

CITATION

Dr Himmatrao Saluba Bawaskar is an internationally recognised Clinical Scientist working since more than 40 years for saving the lives of millions of poor, marginalised communities from snakebites envenomation and scorpion sting. He was born in a small village with a population of 500 in rural Maharashtra in a poor farmer family on 3rd March 1951. His childhood was marked with incessant hardships. After obtaining MBBS degree from Government Medical College, Nagpur, he joined the primary health centre Birwadi, Maharashtra in 1976 and studied in details the clinical sign and symptoms due to venomous scorpion sting and published original research article in the Lancet 1982. After completion of MD in Medicine from B J Medical College, Pune, he himself took request transfer to Rural Hospital Poladpur in Raigad district to continue the research in scorpion sting. In 1981 his doctor wife Pramodini joined his venture. In the year 1983 doctor couple tried sodium nitroprusside and then prazosin an alpha blocker to reverse the refractory pulmonary edema due to scorpion sting and case fatality rate due to scorpion sting is dropped down from 40 percent to less than 1 percent. In 1986, in his paper titled Prazosin in the management of cardiovascular manifestations of scorpion sting published in The Lancet he put forward for the first time Prazosin as a physiological antidote for scorpion stings. His pioneering research on scorpion sting was published in the Lancet, British Medical Journal, British heart Journal and many other topmost National, International journals. His work on scorpion sting attracted attention of several international scientific bodies and experts. He was invited by Ciba foundation London 1994 and Morocco government at Rabat 2009 for discussion and guidance of scorpion sting management.

Dr Bawaskar continuously providing training to all peripheral doctors on how to manage scorpion, snake bite at limited resource settings. He generated scientific evidence on simple preventive measures such as bamboo cot and mosquito net prevent krait, scorpion and mosquito bite which was published in the Lancet.

Dr Bawaskar extensively studied and analysed chronic renal failure in farmers due to cadmium and lead contaminated of drinking water in a clay land as a result of phosphate manure and pesticide in Buldana and Akola district and published his findings in Clinical Toxicology. His original article regarding use of thrombolysis for acute Myocardial infarction at rural setting was published in Tropical doctor. His original contribution of diagnostic scores for hypothyroidism got published in the JAPI. Dental fluorosis due to more than 3 PPM fluoride content of bore well water used for drinking found in a village published in Tropical doctor. Due to his research, now the villagers are provided fluoride free water.

Dr Bawaskar is providing mentoring support to the ICMR-NIRRH Scientists and provided training on snakebite to the Medical Officers in Tribal block of Palghar District. The case fatality rate due to snakebite was drastically reduced after Dr Bawaskar training. Based on this contribution, Government of Maharashtra requested him to conduct training of all Medical Officers in Maharashtra State. Dr Bawaskar also contributed in the development of National Treatment Guidelines for Snakebite.

Dr Bawaskar has extensively provided clinical services and also published more than 70 original research articles in national and international medical journals including Lancet, New England Journal of Medicine and British Medical Journal. He also contributed several book chapters and policy documents on scorpion and snake bite. He is invited as peer reviewers for scientific article by the editor of Lancet, NEJM, Clinical Toxicology, JAPI, JICMR, Current Science etc He was invited to deliver talks in national and internal medical conferences, awarded Dr.Mehta and Patel award for his best paper published in JAPI 2007. He also contributed in drafting the policy to curb corruption in Medical Practice.

He travelled extensively all over Maharashtra, Tamilnadu, Andhra Pradesh, Karnataka, Kerala, Jammu and trained peripheral doctors by giving lectures, slide

demonstrations regarding how to manage scorpion snake bite cases at restricted resources at village level. He wrote book on scorpion sting for doctors and his biography in Marathi book Baristarch Kart. His treatment is accepted and utilize for to save scorpion and snake bite victims all over middle east , Africa , Mexico , Pakistan and India .

It is important to note that Dr Bawaskar life time clinical and public health research is done without help of any funding agencies either Government or Non Government Organisations. All the research conducted was from his own funds and his family earning only. Dr. Bawaskar is an exemplar for the fact that research truly related to upliftment of human life needs a higher level of dedication.

ACHIEVEMENTS

Dr Bawaskar Research demonstrated use of prazosin for treatment of scorpion sting that brought down case fatality rate due to scorpion sting from 40 percent to less than percent in Konkan region of Maharashtra. His research on snakebite and scorpion sting gave a glory to India in the International science and is a great motivation to the young generation. Capacity building of healthcare providers on snakebite and scorpion sting especially in rural and tribal areas is a major achievement that paved way to reduce mortality and morbidity due to snakebite in India. Due to his tireless services to the Nation on addressing several public health problems especially of the poor and marginalised population, millions of lives are saved.

STATE AWARDS

AntiaFinseth award 2004 by Association of Rural Surgeon India

kamaltaiogaleziddhapurskar 2004

Rajabhau Joshi Rugnasevapurskar 2004

Late RamdasajiKalaskarkrutandynapurskar 21 August 2005

2005 Award for the IMA appreciation of selfless and dedicated services offered for mankind from rural area

Apatevachanalayutkrustasahitye award for barusterch Kart june 2006

Marathwadabhushan 17 September 2006 at alibag

Jivan Gaurav Puraskar By Babasahen Ambedkar Marathwada university Aurangabad

NATIONAL AWARDS

Dr .Mehta and Patel award

Life time achievement award by maharashtraasso. Of .Physicians Conference 2003 at Goa.

Award for original research in scorpion sting by Parkar medical foundation Ratanagiri.

Buldana Zilha Gaurav Purskar 2004

Life time award of clinical research society 2012.

Shri Guruji award 2012

2013 Ekam foundation Dr KS Sajivi Lifetime Achievement Award.

Dr Tulpule purskar for marathi BOOK Shodh Gramin Arogyacha Marathi vidyanparishad 2016

Science Man of Year By Lokmat paper by the auspicious had of former president Hon Smt Pratibhatai Patil

ACHIEVER AWARD 2019 at MAPICOM 2019

PADAM SHRI NATIONAL AWARD 1922

INTERNATIONAL AWARDS

Ciba foundation London 1994 and Morocco government at Rabat 2009 for discussion and guidance of scorpion sting management.

Excellent award 2015 lion club pune 27th Dec 2015

SOCIETAL IMPACT

Mesobuthus Tamulus a most lethal scorpion flourished allover Kokan region with 40 percent case fatality due to refractory pulmonary edema have been reported from Maharashtra, Karnatka, Andhra Pradesh, Mudurai, Chennai, Pondicherry and

Saurashtra. In the year 1976 Dr Bawaskar HS joined the primary health centre Birwadi and studied in detail the clinical sign and symptoms due to venomous scorpion sting and publish original article in the Lancet 1982. Due to Dr Bawaskar contribution the case fatality rate was brought down to less than 1 percent. He has trained several doctors in periphery all over India that could save lives of millions of people.

***Contributed scorpion and snake bite chapters to API Text book of medicine.**

****Chapter on scorpion sting international text of medicine Singapore. Text book of Environment medicine**

*****Case report on snake bite – Davidson 100 cases text book.**

Editorial in JAPI, Journal of critical care medicine, Indian paediatrics

**** CME training of army doctors at JAMMU 166 9th and 10th June 2018**

****Chief adviser and guide and expert Training programme on diagnosis prevention and management of snake and scorpion bite For Public health department government of Maharashtra model rural health research Unit (MRHRU) Dahanu Dist.Palghar Maharashtra(ICMR PROJECT)**

PJ Mehta Oration 2023 Association of physician India

It important to note the life time clinical research is done without help of any funding agency and funds from day today's family earning.

Hobbies –

Medicosindia link

<http://www.medicosindia.com/dr-himmatrao-bawaskar-the-crusader/>

<https://www.loksatta.com/chaturang-news/loksatta-gadde-panchvishi-article-by-himmatrao-bawaskar-abn-97-2404381/>>

<http://www.daktre.com/2012/04/of-scorpion-stings-and-antivenoms/>

Dr Bawaskar Interview in Forensic Journal By Dr Agarwal

http://www.anilaggrawal.com/ij/vol_009_no_001/others/interview/1/bawaskar.html

HEALTH POCH DELHI

<https://www.healthsoch.com/health/cardiology/diagonal-ear-lobe-crease-a-premonitory-diagnostic-sign-of-impeding-ischemic-heart-disease/>

BIBLIOGRAPHY

Dr H.S.BAWASKAR & P.H.BAWASKAR

YEAR	SUBJECT	JOURNAL
1977	Scorpion sting and cardiovascular complications	<i>Ind. Heart. J. ;29;228</i>
1978	Pulmonary oedema after scorpion sting	<i>Lancet I 445-46*</i>
1982	Diagnostic cardiac premonitory signs and symptoms of red scorpion sting	<i>Lancet ii 552-54*</i>
1984	Scorpion sting	<i>Trans. Roy. Soc. Trop. Med. Hyg.,78:414</i>
1986	Prazosin in management of cardiovascular manifestations of scorpion sting	<i>Lancet , I:511-12*</i>

1987	Prazosin for vasodilator treatment of acute pulmonary oedema due to scorpion sting.	<i>Annal. Trop. Med. And parasitol.</i> ,81: 719-23.
1987	New directions in the management of scorpion sting	<i>Mah. Med. J.</i> ,38:149-40.
1989	Sting by red scorpion (<i>Buthotus tamulus</i>)in Maharashtra state .India: a clinical study	<i>Tans.roy. soc. Med. Hyg.</i> , 83:858-60.
1991	Treatment of cardiovascular manifestations of human scorpion envenoming is serotherapy essential.	<i>J. trop. Med. Hyg.</i> , 94; 156-58.
1991	Consecutive sting by red scorpions evoke severe cardiovascular manifestations in the first, but not in second victim: A clinical observations.	<i>j. trop. Med. Hyg.</i> ,94:231-33.
1991	Scorpion sting: a review of 121 cases	<i>j. wilderness med.</i> ,2:164-74.
1991	Cardiovascular manifestations of severe scorpion sting in India (a review of 34 children)	<i>Annals. Trop. Pedtr.</i> ,11;381-87.
1992	Treatment of envenoming by <i>Mesobuthus tamulus</i> (Indian red scorpion)	<i>trans. Roy. Soc. Med. Hyg.</i> ,86:459.
1992	Role of atropine in management of cardiovascular manifestations of scorpion envenoming in humans.	<i>J. trop. Med. Hyg.</i> ,95:30-35.
1992	Management of the cardiovascular manifestations of poisoning by the Indian red scorpion (<i>Mesobuthus tamulus</i>).	<i>Brit. Heart j.</i> ,68:478-80.
1992	Myocardial damage caused by mesobuthus tamulus envenoming.	<i>Bombay. Hospital. J.</i> ,34:215-17.
1992	scorpion sting	<i>continuing med. Education</i> ,2:19-23.
1994	Vasodilators :scorpion envenoming and the heart(An Indian experience),	<i>Toxicon</i> ,32:1031-40.
1996	Malaria vaccine	<i>Lancet</i> ,348:1379*
1994	Scorpion envenoming	<i>Ciba foundation bulletin</i> ,37:16-17.
1994	Scorpion sting.	<i>Med. Update. Feb.</i> 799-823.
1996	Severe envenoming by the Indian red scorpion <i>mesobuthus tamulus</i> . The use of prazosin therapy	<i>Q,J.med.</i> ,89:701-4.
1996	management of scorpion sting	<i>proceeding of first national symposium on venom and toxins ICMR</i> 30-35.
1997	Ian Munro remembered	<i>Lancet</i> 349:960.*
1997	Peripheral doctors form backbone for the management of acute life threading medical emergency evoked by Indian red scorpion envenoming.	<i>Bombay hospital J.</i> 710-14
1998	Contributed chapter on scorpion sting	<i>Medicine Update</i>
1998	Management of scorpion sting	<i>medical therapeutic</i>
1999	Management of scorpion sting	<i>Heart</i>
2000	Envenoming by scorpion and Snakes (Elapidae) their neurotoxins and therapeutics.	<i>Tropical Doctor</i> ;30:23-25
Quoted	Scorpion sting	<i>3rd edition of Oxford text book of medicine</i>
Quoted	Clinical research in rural area	<i>clinical science and clinical research by Prof. R.D.Lele</i>
Included		<i>Pharmacology and pharmacotherapeutics 14th ed. By Satoskar& Bhandarkar.</i>
Guest lecturers		
author	• Scorpion sting its management and literature review	<i>POPULAR PRAKASHAN .</i>

OTHER PUBLICATIONS

1993	Clinical science and rural medicine	<i>Bombay hospital .j. ,35: 115-29.</i>
1994	Thrombolytic therapy in acute myocardial infarction in rural setting	<i>Bombay hos. J. ,36;214-17.</i>
1993	Prolonged QT interval due to chloroquin.	<i>Bom. Hos. J.36:272-74.</i>
1993	Hypothyroidism	<i>Bom.Hos. J.,35:213-15.</i>
1992	Snake bite.	<i>Bom. Hos. J.34:190-94.</i>
1993	Toxic effects of brochodilators.	<i>Bom. Hos. J. 35:213-14.</i>
1996	Non allopathic doctors form the backbone of rural health	<i>Issues in med. Ethics.,4:112-14.</i>
1998	Premonitory diagnostic signs and symptoms (scores) of thyroid hypo-function: A clinical observations.	<i>JAPI, 46: 714-15.</i>
1995	Member of Indian Council of Medical research (Task force Venom & Toxins) New Delhi.	
1999	Sudden cardiac death in hospital	<i>Issues in Medical ethics ;4: 123</i>
2000	Electrical alternans with scorpion sting	<i>Ind. J. electrocardiology 59-63.</i>
2000	Is BCG vaccination obsolete?	<i>National medical. j(correspondence) ;13 no 2 108-109</i>
2000	Prazosin therapy and scorpion envenomation	<i>JAPI ;2000;48:1175-80.</i>
2000	Endothelin, nitric oxide and prazosin	<i>JAPI;2000;48:1224</i>
2001	Clinical profile of HIV in Rural Western Maharashtra	<i>JAPI;49:388-89.</i>
2001	Call for global snake –bite control and procurement of funding .	<i>Lancet ;357:1132-33 7th * April</i>
2002	Profile of snake bite poisoning in western Maharashtra	<i>Tran. Roy. Soc. Tro. Med. Hyg ,96:79-84.</i>
2001	Researcher, clinician, or teacher?	<i>Lancet* ;358:921-2</i>
2002	Thrombolytic therapy in acute myocardial infarction in a rural setting	<i>Trop. Doctor ,32:66-70</i>
2002	Minerva south Asia	<i>BMJ ,17:888</i>
2002	General practice in rural areas	<i>Issues in medical ethics Vo. X no 2 april-june 14</i>
2002	International CME- critical Care in community hospital.	<i>12-13 TH NOV mgims WARDHA</i>
2002	National symposium on venom & Toxins Jammu	<i>15-16th nov</i>
2002	Review meeting D/D, DHO/Civil surgeon Dr Salunke	<i>AT BAIFf pune 20th nov</i>
2002	Aphasia in a farmer after viper bite	<i>Lancet* 23 nov.02; 360;9346 :1703</i>
2002	Guest speaker	<i>The national Symposium on venom and toxins 15th and 16th November</i>
2003	Uses of errors Mistakes are the lessons of the past	<i>Lancet 4th Jan 03*</i>

2002	Authentic hero 's of India	<i>The week 29th Dec 02 page 78</i>
2003	A sold out soul can not impersonate to be a purchaser.	<i>JAPI 2003;51:92-93</i>
2003	World's forgotten children	<i>Lancet 5th April 03*</i>
2003	Whose interest the world trade markets serve?	<i>Lancet 12th April 03*</i>
2003	Profile of scorpion sting in children and its management at rural setting	<i>Indian pediatrics</i>
2003	Child survival in India – debate	<i>Lancet ;362 Web*</i>
2003	Sponsored conferences	<i>issue in medical ethicsXI:4:134</i>
2003	Clinical profile of severe scorpion envenomation in children at rural setting	<i>Indian Pediatrics ;40:1072-80.</i>
2004	Snake venoms and antivenins :critical supply issues (Editorial)	<i>JAPI;52:11-13</i>
2004	Towards evidence to secure reproductive rights(letter)	<i>Lancet ;363:991*</i>
2004	envenoming by krait(<i>bungarus caereulus</i> and cobra(<i>Nana naja</i>) envenoming and their management at Rural setttin in India	<i>Journal wilderness and environmental medicine 15;4:257-66</i>
2004	Political neglect in India's health	<i>Lancet. :364:248 17 July 04*</i>
2004	Bilateral ptosis following wasp sting	<i>JAPI;52:842.</i>
2005	Management of scorpion sting in rural setting: what is role of scorpion antivenom?	<i>J. animal toxins and venom tropical med. January JATViYD 05</i>
2005	Organophosphorus poisoning in agricultural India- status in 2005	<i>Editorial JAPI ;53:422-24</i>
2005	Research fraud	<i>Lancet ;36:1076*</i>
2005	Scorpion sting: Current Management	<i>Physician Digest Vol 15 No 4 ; 43-58</i>
2006	Scorpion sting –current management	<i>Pediatrics on call</i>
2006	Endemic fluorosis-a description of severely affected population in an isolated village in western Maharashtra	<i>Tropical Doctor;36:221-23</i>
2006	Novel role of anti-platelet agent(aspirin plus clopidogrel) in an incoaguable n blood of a victim of Russell's viper snake bite	<i>J.venom.anim.toxinsIncl.trop. dis vol12 no 1 : 137-141</i>
2007	Utility of scorpion antivenin Vs prazosin in the management of severe <i>mesobuthus tumulus</i> (Indian red scorpion) envenoming at rural setting	<i>JAPI ;55:14-21.</i>
2007	Snake bite poisoning	<i>Medicine update Vol 17 :349-358</i>
2007	High dose of pralidoxime for organophosphorus poisoning	<i>Lancet ;369:1425*</i>
2007	Can scorpion be useful?	<i>Lancet 370:1664*</i>
2008	Profile snake bite in rural Maharashtra	<i>JAPI ;56:88-95</i>
2008	Snake bite, cocktails , and a girls with a stomach ache	<i>Lancet;371:696*</i>
2008	Woke up paralysed-no injury , no stroke	<i>Lancet ;371:870*</i>
2008	Scorpion sting: study of clinical manifestations and treatment regimen	<i>Current science ;95:9:1337-41</i>
2009	Antivenom for children with neurotoxicity from scorpion sting	<i>NEJM ;361:631-32</i>
2009	Management of snake bite and scorpion sting	<i>Quarterly Medical review</i>

2010	Snake bite in South Asia :A Review	<i>;60:4 Oct-Dec page 1-48 PLOS Neglected Tropical diseases :4:e603-11</i>
2010	Snake bite	<i>Lancet 2010:375:805*</i>
2010	Chronic renal failure associated with heavy metal contamination of drinking water: a clinical report from small village in Maharashtra.	<i>Clinical toxicology 2010;48:768-768</i>
2011	Efficacy and safety of scorpion antivenom plus prazosin compared with prazosin alone for venomous scorpion (<i>Mesobuthus tamulus</i>) sting: randomised open label clinical trial	<i>BMJ (in press) Likely to be publish on web site BMJ on 15th Jan 2011</i>
2012	Scorpion sting:Update JAPI	
2012	Hemothorax in snake bite paediatrics	<i>Indian Paediatrics 2012</i>
2012	Problem at small nursing home in rural India	<i>Issue in medical ethics</i>
2013	Tobacco and health at rural India –High lights 2012	<i>Lancet 5th Jan 2013*</i>
2013	Snake bite poisoning	<i>Journal of the Science of healing outcomes :5:18-20</i>
2013	Medical trade	<i>IJME oct 2013</i>
2014	Snake bite poisoning: A neglected life threatening – Occupational hazard	<i>Ind.J.Crit.Care Med. 18;123-24</i>
2014	Premonitory signs and symptoms of envenoming by common krait	<i>Tropical doctor 2014 44:82-85</i>
2014	Scorpion envenomation: Review	<i>NEJM ;371:473-63</i>
2014	RBC acetyl choline esterase: A poor man's early diagnostic biomarker for familial Alzheimer's and Parkinson's disease dementia	<i>J.Neurosciences in rural practice JAN 2015</i>

2014	Severe scorpion sting result in acute myocardial infarction	J Cardiovascular disease research 2014;5 :27-29
2014	Homocysteine :Often neglected but common culprit of coronary heart disease	J cardiovascular disease research 2014;5:40-43
2014	Violence against doctors in India	Lancet* 2014;384:955-56*
2015	Caste is eating like termite to Indian society	Lancet *2015;385: 416*
2015	Snake Bite Poisoning	JMGIMS 2015;20:5-14
2015	Homocysteine and cardiovascular system	Int R J Pharm Sci 2015;6:1-7
2015	Why Indian doctors are lethargic about active research	IJME 2015;X11:60
2015	Listen to mother first	Indian paediatrics 2015;52:257
2015	Reversible causes of coma	Lancet*;385:1178
2015	Scorpion envenomation: A Step ahead [editorial]	Indian Paediatrics 2015;52:289-90
2015	Eliminating acute kidney injury by 2025: an achievable goal for India	Lancet* 2015;386:855
2015	C-peptide and cardiovascular system	International J Research in medical science 2015, 3(9): 2436-2439
2015	Anaphylaxis to scorpion antivenin and its management following envenomation by Indian red scorpion, Mesobuthus tamulus. Indian J Crit Care Med 2015;19:547-9	Indian J Critical Care Med 2015;19:547-49
2015	Management of snake bite poisoning	Your health[IMA } 64:08:
2015	2015 – Prevention is mother of cure High light	Lancet 2015:386:2467
2016	Should we share the management of acute life-threatening medical emergencies on the telephone?	Indian J Medical Ethics 2016vo1 issue 4 263-264
2016	Diagnostic signs and symptoms of congestive heart failure in dogs	Indian J animal health(2016), 55(2) : 177-178
2017	Profile of Vitamin D in patients attending at general hospital Mahad India	Indian J endocrinology and metabolism 2017;21:125-30
2017	Chinese restaurant syndrome	Indian j critical care medicine 2017;21:57-58
2017	Pathophysiology of dilatation of pupils due to scorpion and snake	Indian J ophthalmology 2017;67-70

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- 2017- Snake bite in India: a neglected disease of poverty **Lancet – 2017;390:1947-48**
- 2017- Rabies: Novel clinical presentation **IJCC ;21(12):871-73**
- 2018 - Diagonal ear lobe crease: A premonitory signs of impending ischemic heart disease **IJFMPC 2018 ;7:1361-67**
- 2018- Emergency care in rural settings: Can doctors be ethical and survive? **Indian J Medical ethics 2018 Octo- Dec 3(4);329-30**
- 2019 -Snakebite envenoming. **Lancet 2019;393:129-131**
- 2019- Pre-intensive care: Thrombolytic (streptokinase or tenecteplase) in ST elevated acute myocardial infarction at peripheral hospital . **Indian J Family Medicine and Primary care 2019;8:62-71**
- 2019-Bawaskar HS, Bawaskar PH. Diagnosis of envenomation by Russell's and Echis carinatus viper: A clinical study at rural Maharashtra state of India. **J Family Med Prim Care 2019;8:1386-90.**
- 2019 – Tropical Megaloblastic Anaemia **Lancet 2019 ;393: June 1 2261**
- 2019 –Snake bite:prevention and management in rural Indian setting –**Global Lancet – 2019;7:e1178**
- 2019 Can doctor s advise beyond the purely professional? **IJME 9th July**
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- 2020-Clay soil chronic kidney failure in vidharbha region of Maharashtra state . Achieves clinical nephrology 2020; 6(1): 010-012. DOI: <https://dx.doi.org/10.17352/acn.000039>**

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2020- From quarantine room: Physician perspective. JFMPC 2020 (in press)

2020-**Profile of Vitamin B12 and Vitamin D in Rural Schoolchildren in Raigad, India** **Indian paediatric** 2020 sept15 871

2020-**Scorpion Sting With ST-Segment Elevation** **JAMA** 26october 2020

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2021-Himmatrao S Bawaskar., Pramodini H. Bawakar., (2021) Primary Bilateral Papilledema due Myxedema. *J. Archives of Medical Case Reports and Case Study.* 4(1); DOI:[10.31579/2692-9392/026](https://doi.org/10.31579/2692-9392/026)

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2022-Post immunization COVID-19 disease J Family Med prim Care 2022;11:1555-7

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2022-Imparting knowledge is no more considered is no more considered a
paramount contribution IJME 6th September ,2022Doi:10.20529/IJME.2022.068

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often used by tribal community
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BMJ- RCT trial Impact factor 24, with editorial and paper and scorpion photo on cover illustration



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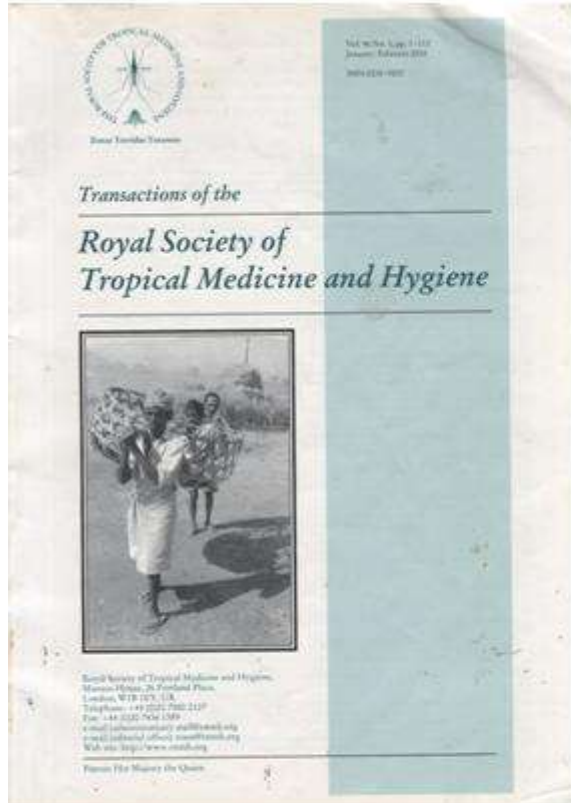
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IDEAL VEHICLE

Profile of snakebite envenoming in western Maharashtra, India

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Abstract

Ninety-one cases of snakebite were admitted between January 1998 and January 2001 to the general hospital at Mahad, 180 km south of Mumbai in western Maharashtra, India. Twenty-nine (31.9%) patients, when admitted to hospital, brought the snakes responsible for the bites (20 kraits, 9 *Bolis* [varanoid]). Forty-five (49.5%) patients had snakebite without envenoming; 27 patients had local fang marks without local and systemic manifestations; 18, reporting 24 h after the bite, had local oedema. Twenty-six (28.6%) patients were paralysed. Twenty-five cases who reported between midnight and 08:00 showed no local signs of envenoming. One patient, who reported at 16:00, had local oedema with bites and a history of cobra bite. Ten (11.0%) patients died: 5 on the way to hospital and 7 during treatment. Out of 7 cases transferred for tertiary care, 6 recovered and 1 died on the way to Mumbai. Early administration of anti-snake venom (ASV), endotracheal intubation and timely intervention with manual ventilation by Ambu bag and anticholinesterase treatment for Elapidae (krait and cobra) envenoming are crucial for saving lives. Clinical confirmation of snakebite with envenoming was by identification of the dead snake brought by victims and by clinical signs and symptoms such as paralysis (krait and cobra) and rapid progressive local oedema with active bleeding (E. carinatus and Russell's viper). The 20-min whole blood clotting test is a simple, rapid and reliable test of coagulopathy. It is also of use in assessing the effectiveness of ASV and is of crucial importance for controlling administration of expensive ASV in relation to restoration of blood coagulability.



25th Feb. 2022 Narveer Tanaji malusary shouory purskar at UMBRATH (Aditi takare and Bharat shet gogavale)

