









"While everyone talks about the sufferings of a patient, the challenges faced by a doctor, and the contributions of the staff, one group of people often go unmentioned...the behind-the-scene sufferer's...the attendants."

ay in day out, we see patients...we speak to them, empathize with them. When we are talking maybe we casually glance at the attendant once in a while. We explain the prognosis, further course of action and the treatment to both and then satisfied. hold the door open for them to leave. Sometimes we take that subtle silent pride in knowing more about our patient...their profession, where they live and the challenges they are facing, but what we often fail to ask or notice are the perils of the person who comes along with the patient.

A certain person, a dentist by profession (...which we later find out!), walks into our OPD and holds the door open for a wheelchair carrying his mother, a pleasant looking lady who clearly is unable to see (...but this isn't about her!). The man himself looks a little hassled in the new hospital. An old man with a stick follows the duo(...the husband of the patient). We arrange for the patient to sit in the examination chair. None of the attendants take the extra chair till offered. The woman, who had undergone corneal transplant in both eyes many years back, had already lost one eye to high pressures. Her better eye was losing vision since the last few days. The family comprising of the wheel-chair bound lady, an old man and a working professional, had travelled over 300 kilometers just to get examined. The patient was found to a graft rejection of the transplanted tissue. and was



reassured and started on treatment. When informed about the next visit, the son hesitated for just one moment but then agreed. It was that momentary hesitation that got us talking. Being the only son of ailing mother with cardiac, ocular and other life style issues since the last 30 years, he took it upon himself to do whatever it takes provide his mother with the best possible treatment. Being in the medical profession himself, he wasn't unaware of the follow up visits that are needed.



# Editorial

The behind-thescene patient – The attendant He too has patients back home and each time his mother needs a follow up, he misses an entire day of work. Sometimes at short notice, he moves his appointments around, cuts a sorry figure in front of prior commitments, at the risk of looking unprofessional...but still does it,



because it has to be done. Taking an elderly dependent mother to hospital visits so often is physically emotionally both and taxing. Managing medicines schedules. food requirements through the travel and waiting for hours through the tests and examination, is often challenging. We here at SCEH, decided to ease his troubles, by reducing the need for frequent visits through telephonic consultations and mobile phone pictures.

While we are often busy focusing on the disease, the eye, the further course of action and look at the whole situation from a close-up, we need to zoom out and appreciate the whole picture...The logistics, the actual need and other alternatives and possibilities. Our waiting rooms are full of people looking at their watch, because they are late for a meeting, or have left young children unattended at home, or have already spent a half a months wage in bringing their loved one to us.



We are doctors' and we see patients, but we also need to see the world around them to make their experience worthwhile....

"Empathy is seeing with the eyes of another, listening with the ears of another, and feeling with the heart of another."
-Alfred Adler



SCEH hosted the "Annual Partners Meet 2025," a land-mark event that unified project teams from all secondary centers in a collaborative effort. The meet aimed to bolster support for onsite activities, reinforcing SCEH's Mission and Vision. Key deliberations centered on the Vision Centre program, Door-to-Door initiative, and innovative strategies to enhance community engagement, with a special focus on individuals aged 50+ and Ayushman Bharat beneficiaries. The event demonstrated robust participation from the Public Health Department, Community Team, Hospital Administration, and secondary centers, resulting in a seamless and impactful experience.



From White Reflex to a Bright Future: Sibling Survivors of Retinob lastoma

"Life is simple. Everything happens for you, not to you. Everything happens at exactly the right moment, neither too soon nor too late. You don't have to like it... it's just easier if you do" -Byron Katie

# Patient Story

Story contributed by Dr Chhavi Gupta Narula

This is a story of two siblings from Mohammadi, Uttar Pradesh, Bhavya and Bhavyansh Pandey. Both the kids had to fight against retinoblastoma - a childhood eve cancer. It all began when a vigilant community health worker (CHW) at a vision center noticed a white reflex in Bhavya's eye while doing a routine screening. The CHW had attended а retinoblastoma awareness session by our team at the secondary centre. His prompt decision and referral allowed Bhavya to get the immediate care she needed. Her younger brother, Bhavyansh, was also screened as part of the protocol, which helped to identify his condition early. He was given timely treatment, setting them both on the road to recovery. Today, both Bhavya and Bhavyansh are thriving. Bhavya underwent an eye removal surgery because of advanced retinoblastoma, but now wears a prosthetic eye, and this hasn't dimmed her spirit. Her parents' support and determination made her even top her class at school! The joy they bring to our staff and doctors during their follow-up visits at SCEH is contagious—their laughter and playful banter light up rooms! Early detection and prompt treatment can often preserve vision in the affected eye. It is essential to continue training and create awareness among primary caregivers. Retinoblastoma, though life threatening, is beatable - and Bhavya and Bhavyansh are living proof.



Department of Cornea organized a Cornea Infectious Keratitis Workshop in Nepal. The workshop was hosted by Tilganga Institute of Ophthalmology and sponsored by **KeraLink International**. 22 participants from 20 institutions and 13 cities across Nepal attended the workshop. The team included Dr Umang Mathur, Dr Manisha Acharya, Dr Nikunj Patel and Ms Rakhi Nathawat. Early intervention in keratitis not only reduces the burden of blindness but also the cost of treatment and skill of keratitis management is simple yet extremely effective.



# Humans of SCEH

Counsellor, SCEH Mohammadi

he year 2013 was a very difficult year for me. I had been married just six years and had a five years old son, when my husband, a lawyer, was shot in a random shooting at the court.

My world had just turned upside down. I had lost my friend, companion and my biggest pillar of strength. Even though we were living in a joint family, I knew time had come that I need to step up and become independent. While most of the family was not in my favor of working, my father-in-law and sister in law supported me.

I stumbled upon the knowledge of a vacancy at SCEH at a nearby drug store, where I had gone to by some medicines and just happened to ask the shopkeeper regarding any job opportunities. While I had worked before marriage, it had been six years since I stepped out of the house alone, and the idea of workina again was terrifying. Luckily, I got a job in counseling at Mohammadi. Beina respectful job close to my home, I grabbed it despite all my concerns and fears. The biggest challenge was to leave my son alone at home. Neither of us were used to being apart. In the early days, guilt and sadness consumed me, but with the help of my sister-in-law, I overcame

all the negativity and started focusing on my newfound job. Just when things had started picking up at work, I lost my sister-in-law also. I don't think there were any more tears left in me, so I picked up the broken pieces of my life and resolved to take care of my family and hers.

What I love the most about my job is the gratitude some patients come back with after their surgeries have gone well, especially children and



bilateral mature cataracts. One such patient I never forget was a young male I convinced for optical corneal transplant when he was very reluctant. His transformation post-surgery was heart-warming. Even in my locality I am well respected all thanks to my job. Today, my son is studying in Bareilly, and I recently got my sister-in-law's son married. SCEH is my second home, my colleagues are my extended family and I intend to retire from here.

"When one door closes, another opens"
- Alexander Graham Bell

# Outstanding achievements at APAO-AIOS 2025



Dr Manisha Agrawal won the best posterior segment video award. She also won the best poster podium presentation and was awarded the AIOS appreciation award.



Dr Obaidur Rehman was awarded the best paper (external eye and ocular surface diseases category), best video (general film category), and best poster (lacrimal category). He was simultaneously a contender for the Col. Rangachari, CS Reshmi, and ET Selvam awards. Last year, he won the best poster podium presentation 2024 (lacrimal category).



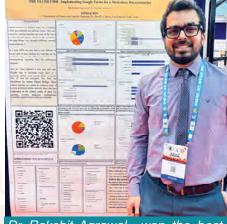
Dr. Chhavi Gupta received the Sujatha Savitri Rao Award for the best paper in the orbit and oculoplasty (2024).



Dr. Elika Gupta was awarded FAICO in Oculoplasty



Dr Shirali Gokharu won the International Ophthalmic Heroes of India award for her travel grant to ISOO and also for winning the best poster podium presentation.



Dr Rakshit Agrawal won the best physical poster in Cornea.



Dr Aditya Sharma was awarded FAICO in Comprehensive Ophthalmology



Dr. Khyati Roop won the best physical poster award in Ocular Pathology/Ocular Oncology and tumours.



Team from SCEH, which included Mr Sandeep, Mr Ramesh and Ms Pratibha organized and managed 25 wetlab stations at APAO-AIOS 2025 where over 600 people were trained during the conference.



ISGEO Spirit Award awarded to Bodhya Eye Consortium (BEC) and presented to Dr Umang Mathur



Ms. Ria Ratna, was selected as the Rare Star Awardee in the Genetic Counselor Category for the year 2025.



Dr Richa and Dr Arjun Aurora won second prize in medical retina case presentation and video competition categories respectively at the Retina fellow's retreat at PGI Chandigarh.



The second Annual Sukarya ceremony was held in April 2025 to honor outstanding contributions of employees and teams who embody the spirit of continuous improvement.



A Grand Mega Health Camp was held in Morena, Madhya Pradesh, from March 26 to April 2, 2025, providing essential medical services to underserved communities. SCEH participated in the camp, delivering pediatric eye care services to over 500 children. Free spectacles were distributed, and 76 children were identified for surgical treatment. Rajya Sabha MP Shri Vivek Krishna Tankha supported the initiative.



Dr. Obaidur Rehman delivered a keynote lecture on 'Overview of Oculoplasty' at The Bright Eye, an optometry conference organized by Jamia Hamdard University.



Mr. Shashi Bhushan Vice President of SBI Foundation, visited SCEH Vrindavan and Farah EI centre, where he was thoroughly impressed with the progress, noting that all targets had been successfully achieved.



Dr Shalinder Sabherwal was elected as the Vice President of the International Society for Geographical and Epidemiological Ophthalmology (ISGEO).

In the recently concluded IAPB meeting in Kathmandu, our team was featured in several posters at the event. Dr Umang Mathur presented one that highlighted the formation and early achievements of the Bodhya Eve Consortium. KeraLink showcased our collaborative work at the Saharanpur center, aimed at preventing and treating corneal vision loss. Peek shared findings from multiple projects at SCEH, including validation of their near vision app, development of a near vision algorithm-based calculator, and a study on enhancing adherence in community eye screening programs. Dr Shalinder Sabherwal presented our recent study on willingness to pay for near vision glasses, a project delivered in partnership with Peek and the Livelihood Impact



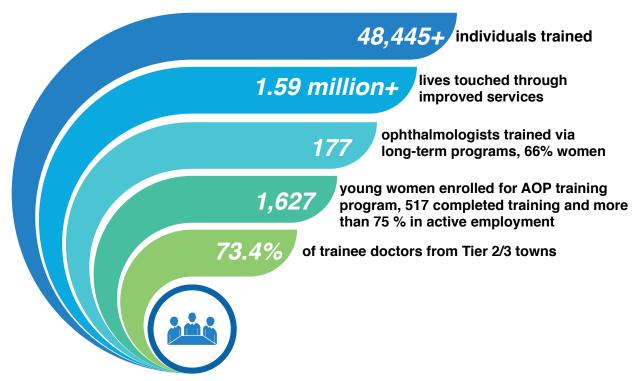
Fund. Dr Priya Morjaria from ICEH, share updates on the SEHRA tool and its application at SCEH.

# Standard Chartered -Shroff's Eye Care Education Phase 2



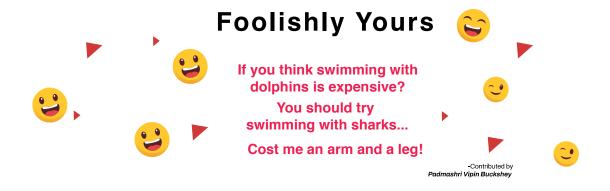
When Standard Chartered Bank partnered with SCEH to create the Eye Care Education Academy, it was more than a CSR initiative. It began with a shared conviction that the best way to make quality eye care accessible isn't just through infrastructure, but by investing in people and was a long-term commitment to nurture eye care professionals who could serve underserved communities, with skill, compassion, and cultural understanding. With time, that commitment deepened and gave rise to a new chapter in building inclusive, community-rooted eye care talent for India with launch of a new Rural Eye Care Academy in Mathura, Uttar Pradesh.

#### What we've achieved so far:



#### What's ahead in Phase 2:

- A decentralised academy in Mathura tailored to rural health realities
- Expanded training for ophthalmologists, paramedics, and eye care managers
- Mentorship from the central academy to support local delivery





# Dr. Shroff's Charity Eye Hospital

5027, Kedarnath Road, Daryaganj, New Delhi-110002 Ph no:011-42524444, 43528888| Email:communications@sceh.net

Delhi | Alwar | Mohammadi | Meerut | Modinagar | Ranikhet | Saharanpur | Vrindavan

# **Creative Corner**

While even ace surgeons experience a flutter of the heartbeat while operating, for a trainee or a relatively younger surgeon, the turbulence within can range from a hailstorm to a hurricane. **Dr Aastha Garg**, Consultant, Cornea and Refractive services, puts the feeling into words...

# A Surgeon's Perspective: The Calm Within the Storm

Finding clarity in the quiet chaos of the operating room

It was a day like any other, or so it seemed. I was preparing to take my usual position at the head of the operating table for a posterior polar cataract surgery (planned with an anterior vitrectomy). Routine, yes, but inside, I was far from composed.

#### The Inner Storm



As the nurse began draping the patient's eye, a wave of anxiety hit me. What if I made a mistake? It wasn't just the surgical challenge that unnerved me that day. I was carrying a mental weight—a storm of personal turmoil I couldn't shake. And yet, in front of me lay a patient, calm and trusting. She had no idea what I was feeling. We had discussed the risks, she knew a second surgery might be necessary, but she still looked at me with unwavering confidence. Repeatedly, she asked, "लेंस तो डल जाएगा ना?" ("The lens will be put in, right?"). I smiled and assured her, "Yes, I'll give it my best."

# The surgery

As she lay under the surgical lights, I pushed the emotional waves aside and steadied myself. As I sat on the operating chair, I fought back the tears threatening to break through. Then, I made the side port incision and began the procedure. The surgery went smoothly—no complications. When I removed the drape and told her it was successful, she simply smiled, unaware that, albeit small, I had still accomplished a little something.

#### The Return of the Noise

But as she left the room, the noise came rushing back—the nagging thoughts, the mental clutter. They hadn't disturbed me once during the surgery. For the last fifteen minutes, my mind had been silent. No fear. No sadness. Only focus. And that's when I realized something profound: every surgeon, at some point, has stood at this crossroads. We've all had to silence our inner chaos to do right by the patient in front of us.

# The OR as Therapy

Perhaps that's why many of us see the operating room as a form of therapy. Inside, no one can touch you—not emotionally, not physically. It's just you, your patient, your music, and your team. It's probably not the adrenaline rush that we chase. It's peace, the stillness and clarity.

#### What Lies Behind the Smile

We often forget that behind a surgeon's calm smile could be a skipped meal, a sick family member, or a heavy heart. And yet, we show up. We laugh in the scrub room, exchange knowing looks, and carry each other through. Our seniors, peers and the nursing staff—they understand the unspoken. They stand by you, even on your worst days, because they know that underneath the title, we're just human. And in this quiet, imperfect humanity, we find purpose. We make mistakes. We forgive each other. We heal others while trying to hold ourselves together.

That day reminded me, that the person holding the scalpel is not just a surgeon. They are a human—doing their best, every single day. That day taught me to be kind and resilient.

I remembered the words of Dr. Sangwan: "Be kind to each other."

And of Dr. Mathur: "A surgeon who can conquer surgical anxiety can conquer any other anxiety."