. The investment is low; a good sewing machine is the most expensive purchase required. Usha automatic zig zag sewing machines come for about Rs 18,000. Lightweight, with a built-in motor, they make it easy to do embroidery, picot, over-edging, blind stitch, stretch stitch, etc. If power cuts are frequent in your area, you could invest in an inverter. You will need to buy rulers, chalk, measuring tape, canvas, scissors, pattern books, hangers and an iron, and stock up on threads, buttons and hooks. To advertise, you could put a board outside your balcony or notices in your building. Word of mouth will also bring in customers. Be realistic when you give a date for delivery. Though you should decide the tailoring rates for regular *salwar kameez* and blouse, you could charge extra for fancy neck or sleeve patterns and clothes with lining. You can also take orders for stitching sari falls. During the festival season, you may need an assistant if you take in more orders.

—Chandrika Parmar

Mumbai-based Parmar has run a tailoring business from home for several years



In the past 30 years as a bank manager, I often freelanced for Hindi newspapers and magazines. I opted for VRS recently and plan to start a Hindi periodical in Patna. Please tell me how to get started.

Download and submit an application form for title verification, giving four or five proposed names for your publication to the Registrar of Newspapers for India (RNI), New Delhi. Once the title is approved, obtain a licence number from the District Magistrate's office. After you send a copy of the first issue with photocopies of title verification and allotted licence number, the RNI office will issue an RNI number. You can apply for postal concession through the Chief Postmaster General of your area. Unless you have your own premises, office space has to be rented to accommodate editorial staff—reporter, subeditor, designer. Investment for computers, printer and furniture is also involved. You will need to invest at least Rs 100,000 to bring out a fortnightly journal in Hindi. Printing an eight-page tabloid in a city like Patna will cost Rs 10,000 for 2,000 copies. Costs increase with colour pages. You can cut manpower costs by hiring freelance writers and subscribing to a news agency. Plan at least two issues in advance. Market-

ing your product well can earn you good advertisement revenue.

—Suresh Nautiyal

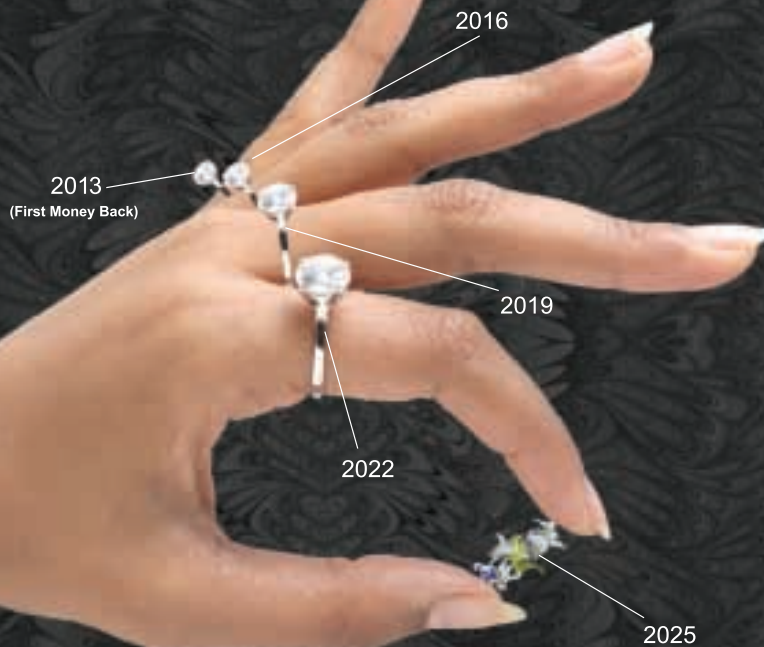
Delhi-based Nautiyal is senior associate editor of Combat Law and editor of Uttarakhand Prabhat, a Hindi fortnightly

I retired as general manager (finance) from a vehicle manufacturing company. Now I would like to be a guest lecturer in a private management institute. Do you think it is feasible?

To join a management institute of repute, candidates must have the necessary qualifications in management, particularly in the relevant discipline. A knack for teaching is an important requirement. You have to develop the correct method of lecturing, though you can be given proper training by the institute you join. Besides being technically sound and possessing in-depth knowledge of the subject, it is essential to be a good communicator. An approachable attitude is vital. You should also be willing to help job aspirants with preparations for placement interviews and group discussions. Considering your background and hands-on experience, your ability to give a real picture of the corporate sector to students would be valuable. The possibility of being appointed as guest faculty would depend on the requirements of the institute and whether it has any provision for such positions. However, teaching staff in private MBA institutes are mostly on a contractual, part-time basis. This increases the likelihood of a teaching schedule being worked out mutually.

—Ashu Jain

Jain is senior faculty head at MBA-Guru, Delhi, which offers educational services to B-school aspirants



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My uncle is in critical condition in a hospital in Mumbai. His incapacitation prevents him from signing cheques or withdrawing money from the ATM to pay his mounting medical bills. What can he do?

With no immediate family to look after financial and legal affairs, this case presents an exclusive predicament for older people, though it can affect anyone irrespective of age. Two factors affect the possible solutions. One is trustworthiness of any other person who may be involved in any legal process that is designed to prevent such a predicament; and legal enforceability of the process in the eventuality of incapacitation/fatality of the 'Person' concerned. The first factor is resolved if there is someone who is considered trustworthy by the 'Person'. Such a person may be a blood relative or friend or any other person who can be contacted easily and execute the process to release the necessary funds. Two solutions are provided by legal experts, though in this case, unfortunately, nothing can be done.

Solution 1: Joint signatory to bank account

The trusted person's name can be included in the Person's bank account that holds the necessary funds for payment in case of an emergency. The bank can be given instructions about the details of the circumstances under which the trusted person can withdraw funds or sign cheques on behalf of the 'Person'. These legal steps will ensure that the person using the funds is genuine and that there is no misuse of the funds. Here are the essentials of the 'Agreement' to ensure appropriate implementation of the process:

- Appropriate choice of a trustworthy person to act on behalf of the 'Person'.
- Written details of circumstances under which funds should be released.
- Written details of the steps that will verify the circumstances for release of funds.
- Appropriate authority (e.g. Branch Manager of the bank where the account is held) to carry out the instructions on the bank's behalf.
- Appropriate and attested identification documents of the trusted person.



- Express instructions that the funds be released directly to the third party (for example, the hospital where the 'Person' is admitted for medical care). Subject to restrictions and conditions to ensure proper use, funds in cash may be released from the bank account to the trusted person to fulfil petty cash obligations.
- Bank's consent and approval of the process and its willingness to act as required. The rights and duties of the bank and its acting authority should be specified in writing.
- The trusted person's consent should also be duly recorded in writing and filed with the other documents with the bank.

All these matters may be effectively dealt with through a legal agreement with the chosen bank and the trusted person. This arrangement would act in the form of a **conditional joint account operation**. This arrangement could effectively solve the problem. There is only one issue that needs clarification: consent of the bank as required by this arrangement. While there is nothing in the law to forbid such an arrangement, there are no provisions to support such an arrangement either. As such, the arrangement would have to be governed by a very basic law like the Contracts' Act 1972.

Next month, Solution 2

This article has been written by Prachi V Manekar, a Bombay High Court advocate

Etcetera

»»»» C culture

C ART

Aerosol ART

A business is not always about profits and numbers; sometimes it can inspire breathtaking art. If you find that hard to believe, meet businessman Sunil Gogia. After being a distributor of spray paint cans for the past eight years, Gogia discovered the many creative possibilities of the product he was selling one day. "Last year, as I was testing out the application of spray paint on various surfaces while doing some R&D for the cans, I unwittingly started expressing my artistic urges on canvas, paper and metal," says Gogia. In just a couple of months, the gregarious 62 year-old ended up painting a series of landscapes, portraits and abstract art using just the aerosol can and some household tools. Encouraged by his family, he put up his first solo show at Palm Beach Galleria in Navi Mumbai in August 2009 where he also performed a live spray painting demo. Last month, Gogia exhibited a fresh series of paintings at his residence in Deonar. Though there are not many artists pursuing aerosolgrafia in India, Gogia enjoys his exclusive status. His works can be viewed on his blog: www.sunilgogia.com or www.sunilgogia.blogspot.com

Courtesy: Sunil Gogia



Varma's WORLD

THOUGH THE PEACH-SKINNED VOLUPTUOUS WOMEN of his paintings still leave us entranced a hundred years after he first immortalised them on canvas, Raja Ravi Varma's life, artistic spirit and the ethos of his times have never been examined in such minutiae as Rupika Chawla's extravagant book *Raja Ravi Varma: Painter of Colonial India* (Mapin; Rs 3,950; 360 pages) does. The book is replete with personal notes, newspaper clippings from the era, letters, period photographs, court records, and anecdotes supplied by his patrons and friends. Light in tone, yet scholarly in terms of the research that went behind it, the book cannot be dismissed as just another book on yet another great artist. Read it to discover the artistic spirit that drove Varma, and the politics and culture that shaped him into a legend.



SCORING THE BLUES

In resuscitating traditional blue pottery, Leela Bordia has transformed the fortunes of a village in Rajasthan, reports Arati Rajan Menon

According to African wisdom, it takes a village to raise a child. In a dusty hamlet 50 km from Jaipur, it has taken one woman to raise a village. A drive through Kotjewar reveals signs of prosperity—cement houses, the sounds of televisions blaring, a sturdy schoolhouse—juxtaposed against the crumbling mud houses and narrow alleyways of the past, preserved almost as a badge of pride to show how far this village has come.

The key to Kotjewar's progress is the exquisite blue pottery it produces; it was unlocked by 60 year-old Leela Bordia. Over the years, Bordia has

established eight pottery units in this village of about 1,000 people. She comes here regularly, sitting comfortably cross-legged amid the artisans, sharing their lives, and her ideas. The collaboration has resulted in an array of products: door knobs, beads, candles, incense stick stands, bathroom fittings, lanterns, coasters, napkin holders, perfume bottles and decanters along with a variety of tiles, lamps, coffee tables and tableware. And this fine merchandise has not just set cash registers ringing across India and overseas, it has kept the home fires of Kotjewar burning strong and proud. "This is all Baiji's doing," says Lala Ram, a 50-something artisan





THE PROCESS

Blue pottery is made out of ground quartz. The dough is pressed into moulds and the unfired pieces are hand-painted with oxide colours, dipped in clear glaze and fired once in wooden kilns. The process is tedious and time-consuming. Once made, the items cannot be reworked. One can never be sure if the finished product will have the exact shade expected. The smallest mistake could lead to the piece either cracking or turning black.

lage to return to the time-honoured tradition that was further honed by Bordia's computer-generated modern designs and quality control mechanisms. Finally, in 1992, Neerja International 'adopted' Kotjewar—it assists the villagers with educational and medical help, life insurance and support for widows.

"In the process of saving a craft, we have saved the craftspeople and their families," says Bordia with pride. "We never thought of it as a business but a mission." Her entire family is part of this mission. While her husband joined the company soon after she launched it, looking after the financials, her daughter Aparna is an integral part of the business today. Son Apurva runs Neerja Software, which also chips in by training young artisans in design tools to improve their product lines.

Bordia turned grandmother this January but she insists the arrival of Myra will not slow her down! "The job is still 24/7 for me," she says. Apart from her continuing crusade to improve the quality and aesthetic appeal of the pottery, Bordia takes one-hour sessions with schoolchildren in Jaipur on craft traditions and is writing a book on blue pottery. "We must preserve our cultural identity and originality," she affirms. "I can't retire from that!"

who was at the vanguard of Kotjewar's transformation. "She taught us how to support our families while keeping our heritage alive."

Raised in Kolkata, Leela Bordia moved to Jaipur in 1974 following her marriage to her husband Kamal, an engineer who was in the construction business. Following a stint as a Montessori teacher, she began social welfare work in villages around Jaipur when she chanced upon traditional blue pottery, which was languishing as there were few takers for the rudimentary vases and bowls and repetitive designs. Bordia saw in the art a greater potential to bring about sustainable change. "I didn't want to give people handouts," she says. "I wanted

them to stay in their village and work rather than struggle in the city." She managed to persuade one artisan—Lala Ram—to swim against the tide, while herself completing a one-month course in pottery technique and design from the US.

It was enough. In 1980, Bordia launched Neerja International (named after her sister). Her creativity came together seamlessly with the traditional expertise of Lala Ram's family to produce the company's first batch of blue pottery beads, knobs and curios. "I put in the capital and assured them I would buy everything they made," she recalls. "It was a win-win situation for them." The success of Lala Ram's family emboldened others in the vil-

Smita

Forgotten VOICES

C NOSTALGIA

Once the reigning celebrities of the Indian musical era, the women singers of India—or the *gaanewaaalis* and *baijis* as they were popularly known—are hardly remembered or spoken of now. Theirs were the voices that made a significant contribution to Indian art, music, literature, theatre and films in the early 20th century. Some of them grew up in the bylanes of the courtesans' *mo-halla* to become singing sensations of the 78 rpm gramophone era.

To bring back the histories of these incredible women artistes in a more contemporary interpretation, an exhibition, *Women on Record: Celebrating the Music of Women in the Early 20th Century*, was held at the Indira Gandhi National Centre for Arts in New Delhi in April. The 15-day event chronicled the involvement of the singers with

78 rpm vinyl records through a series of collages, texts, archival prints and photographs.

Put together by photographer Parthiv Shah and his classical musician wife Vidya, the textual references at the exhibition estimated the number of records issued in India over the past 100 years at about half a million—a large corpus of which remains unheard of and inaccessible. Between 1902 and 1910, the Gramophone Company had recorded more than 2,000 songs in Bengali, Parsi, Gujarati, Urdu and Marathi. However, the production of 78 rpm records was halted during the 1970s and now most of them are collector's items.

Scholars spoke about singers like Janki Bai, Binodini Dasi, Chunni Bai, Angurbala, Begum Akhtar, Allahrakshi, Zohrabai Agrewali and Jaddan Bai (mother of actress Nargis). Among the many anecdotes that made the rounds at the event, one of the most delightful was that of Janki Bai; her talent once drew her audience to shower 14,000 coins on her. Her skill even earned her 56 knife scars from a supposedly jealous rival, which got her the title of '*Chhappan Chhuri*'. One was also awed to know that some voices linger not just in our memories but also in space—Kesar Bai Kerkar was the only artist from India whose voice was sent to space by NASA in 1977.

—Neha Bhatnagar



TEXTILE TEARS



WOULD MUMBAI BE MUMBAI WITHOUT THOSE MILLIONS OF TIRELESS MILL-WORKERS WHO CONTRIBUTED TO THE MAKING OF ITS COLOURFUL SOCIAL FABRIC? *LALBAUG PAREL*, A MARATHI MOVIE DIRECTED BY ACTOR-FILMMAKER MAHESH MANJREKAR, HIT SCREENS ALL ACROSS MAHARASHTRA ON 9 APRIL. THE MOVIE IS BASED ON THE 1982 MILL-WORKERS' STRIKE—LED BY TRADE UNION LEADER DATTA SAMANT—THAT BROUGHT OVER 50 TEXTILE MILLS IN MUMBAI TO A GRINDING HALT AND LEFT 250,000 WORKERS ADRIFT. THE PREMIERE OF THE MOVIE WAS ATTENDED BY SCORES OF

MILL-WORKERS, MANY WHO CAME AWAY FROM THEATRES OVERWHELMED AND EMOTIONAL AFTER THE SCREENING. THOUGH THE VOICE OF PROTEST OF THOUSANDS OF MILL-WORKERS HAS FADED WITH THE PASSAGE OF TIME, THERE WAS ONE AMONG THEM WHOSE WAIL WAS FINALLY HEARD—JAYANT PAWAR, WHO SCRIPTED THE STORY, IS A FORMER MILL-WORKER.



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The Artist & 'I'

He has been called the 'Thinking Actor of Bengali Cinema' but has exhibited supreme artistry in both critically acclaimed and commercial films. And despite a half-century innings on stage and celluloid, age has dimmed neither his enthusiasm nor energy. **Partho Mukerjee** and **Priyanka Mukerjee** ask Soumitra Chatterjee to share the secret of his boundless energy. Photographs by **Shilbhadra Datta**

Raised in a family where idealism and a taste for the best in culture went hand in hand, Soumitra Chatterjee was steeped in art, learning and humanity from an early age. He would read Rabindranath Tagore voraciously; the more he related to Tagore, the more he gave to his acting—he went on to act in 14 Satyajit Ray films. Pauline Kael described him as Ray's "one-man stock company". He was to Ray what Toshiro Mifune was to Akira Kurosawa, Marcello Mastroianni to Federico Fellini, and Robert de Niro to Martin Scorsese. It was even suggested by critic Chidananda Das Gupta that Ray cast Soumitra every so often because of his distinct resemblance to the young Tagore.

In a career spanning more than 50 years and 200 films, Soumitra has also worked under Mrinal Sen, Tapan Sinha, Tarun Mazumder and Goutam Ghosh. Such was his acting prowess that he defined a new dimension in acting. Indeed, his accolades are many and they have come from different quarters: foreign governments, international film festivals and the Indian government (Padma Bhushan). Ironically, Soumitra was conferred the Best Actor National Award in 2006. But to the actor himself, the appreciation of his audience is the best recognition.

Theatre continues to be his first love, though, having been initiated into the art by legendary director-producer-

actor Natyacharya Sisir Kumar Bhaduri. As playwright and actor Monoj Mitra once said, "The audience readily relates to the characters he creates." That's not all. Ask Soumitra about the poet in him and the artist confesses, "Poetry that can moisten my heart with emotions I am sure can whet my feelings as an actor."

We met Soumitra on a sweltering morning at his home in Golf Green, Kolkata. He had returned from Santiniketan only the night before. Prior to that, he had toured England and shot at many outdoor locations. At 75, Soumitra's energy still knows no bounds. But in him, we meet a star who doesn't scorch by his stellar glare but leaves one enlightened by his wisdom. His home welcomes us with calmness typical of simplicity and taste. The curios reflect the delicate taste of the lady who holds the fort—his wife Deepa, an ace badminton player and former state champion.

Paintings by Jamini Roy and Robin Mondal catch the eye as Soumitra draws our attention to a painting of blue waves by Mondal that he used as a prop in *Chandrapur Chor*. A Rajasthani carpet with cushions casually tossed on it and the ocean blue sofa with his handy belongings resting on it speak of an artist's carelessness for the trivialities of life. Against the diffused sunlight filtering in through a huge door, which reminds one of the entrance to an inner sanctum, Soumitra invites us to begin the interview over *sandesh* followed by tea and snacks.

EXCERPTS:

In the past 30 days, you have travelled more than 16,000 km. You directed, performed, played the role of a cultural ambassador of our country. After you returned, you resumed your routine of shooting, rehearsals and recitation. Where do you get such an abundance of energy?

I cannot live without work. Whenever I am not busy, I grow restless and begin to think about unnecessary things such as growing old and impending death. I don't want to be swamped with these traumatic thoughts so I keep working. I've been able to maintain the same tempo as I have had for the past 30-40 years. I've always been engaged in theatre, with organisations, writing and editing a magazine.

Doesn't the strain ever take a toll on your health?

I sometimes feel a little tired and only very occasionally it takes a toll on my health. What keeps me going is that I never get bored of acting. I am still hungry for a new role, a good role. Besides, my theatre work keeps me refreshed.

Now that you have been performing across the world, your theatre must have found new enthusiasts in the youth. How inspiring is it to see them engrossed in your work?

In fact, the younger generation hasn't seen me in my golden days of cinema but they can watch my work on television, on VCD or DVD. Mercifully,



I have not finished my innings yet. I keep on creating new characters, which they appreciate. Their appreciation gives me that extra bit of energy.

You made your debut in professional theatre when you first met Nityacharya Sisir Kumar. Was it your love of acting or an opportunity to use theatre as a tool to propagate your philosophy of life?

It was while watching a play of his for the first time that the full vision of my own life changed. In a few months, I made up my mind that I would be a professional actor. I can't say I consciously thought of theatre as a tool to propagate the philosophy of my life. It was a calling from within.

You consistently acknowledge Sisir Kumar as your mentor but do you remember your schoolteacher who introduced you to the stage in *Sleeping Princess*?

My stage debut was not in *Sleeping Princess*, but I do remember that it was an English play directed by Miss McArthur, then principal of CMS St John's School, Krishnanagar, where I studied. I remember how she encouraged me to practice the emotion I needed to portray my role by observing it closely in real life. I now realise the importance of that training.

Even your childhood pranks were dramatic....

Yes (laughs). I was once told to watch over a suitcase belonging to a guest at home. The suitcase contained a lot of money. As I couldn't stay put, I stuffed the money into my pocket and went to a friend's house. I told my friend that I had planned to run away from home. I was taken back to my family. They were horrified and chided me severely till I let out a giggle. That's when they knew I was joking.

The fire of patriotism always existed in your family. You have seen some noted freedom fighters visiting your home.

I have seen my father courting arrest and taking part in the civil disobedience

and non-cooperation movement. My grandfather was also involved with a radical group in the freedom movement. He was closely associated with Bagha Jatin [Jatindranath Mukherjee], one of the great patriots our country has ever seen. Though they were uncle and nephew, they were great friends. That's why my grandfather was arrested along with Jatindranath in the Howrah-Gang case. These events always inspired us.

Then your family moved to Howrah. The city across the river must have enticed you.



Charulata



Abhijan



Apur Sansar



Apur Sansar

It was in Howrah that I experienced the ferocious riot of 1946 that left a strong impact on me. I matriculated from Howrah Jila School in 1951 and took part in dramas and formed a group in school. Later, I went to Kolkata—the city of Rabindranath, Vivekananda and Jagadish Chandra opened a new cultural horizon for me; its theatre altered the perspective of my life. However, our approach to the language of cinema changed with the release of Satyajit Ray's *Pather Panchali* in 1955.

Sisir Kumar thought of film purely as a director's medium. How did films catch your fancy?

When I was a child, I would bunk my studies and visit local cinema halls in Krishnanagar to watch cinema. I would watch English and Bengali movies. Hindi films were not very popular then. There was a Hollywood film I will never forget—*The Yearling* (1939) by Marjorie Kinnan Rawlings. It was about a rural family and its struggle for existence. I couldn't sleep for a few nights after watching it. My love for cinema and theatre were not at warring ends. Regardless of theatre or cinema, my interest is in acting.

What role did Satyajit Ray play in your grooming?

I met Mr Ray when he was looking for Apu to make the second part of the trilogy, *Aparajito*. He found me too grown up for the role of the adolescent Apu. But he talked to me at length and asked me to keep in touch. When *Aparajito* got the Golden Lion of St Mark at the Venice Film Festival, he declared that he had decided to make *Apur Sansar*, the third part of the trilogy and contacted me for the role of Apu. I learnt only later that he thought of making *Apur Sansar* the moment he met me. Although I learnt the nuances of acting from Sisir Kumar, Mr Ray became my mentor.

Would you have been a different person today had you not met Ray?

All I can say is that I became what I am today because of him.



New season: Soumitra Chatterjee on stage in *Tritio Önko, Ötoéb* (2010), an autobiographical play that he has also directed

You are perhaps the country's only matinee idol who pens verse as well. Apart from your strikingly handsome looks and exceptional acting prowess, you don't really suit the mould of a celluloid hero. Till recently, you were found at Coffee House; you have taken part in rallies; stood by agitating workers; fought for the common man's cause, eschewing glamour. How come you are still a crowd-puller?

I have always looked at life as a complete artist, not as a typical film star. Having been brought up with patriotic fervour, it has not been difficult for me to stand by my country and its people. I am not only a film actor; I have another identity as a human being.

You've always struck the perfect balance. Despite being critically acclaimed for your acting in the art-house productions of Satyajit Ray and Mrinal Sen, you are also an entertainer in commercial ventures.

Satyajit Ray did not believe in the concept of 'art house' films. He said there was only good or bad cinema, not art

films or commercial films because all films are commercial films.

By the term 'commercial film,' one means films where commerce is the only criterion.

Satyajit Ray was indeed interested in the box office. No filmmaker would want to screen a film before a handful of close associates. He might have had a different idea about the box office but he was definitely interested in box-office success. The second film I acted in was *Khudhita Pashan*, under the direction of Tapan Sinha, then the biggest name in so-called commercial cinema. Other than Satyajit Ray, no one has helped me learn the intricacies of acting more than Tapan Sinha.

Do you think you are as successful in mainstream film as parallel cinema?

Of course I am! Otherwise, why would people talk about my performance and that of Uttam Kumar in the same breath? In fact, people would debate the subject as avid fans of Mohun-

bagan and East Bengal do. This has been possible because I have never believed in categorising film as commercial and so-called art-house.

Of the characters you have portrayed, which is the closest to you?

All my good roles have a part of my personality in them. My role in *Koni* had the teacher in me; in *Ekti Jeevan*, the lexicographer in me found life; in *Apur Sansar*, the young romantic poet; in *Abhijan*, the daredevil.

Do you plan to introduce your grandchildren to any genre of the performing arts? Poulami has stepped into her father's shoes but what about Sougata?

I have never forced my children to follow my path. Sougata never took to acting but he writes wonderful poetry and has a few books to his credit. Poulami is actively involved with theatre. I can say without bias that she is a marvellous actress. As for my grandchildren, I would want them to follow a path they find suitable according to their own choice.

Gaming zone

A new book throws light on a colourful yet grey area in our cultural history. *Harmony* presents an excerpt from *The Art of Play-Board and Card Games of India* by Marg Publications





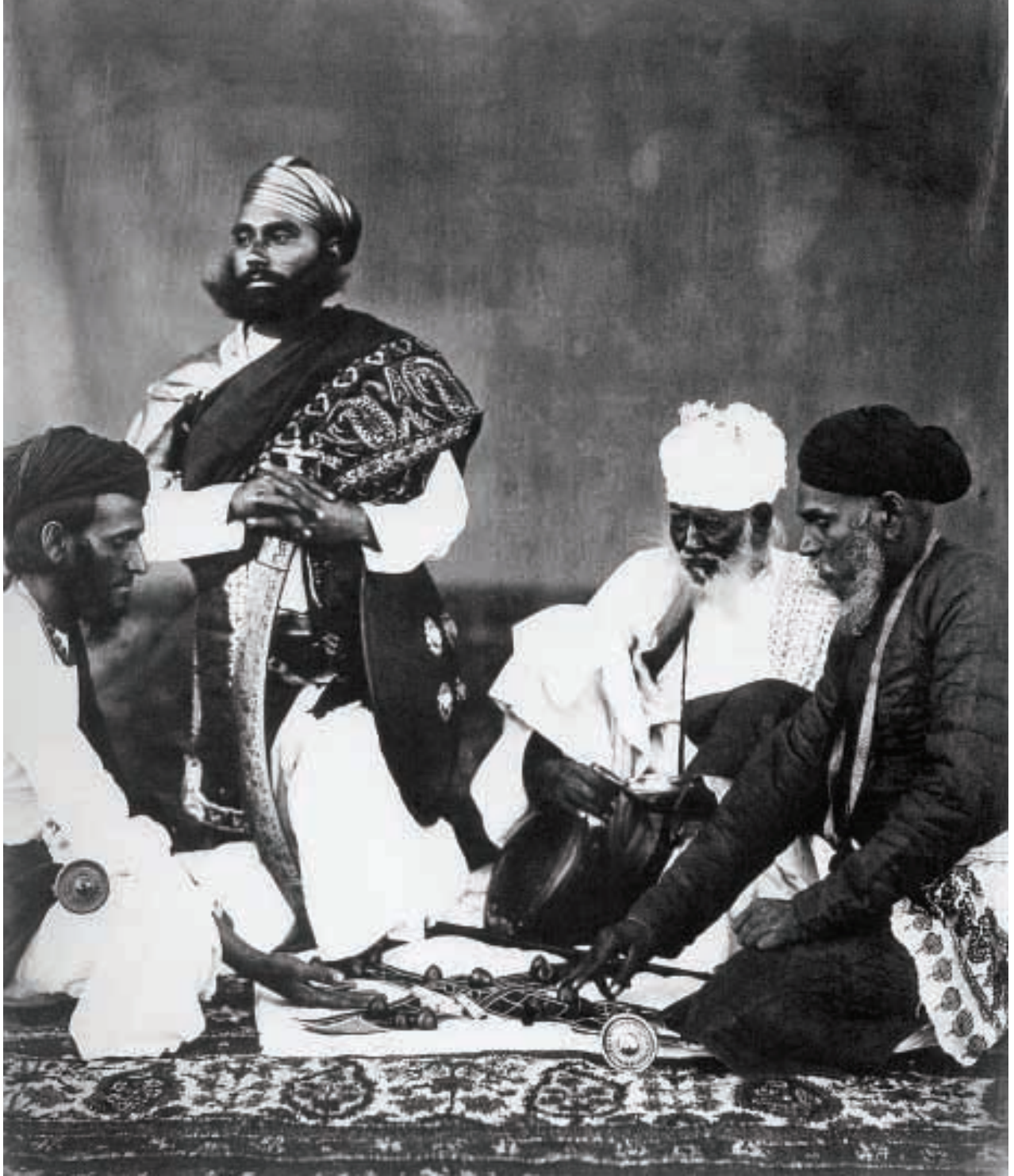
In the last five millennia, the Indian subcontinent has shown greater creativity than probably any other part of the world in the range and quality of its games, whether of chance or skill, and of its games-related artefacts. A natural flair for gaming, allied to brilliant aptitudes for artistic design, mathematics, numerology and intellectual or metaphysical inquiry, have all played their part in this.

In daily life, at all levels of society from village to court, the playing of traditional games and contests constituted for both sexes a continuous experiential link between childhood and adulthood. Playing games of increasing complexity from youth into maturity served not only as a diversion or pastime but as, in some sense, a mode of learning. At the most overt level, games themselves could mirror aspects of human life in an instructive way. Chess is indeed one of India's most far-reaching and enduring contributions to world culture.

Other traditional Indian games were overly religious and didactic in conception or made prominent use of religious symbolism in their decoration. The versatile race game of gyan chaupar (Snakes and Ladders), the spiral race game of ganj (closely related to the 16th-century European Game of Goose) and Hindu ganjifa cards (based on the ten avatars of Vishnu, or less often the Ramayana story and other themes) are some examples. In the Indian subcontinent as elsewhere, people have no doubt always played games mainly for fun or for money. But from early times, when gaming was associated with divination, such play also had a significant role in religious ritual and the mystique of kingship. (From the introduction by Andrew Topsfield)

(Opposite page) The Vaishnava 72-square gyan chaupar (also gyan chausar, "Chess of Knowledge", Snakes and Ladders) board on cloth—from 19th century Nepal, it found its way to a private collection in Germany (photograph by Joachim Bautze); (above left) the Vaishnava 72-square gyan chaupar from 19th century Rajasthan is now at Pitt Rivers Museum in Oxford; and (above right) rosewood with ivory and brass inlay folding board for the karmic game of Shivasayujyam from mid-19th century Mysore





(Opposite page, clockwise from left) Ganjifa cards on paper from 19th century Maharashtra; sideview of a painted lacquered wood Ganjifa card box showing a British official shooting a tiger and a dark-skinned tribal hunter; and *Dashavatara* (ten avatar of Lord Vishnu) ganjifa with its original box

(This page, above) Rajputs playing the game of Pucheese (also Pachisi), one of the earliest versions of chaupar; and another version of Pachisi (a 'race game' exemplifying the triumph of the 'fastest' with a strong reliance on chance) on chaupar board made with velvet and gold wire from 18th century North India



The first versions of hunting games called 'Sheep Against Tiger' were probably developed by shepherd boys who spent their lives guarding their flock from predators.

(Left) Two ivory pieces from a Sheep Against Tiger set—the tiger is one of the two and the sheep one of the seven from the 19th century Rajasthan hunting game set; (below) a bird's eye view of an eternal struggle from 20th century hunting games with their various pieces

While such games have enjoyed a persistent life in villages and other non-urban contexts, the board game historian with an observant eye will still encounter scratched boards on pavements, doorways and railway stations in cities like Kolkata and Mumbai.





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THE RIGHT TO RETIRE

Timeri Murari waits for the day when we can choose when to retire

I was 20 when I retired from my career as an electronic engineer. I know that's a pretty young age to take retirement, but the math and calculus confounded me. When I broke the news of my retirement to my father, he was disappointed, naturally, as we didn't have an engineer in the family. We did have a doctor, though. "What are you going to do?" he asked politely, as he saw a future of unemployment stretching ahead of me. "I'm going to be a writer," I told him, as it sounded an interesting profession to follow. He replied immediately: "At least, you won't have to retire from that when you reach retirement age."

He was right. Writers, painters, musicians, poets and filmmakers never retire. They die composing, painting and singing. Also, he spoke from his own experience as a government servant. He had loved his work as head of the agriculture and husbandry department of his state. But, when he was still only a middle-aged man, he was retired at the age of 57. It was a blow to him to wake up on the morning of his birthday with nowhere to go. His life had sort of ended. He was healthy, had all his wits about him, and a lot more experience and wisdom to give to his department. He lived another 30 years before his death. I calculated he had spent more time in retirement than actually working. Admittedly, he kept himself occupied working with tribals to help them with agriculture, and continued playing the game he loved, cricket. In his 70s, the team retired him, and I think that was worse for him, as he enjoyed his Saturday matches. The captain told me they

worried he could be hurt by a fast, rising ball. I think he complained more about that than his career ending.

In my father's day, our life expectancies were in the mid-60s, if we were healthy and lucky. I guess 57 was a calculation that the person would die in a year or two, and it was a kindness to live his last few years in peace and

If you have no wish to retire ever, like writers and painters, become a politician who can continue ruling us mortals long into senility

quiet. Since then, through our better diets and medical advancements, we now live well into our 70s, 80s and even the 90s. So when we retire at the age of 60, we have time ahead of us, trying to fill up the hours, days, weeks, months and years. In the States now, the retirement age has been raised to 70 and, even then, if you're of sound mind and body, you can continue working till you decide you've had enough. We should introduce that concept in India too as a retirement age is very arbitrary, imposed on many who would prefer to keep working.

Of course, where physical work is the profession, the body can only perform for a limited amount of time. Great athletes can be neatly slotted into this

category of physical exertion as a career. The Agassis, Peles and Gavaskars can only excel up to the limits of their bodies. They have very short careers in which to fulfil their ambitions, and make enough money for retirement. Most of them have to quit their sport by the age of 30 and that to me is the worst possible scenario, to give up something you love so young. Female movie stars are akin to sportspersons. Hit 30, and you're OLD, and will no longer be romanced. You play mothers, while geriatric male stars continue chasing 20 year-olds around trees, and into beds.

For many men, and now women, retirement is welcomed. Statistics have revealed that the majority of people do not like their jobs. They work because they have to and are happy to retire from something that occupied most of their life. They're tired of the daily commute, the politics, the grind of files, meetings and travel. But then what? Some dread that birthday and the time to fill. Yet retirement can be fulfilling for others. They learn new skills, take up causes, campaign for the underprivileged, teach and even become *sadhu*.

If you've no wish to retire ever, like writers and painters, become a politician. They retire us mortals at 60, while they can continue ruling us long into senility, and trundle around in wheelchairs. And why not? There is a pot of gold at the end of their rainbows.

Timeri Murari, 65, is an author and screenplay writer living in Chennai

The first day at school

The first time you rode the bicycle.

The first crush you had at thirteen

The first drama you got a part in

The first day at college

The first date you went on

The first kiss

The first time you proposed

The first job interview

The first board meeting you addressed

The first day after retirement

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PASSAGES

Of faith and longing

EXCERPT FROM "BARA MAH" IN THE *HYMNS OF GURU NANAK*, TRANSLATED BY KHUSHWANT SINGH.
FIRST PUBLISHED BY ORIENT LONGMAN IN 1969

SAVAN (July-August)

Savan saras mana ghan varsai rut de

O my heart, rejoice! It's Savan
The season of nimbus cloud and rain,
My body and soul yearn for my Lord,
But my Lord is gone to foreign lands
If He return not, I shall die pining for Him.

The lightning strikes terror in my heart,
I stand all alone in my courtyard,
In solitude and in sorrow.

O Mother of mine, I stand on the brink of death,
Without the Lord I have neither hunger nor sleet
I cannot suffer the clothes on my body.

Nanak says, she alone is the true wife
Who loses herself in the Lord.

BHADON (August-September)

Bhadon bharam bhuli bhar joban pachtani

In the month of Bhadon
I lose myself in a maze of falsehood
I waste my wanton you,
River and land are one endless expanse of water
For it is the monsoon the season of merry-making.
It rains,
The nights are dark,
What comfort is it to the wife left alone?
Frogs croak
Peacocks scream
The *papeeha* calls 'peeoh, peeoh.'



The fangs of serpents that crawl,
The stings of mosquitoes that fly
Are full of venom,
The seas have burst their bounds in the ecstasy
Of fulfilment.
Without the Lord I alone am bereft of joy,
Whither shall I go?
Says Nanak, ask the guru the way
He knoweth the path which leads to the Lord.

ASAN (September-October)

Asan au pira sadhan jhur mui

It's the month of Asan
O Master come to me
I waste and shall die.
If the Master wills,
I shall meet Him.
If He wills not,

In a deep well shall I be lost.

I strayed on to the paths of falsehood
And the Master forsook me,
Age hath greyed my locks
I have left many winters behind.
But the fires of hell still lie ahead.
Whither shall I turn?

The bough remained ever green
For the sap that moveth within day and night.
Night and day, reneweth life.
If the name of the Lord courseth in the veins
Life and hope will forever be green.
That which cooketh slowly cooketh best.

It is Asan, says Nanak,
It is trysting time, O Lord,
And we have waited long.

“Some people, no matter how old they get, never lose their beauty—they merely move it from their faces into their hearts.

—American photographer, artist and humorist Martin Buxbaum

MISERY LIT

n. A memoir or novel that focuses on extreme personal trauma and abuse.

Also: misery-lit, mis lit, misery literature, misery memoir

Example: A Today's idea: Is women's fiction plagued by **misery lit**, obsessed with bereavement, child abuse and rape? Or chick lit, obsessed with Prada handbags and landing the perfect catch? Or is it torn between the two? British writers have at it.

—Tom Kuntz, “Woe is women's lit,” ‘Idea of the Day’ (NYTimes.com), 18 March 2010

Infoganda *n.* A fake or misleading news story designed to further a hidden agenda.

Example: That is the conclusion of a fascinating new book, “Why America Fights,” which traces America's involvement in a number of wars. It introduces a new word: **infoganda**. This being the masquerading of propaganda to go to war as information; Donald Rumsfeld called it “perception management.” When you watch the military flyovers here each July 3, that is really and sadly part of that infoganda campaign, which has gotten costly and almost sacrilegious if you oppose it.

—John Frievalds, “Government ‘infoganda’ has turned defense spending into a sacred cow,” Telegraph Herald, 14 March, 2010

JIHOBBYIST

n. A person who is interested in and sympathetic to the goals of radical Islam, but who is not a member of a radical group.

Also: ji-hobbyist

Example: **Jihobbyists** are people drawn to the online theatre of violent jihad, becoming increasingly radical as they delve deeper into Web forums. Colleen LaRose, also known as ‘Jihad Jane,’ is an example of this threat, according to counterterrorism experts.

—Michael B. Farrell, “Jihad Jane case suggests rising threat from online jihobbyists”, The Christian Science Monitor, 19 March 2010

Chermany *n.* China and Germany taken together, particularly as an economic entity or market. [Blend of China and Germany]

Example: The US perpetually runs large trade deficits with the rest of the world (especially **Chermany**) because other countries are far more focused on export-led growth.

—Steven Capozzola, “Chermany”, Manufacture This, 18 March 2010

COVER STORY

The Delhi government is taking a significant step to insure the wellbeing of its citizenry with the launch of a healthcare insurance scheme in July 2010. The scheme, Apka Swasthya Bima Trust (ASBT), is expected to cover ailments related to the heart, brain and kidney, and complex medical procedures such as cardiac surgeries, pacemaker implants, cancer therapy and neurosurgery. ASBT irons out the limitations of current government-sponsored health insurance schemes—Rashtriya Swasthya Bima Yojna (RSBY)—that only cover common ailments and are limited to primary and secondary healthcare requirements. “Though initially it will reach out to people below the poverty line, it will soon be expanded to cover all citizens,” says a senior health officer involved with the project.



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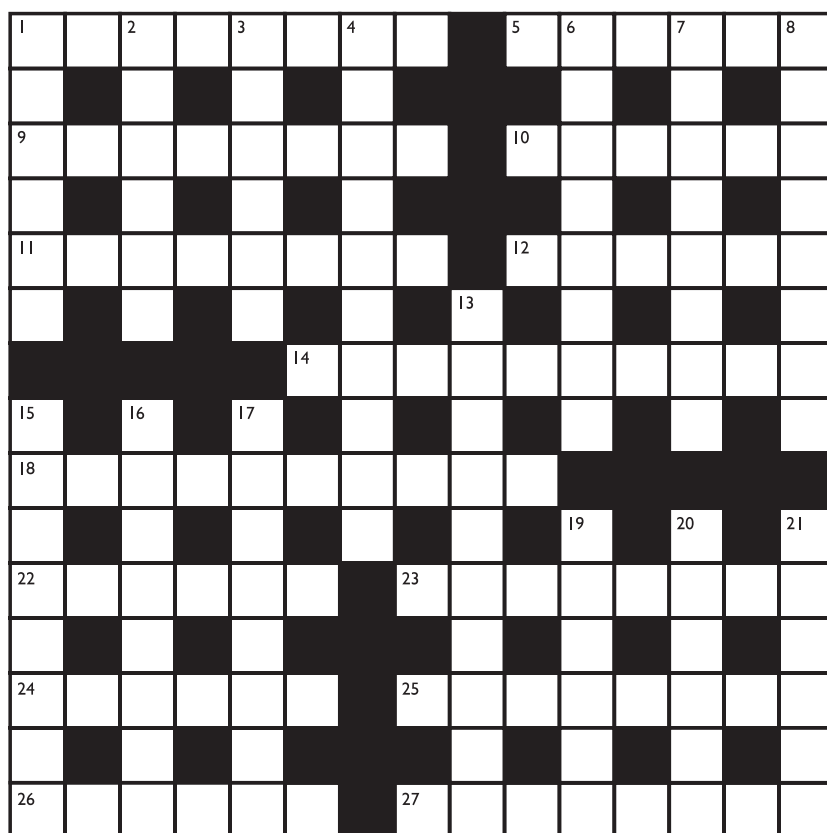
The Pune-based Film and Television Institute of India (FTII), which has spawned some of the brightest and best of Indian cinema—actors Jaya Bachchan, Naseeruddin Shah and Mithun Chakraborty, and directors Adoor Gopalakrishnan, Subhash Ghai and Sanjay Leela Bhansali—marked its golden jubilee in March with a three-day festival. The event was flagged off by a ceremony where many former students and teachers were felicitated.

The Institute was established in 1960 by the Government of India when Prabhat Film Company offered its land for sale. Though it started out with just four courses—direction, acting, cinematography and editing—today

students can choose to specialise in 12 different streams of filmmaking. The Institute's continuing legacy ensures that the celebrations won't be confined to Pune alone. There will be FTII festivals in select cities; a special section on FTII at the International Film Festival of India (IFFI) 2010; participation in the Wisdom Tree Festival in March 2011; and a special festival that will showcase works of Japanese filmmaker Akira Kurosawa. Looking ahead, the Institute aims to introduce a slew of initiatives such as inviting research scholars from tribal areas; releasing DVDs of films made by diploma students; and organising film festivals to encourage folk cinema, women filmmakers, experimental film and documentaries.

THIS MONTH, THAT YEAR: **MAY 1960**

- On 1 May 1960, under the Bombay Reorganisation Act, Maharashtra and Gujarat, which earlier constituted Bombay state, gained independent statehood.
- On 3 May 1960, *Fantasticks*, the world's longest-running musical, opened at New York City's Sullivan Street Playhouse where it would play for 42 years.
- On 16 May 1960, Theodore Maiman operated the first optical laser at Hughes Research Laboratories in Malibu, California.
- On 22 May 1960, Chile's subduction fault ruptured from Talcahuano to Taitao Peninsula, causing a tsunami and one of the most devastating earthquakes on record.

EXCLUSIVE HARMONY CROSSWORD 67**BY RAJU BHARATAN****ACROSS**

- 1 Sania's 'Biwi No 2' dilemma going by the *Biwi No 1* picture we carry on our mental screen (4-2-2)
 5 Aga confronting she actor (6)
 9 Was Osho central to their being devised in IPL Twenty20 Cricket? (3-5)
 10 It does in the mindset, doesn't it, Sunil Gavaskar's 7 June 1975 'World Cup 36 not out' through 60 England overs at Lord's? (6)
 11 Dina turning to embrace mate full of spirit (8)
 12 A feeling-fulfilled exclamation

upon finding something you were desperately looking for in the map book? (2 4)

- 14 Something you could not, possibly, get to see Lalu Yadav as tightening even in face of the gravest agricultural crisis while he ruled! (3 3 4)
 18 A time when you are up against it if you cannot get your clutch-and-brake balancing act together! (4 1 5)
 22 Just the city for *The Big Country* style of shooting (6)
 23 Kind of two-in-one subscription to treasure in the days of the

magazine boom? (8)

- 24 Bad luck as symbolised by 'a pair of pairs' in successive matches! (6)
 25 Suggesting a talented entertainer revealing all? (8)
 26 Egg turning into nut precious as precious could be (6)
 27 Girdle as the Nanda type of screen woman? (8)

DOWN

- 1 Would-be TV serial heroines, in turn, as viewed on either side (6)
 2 A Bish ball player of dubious note (6)
 3 HRA-inclusive Ten capital (6)
 4 In any film on the Sania-Shoaib saga, wonder which segment is going to be this to watch (6 4)
 6 Trust the Manoj Kumar style of villager hero in Hindi cinema to (2 2 4)
 7 SOS about crate loaded with wisdom (8)
 8 Urging Shaun not to ally gamesmanship to bowling frighteningly fast (4 4)
 13 A high six by M S Dhoni that clinches a series win for India is (1 3-6)
 15 Andhra as thing the press could get of N T Rama Rao only after midnight (1 7)
 16 Lata Mangeshkar's in a white sari is still evidently far away (4 4)
 17 The Sonam letter expressing gushing appreciation (4 4)
 19 He's holding art card (6)
 20 Chalk marking belonging to Oerter by direct descent (6)
 21 In which Russi Karanjia sailed through life? (3 3)

For answers, see Page 79

RAJU BHARATAN is the originator of the 'Sunday Cryptic' crossword in *The Times of India*, where he set the first 1,500 puzzles

Tips for beginners: A whole variety of clues goes into framing a cryptic puzzle. For instance, the anagram. The clue here could be: Unresting opponent of authority (Unresting being the 9 letters of insurgent rearranged). Another variety of clue is the palindrome—DEIFIED, when viewed backward or when viewed up in a Down clue, reads DEIFIED all the way. Next, there could be the clue (8-letter answer) reading: Complete view of daughter sandwiched between parents—PANORAMA (PA/NORA/MA). The 8-letter solution to the clue, The framework of our constitution, is SKELETON. At times, what looks straight could prove tricky. For example, the clue, How we stand, has UNITED for its 6-letter answer. The clue, How we fall, has DIVIDED for its 7-letter answer.

BRAIN GYM

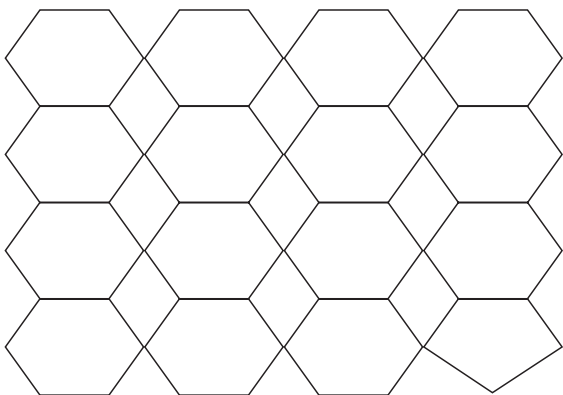
BRACKET PICKS

What goes in the empty brackets?

1 2 (2 8 4 6) 3 4
 4 5 (12 21 15 18) 6 7
 7 8 (28 40 32 36) 9 10
 11 12 () 13 14

HALL OF HEXAGONS

How many hexagons (six-sided figures) can you find here?



A ROW APART

Find the odd row out.

- | | | | | | | |
|----|----|----|----|----|----|----|
| A. | K | N | Q | T | W | Z |
| B. | B | F | J | N | R | V |
| C. | A | F | K | P | V | Z |
| D. | 3 | 6 | 9 | 12 | 15 | 18 |
| E. | 7 | 11 | 15 | 19 | 23 | 27 |
| F. | 13 | 18 | 23 | 28 | 33 | 38 |

TRACE THE PHRASE

The following 17 letters can be rearranged into a seven-word phrase that means 'to act as an unseen observer'. What is this phrase?

O E A O E A B L F N T L L Y W T H

SUDOKU FOR YOU

6			9			2		
	5							
		9	8				3	
2				7		6		
4				6	8	3		
			3				7	
7						4		9
	9	6	5			8		

Choose a number from 1 to 9, and place it in the grid. Every digit from 1 to 9 must appear once, and only once, in each of the columns, rows and in each of the sets of nine boxes.

KOFFEE WITH KAKURO

				6	16					
			10							
		30	15				14	38		
	26					3				
	5				19					
	9									
17					17				9	
6							10			
			15	10			11			
	16					19				
	14					10				
	9				18					
				8						

The object of a Kakuro is to insert digits from 1 to 9 into the white cells to total the clue associated with it. However, no digit can be duplicated in an entry. For example, to total 6, you could have 1 and 5, 2 and 4 but not 3 and 3. You may, however, use a number again in the same row or column.

SOLUTIONS TO EXCLUSIVE HARMONY CROSSWORD 67

ACROSS: 1 Sush-to-be (reference to Sushmita Sen as, possibly, 'Biwi No 2' in the *Biwi No 1* David Dhawan show); 5 (Mohan) Agashe (Aga/she); 9 Neo-shots (NE/Osho/ts); 10 Sticks; 11 Animated (ani/mate/d: Dina turning to embrace mate); 12 At last (Atlas/t); 14 The cow belt; 18 Down a slope; 22 Ranchi; 23 Lifetime (Life + Time); 24 Hoodoo (H/oo/d/oo); 25 Starkers (Star.kers); 26 Nugget (Nu/gge/t); 27 Griselda (*a woman of excessive meekness and patience* (like Nanda on the screen), 8 letters of *Griselda* rearrange into *Girdle as*)

DOWN: 1 Sanias (sa/ni/as: in turn, as viewed on either side); 5 Shoaib (taking o to stand for ball, 6 letters of *Shoaib* rearrange into *A Bish ball*); 3 Tehran (Te/HRA/n); 4 Better half; 6 Go to town; 7 Socrates (SO/crate/S); 8 Easy, Tate; 13 A cup-lifter; 15 A *darshan* (8 letters rearranging into *Andhra as*); 16 Swan song; 17 Mash note (its 8 letters rearrange into *The Sonam*, mash note is letter expressing gushing appreciation); 19 Hearts (He/art/s); 20 Lineal (Line/Al: Al being reference to Al Oerter); 21 Red Sea

SOLUTIONS TO BRAIN GYM

BRACKET PICKS

55 70 60 65

In the first line, multiply the digits outside the brackets by 2 in this order: extreme left, extreme right, second left and first right. In the second line, multiply by 3 and in the third line by 4, following the same procedure. Therefore, in the fourth line, multiply by 5 and follow the same procedure.

HALL OF HEXAGONS

The answer is 21.

There are 15 small hexagons and 6 large ones. The last shape in the bottom row is a pentagon.

A ROW APART

The answer is C.

In A, two letters are missed out.

In B, three letters are missed out.

In C, four letters are missed out with the exception of V, which should be U.

The numbers in D, E and F follow the same pattern.

TRACE THE PHRASE

TO BE A FLY ON THE WALL

SOLUTIONS TO SUDOKU

6	3	7	9	1	5	2	4	8
8	5	2	7	3	4	9	1	6
1	4	9	8	2	6	5	3	7
2	1	3	4	7	9	6	8	5
4	7	5	1	6	8	3	9	2
9	6	8	3	5	2	1	7	4
7	2	1	6	8	3	4	5	9
5	8	4	2	9	1	7	6	3
3	9	6	5	4	7	8	2	1

SOLUTIONS TO KAKURO

				6	16				
			10	4	6		14	38	
	26	8	7	2	9	3	2	1	
	5	3	2	19	1	6	5	7	
17	4	7	6		17	8	7	2	9
6	5	1	15	10			10	6	4
	16	2	5	9	15	19	6	8	5
	14	4	6	1	3	10	1	9	
	9	5	4	18	7	2	4	5	
				8	5	3			

“Retirement should not be an excuse to retire from responsibility. Public service can give you the deepest sense of independence.”

V Mani, 66, for giving the children of prisoners hope and freedom to pursue their dreams



Prasad Durga

While childhood can be carefree and fun for some children, for children of convicts it's mostly a bleak episode. With this in mind, Bengaluru-based **V Mani** established SoCare, a unique initiative to give them shelter, education and the emotional grounding to face life with confidence and purpose. A retired bank employee, Mani was struck by the idea a decade ago when he had to pass by the central jail on his way to work. Every morning he would witness the heart-wrenching sight of children of prisoners waiting for their parents outside the jail. Instead of brooding over their anguish, Mani pledged to do something that could lessen it. After retirement, in 1999, he and his wife

Saroja pooled in their savings to start SoCare. Today the institute offers a roof to 136 children besides providing them with basic education, vocational training after Class X and higher education. SoCare receives funds from generous donors and corporate houses, and has tie-ups with nine private schools in Bengaluru—where the children are enrolled. Plans are also on to open a similar centre in the poverty-stricken Gulbarga district in Karnataka. “Such children always feel a sense of deprivation,” says Mani. “Therefore it's even more important to make them feel loved and needed so they don't take the wrong path in life.”

—Dhanya Nair Sankar

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(A Unit Linked Pension Plan)
ON 12/04/2002

Risk Factor & Warning :-

1. Unit Linked Life Insurance products are different from the traditional insurance products and are subject to the risk factors.
2. The premium paid in Unit Linked Life Insurance policies are subject to investment risks associated with capital markets and the NAVs of the units may go up or down based on the performance of fund and factors influencing the capital market and the insured is responsible for his/her decisions.
3. Sahara India Life Insurance Company Limited is only the name of the Insurance Company and Sahara Swabhimaan is only the name of the unit linked life insurance contract and does not in any way indicate the quality of the contract, its future prospects or returns.
4. IN THIS POLICY THE INVESTMENT RISK IN INVESTMENT PORTFOLIO IS BORNE BY THE POLICY HOLDER.

For more details on risk factors, terms and conditions please read the sales brochure carefully before concluding a sale. The benefits shall be subject to modification as per prevailing tax laws and statutory provisions from time to time.

Insurance Is The Subject Matter Of Solicitation.

Sahara India Life Insurance Company Limited

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