

# The surgical dementia

Don't say, 'forget it!' when you repeatedly forget. It demands brain imaging and some lab tests to see what's messing with your memory—blood collection, tumour, thyroid or simple B12 deficiency

## doctor in the house

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A SEPTUAGENARIAN couple was seated in my consulting room. The wife started to talk as soon as she caught her breath. "He's been forgetting a lot of things these days," she complained. "He doesn't remember what he's eaten this morning or how much money he withdrew from the bank the other day." She sounded a tad exasperated of taking care of him.

"Does he remember past events like which school he went to, his wedding date?" I questioned, hoping to give him some brownie points. "March 31, 1975," he shot back, putting a gentle smile on her tired face. "He fumbles a little in his speech as well, I've been noticing."

I asked him to close his eyes and stretch his arms out straight in front of him, parallel to each other with palms facing the ceiling as I demonstrated the action myself. After a few seconds, I noticed his right arm drift downwards while his left was able to resist gravity. I explained to them that this was probably owing to something pressing down on the left side of his brain.

"Do you drink?" I questioned innocently to postulate a diagnosis in my head. Husband and wife looked at each other and then at me. He shook his head sideways and she, up and down. "A few pegs a week doesn't classify as drinking," he reasoned.

I asked them to get a CT scan done right away on the ground floor, and within the hour they were back at the clinic. "It shows exactly what I expected," I said with slight cocky arrogance, even though most of the time that I order a scan for forgetfulness, it usually comes back normal. "You've got a chronic subdural hematoma," I stated, describing it as collection of blood between the bone and brain and probably responsible for his symptoms. "You must have bumped your head somewhere without realising it," I continued, explaining that this can happen in the elderly even without any definite trauma. The brain atrophies with age and if a tiny vein between the brain and its covering (the dura) snaps, it can cause blood to accumulate over time and cause this symptom. "It needs

to come out," I concluded, even before they could ask how we should go about it.

The next morning with zealous quickness, we made two small incisions on his scalp and drilled two holes into the skull, a few inches apart, following it up with a cut into the dura. Dark altered blood emanated under high pressure. Although this is technically the easiest operation in our field and I must have done several hundred by now, I'm excited every single time I cut into the dura. With the delectation of a child, I'm eager to see what comes out. Each time the colour of the blood has a varied hue of red, it jets out at a force that's different every time, and the underlying brain is at disparate distances from the bone. I often joke with my dextrous orthopaedic colleague that this is one neurosurgical operation I can teach him to perform, because all it involves is drilling a hole into the bone.

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After ensuring that all the blood was out, we closed in the usual fashion. The next morning, his absent-mindedness was gone, and at dinner, he was crisply responsive about what he had eaten for breakfast and lunch.

Dementia is a collective term used to describe various symptoms of cognitive decline. Forgetfulness is a symptom that plagues all of us at all stages of our life. As physicians, we need to discern which patient needs an MRI, or more importantly, in which cases can this condition be reversed. As the French philosopher Montaigne pointed out, you can be knowledgeable with another man's knowledge, but you can't be wise with another person's wisdom. Surgical wis-

dom is just as hard to attain as the spiritual one.

In my opinion, any elderly patient who has a recent onset of forgetfulness should have their brain imaged. While blood accumulation is not uncommon, on occasion, I have also found tumours in the frontal lobe—the area that aids in planning, execution, processing feelings, and memories. I've also picked up an extra accumulation of fluid in the ventricles, which, when drained, reverses these symptoms. More importantly, forgetfulness is commonly seen in those having deficiencies of Vitamin B12 and low thyroid levels and can be easily reversed by supplementing them. So, before we start prescribing pills for dementia, let's try and take a look at what's going on inside; also because there's a high chance your patient won't remember taking the pills!

"How do I keep my brain sharp?" a lot of people ask me. "Clean living and keep moving" is my standard response. There is really no rocket science here. Exercising, healthy eating, a bedtime routine, sound sleep, yoga, meditation, and expressing gratitude is what every single self-help book will tell you.

The other day, three lovely old ladies came to take the vaccine at my hospital. They were in their 80s and I had made arrangements for them to be taken care of, as one of them needed a wheelchair. I came down to visit them in the waiting area where they relaxed for the mandatory 30 minutes once they took the jab. "Hi!" I said, happy to see them dressed in nice floral skirts, their faces powdered in the characteristic way that elderly Parsi women step out in the afternoons. "Can you give me some medication for my memory, please?" the one in the centre said. "I'm forgetting a lot these days."

"And she fumbles with her words too," her friend added.

"This COVID is driving us insane," the first justified. "It's so depressing. Plus, we live alone. What if we get it? There are no vibrators available anymore!"

There was a delightful silence. I know she meant ventilators, but I didn't have the heart to correct her, I wanted to enjoy the moment. Also, I don't judge.

The writer is practicing neurosurgeon at Wockhardt Hospitals and Honorary Assistant Professor of Neurosurgery at Grant Medical College and Sir JJ Group of Hospitals.



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## How can therapists protect their mental health?

- Sleep for at least eight to ten hours: On days with fewer appointments, try to take short naps.
- Be kind to yourself and constantly remind yourself that you're doing fine and doing everything you can within your abilities.
- Talk to friends who are from the same background, because as therapists, they have empathy for what you are going through as mental health professionals.
- Journal your thoughts.
- Do not keep your worries bottled up.

# I'll be there for you

City therapists, who are attending to an average of 20 calls a day, are struggling to find their bearings in the second wave

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THE early stages of the pandemic was difficult for many. Isolation, stress, and a variety of other emotional challenges have had a negative impact on people's mental health. But, a year later, and nothing seems to have changed. The problems have only exacerbated, say city therapists, who have been working overtime to accommodate requests coming to them.

Mumbai-based Tanvi Sardesai, a licensed clinical psychologist, says that she attends to at least 20 patients daily. While the number may seem insignificant, every patient warrants undivided attention of 45 minutes to an hour each, which means she is clocking in close to 18 hours of therapy every day. "This pandemic has changed the way people live. We are not used to spending so much time indoors, so we see a large number of people suffering from stress, existential crisis, and self-doubt," she says.

Dr Priyanka Chopral Mahajan, a city-based psychiatrist, says that there has been a three per cent increase in calls coming to her, regarding mental health, compared to the first lockdown. "I've seen cases where people who were suffering from anxiety and depression were doing

well, but now [with the second lockdown] they're back to square one." When the situation peaked in April due to the devastating second COVID-19 wave, Dr Mahajan was attending to about 15 patients daily.

The challenge for most therapists now is to try and make themselves available to as many patients as possible. Malvika Fernandes, a counselling psychologist, leads the mental health programme for non-profit, Project Mumbai, which offers free "counsellors on call" facility. On an average, she attends to 20 to 25 calls a day, managing it alongside her private consultations.

While Fernandes tries her best to offer immediate support to anyone who reaches out to her, it is not always possible to accommodate everyone in a single day. There are occasions when Fernandes is overbooked, and an emergency case arises. "In such a situation, we assign severity ratings to our patients. If I believe someone is improving, I try and reschedule their

appointment, and at the very least have an introductory session with the emergency case," she adds.

In order to ensure that she doesn't experience burnout, Fernandes at present, only sees six patients per week. "This allows me to thoroughly investigate each case. I do about five to eight follow-ups with each patient at least." When she feels overwhelmed with the calls, she says she tries and consults less serious patients. "This way, we do not end up disrespecting the person who has come to seek help," says Fernandes.

Vandita Morarka, a lawyer and founder of One Future Collective, is working with a pool of therapists to offer therapy support, especially to COVID-19 health workers. She says that therapists have a network of psychologists, who are willing to share the load of calls and provide free services. "They are on various WhatsApp support groups, and even have an excel sheet with the names and contact information for therapists all over India."

Many organisations have started outreach programmes, to help share the burden of therapy. Earlier this week, the Archdiocese of Bombay's Health Outreach Project launched a helpline facility, offering counselling services, among other support. A team of five psychiatrists attend to callers. They've already received over 30 calls.



Tanvi Sardesai



Vandita Morarka



Dr Priyanka Chopral Mahajan

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