Insight MD

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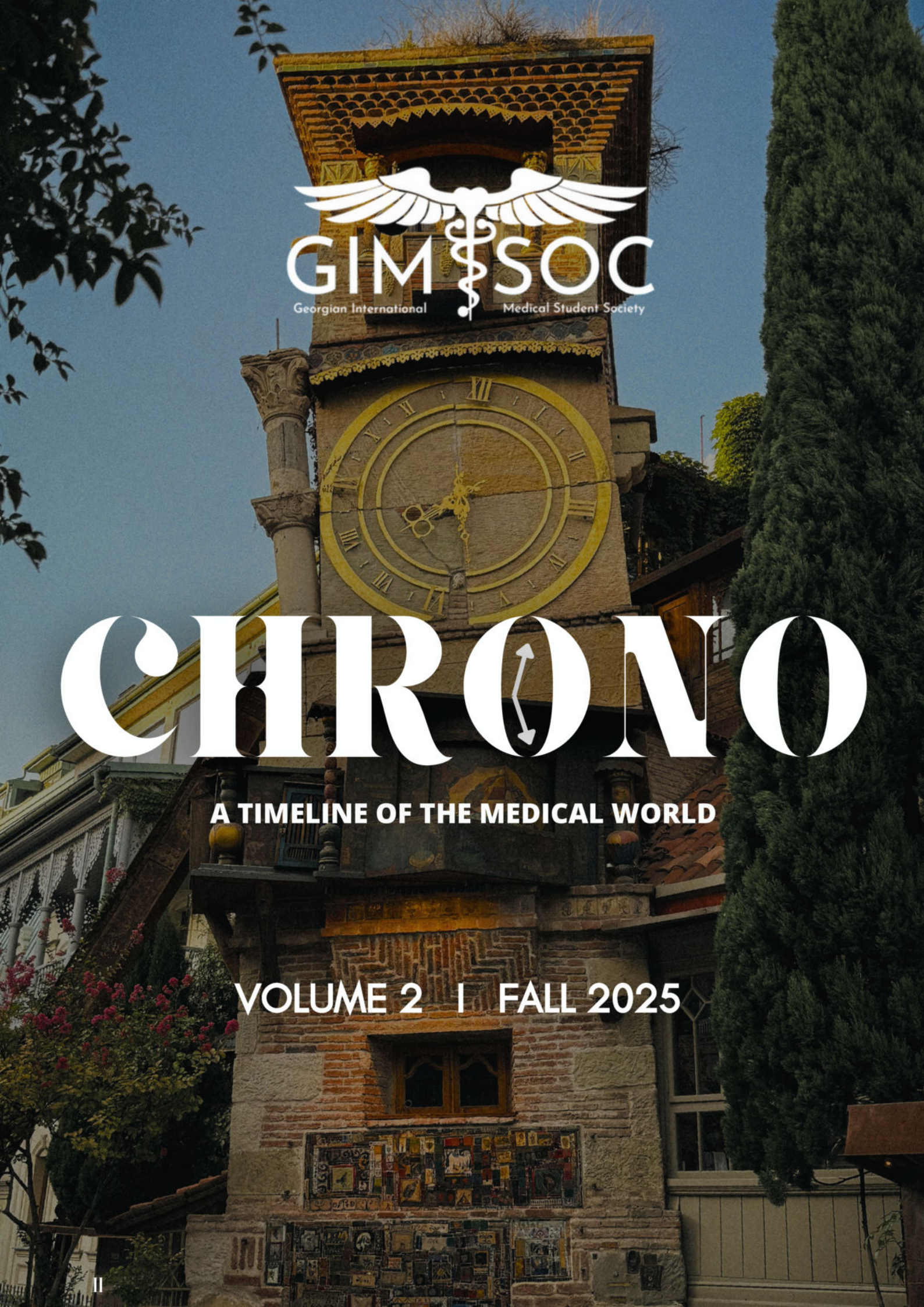
Games & puzzles to tickle your brain

EAT. STUDY. EXPLORE.
A round up of cafes and historical travel destinations within Georgia!

PENS & PAINTS
Poetry and art, sourced right from the community

GIM SOC
Georgian International Medical Student Society

VOLUME 2



CHRONO

A TIMELINE OF THE MEDICAL WORLD

VOLUME 2 | FALL 2025

The Name Unveiled

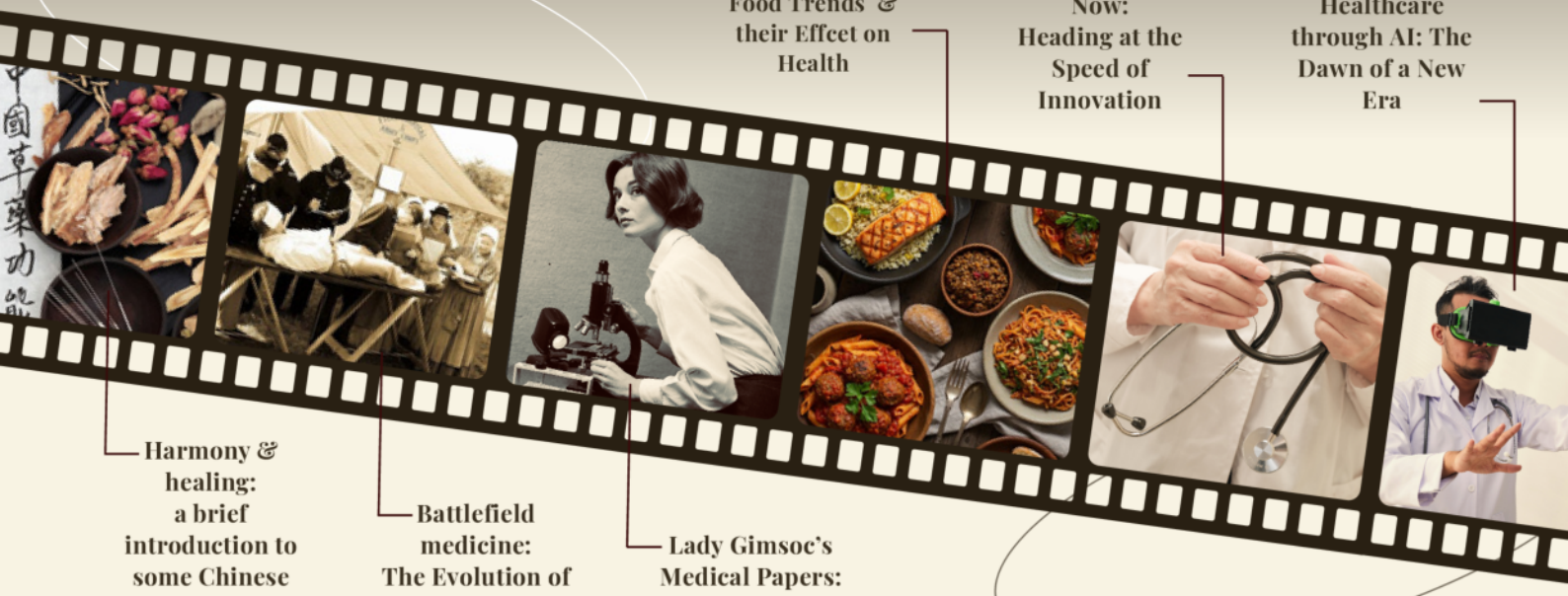
CHRONO

Welcome to **CHRONO**, a timeline of the medical world.

Each issue explores how healing has evolved through time, from ancient remedies and battlefield ingenuity to genetic frontiers and AI revolutions. **CHRONO** captures the heartbeat of innovation, the rhythm of discovery, and the timeless human drive to care, cure, and connect.

We begin with **Harmony & Healing**, exploring foundational Chinese medical techniques and their lasting influence on holistic care. **Battlefield Medicine** follows, highlighting how global conflicts accelerated advancements in trauma and emergency care.

Lady Gimsoc's Medical Papers: CRISPR Leaps from Lab to Life investigates gene-editing breakthroughs redefining clinical practice, while **A Look Through Food Trends & Their Effect on Health** considers nutrition's evolving role in public health. **The Medicine of Now** surveys the rapid pace of innovation shaping modern diagnostics and therapeutics, and **Transforming Healthcare through AI** concludes with an analysis of artificial intelligence as the new frontier of precision medicine. Through these features, CHRONO presents medicine as a continuum, a discipline shaped by history, driven by science, and propelled by innovation.



A Look through Food Trends & their Effcet on Health

The Medicine of Now: Heading at the Speed of Innovation

Tranforming Healthcare through AI: The Dawn of a New Era

Harmony & healing: a brief introduction to some Chinese Medical Techniques

Battlefield medicine: The Evolution of care through Global Conflict

Lady Gimsoc's Medical Papers: CRISPR leaps from Lab to Life

Peekthrough our Insight MD magazine's newest edition:

CHRONO

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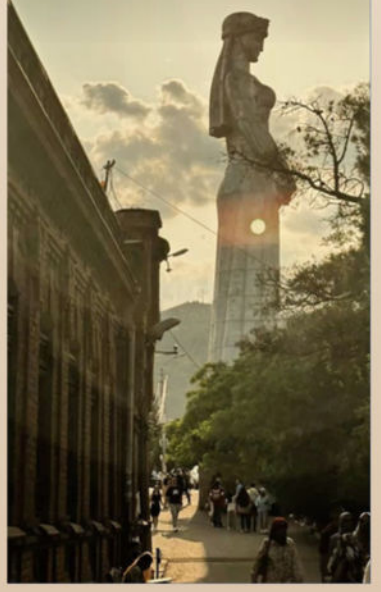

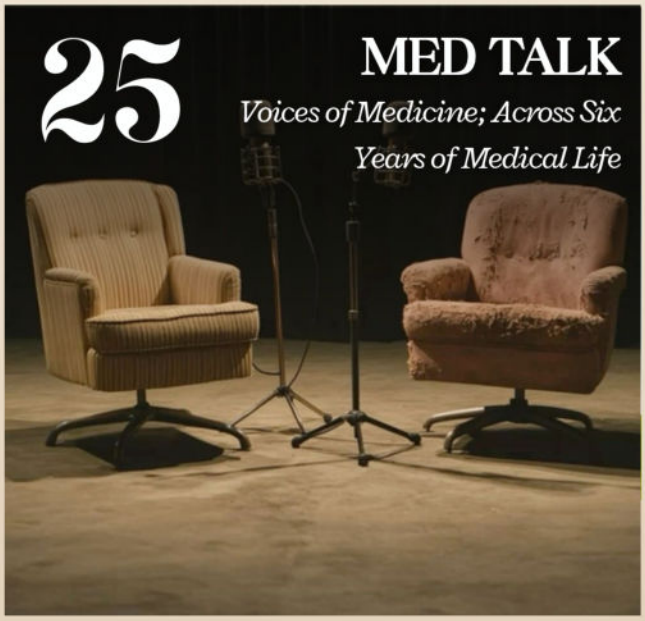

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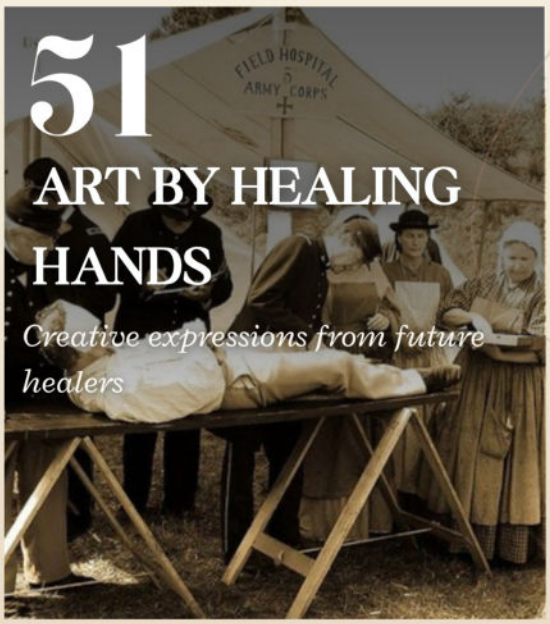

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letter from the EDITOR

Greetings Readers!

There is something quiet and magnificent about beginnings, the kind that do not arrive with fanfare, but instead slip in gently, like the first breath of dawn. That's exactly how my journey with GIMSOC began. A gentle unfolding into something greater. I came searching not just for a team, but for purpose, for community, a place where words could move hearts. And I found all that, and more, among the warm, driven souls who poured their creativity into every corner of this magazine.

This issue reflects our collective, creative heartbeat. It echoes the quiet strength of students learning to hold themselves upright in the face of impossible days. It flows with time, through the seasons of medicine, the pulse of progress, and the stillness between milestones. Time guides us, challenges us, and ultimately shapes the way we grow, not just as future doctors, but as human beings.

Through each article, artwork, and captured thought, we offer you not just a magazine, but a mirror. One that reflects who we are becoming: curious, resilient, and radiant with vision.

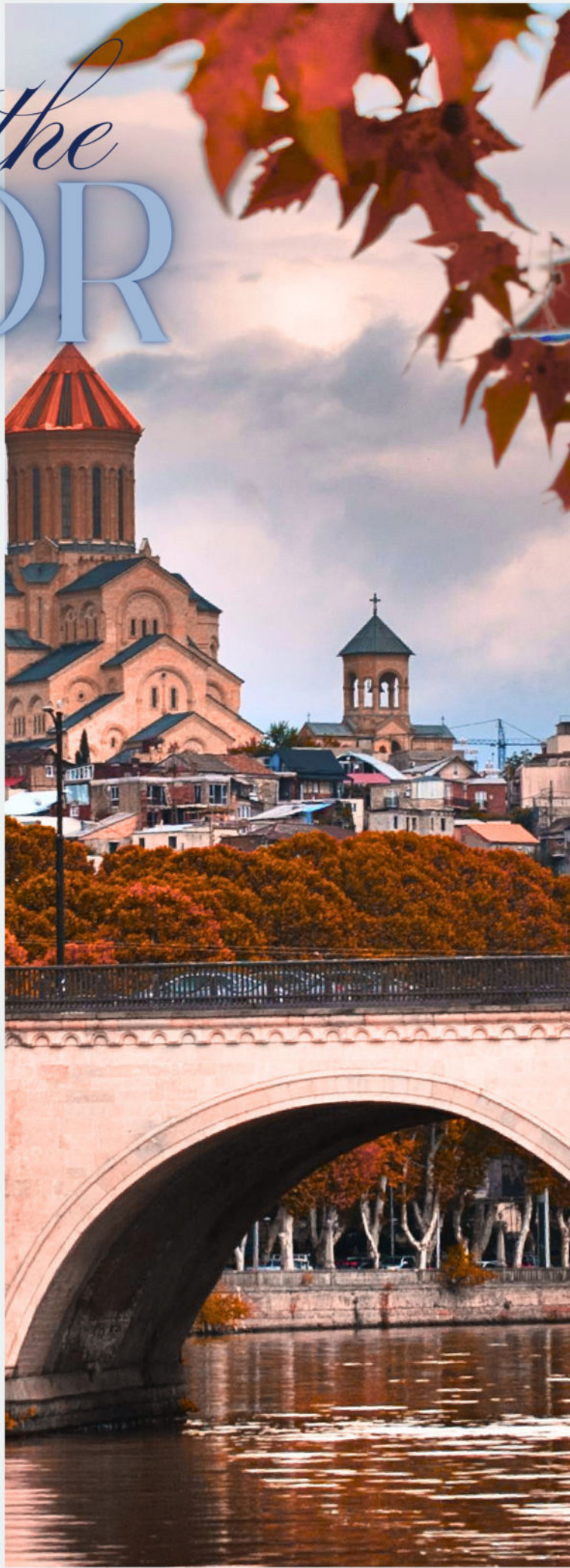
As someone who believes in stories not only for their beauty, but for their power to ignite change, I am proud to share this edition with you. Let it be your warm companion, a moment of pause in the whirlwind. And may it remind you that even in the most clinical of places, there is art, and there is always a reason to begin again.

With sincerity and hope,

Matheesha Halpage

Director, Publicity Department

letter from the EDITOR



Dear Readers,

As the season drapes the landscape in rich, amber hues, I feel as though I, too, have stepped into the vibrant autumn of my medical schooling. After years spent immersing myself in textbooks and lectures, I have finally stepped back into a realm that brings me authentic joy: creating.

Being part of this incredible team of talented women has infused my days with a renewed sense of purpose, passion, and excitement, transforming my once monotonous routine. Each day, I find myself surrounded by brilliant minds, each bringing their unique perspectives and strengths to the table. As different and diverse as we are, our commitment to crafting something meaningful unites us.

Autumn is historically a season of harvest, a celebration of the fruits of labour. Over the long, sun-drenched days of summer, we poured our hearts and souls into this magazine; delving into research, crafting articles, refining content, and designing layouts with care. Fall has slipped by as we added in our final contributions. A round-up, a rush, a final note; wrapping up each piece like a beautifully packaged gift. Now, I hope that as winter approaches, our reap of the harvest, "CHRONO", will keep you company, and offer you a delightful escape; warm, inviting, and ever-indulgent.

In pixels, patterns and pleasant surprises,

Afrah Riyas

Deputy Director, Publicity Department

meet the EDITORIAL BOARD

Matheesha Halpage

DIRECTOR

Where words meet wonder, I paint stories that breathe into every line. As a medical student, I write not just to inform, but to awaken minds and inspire change, weaving emotion into ink and turning vision into voice.

Afrah Riyas

DEPUTY DIRECTOR

Creative & dedicated with an eye for detail. Spending tireless hours designing and redesigning to stun your visual experience.

Sakshi Dolas

MEMBER

With a strong sense of aesthetics, I am passionate about creating content and designs that truly stand out—an escape I cherish alongside my love for med school.

TEAM PUBLICITY

Where creativity comes to life..

Meet GIMSOCs Department of Publicity. A group of dedicated minds blending medicine and creativity to inspire, inform, and make an impact through every piece we create.

Laiba Tanveer Ishaq

MEMBER

I'm deeply passionate about medicine and fascinated by how the body works. I approach every topic with precision and a drive for perfection, always aiming to understand things in depth.

Josephine Alex

MEMBER

I'm a typical medical student obsessed with being multifaceted, a creative mind with an emotional, thoughtful soul. Driven by purpose but grounded in sweetness. I'm learning to become not just a good doctor, but a whole human being.

Joycy Matta

MEMBER

I'm a medical student with my heart set on hearts captivated by the rhythm, resilience, and mysteries of cardiology. Beyond the stethoscope, I thrive on connection and communication. I'm driven by the pulse of people and possibility

LETTER FROM THE CO-CHAIR

I stepped into this country in December 2023, and just two weeks later I found myself applying to the HR Department of GIMSOC. I still remember the disbelief and excitement I felt the day I received the confirmation email announcing my selection as the first HR Director of the organisation. The HR Department became the place where I learned to listen, connect and truly understand people. I joined hoping to contribute in any way I could, yet with every passing week the organisation drew me in a little more. What began as a simple role soon became a calling. I found mentors, friends and a community here.

As I write this, I reflect on how quietly this journey began. During my tenure as HR Director, I never imagined that I would one day serve as Co-Chairperson of GIMSOC in 2025. I still remember the day I was first approached to interview for this position and I remember the day I sat in a small room at NVU with Toyin, Farhad and Kachi as they informed me that I would become Chairperson. That moment brought a mix of happiness and apprehension; I questioned whether I had the capability to lead, whether I was truly prepared for such a responsibility. The trust these three remarkable individuals placed in me has meant the world. Their guidance shaped this year and helped me grow into the role with confidence and purpose.

This organisation has changed me in ways I could never have predicted. It strengthened my confidence, sharpened my leadership and deepened my understanding of service. Personally and professionally, the lessons of this year will stay with me for life. GIMSOC became my family in a place far from home, a support system that pushed me to grow and a platform where I could contribute to something greater than myself.

The love and kindness I received from this organisation are beyond measure and I hope every person connected to GIMSOC feels the same sense of appreciation and belonging. This year would not have been possible without the exceptional support of my Secretary Generals, Javeed and Raashed. They started as colleagues, became brothers and eventually became an essential part of the foundation that held this year together. Their presence made all the difference.

My executives and subcommittee members were the heartbeat of everything we accomplished. Every meeting, every plan, every idea carried us toward the milestones we celebrate today. Even the smallest contributions mattered and while I may not have witnessed every effort, I always felt the dedication behind their work. Watching them embrace every task with ownership and passion filled me with pride. Their unity and strength are what make GIMSOC extraordinary.

This tenure reflects the strength of what me and my team built together. None of this belongs to me alone. It belongs to all of us. GIMSOC was founded to create a community for medical students across the country and it has been an honour to lead that community this year. Many of the faces I look at in the organisation today are not just colleagues. They are friends, people I trust and people with whom I have shared growth, laughter, challenges and memories I will carry forever.

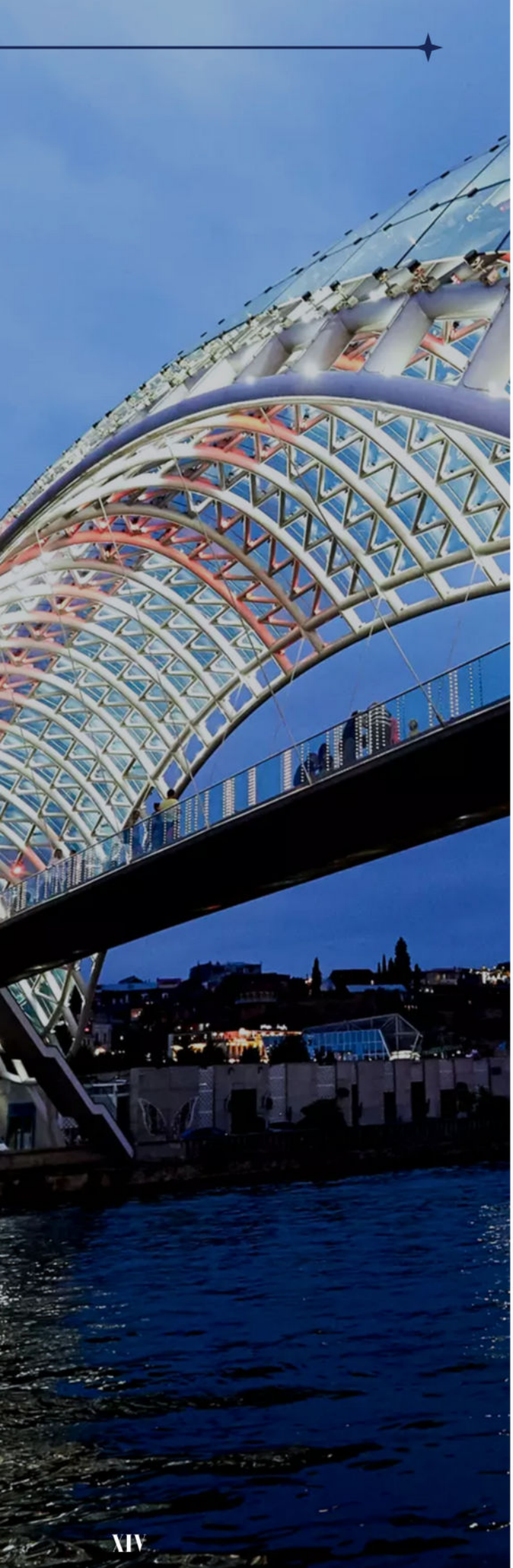
To my friends and family, thank you for standing by me through long nights, stressful moments and victories. Your encouragement kept me grounded and reminded me why I stepped into this journey. It feels surreal to look back on how much this year has held and how quickly it passed.
Yet when I reflect on it all, I feel nothing but gratitude. Grateful that I was trusted to guide this organisation. Grateful for the purpose and progress we achieved. Grateful for the memories that will stay with me long after my tenure ends.

I am thankful to the organisation for this chapter of my life. Thank you for the faith, warmth and the shared vision that made this year unforgettable. GIMSOC will always hold a special place in my heart and I cannot wait to witness the remarkable things that will be achieved in the years ahead.

With much gratitude,

Radha Jaiswal

Co-Chairperson, 2025
GIMSOC



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CHRONO:
APOLLO'S ARCHIVE

-Afrah Riyas

Tick tock tick tock
When only the sun could tell time,
We started with mushed leaves and vine,
When we knew no reason, no rhyme
Mothers grieved, armed only with broth and brine

Tick tock tick tock
The greeks with their four humors
The Chinese with their needles anew
The plague doctors of fleeting rumours
Centuries passed, as dynasties grew

Tick tock tick tock
When finally penicillin came along
Herbs became elixirs and elixirs became pills,
Dancing to the tune of revolution's song
The halls of medicine became fraught with thrills

Tick tock tick tock
What could once only wound or slay,
Became a weapon of hope, to heal within
A thorough flirt, a risky play,
Scalpel cuts clean through skin

Tick tock tick tock
We delve into the invisible unknown
The intricate code of it all
At the centre lay the keystone
Nature vs nurture, the answer for the call

Tick tock tick tock
What lies beyond the queer evermore?
Would Pandora's jar hold a panacea divine?
As long as we desire to help, we grow.
After all, a healed femur was civilization's first sign.

Harmony and Healing: A brief introduction to some Chinese medicinal techniques

-Laiba Tanveer Ishaq

Chinese Medicine is an ancient healthcare system with a history of about 2500 years.

Chinese medicinal techniques are deeply rooted in nature, including practices like acupuncture and herbal remedies (such as plants, flowers, herbs, etc.).

While Western medicine focuses on symptomatic treatment by using pharmaceutical drugs, Chinese medicine emphasizes in healing through nature as a way to cure any disease, it shows the importance of the alignment and harmony between the body and mind.

Although individuals may criticize these traditional Chinese medicinal techniques, it has paved a way for the advancements of both traditional and modern healthcare practices.

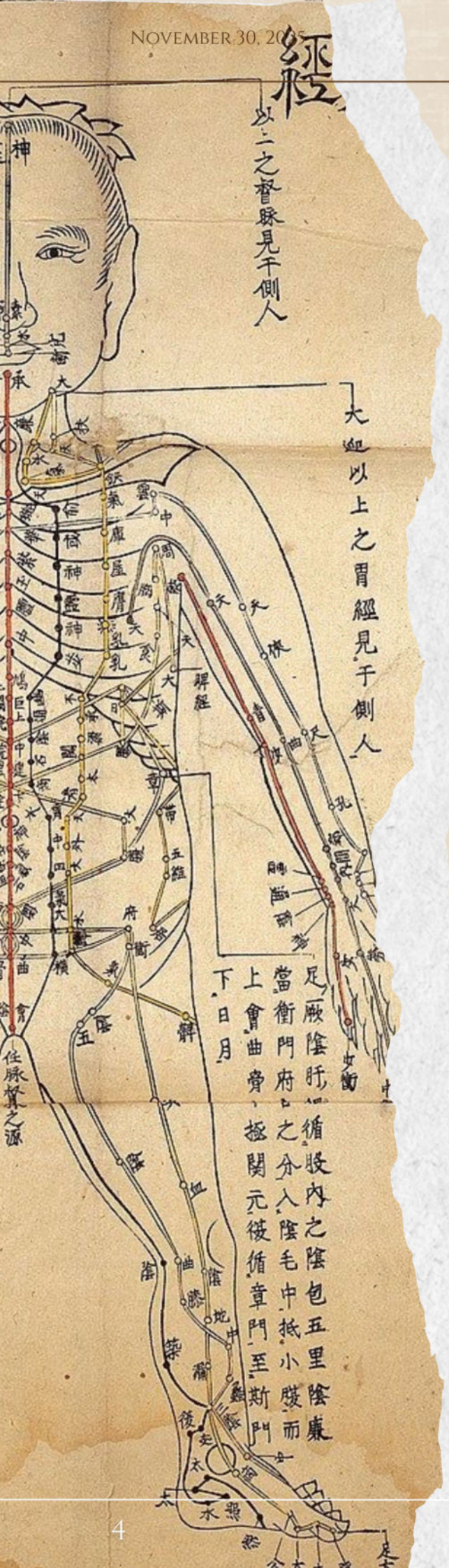
This article explores the benefits and applications of acupuncture and herbal medicines.

Herbal Medicine

Chinese herbal medicine is one of the oldest and most developed systems of pharmacology in the world. It uses natural substances such as roots, bark, flowers, and minerals to restore balance and treat various conditions. Formulas are a combination of herbs are customized for each patient based on their needs.

Panax ginseng is a herb that is grown in China, Korea, India and Siberia. It is taken orally to support memory, improve cognitive function, reduce depression, stress, and Alzheimer's disease symptoms. An additional herb known as Chinese Angelica, is used to the alleviate menstrual cramps and improve blood circulation. It is traditionally believed that this herb helps regulate the flow of Qi which is the body's vital energy. Moreover, Chinese Angelica is commonly used to support overall cardiovascular health.

A well known Chinese herbalist, Ji Desheng (October 6, 1898- October 18, 1981) specialized in snakebite medicine and treatment by creating snake bite pills that features more than 10 kinds of herbs. These snake bite pills not only work for venomous bites, but also help treat viral hepatitis, herpes zoster, mumps, gastritis, scalds, and even stroke. Herbs are commonly used by herbalists, Ayurvedic and naturopathic doctors.



Acupuncture

Acupuncture is the insertion of fine sterile needles into specific points in the body. Qi, often translated as "vital energy", encompasses the concept of Yin and Yang. This is built on the five elements-wood, fire, water, earth and metal. However, imbalances due to excess or deficiency, are believed to disrupt the harmonious flow of Qi and will lead to illnesses.

To perform acupuncture, the needles are placed in points known as acupoints, which lie along meridians- an invisible pathway through which the Qi (the body's vital energy) flows. Diseases or illnesses arise when the Qi system is blocked or is imbalanced; therefore, in order to restore it, needles are inserted into the body's meridian pathway. It is commonly used for pain relief, stress reduction, and management of chronic diseases.

Acupuncturists not only perform the procedure, but also check the underlying cause of a patients pain by evaluating their symptoms, pulse, digestive, emotional and sleep patterns. Acupuncture is often combined with other techniques, such as herbs, moxibustion (a warming therapy), cupping, and dietary therapy to maximize the effect of acupuncture.

Chinese medicinal techniques have proved continuously over the years their effectiveness in treating a wide range of diseases and their symptoms.

CURE QUEST: ORIGINS

Trace the roots of life-saving discoveries across the globe

- [ ] Early Documentation of Acupuncture and moxibustion
- [ ] Discovery of Insulin
- [ ] First demonstration of Ether anesthesia, 1846
- [ ] Bronze scalpels and forceps (discovered in tombs)
- [ ] CPR Development and Defibrillation refinement
- [ ] Identification of Tuberculosis pathogen
- [ ] Stethoscope invention
- [ ] Discovery of Chagas Disease - American trypanosomiasis
- [ ] Herbal Anesthesia and Abdominal surgery
- [ ] Sushruta Samhita- Rhinoplasty and Cataract surgery
- [ ] First Human Heart Transplant, 1967
- [ ] First HPV vaccine
- [ ] Small pox vaccine
- [ ] Earliest known Cranial surgeries with high survival rates
- [ ] First implanted Cardiac Pacemaker, 1958

Answers on page 75

Battlefield Medicine: The Evolution of Care Through Global Conflict

-Sakshi Dolas

Modern medicine, with all its complexity and precision, owes much of its evolution to the pressures and demands of warfare. Among the most transformative periods in medical history are the two World Wars, which acted as crucibles for innovation, rapid adaptation, and redefined approaches to care. While war brought unprecedented destruction, it simultaneously accelerated the development of medical systems, techniques, and treatments that underpin many practices today.

"War is the only proper school of the surgeon."

-Hippocrates

The First World War (1914–1918) introduced injuries on a scale and of a nature never before seen. Trench warfare, artillery bombardments, and chemical attacks produced horrific trauma. Medical services were overwhelmed, prompting the institutionalization of triage, prioritizing patients based on injury severity and survival likelihood—a concept now central to emergency medicine.

Though surgical care was rudimentary, important innovations emerged. Infection was the greatest threat in an age before antibiotics. Surgeons adopted aggressive debridement, removing infected tissue to prevent gangrene and sepsis. Antiseptics like carbolic acid and iodine were used extensively, and wound irrigation became standard. These practices laid the groundwork for modern aseptic technique.

The prevalence of facial injuries led to the birth of reconstructive surgery. British surgeon Harold Gillies pioneered facial reconstruction, restoring both function and appearance. These efforts redefined surgery as not just life-saving but also life-restoring, a philosophy that remains integral to modern care.

Psychological trauma was formally acknowledged for the first time. Soldiers suffering from "shell shock"—now recognized as PTSD—displayed tremors, anxiety, and emotional withdrawal.

"Without penicillin… many of our wounded would have died. It was our secret weapon."

-Winston Churchill

Though treatments were crude and stigma pervasive, this marked the beginning of military psychiatry and the eventual integration of mental health into medical care.

Public health also gained prominence. Poor sanitation and close quarters meant disease often claimed more lives than battle. Trench foot, typhoid, and dysentery were rampant. In response, hygiene protocols, vaccinations, and improved nutrition were implemented—interventions that influenced post-war civilian healthcare.

World War II (1939–1945) expanded and deepened these innovations. The most transformative breakthrough was the mass production of penicillin. Although discovered in 1928, it was during WWII that penicillin became widely available, revolutionizing the treatment of infections and reducing mortality dramatically. This marked the beginning of the antibiotic era.

Blood transfusion advanced as well. With improved understanding of blood types and the use of anticoagulants, blood could now be stored and transported. Blood banks were established, making transfusions common in both military and civilian contexts—foundations of today's transfusion medicine.

The organization of battlefield care was radically reshaped by the creation of Mobile Army Surgical Hospitals (MASH units). These units allowed complex surgeries to be performed close to the front lines, significantly improving survival rates. The concept of rapid, proximity-based intervention became the basis for the "golden hour" principle in trauma medicine.

Psychiatric care evolved with the implementation of forward treatment—treating psychologically affected soldiers near the battlefield rather than evacuating them. This approach proved more effective and humane, laying the groundwork for modern combat psychiatry and reducing the stigma surrounding mental health care.

Another important development was in rehabilitation medicine. Advances in prosthetics, physiotherapy, and vocational retraining helped wounded soldiers regain independence. Care expanded to include psychological support, foreshadowing the holistic, interdisciplinary rehabilitation services common today.

The war's global reach exposed troops to tropical diseases like malaria and dengue.

"We found ourselves constantly inventing. War forced us to try what peacetime had not dared."

— Sir Archibald McIndoe, pioneering plastic surgeon during WWII

Public health measures—vector control, widespread use of insecticides, and antimalarial drugs—were intensified. Vaccination programs broadened. These responses not only protected soldiers but also propelled advances in tropical medicine and helped shape global public health institutions such as the World Health Organization.

Equally vital were improvements in medical documentation and research methods. The scale of military medicine necessitated standardized record-keeping and large-scale data collection, enabling the first controlled clinical trials. One landmark was the streptomycin trial for tuberculosis in the 1940s, which laid the groundwork for evidence-based medicine.

Perhaps most significantly, the wars transformed the philosophy of medical care. The need to treat long-term physical and psychological injuries, facilitate social reintegration, and support veterans catalyzed the development of universal healthcare systems in many nations. Medicine was no longer episodic but holistic, extending beyond the immediate to the lifelong.

The legacy of wartime medicine endures. Many practices now routine—sterile technique, antibiotics, psychiatric triage, mobile care units, and rehabilitation—emerged from the urgency and devastation of global conflict. These advancements reflect the ingenuity and dedication of medical professionals operating in the harshest conditions imaginable.

The evolution of battlefield medicine illustrates that medical progress is driven not only by scientific innovation but also by profound human resilience. History shows how necessity fuels creativity, and how collaboration and dedication can transform care even under the most challenging conditions. Medicine is more than treating illness; it is about restoring dignity and hope—principles that continue to guide healthcare today.

Born from urgent necessity, war medicine evolved through resilience, empathy, and an unwavering commitment to healing. As the world faces new challenges—from pandemics to humanitarian crises—the lessons of wartime medicine remain vital: even amid destruction, care and compassion endure, and medicine remains a force for dignity and hope.

Los Angeles Times(2024). U.S. Army medics treat a wounded soldier on D-day during the Normandy landings in Nazi-occupied France.[Photograph]. www.latimes.com

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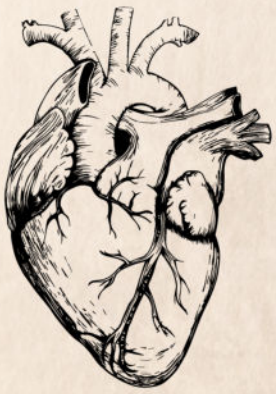
SCAN THE CODE TO HEAR THE MUSIC BEHIND THE PAGES.

Spotify®

Vitals without Voice

~ Maya Lekshmi Madhu

Skin —
a pale membrane stretched over silence.
Veins trace unread messages.
No reply expected.
Steel rests on trays, unfeeling, ready.
Movements are rehearsed, not remembered.
Clear fluids drip-calculated, not questioned.
The monitor pulses,
counting seconds no one claims.
Incision, without hesitation.
No resistance, no ceremony.
The diagnosis speaks like frost on glass—
precise,
and without warmth.
Here, the body is a chart.
The soul, unmentioned.
Breath is data.
Death,
an entry line.



Lady Gimsoc's
MEDICAL PAPERS

CRISPR LEAPS: FROM LAB TO LIFE

-Afrah Riyas

Dearest gentle reader,

While the drawing rooms of Gimsoc Square are abuzz with gossip of seminars, lectures, and last season's workshops, this author has her eye on a far more astonishing tale, one that unfolded not in an event hall, but in the refined corridors of science.

It has come to my attention that a certain baby has been cured of a ghastly disease. The story begins 5 years ago when esteemed scientists, Dr. Jennifer Doudna & Dr. Emmanuelle Charpentier graced history as the first female duo to be awarded the Nobel Prize in Chemistry, for their groundbreaking research in gene editing. CRISPR-Cas9, a microscopic mechanism plucked from the arsenal of humble Streptococcus bacteria's immune system, first discovered by Dr Yoshizumi Ishino & colleagues in 1987, was transformed by the ladies' innovative minds into a revolutionary tool of genetic modification. One might say these formidable ladies wielded not embroidery needles, but molecular scissors. A small step for the bacteria; a giant step for mankind. And what a giant step indeed! Researchers got to work immediately, and soon CRISPR danced its way from petri dishes into plants, goats, spiders and now, astonishingly, into a child.

Pictured Emmanuelle Charpentier (L) and Jennifer Doudna (R) raising their awards during the Princess of Asturias Prize for Scientific and Technical Investigation awarding ceremony in Oviedo, northern Spain, 2015

INSIGHT MD

Pictured Kyle 'KJ' Muldoon before his treatment was available

The Muldoon family's newest member, young master Kyle 'KJ' Muldoon Jr has been diagnosed as afflicted with Carbamoyl Phosphate I deficiency, a fate that befalls only one in more than a million which prevents the body from properly eliminating ammonia. This buildup leads to hyperammonemia, which causes neurological issues and, all too often, ends in heartbreakingly early farewells. An unfortunate destiny written in faulty genetic ink.

Faced with odds so dire that most mamas and papas would scarcely dare to whisper them aloud, the Muldoons were presented with a bold and untested path by the fearless Dr. Rebecca Ahrens-Nicklas of the Children's Hospital of Philadelphia; a personalized therapy fashioned from none other than CRISPR.

On the rain-soaked evening of August 8th, Dr. Kiran Musunuru, a gene editing researcher at the University of Pennsylvania, found himself at the receiving end of a most intriguing correspondence, from none other than Dr. Ahrens-Nicklas with a daring proposition. But this proposal did not involve the usual academic fare, neither lab experiments nor research materials, but a never-done-before genetic intervention. What followed can only be described as a scientific & federal collaboration with incomparable speed. Dr. Musunuru, joined Dr. Fyodor Urnov and a legion of devoted researchers, plunged into the task with much haste and fervor, and an FDA approval that followed immediately. "We burned a vat of midnight oil the size of San Francisco Bay," Dr. Urnov jested, though this author suspects there was little exaggeration in his words.

Pictured Dr. Kiran Musunuru, researcher at the University of Pennsylvania (left) and Dr. Rebecca Ahrens-Nicklas at the Children's Hospital of Philadelphia (right)

Pictured from left to right, Dr. Musunuru, KJ, Dr. Ahrens-Nicklas

And so, after months of tireless labor, late nights, complex sequences, and no shortage of hope, triumph arrived. On February 25th, when Young Master KJ had seen just six months of this world, he became the very first human to receive a CRISPR-Cas9-based therapy crafted precisely to correct his unique genetic mutation.

A second dose followed just twenty-two days later, and a third in May, each one delivered like a secret missive to the very cells that had betrayed him at birth.

The outcome, dear reader? Nothing short of miraculous. Young Master KJ, who once clung to life by the thinnest of threads, now eats as any healthy child might; no rigid diets or round-the-clock worry. His ammonia levels, once perilously high, now rest comfortably within normal bounds.

And perhaps the most telling measure of progress in this young gentleman's tale? His weight, once stubbornly slight, has ascended to the 40th percentile from the 7th.

Of course, it is far too soon to declare this a complete and permanent cure; science, like society, is never so quick to surrender to certainty. The implications, though, are profound. What began as a daring leap for one child may well become a gateway for many. For if CRISPR can rewrite the fate of Master KJ, might it not do the same for those burdened by sickle cell disease, muscular dystrophy, cystic fibrosis, Huntington's, or even HIV?

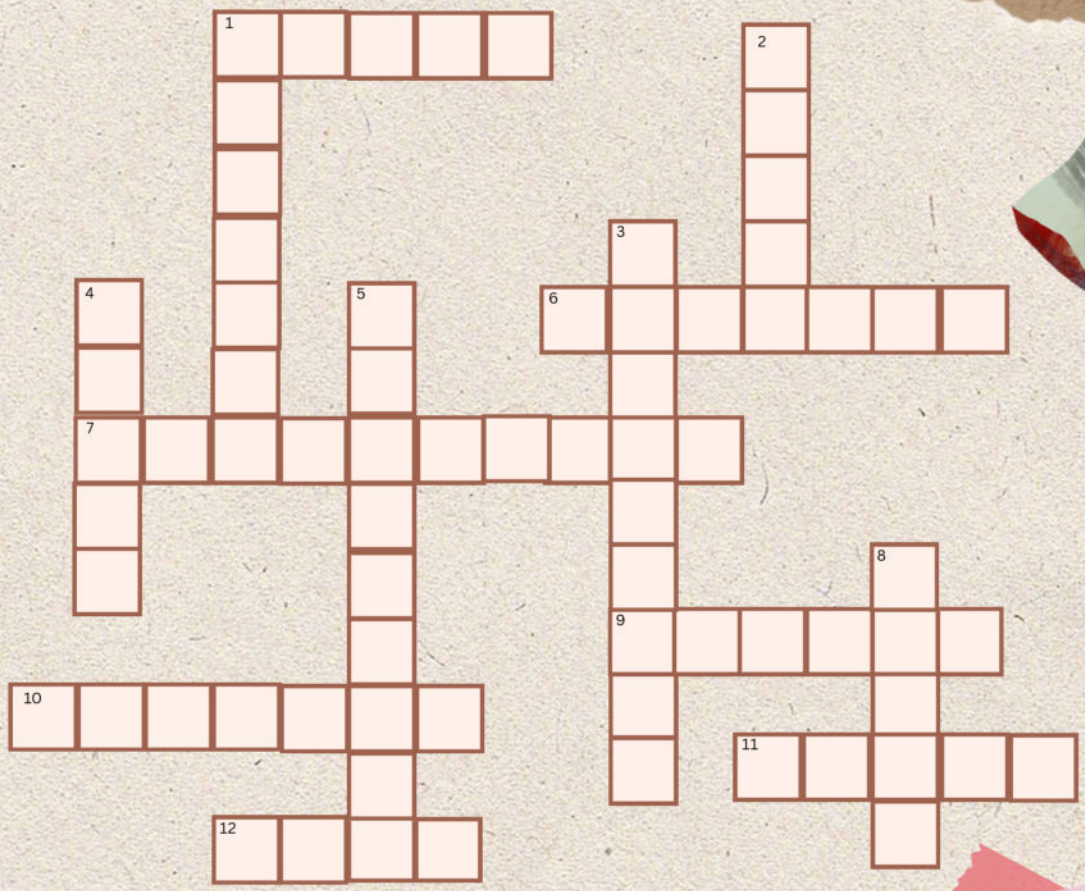
Yes, dear reader, it appears we are standing on the edge of a new era. One where medicine does not merely treat, but edits, rewrites, and perhaps even erases the cruel mistakes of nature. And as always, this author shall be watching pen poised, eyes sharp, and ears ever attuned to the rustle of revolution.

Yours in ink and intrigue,

—Lady Gimsoc

Pictured the Muldoon family.

crossword



Across

1. Viral disease prevented by the MMR vaccine
6. Disease caused by Mycobacterium leprae
7. Infection acquired in a hospital
9. Immune cells attacked by HIV
10. Mosquito-borne disease caused by Plasmodium parasite
11. Viral hemorrhagic fever first identified in Zaire
12. Tick-borne infection caused by Borrelia burgdorferi

Down

1.Childhood disease marked by Koplik spots
2. Fluid heavily lost in cholera infection
3. Inflammation of the liver caused by viruses
4. Type of organism that causes ringworm
5. Organism type that causes tuberculosis
8. Fluid used to transport pathogens in diagnostic tests

Answers on page 74

Let's Eat!

Does Pink Salt Really "Seal The Deal"?

A Look Through Food Trends And Their Effect On Health

~ VAISHALI RAJA

The organised chaos of the world runs towards striking trends every day. From the next viral dance routine to the newest munchies one can devour, exhilarating inventions are followed, leaving the crusty old behind. This fast-paced evolution of food consumption affects the health of populations worldwide.

This article sheds light on the humongous world of food trends and how they may affect one's ability to live life to the fullest.

A Brief History of Our Eating Habits

Aeons ago, food habits were heavily influenced by the availability of goods based on geographic location - every region had a specific crop or dish that satisfied the itch of hunger. Whole foods and vegetables dominated tables in some regions, while hunted meats and seafood landed on a few.

With the development of trade and transportation of goods, combinations of raw materials gave rise to a variety of meals across the world. This diversity introduced a transitional era into the world of food. A transition where not just healthy meals, but also other technological advancements such as biofortification, brought great promise to ensure a balanced diet for everyone.

Slowly, yet steadily, anyone from any part of the world could indulge in the delicacies that other continents had to offer. This slowly snowballed to giving into the latest, trendy food creations - from buying enticing confectioneries, indulging in the largest burgers in the world, to following various types of diets that promise great benefits.

The Double-Edged Sword of Food Trends

From thinking *"Himalayan salt is the best salt to use while cooking"*, to *"I heard chia seeds are a good source of fibre"*, trends affect what we eat. However, something that goes unnoticed, is that the spread of good words as these one-liners, may potentially cause a threat to one's well-being.

Let's take the examples mentioned above. Increased consumption of Himalayan pink salt could lead to iodine deficiency if iodised salt is omitted. Eating chia seeds without soaking them beforehand may result in intestinal obstruction, due to these seeds hydrating and forming clumps during digestion. Vital information like these pointers, which may disrupt one's health, is sometimes overpowered by the purity of the benefits of these items.

The human body is simply complex. **No one-size-fits-all approach exists when it comes to food.** Every dietary path, whether it be environmentally friendly, cruelty-free, non-GMO, or sustainable, the final verdict lies in how it is when it comes to providing society with the nutrients required for a healthy future.

The intricate metabolic cycles that work may screw up - lack of iron in your vegan diet? You may face anaemia. Following a keto diet? The lack of fibre may cause constipation. **These reactions are not absolute, but relative with respect to one's way of living.**

Being conscious of your food choices is commendable. But it's just as important to examine why we adopt certain eating patterns. Is it truly for health, or simply because it's trending? Make sure to compensate for the loss of any vital components as you follow these patterns.

Be vegan, but don't forget your iron. Squeeze some lemon juice on your greens to aid absorption. Try keto, but keep track of your fibre.
In the age of food trends, have health as the core ingredient of your plate!

PINKYPAN

Pinky Pan: A Bright Breakfast Spot in Tbilisi

Located at 42 Irakli Abashidze Street, Pinky Pan is a vibrant breakfast café in Tbilisi, offering pancakes, all-day breakfast, and specialty coffee from 10:00 to 21:00. The space is calm and modern, with minimal yet tasteful interiors that create a relaxed atmosphere.

The café's signature pancakes are light, fluffy, and complemented by fresh, seasonal elements. The flavours are balanced and subtly sweet. A smooth latte and bold black coffee round out the offerings, each well-prepared and satisfying. Pinky Pan is also pet-friendly, making it a welcoming spot for a fresh, beautifully served meal—perfect for a quiet break in a serene setting.

@pinkypan.ge

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Explore GEORGIA

BY MATHEESHA HALPAGE

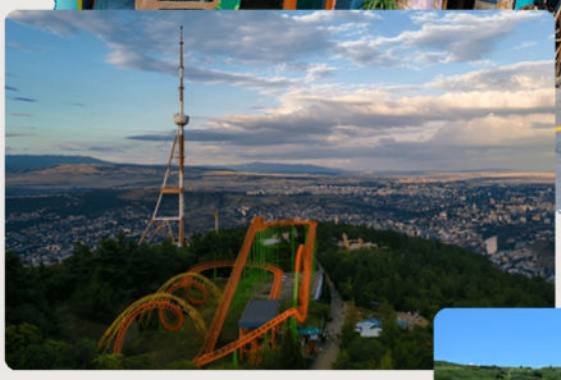
Georgia is a country full of charm, where ancient history meets stunning landscapes, and the best part? Many of its most beautiful places are completely free to visit. From quiet lakes to towering fortresses and romantic towns, here are six must-see destinations in Georgia that offer unforgettable experiences.

BREATHTAKING TAKING LOCATIONS HIDDEN IN THE QR CODE!

1. Chronicles of Georgia

STONE GIANTS OF MEMORY

Just above the Tbilisi Sea, the Chronicles of Georgia rise like ancient sentinels. Crafted by Zurab Tsereteli, this monumental sculpture complex echoes with the soul of the nation, kings, queens, and sacred scenes carved into towering basalt. It's dramatic, surreal, and somehow always quiet. Free to explore and offering sweeping views of the capital below, this site is a sacred kind of silence, a place where history doesn't just speak, it roars.



2. Mtatsminda Park

JOY AT THE EDGE OF THE SKY

Resting on the heights of Mount Mtatsminda, this family-friendly amusement park offers breathtaking views, playful nostalgia, and nature's kiss in the breeze. You don't need a ticket to enter or wander its pine-scented paths, only for the rides. It's a perfect escape for slow mornings or dreamy evenings, where laughter dances with clouds and time seems to pause in delight.

3. Turtle Lake

TBILISI'S NATURE-LACED HIDEAWAY

A haven just above the city, Turtle Lake (Kus Tba) is where locals retreat for sunlit strolls, morning jogs, or lakeside picnics. Surrounded by lush hills and walking trails, it's an easy yet soul-soothing escape. Free, open, and refreshingly grounded, it's a pocket of calm in the rush of modern life.

4. Ananuri Fortress Complex

ECHOES ALONG THE ARAGVI

Two hours north of Tbilisi, perched along the Aragvi River, stands the majestic Ananuri Fortress, a tale of wars and worship etched in stone. Built in the 16th century, it's one of Georgia's most photogenic sites, with views of the blue Zhinvali Reservoir stretching beneath its towers. You can wander through the walls, climb the towers, and breathe in the stories, all without spending a single lari.

5. Martvili Canyon

WHERE WATER WEARS THE STONE

Tucked deep within the lush landscapes of Samegrelo, Martvili Canyon flows like a hidden poem, its turquoise waters carving through ancient limestone cliffs draped in moss and light. Waterfalls whisper from above, while smooth stone walls echo with the quiet wisdom of time. Walking along its serene trails feels like stepping into a natural cathedral, where every ripple and rock tells a story older than memory.

6. Sighnaghi

THE CITY OF LOVE AND LOOKOUTS

Perched on a sun-drenched hilltop in the wine-rich region of Kakheti, Sighnaghi is a painter's dream, pastel-toned houses, cobblestone streets, and sweeping views that stretch toward the distant Caucasus. Wandering through its quiet alleys feels like walking through a soft-spoken love letter, where every balcony holds a story and every breeze carries a touch of old-world romance. With its timeless charm and gentle spirit, Sighnaghi invites you to linger, to look, and to fall a little in love.

QUIZ TIME

PRESS START

QUESTION 1

A 55-YEAR-OLD MAN WITH HYPERTENSION DEVELOPS A DRY COUGH AFTER STARTING A NEW MEDICATION.
WHICH DRUG IS MOST LIKELY RESPONSIBLE?

A) LOSARTAN B) ENALAPRIL
C) AMLODIPINE D) HYDROCHLOROTHIAZIDE

QUESTION 2

A DIABETIC PATIENT IS PRESCRIBED A MEDICATION THAT INCREASES INSULIN RELEASE BUT MAY CAUSE HYPOGLYCEMIA.
WHICH CLASS DOES IT BELONG TO?

A) BIGUANIDES B) SULFONYLUREAS
C) DPP- INHIBITORS D) SGLT2 INHIBITORS

QUESTION 3

WHICH ANTIBIOTIC INHIBITS BACTERIAL PROTEIN SYNTHESIS BY BINDING TO THE 30S RIBOSOMAL SUBUNIT?

A) ERYTHROMYCIN B) TETRACYCLINE
C) LINEZOLID D) CHLORAMPHENICOL

QUESTION 4

A 70-YEAR-OLD MAN TAKING WARFARIN STARTS A NEW ANTIBIOTIC AND LATER PRESENTS WITH BLEEDING GUMS.
WHICH ANTIBIOTIC MOST LIKELY CAUSED THIS?

A) AMOXICILLIN B) CIPROFLOXACIN
C) METRONIDAZOLE D) AZITHROMYCIN

QUESTION 5

A PATIENT WITH ASTHMA DEVELOPS TREMORS AND PALPITATIONS AFTER USING HER INHALER.
WHICH MEDICATION IS SHE MOST LIKELY USING?

A) IPRATROPIUM B) SALBUTAMOL
C) MONTELUKLAST D) BUDOSENIDE

QUESTION 6

A MAN WITH PEPTIC ULCER DISEASE IS ADVISED NOT TO TAKE A CERTAIN PAINKILLER AS IT MAY WORSEN HIS CONDITION.
WHICH DRUG SHOULD HE AVOID?

A) PARACETAMOL B)TRAMADOL
C) IBUPROFEN D) MORPHINE

PAGE 74 - ANSWERS

WE DIDNt BrEAk it

~ Leesarena Kani

WE LEFT HOME WITH QUIET DREAMS
ARRIVED IN COUNTRIES WHERE THE
SIGNS DIDN'T SPEAK OUR LANGUAGE
BUT THE LECTURES GAVE US ONE—
OUR HEART WAS STILL LEARNING TO
SPEAK.

THEY HANDED US WHITE COATS
LIKE ARMOR WE HADN'T EARNED YET
—
STITCHED WITH PRESSURE,
IRONED WITH DOUBT.

WE STUDY THROUGH SILENT NIGHTS,
LEARNING TO SAVE LIVES,
WHILE TRYING NOT TO LOSE OUR
OWN.

WE'RE CHASING FUTURES TRYING TO
ACHIEVE SOMETHING
BECAUSE OUR PAST STILL LINGERS—
WHISPERS FROM OUR YOUNGER
SELVES,
ASKING US NOT TO GIVE UP.

WE STUDIED HEARTS,
WHILE OURS BROKE IN SILENCE.

LEARNED ABOUT THE BRAIN,
WHILE OURS RACED WITH
DEADLINES
WE COULDN'T ALWAYS NAME.

THEY SAY MEDICINE IS SCIENCE—
BUT WE KNOW IT'S ALSO SURVIVAL.
NOT JUST OF THE PATIENT,
BUT OF OURSELVES.

WE ARE RUNNING—
NOT FROM FAILURE,
BUT TOWARDS SOMETHING
WE CAN'T EVEN NAME YET.

MAYBE IT WAS THE DREAM,
MAYBE IT WAS THE GUILT,
MAYBE IT WAS THE NEED
TO MAKE OUR STRUGGLES MEAN
SOMETHING.

SOME DAYS—
WE SUCCEED.
OTHER DAYS—
WE JUST SURVIVE.

BUT STILL—
WE SHOW UP,
WE FIGHT BACK,
WE BECOME.

SO IF YOU SEE US QUIET—
DON'T MISTAKE IT FOR WEAKNESS.

IF YOU SEE US TIRED-
KNOW IT'S BECAUSE WE NEVER
STOPPED TRYING.

WE ARE ABROAD MEDICAL
STUDENTS.
WE DIDN'T BREAK IT.
BUT WE'RE STILL HERE,
TRYING TO HEAL IT ALL ANYWAY.

-WRITTEN ON BEHALF OF ALL OF US
WHO LEFT HOME TO FIND PURPOSE
IN MEDICINE

MED TALK

Voices of Medicine; Across Six Years of Medical Life

Welcome to MedTalk, a window into the hearts and minds of medical students across every year. Explore their journeys, challenges, and triumphs, and step into the world of medicine through the eyes of those living it;
one story at a time.

"DON'T GET COOKED!"

MAYANK VIKRANT BANSAL'S JOURNEY THROUGH THE FIRST YEAR OF MED SCHOOL

2nd Semester, Geomedi Teaching University

For Mayank, the path to medicine wasn't plotted from the start—but curiosity led the way. "I've always liked biology," he says. "There's something fascinating about figuring out how the human body works." At one point, he explored options like biotechnology, but a colleague's offhand suggestion about studying MBBS in Georgia caught his attention. He looked into it—and just went for it.

He stepped into medical school with energy and resolve. "On day one, I told myself—I'm going to do everything right. Attend every class. Stay on track." Like many, he had braced for the worst: sleepless nights, relentless pressure, endless textbooks. "I overestimated the stress," he laughs. "It's definitely challenging, but not as bad as I expected. If you're organized, it's surprisingly doable."

Having studied in the US and UK earlier, Mayank wasn't new to the idea of being far from home. "Adjusting to a new country wasn't that hard. I do miss my family and friends, of course—but I've learned to deal with it. It is what it is," he says with a shrug. His mindset is steady, grounded, and focused.

The moment he truly felt like a medical student came unexpectedly. "My engineering friends were heading out to hang out, and I had to stay back to revise anatomy.

That's when it hit me—I've chosen a very different kind of life."

Adapting to the sheer volume of information in med school took time. "At first it was overwhelming," he admits.

But once I built a schedule and stuck to it, things started making sense." Music plays a big part in his routine—it helps him concentrate and retain better.

He's refreshingly honest about the inner battles, too. "Self-doubt is kind of part of the process," he says with a smile. "It keeps me in check. Forces me to reflect and improve."

Imposter syndrome still shows up sometimes, but he's learning to handle it. His biggest challenge? Time management.

"I've realized small changes in daily habits really help—cutting down caffeine at night, eating right, sticking to a rhythm."

For mental health, his approach is simple: people. "I'm not someone who enjoys too much alone time. I get my energy from socializing—talking to friends, meeting new people. It helps me reset." At his core, not much has changed. "I'm still stubborn and passionate—just a bit more practical now."

His days start early, usually with coffee and a quiet intention to keep moving forward.

Seniors and mentors have shaped much of the journey. "They know what's useful and what's just noise. They'll tell you which books matter, what topics to focus on, and what to ignore. One of the best pieces of advice I got was: Don't stress about the future. Focus on what's in front of you."

Interestingly, motivation hasn't always come from encouragement. "Honestly? Hatred. The negativity I got early on—it pushed me. I still use it as fuel." His mindset: try everything, see what works, learn, repeat.

Joining the MEDCON conference team was part interest, part curiosity. "I've always been curious about how people think. The differences, the similarities—it all fascinates me," he says. "Being part of a team helps me improve communication, decision-making, and understand people better."

With experience in organizing events and solving problems on the go, he enjoys being in spaces where ideas take shape and people grow together.

Now in his second semester, he's balancing studies and extracurriculars without too much strain. Looking back, he describes his first year in three words: rollercoaster, fast, and fun. "The first semester was rough," he admits. "But the second has been smoother."

If not medicine, he'd be in culinary school. "It's either medicine or cooking. But if I had to choose again, I'd still pick medicine—just with more focus and one clear goal."

His biggest mistake in the first year? "Procrastination. Pushing things off always made them more stressful."

And to his future self: "Don't get cooked." A reminder not to burn out—to stay sharp, steady, and curious.

For those considering medicine, his advice is clear:

"Ask yourself if you're ready to give this a few solid years. If yes, commit. And whatever topic you're studying, give it three days—no more. Move on, and keep going."

"YOU'VE GOT YOU"

The Story of Tanvi Kundu

4th Semester, East European University

For Tanvi Kundu, the journey into medicine wasn't a decision made in a moment of certainty—it was something that unfolded slowly, like pages turning in a book she hadn't planned to write but somehow always carried within her. Raised in the heart of Haryana, in a household rooted in discipline, honesty, and quiet encouragement, her story was shaped as much by gentle nudges as by her own growing sense of self.

Tanvi Kundu
2nd year, Semester 4,
East European University

Her mother, a physical education teacher, taught her strength—of body and of resolve. Her father, with his calm presence and structured thinking as a corporate professional, gave her a steady rhythm to follow. But even with such strong foundations, it wasn't until the later years of school that the idea of becoming a doctor began to take shape. Not because she was pressured to, or because it felt like the obvious path—but because something within her started to believe that she could.

"It all started with believing in myself," Tanvi says now. That quiet shift—from self-doubt to self-trust —became the turning point.

Medical school, though, didn't wait for her to adjust. The first year felt like being dropped into the deep end. "You sit down and suddenly you're expected to know everything," she remembers, half-laughing. The first semester passed in a blur —familiar subjects, familiar methods. But the second was a different story. It no longer felt like school. It felt real.

Gone were the days of last-minute cramming. She learned, sometimes the hard way, that long-

term retention required consistency. That success in medicine wasn't about knowing more—it was about understanding better. And above all, adapting.

"You start as someone who thinks reading is enough," she explains. "But eventually, you realize this journey needs structure. Discipline. And a lot of self-trust." She developed a system that worked: weekly revision loops, breaking topics into parts, and speaking concepts aloud until they clicked. Her favorite method? Bullet points and white space. "If it looks clean, it feels manageable," she adds with a grin.

Being away from home added complexity. Without family nearby, she leaned into friendships, finding comfort in shared chaos and late-night talks. "People come and go," she reflects. "You learn to create your own home wherever you are."

By the second year, her mindset changed. Burnout became something to prevent, not power through. Walks, music, dancing, and stillness became part of her routine. "You have one life," she says. "You have to enjoy it too."

Her third semester tested her resilience. The academic pressure was intense. "I cried almost every day," she admits. Long lectures, low marks, and constant expectations forced her to reset—reworking her schedule, taking longer walks, and giving herself space to breathe. "That's when I learned it's okay to restart."

Among her subjects, physiology stood out. It wasn't just about systems—it made her ask why. That question became her anchor, reminding her that curiosity and endurance must go hand in hand.

Her study style is quiet and structured. "I love my friends, but when we study together, we talk more than read," she laughs. So she sticks to her routine: timed sessions, checklists, and self-quizzing. "If I can explain it to myself, I know I've got it."

Practical experiences stirred unexpected emotions. The first time she saw an endotracheal tube, she froze. "It genuinely scared me." But the fear gave way to calm. "I realized—I can actually do this."

Tanvi doesn't journal, but she talks—especially with her sister. Their conversations bring clarity. Her parents remain her foundation, and she credits a senior who guided her through self-doubt. "She believed in me when I couldn't."

One moment stands out: her father gifting her a stethoscope back in school. "That was the first time I saw myself on this path," she says. "It felt real."

Now in her fourth semester, she feels more grounded. Her goal is to become the kind of doctor whose presence comforts even before treatment. "Medicine isn't about perfection. It's about evolving—with heart."

Her message is simple: "You are enough. You've already overcome more than you thought. No matter what—you've got you."

“KEEP MOVING FORWARD”

Prathamesh’s Path to Purpose

6th Semester, East European University

Prathamesh Chavan Patil, didn’t always have a clear roadmap when it came to medicine. What kept him going, though, was a simple but powerful belief: no matter the doubts, he had already come too far to turn back. As he puts it, “Self-doubt is the worst feeling. It drags you down, makes you question everything. But I learned to remind myself of how far I’d come—and that gave me the strength to keep pushing.”

Starting out, some subjects felt like mountains he couldn’t climb. “At times, I felt like I didn’t even know the basics,” he admits. But the real challenge was applying what he knew when it counted. His first quizzes in those tough subjects weren’t great—he lagged behind his classmates. “I didn’t panic though. I talked to my professors, asked what I needed to do differently, and worked on it.” With that guidance, he was able to turn things around and finish the semester on a high note.

Despite this initial struggle, his commitment never wavered. He describes himself as sincere and dedicated, even if he doesn’t always follow the strictest study routines. “I might not be the most disciplined every day, but I get my work done, consistently. I love medicine, and I’m committed to this path. When I hit roadblocks, I don’t give up—I figure out how to solve them.” This steady determination keeps him moving forward. He is also excited about diving into research soon, eager to contribute beyond the classroom.

One of the most profound realizations for him has been understanding that being a good doctor is about more than just book smarts. “Medical school teaches you theory, but clinical work shows you what it really means to be a doctor.” It involves adopting a whole new identity—a responsibility that can’t be taken lightly.

"I'm working on building that character now: empathy, professionalism, clinical skills. It's a process, not something you get overnight. But once you 'unlock' that mindset, everything else falls into place."

This transformation calls for more than academic knowledge—it demands emotional intelligence and a strong ethical foundation. Clinical rotations reinforced that "compassion and communication are just as crucial as diagnostic skills." Balancing both has been central to his growth as a future physician.

Mentorship has shaped this journey. Classmates helped him spot weak areas, friends offered support, and professors shared advice that made a difference. But his greatest inspiration remains his parents. Both educators, they continue learning—managing work, family, and studies even in their 50s. "Their dedication shows me what's possible when you stay focused and consistent," he reflects. Their commitment fuels his own discipline and balance.

His advice to his younger self, and to others, is simple and sincere: "It's okay not to know everything. Don't fear gaps in knowledge—stay curious and keep searching. Always treat patients with empathy. And don't forget to take care of yourself. Make time for rest and fun—it matters."

He also highlights discipline: "If you can get more disciplined with your studies, that's a huge advantage. It's not about being perfect, but about consistent effort." This mindset, he believes, supports both academic success and personal well-being.

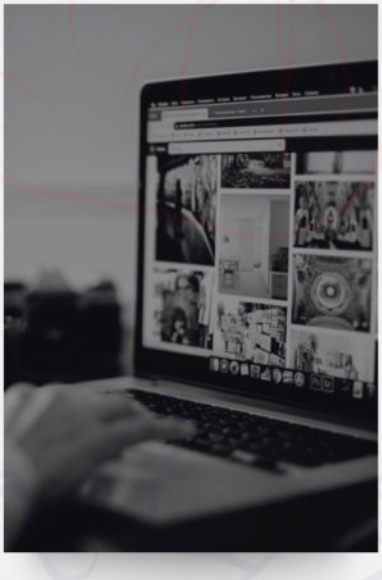
His journey is one of steady progress through reflection, effort, and support. It's a reminder that medicine is a lifelong path shaped by resilience, mentorship, and compassion.

With each challenge, he moves closer to becoming not just a skilled doctor, but a compassionate healer—one who understands that "the journey itself shapes the person behind the white coat."

"NOT FOR THE FAINT, NOT FOR THE FAKE"

Past the Hype by Hadesh Ambalal Chaudhary

7th Semester, East European University



Hadesh's journey into medicine wasn't a spontaneous decision—it was a shared vision between him and his family. Drawn by an endless curiosity about the human body, he believes that no matter how much you learn, it's never enough. High school shaped his character early. A mix of good and bad experiences, he excelled at mathematics, found joy in semi-classical music, and had a deep interest in tech—hardware and software alike. Yet, it was always the human body that intrigued him the most. Sports didn't draw him, but leadership did, thanks to mentors who recognized his potential and encouraged him to take the lead. His path to medical school was anything but linear—he appeared twice for the entrance exam. "Expect the unexpected," he says, "it's either your own shortcomings or life throwing a curveball." First year was transformative—his first time away from home, adjusting to a new country, a new education system, and living with his best friend from high school. A self-proclaimed stay-at-home kind of person, Hadesh learned quickly that med school demands resilience. His biggest takeaway for new students: "A friend to all is a friend to none. It's you and only you. Work harder and never let the past weigh you down." Second year marked the real hustle—subjects like cardiac physiology and neuroscience demanded his full attention. Alongside academics, he rediscovered his passion for graphic design and stepped back into leadership roles, adding color and creativity to the daily grind.

Third year offered him a glimpse of clinical life and gave direction to his interests—particularly internal medicine and cardiology.

This was also the year he joined MEDCON'24, marking the start of his journey into medical events and academic spaces. Now in his fourth year, Hadesh reflects on how clinical life brings a different kind of exhaustion—physical and mental. "The 7th semester hit harder than expected—double the academic load, tight schedules, and more frequent exams. No breaks. No procrastination. Just discipline." That phase made him step back from some commitments and focus on what mattered. Professionalism, he learned, sometimes means saying no—it's not about doing everything, but doing what matters well.

Internal medicine has been the most demanding—vast, complex, and humbling. "Even though it's my favourite," he admits, "studying for exams and real-world knowledge are very different." Balancing clinical hours with student-led organizations is still a work in progress, but that work keeps him grounded. "It keeps me sane and teaches real-life responsibility."

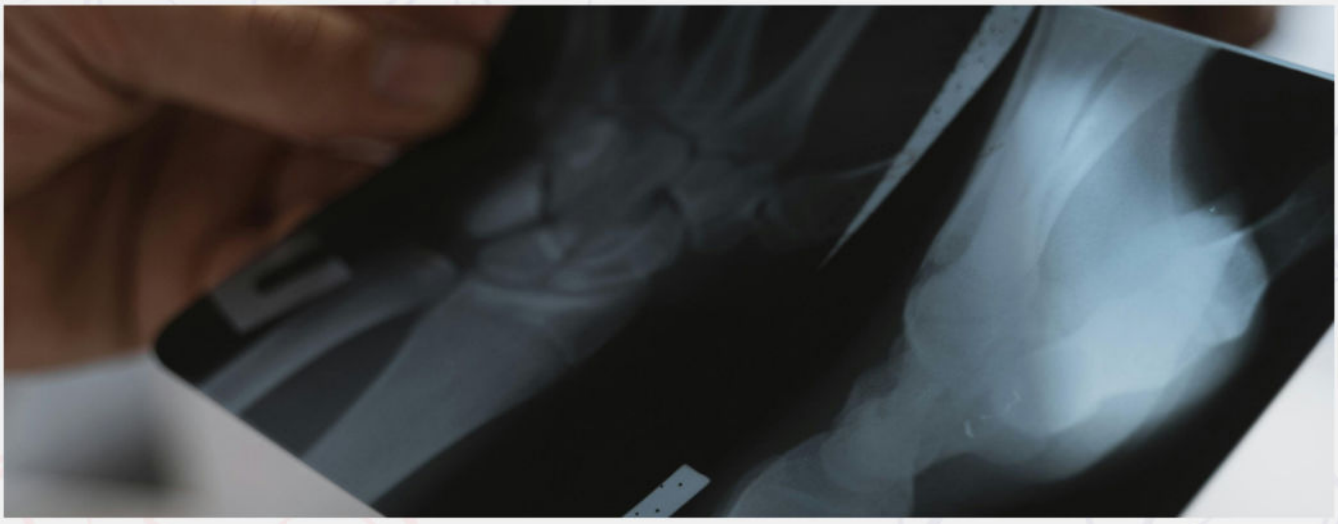
A paediatrics case of Pentalogy of Fallot reminded him that medicine is full of surprises and learning never ends. "Even after a decade, you'll still discover new things. Medicine is a bottomless pit—you must stay curious."
His communication has become more clinical and concise. He remembers doubting his ECG skills but doing well. "Confidence comes from real situations. Even wrong answers stick better with feedback."

He hasn't experienced patient loss yet but is preparing for it, hoping to learn emotional balance from seniors. "You need both—empathy to connect, detachment to survive."

One myth he'd like to bust: "Math doesn't matter in med school." Logical reasoning and basic calculations are essential for clinical thinking. As an auditory learner, regular attendance helps more than solo reading. Collaborative studying offers new perspectives and fills gaps.

Being the only son in a traditional family comes with pressure. "Taking care of parents, securing a future—it's not something you can brush off." His self-care includes anime, F1, YouTube, gaming, and graphic design—"survival tools, not distractions." "Work-life balance is harder to implement than talk about. But it's necessary."
He doesn't journal but thinks through problems like equations—solving them from different angles. He's proud of building a mix of leadership, creativity, passion, and science. "Say what's on your mind. Trying beats doing nothing. Even wrong answers count if they come from effort."

Family is his strongest support, and he admires MS Dhoni's calm, impactful leadership—something he hopes to emulate.
To his future self: "If you're still procrastinating, get moving."
To third-years: "Be realistic. Clinical years demand a lot—physically and mentally. Don't wait for the storm. Prepare. Build your foundation so nothing shakes you."



“More Than Medicine”

Unwritten Lessons by
Syed Javeed Ahmed

10th Semester, Geomedi Teaching University

For Javeed, medicine has never been just a career goal. It’s a personal journey—one shaped by curiosity, compassion, and a growing sense of responsibility, not just as a future doctor, but as a human being.

Rather than focusing on achievements or exam scores, Javeed turns his attention to the aspects of medical training that are often overlooked—but deeply important. “There are things we don’t get tested on,” he said, “but they matter just as much.” For him, three areas stand out the most: mental health, communication, and leadership.

“We spend so much time studying diseases, but forget that we’re treating people,” he reflected. “Empathy and communication aren’t just nice to have—they’re essential.” Javeed believes the curriculum should carve out space for learning how to break bad news, how to approach patients with cultural sensitivity, and above all, how to truly listen. In his view, these aren’t soft skills—they’re survival skills, for both the patient and the physician.

Leadership is another area he believes deserves more attention. “We’re told medicine is a team sport,” he said, “but no one teaches us how to be in a team—let alone lead one.” For Javeed, leadership isn’t about being the one with all the answers. “It’s about helping others do their best work. It’s about presence under pressure.”

But perhaps the most personal topic is burnout. “This field can be isolating,” Javeed reflects. “If we had more tools to handle that—resilience training, mental health support—we’d be able to thrive, not just survive.” In a world that often romanticizes sacrifice, he stands firmly for honesty and support.

One of the most defining moments in his journey happened during a clinical visit to MMT Hospital in Tbilisi.

There, a robotic gallstone surgery was performed by Dr. Guram Karajanashvili—the pioneer who introduced robotic surgery to the Caucasus. "Watching those robotic arms work with such precision... it was art," Javeed recalls. "Clean, elegant, and so advanced."

After the surgery, Dr. Guram shared a moment with the students. In response to a question about whether artificial intelligence might replace doctors one day, the surgeon simply smiled and said, "Doctors will always be needed."
"That moment stuck with me," Javeed reflects. "Technology should enhance what we do—not replace us. Our job is to grow with it, evolve with medicine, and hold onto our humanity in the process."

Impostor syndrome, too, finds its way into the narrative—a quiet weight that lingers behind success. "There are days I feel like I don't belong, like everyone else is miles ahead," he admits. What helps is looking back at the ground already covered. "I remind myself why I chose this. I lean into learning instead of comparison. Don't compete—connect. That's what I try to live by."

His greatest influences remain close to home. "My parents," Javeed shares. "Their belief in me has shaped everything. Every decision, every challenge—they've been behind me."

And to the version of himself that lies ahead, the message remains clear and steady: "Don't forget why you started. Stay kind. Stay curious. Take care of yourself and others. Even slow progress is still progress."

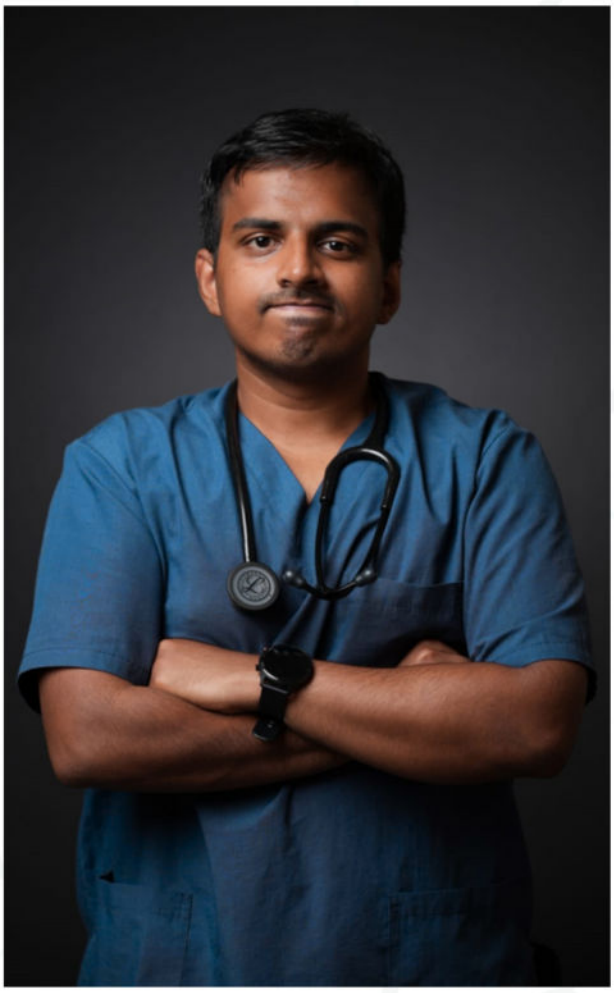
This journey through medicine isn't just about learning how to heal—it's about growing into someone who leads with empathy, connects with others, and never loses sight of what truly matters.

“THRIVING UNDER PRESSURE”

The Last Lap by Tafheem Thajudeen

12th Semester, Tbilisi State Medical University

For Tafheem Thajudeen, the journey through medicine has been anything but one-dimensional. It has been defined by pressure, perseverance, and a deeper understanding of what it means to show up—not just for others, but for yourself.



The path has challenged him to discover inner strength and resilience he didn’t know he possessed, revealing how pressure can shape character and fuel growth.

“Surgery changed the way I think about medicine,” Tafheem shares. “Not because I loved it, but because it pushed me to the edge.” Surgery, with its high stakes and fast decisions, became the first subject that demanded full confrontation with the seriousness of his future profession. It was not just about knowledge or skill—it was about responsibility, precision, and calmness under pressure. He admits that he tends to thrive when the pressure mounts, finding clarity and focus in the intensity. But it was the presence of a demanding professor that made the pressure even more acute.

“It made the pressure more intense—but it also showed me that surgery is a field for the daring.” He reflects on the barriers faced by many students, especially those from countries where medical education opportunities are limited. For him, studying medicine meant leaving home, family, and familiarity behind. The emotional weight of that decision lingers, reminding him daily of the sacrifices required to follow this path. This experience fuels a strong belief in the need for greater inclusivity in medical education. “Everyone deserves healthcare—but to provide that, we need more medical professionals.”

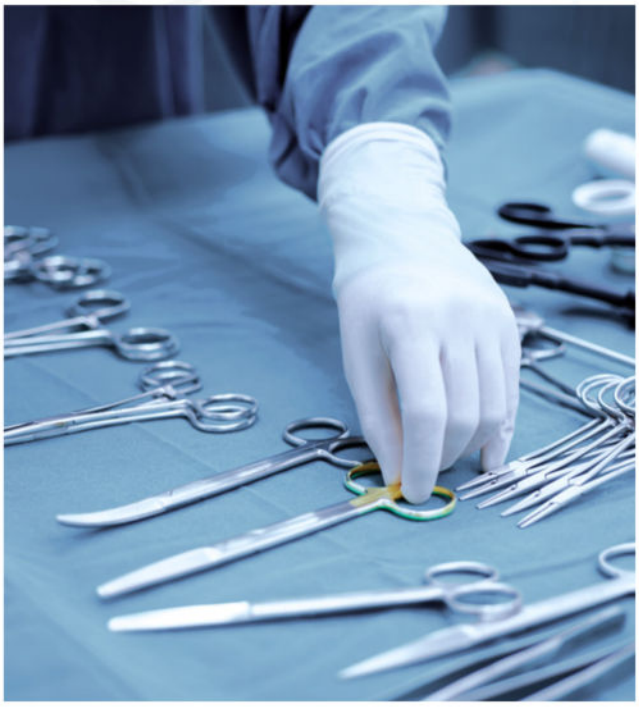
He emphasizes the importance of creating opportunities closer to home so that students aren't forced to leave their families just to pursue their dreams. "It would mean a lot if students had more opportunities at home—so they don't have to leave their families behind just to follow this path."

Impostor syndrome is another challenge that Tafheem confronts openly. He is honest about not considering himself an expert on the subject, but he acknowledges its grip. "I don't think I'm the best person to talk about it," he says, "But I've been there." Even when giving his best effort—whether in academics or on the football field—he found himself focusing on perceived flaws rather than achievements. Sometimes, it isn't just self-doubt; it's unintentionally magnified by those around us. "Sometimes, people unintentionally magnify your self-doubt. Even after giving his best—whether in academics or on the football field—he found himself pulled toward his flaws instead of his wins." He is learning to combat this by practicing positive affirmations and celebrating every effort. "Positive affirmations, celebrating my efforts—those small things help. That voice of doubt starts to quiet down."

Central to Tafheem's support system is his father, a figure who has inspired him deeply. He has witnessed his father navigate difficult times as a government employee while steadfastly providing for the family. "His journey still leaves me speechless." Alongside him are close friends who challenge and support him, encouraging growth across all facets of life.

To his future self, he offers a reminder both gentle and powerful: "Go easy on yourself. Somehow, figure out your mental health. You've got so much potential—don't let it go to waste."

This journey through medicine, marked by pressure and perseverance, is as much about inner strength and self-compassion as it is about knowledge and skill. Tafheem's story highlights the importance of facing challenges head-on while remembering to care for oneself in the process.



A Day out at

MAO BOBA

At 26 I. Chavchavadze Avenue, Mao Boba serves freshly prepared bubble tea every day from 12:00 to 22:00. This cozy café has earned a loyal following for its rich flavours and consistently satisfying drinks.
Top choices include the smooth Taro Boba, fragrant Thai Milk Tea, and the indulgent Fire Tiger Sugar Boba






—all crafted with care and balanced sweetness. Tapioca pearls are always fresh and perfectly chewy.
For orders or questions, reach out via WhatsApp (511413736), and follow their Instagram for new arrivals and seasonal specials. With its inviting menu and easygoing vibe, Mao Boba offers a reliable bubble tea experience in the heart of Tbilisi.

@ mao_bubbletea

PSYCHODERMATOLOGY

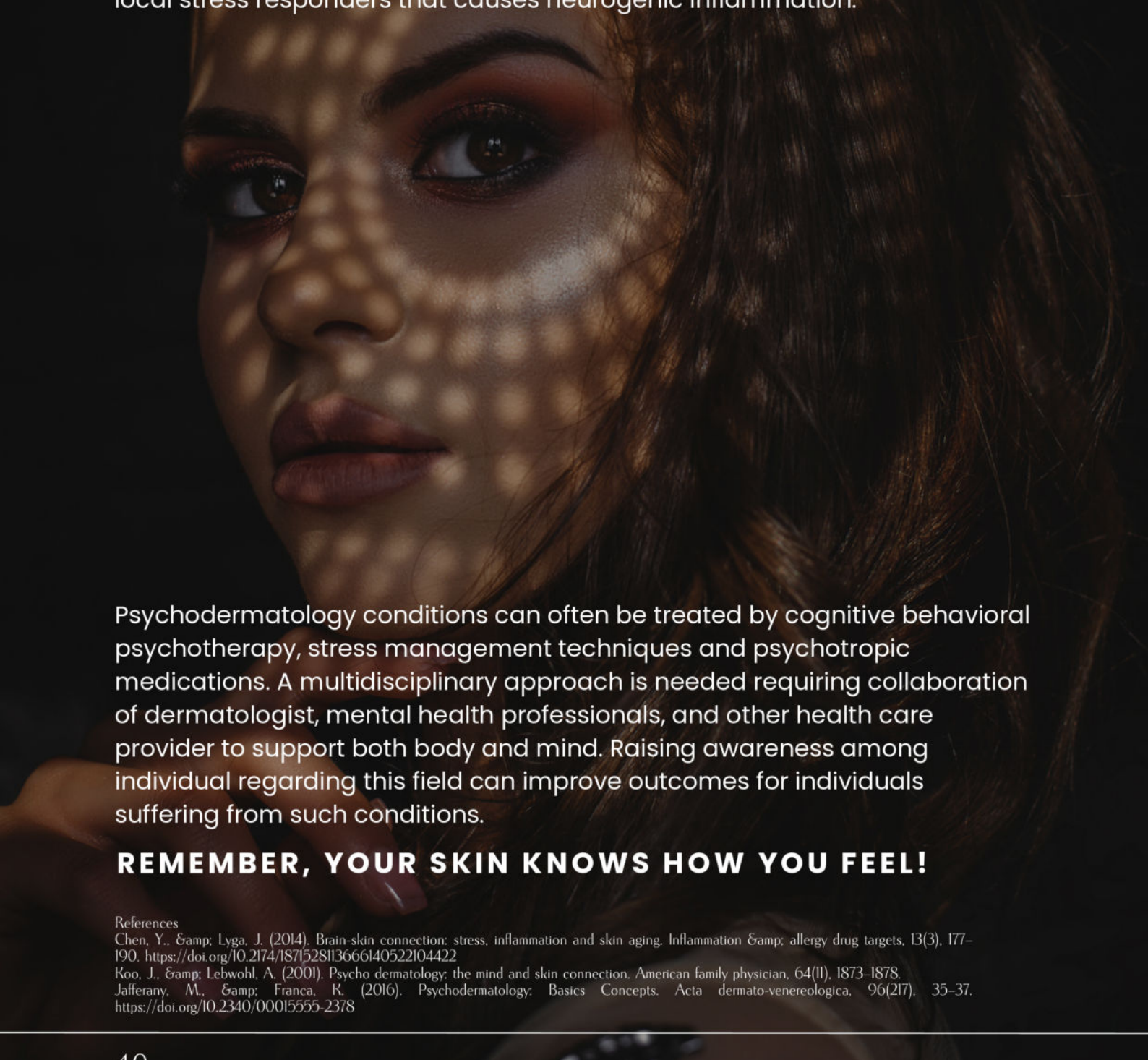
THE SCIENCE OF SKIN AND EMOTIONS

-Adiba Khan

Have you ever noticed your skin acting up when you're stressed, worried or anxious? Our skin reflects our emotions. Skin not only reacts on the outside, but also in the inside, mirroring your mental state. Welcome to the world of psychodermatology, an interdisciplinary field that explores the relationship between the skin and mind.

Surprisingly many dermatologists have been stressing for the need of psychiatric consultation and believe that psychological factors could be responsible for many dermatologic conditions and require a holistic approach to treatment. In more than one third of dermatology conditions, management of the condition involves consideration of psychological factors. Emotional stress has been a hidden culprit behind many chronic conditions like atopic dermatitis, alopecia, rosacea, acne, etc. Psoriasis, urticaria and alopecia are few common examples of psychodermatology conditions. Stress has been reported in 44% patients before the initial flare up and recurrent flare is seen in around 80% patients due to stress.

Psychodermatology shows that what's happening inside our mind can show up outside of our bodies and plays a major role on how our skin looks and feels. Mind impacts skin through the nervous and endocrine interconnectedness, it triggers a cascade of physiological responses in our body. Skin responds to both endogenous and exogenous stimuli. There has been an estimate of 25% to 33% prevalence of psychological factors that affect skin diseases. Stress activates 2 major pathways: the hypothalamic pituitary adrenal axis (HPA) and the sympathetic nervous system, releasing catecholamines and cortisol responsible for increasing allergic and inflammatory responses. Innervation of peripheral nerves in the skin can lead to secretion of factors like neuropeptides and neurotrophins (NT), which are local stress responders that causes neurogenic inflammation.



Psychodermatology conditions can often be treated by cognitive behavioral psychotherapy, stress management techniques and psychotropic medications. A multidisciplinary approach is needed requiring collaboration of dermatologist, mental health professionals, and other health care provider to support both body and mind. Raising awareness among individual regarding this field can improve outcomes for individuals suffering from such conditions.

REMEMBER, YOUR SKIN KNOWS HOW YOU FEEL!

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2 TRUTHS 1 LIE

1

1. The scapula articulates with the humerus at the glenoid cavity
2. The ulna is on the lateral side of the forearm
3. The clavicle is the first bone to begin ossification in the embryo

2

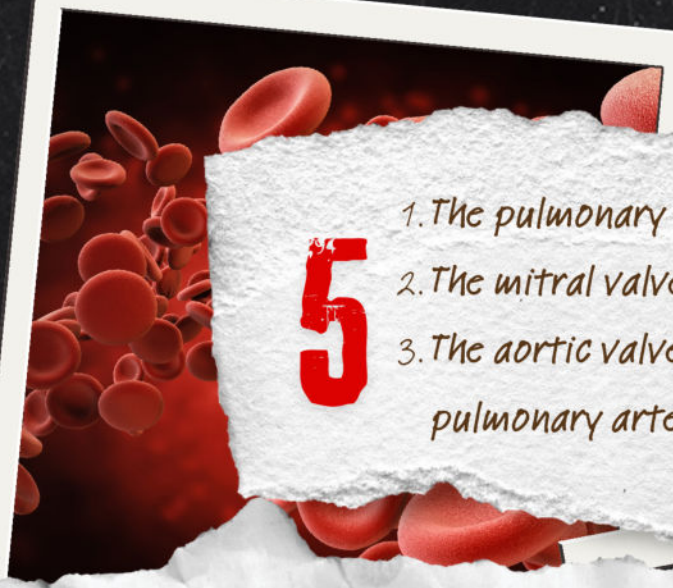
1. The sciatic nerve is the largest nerve in the body
2. The femoral nerve supplies the hamstrings
3. The tibial nerve is a branch of the sciatic nerve

3

1. The pancreas lies mostly retroperitoneally
2. The duodenum is the first part of the small intestine.
3. The spleen is located in the right upper quadrant.

4

1. The temporal bone houses the structures of the inner ear
2. The maxilla forms the lower jaw
3. The zygomatic bone contributes to the cheek prominence

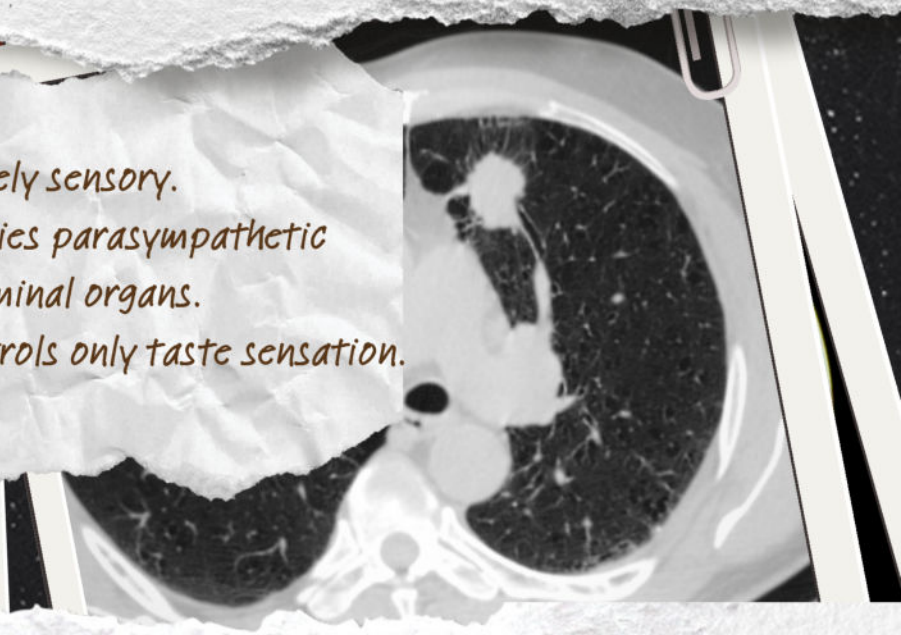


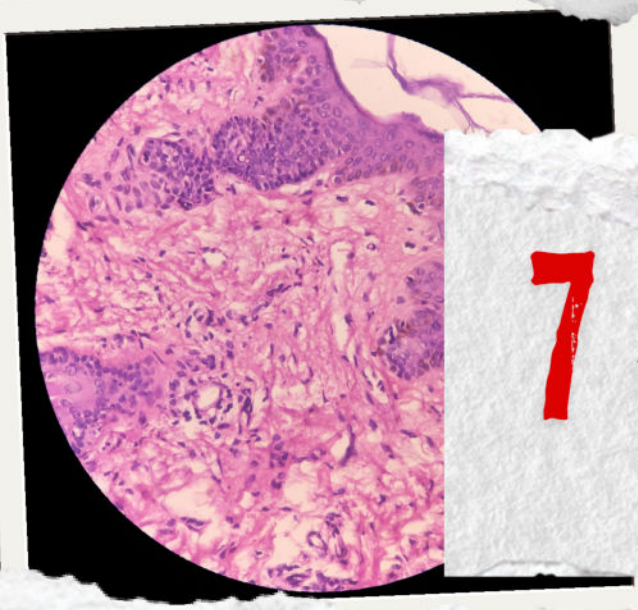
5

1. The pulmonary veins carry oxygenated blood.
2. The mitral valve is between the left atrium and left ventricle.
3. The aortic valve prevents blood flow from the aorta to the pulmonary artery

6

1. The optic nerve (CN II) is purely sensory.
2. The vagus nerve (CN X) supplies parasympathetic fibers to thoracic and abdominal organs.
3. The facial nerve (CN VII) controls only taste sensation.





7

1. The trachea bifurcates at the level of the T4–T5 vertebrae.
2. The right main bronchus is shorter, wider, and more vertical than the left.
3. The left lung has three lobes.

8

1. Simple cuboidal epithelium lines the renal tubules.
2. Stratified squamous epithelium is found in the skin.
3. Transitional epithelium lines the esophagus.

ANSWERS

1. The ulna is on the medial side of the forearm (pinky side); the radius is lateral (thumb side)

2. The femoral nerve supplies the anterior thigh (quadriceps), not the hamstrings (which are supplied by the sciatic nerve)

3. The spleen is in the left upper quadrant, not the right

4. The mandible forms the lower jaw, not the maxilla

5. The aortic valve prevents backflow from the aorta into the left ventricle, not the pulmonary artery

6. The facial nerve controls facial expression muscles and taste from the anterior two-thirds of the tongue — not taste only

7. The left lung has two lobes; the right lung has three

8. The esophagus has stratified squamous epithelium; transitional epithelium lines the urinary bladder

TBILISI 30 NOVEMBER, 2025

Gimsor Times

Let's be honest—2020 flipped everything upside down. But while the world was scrambling, medicine quietly levelled up. In just a few short years, we've seen game-changing breakthroughs that would've seemed like science fiction not too long ago. From vaccines made in record time to health apps that track your heartbeat while you sleep, the way we treat and understand illness has changed—big time.

mRNA Vaccines: A Paradigm Shift in Immunisation

The rapid development of mRNA vaccines for COVID-19 marked a historic achievement in medical science. Companies like Pfizer-BioNTech and Moderna developed vaccines within months of the virus's genetic sequence being identified. This unprecedented speed was facilitated by years of prior research and substantial financial backing, including support from initiatives like Operation Warp Speed in the United States . The success of these vaccines has paved the way for exploring mRNA technology in combating other infectious diseases and even certain cancers

Enhanced Surgical Systems

Robotic platforms like the da Vinci Surgical System have become integral in various surgical specialties, including urology, gynecology, and cardiology. These systems offer high-definition 3D visualization, tremor filtration, and enhanced dexterity, allowing surgeons to perform complex procedures with greater precision and minimal invasiveness.

Telemedicine: Revolutionising Access to Healthcare

The pandemic necessitated a rapid shift towards telemedicine. Platforms like Doxy.me experienced a dramatic increase in usage, with monthly session minutes soaring from 5.5 million in February 2020 to over 89 million in March 2020—a nearly 29-fold increase compared to the previous year . This surge highlighted the potential of telehealth in providing accessible care, especially in underserved areas. While challenges remain, such as ensuring equitable access and maintaining the quality of care, telemedicine has become an integral component of modern healthcare delivery

Miniaturisation and Flexibility

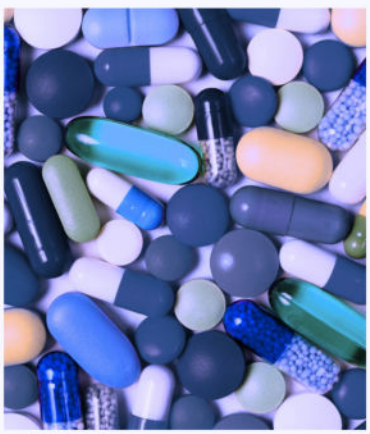
Advancements have led to the development of smaller, more flexible robotic systems. For instance, the TMINI system is a wireless, handheld device designed for total knee surgeries, offering precise bone pin placement and accurate bone resections. Its compact design and intuitive workflow aim to make robotic surgery accessible to more clinics and surgeons.

Dual-Robot Integration

A groundbreaking dual-robotic surgery was performed in Texas to remove a prostate gland, aiming to preserve erectile function. The procedure utilized the da Vinci single-port robotic system and Levita Magnetics' MARS platform, combining two technologies to enhance tissue retraction and visualisation while minimizing nerve damage.

Personalised Medicine: Tailoring Treatments to Individuals

With the rise of affordable genetic testing, personalised medicine is becoming increasingly common. Treatments—especially in cancer care—can now be tailored to an individual's genetic profile. This approach leads to more effective therapies with fewer side effects. As gene-editing tools like CRISPR also continue to evolve, the future of medicine looks increasingly bespoke.



Health Wearables: Your Body's Dashboard

Fitness trackers have come a long way. Devices like the Oura Ring and Fitbit now monitor heart rhythms, oxygen levels, sleep cycles, and more (Wikipedia – Oura Health, Fitbit). Some even caught signs of COVID in users before symptoms kicked in.

These wearables help you spot issues early, stay on top of chronic conditions, and understand your body better day to day. It's like having a little health coach on your wrist (or finger).

Implantable Brain-Computer Interfaces

Devices that decode brain signals into movement commands were developed, offering potential for restoring motor function in patients with severe paralysis.

3D Printing: Custom-Made Implants

This one sounds like something out of a sci-fi film—but it's real. 3D printing is now being used to create custom implants, like hip joints or skull plates, that fit each patient perfectly. No more one-size-fits-all metal pieces.

Even more incredible? Scientists have started printing scaffolds for bone regrowth. A team in the UK created one that slowly dissolves as real bone grows back in its place . And then there's bio printing—literally printing with living cells to build tiny organs. That's still a few years off, but the foundation is already there.

Healthcare is changing fast—and for once, it's not just about hospitals or treatments. It's about you. Your data. Your genetics. Your convenience. We're seeing medicine shift from reactive to proactive, from general to personal.

My Diary

Josephine Alex

Dear Diary,

11 October 2025

Opening up like this feels like stepping into the deepest, most vulnerable parts of myself. There's still a quiet echo of shame that sometimes makes me hesitate, but tonight I want to reflect on the journey that brought me here.

Academically, I've grown leaps and bounds. The person I am today is beyond what the old me could have imagined — truly beyond my dreams. But the journey wasn't easy. I faced struggles and setbacks that tested my resolve. Most friends weren't aware of the depth of my struggle, partly because shame kept me quiet.

I remember being put on probation when I joined the science class in senior secondary school. The guidance and counseling department kept repeating that I could be moved to the arts class if my performance didn't improve. That fear was heavy, but instead of giving up, it lit a determination in me.

I also remember the doubts — from others, and from myself. Could I really pursue medicine? Was I capable? After my first semester at university, I made a conscious decision to give more effort. It wasn't easy. There were tears and moments of frustration, but I refused to let setbacks define me.

From that moment, I committed myself wholeheartedly. I started to see myself differently, as someone capable of achieving the impossible. I began to trust in the power within me, as Ephesians 3:20 says. Slowly, progress started to appear.

Reflecting now, I am filled with awe and pride. One of my proudest moments was being chosen to participate in a medical conference in my second year. That moment reminded me that perseverance and faith can truly transform doubt into achievement.

Every success since has been a reminder that growth isn't linear. It's the culmination of hard work, setbacks, and quiet determination. Sharing these accomplishments isn't about showing off; it's about honoring the journey and acknowledging the strength I've discovered within myself.

Even now, as new milestones come, I will never forget those early days when everything felt out of reach. Those struggles were fuel for resilience. They taught me to see myself as more, to walk in the light of my potential, and to embrace the limitless possibilities that lie within.

Tonight, I close this entry feeling grateful for every obstacle, every tear, and every step that led me here.

- Me

THE WHITE COAT JOURNEY

-ADITI LASWANTE

From boarding flights to foreign skies
To chasing dreams where passion lies
Leaving home the ache runs deep
Calls to family, tears in sleep.
Time flies fast, friends come and go,
Strangers turn to family and
back before you know.
The path of med school is steep
with highs and lows
From failing grades to passing shows.
The very first lecture to final year,
The six year ride is not easy that's clear.
This cloth is white but nit just cloth,
It carries dreams, it carries oath.
A symbol of trust of lives in hand,
Of standing tall when few can stand.
So when the days feel dark and long,
Remember why you started strong.
You aren't just learning how to treat.
But how to fall and rise, repeat.

WORD SHUFFLE

T A O N M A Y	N C E V A I C
R G S E U R Y	I A T P N E T
T O R C O D	S I V R U
Y N I U R J	I N E B N G
T O P S M M Y	U N E R N O
P Y B S O I	E U R C L

ANSWERS ON PAGE 74

INSIGHT MD

PRESENTS

ART BY HEALING HANDS

BLOOM BENEATH THE SCALPEL

Matheesha Halpage

Beneath the calm mask and sterile light, the healer's chest blooms with quiet defiance, flowers unfurl where ribs should rest, a heart that refused to turn cold. In a world built on steel and silence, humanity blossoms still; even in the chill of surgery, compassion finds its breath.

WHISPERS OF AN OLD DOORWAY

Israa Kalim

This sketch captures a quiet corner of an old European street, where time seems to pause. Through intricate cross-hatching, evokes memory and solitude. The absence of color invites reflection, letting shadows speak. Each line feels intentional —an intimate dialogue between light, decay, and the poetry of forgotten places.

THE UNPREDICTABLE PLAY

Sai Vinthiyaa Gopinath

An octopus's arms contain most of its neurons, letting them move with their own instinct. Like the heart's rhythm, its motion is beautifully unpredictable ,a natural flow that reminds us how life beats with mystery and independence.

WHERE SUFFERING MEETS THE SPRING

Sobia Rasheed Muhammad

This textured artwork contrasts two worlds divided by the Earth. One side blooms with flowers, butterflies, and flowing DNA, symbolizing health and harmony. The other is layered with headlines about global disease, reflecting struggle and resilience. Mixed materials and tools create depth, inviting reflection on the fragile balance between illness and wellness.

PAIN OF PURITY

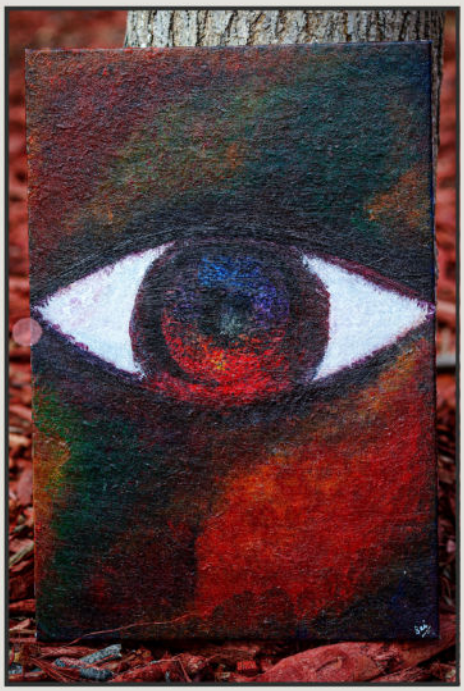
Malavika Menon

It is a digital artwork that depicts the pain women have been subjected to in the name of preserving virtue. This aims to raise awareness against the horrors of Female genital mutilation and support countless women who have gone through this brutal act in the name of purity.

THE VISION OF A SOUL

Sai Vinthiyaa Gopinath

When abstract strokes gather into form, the eyes emerge as the quiet storytellers. They give depth to emotion and shape to silence becoming the window through which the soul reveals its truest vision.



WEAVING THE GENE POOL ODYSSEY

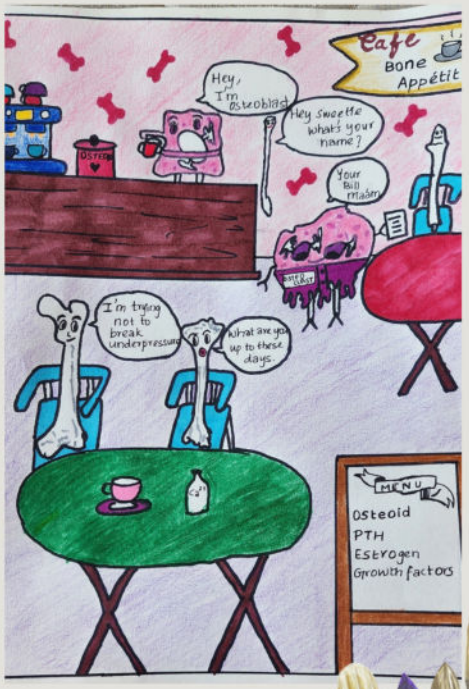
Zobiya Ansari

The artwork visualizes the evolution of genetics and the integration of Artificial Intelligence in bioinformatics. It features key omics (epigenomics, metabolomics) used in disease prognosis and diagnosis. The piece shows Charles Darwin's hands weaving the strands of life, symbolizing his key role in evolutionary biology giving rise to the future of genetics alongside AI.

BONE APPÉTIT

Sri Durgha Arumai Raj

"Bone Appétit" humorously reimagines bone biology as a cafe scene. Her osteoblasts brew 'osteoid coffee' since it helps with formation and osteoclasts collect the bills since it helps with resorption. Blending anatomy with imagination, the artwork illustrates the balance between bone formation and resorption through a playful café-style metaphor



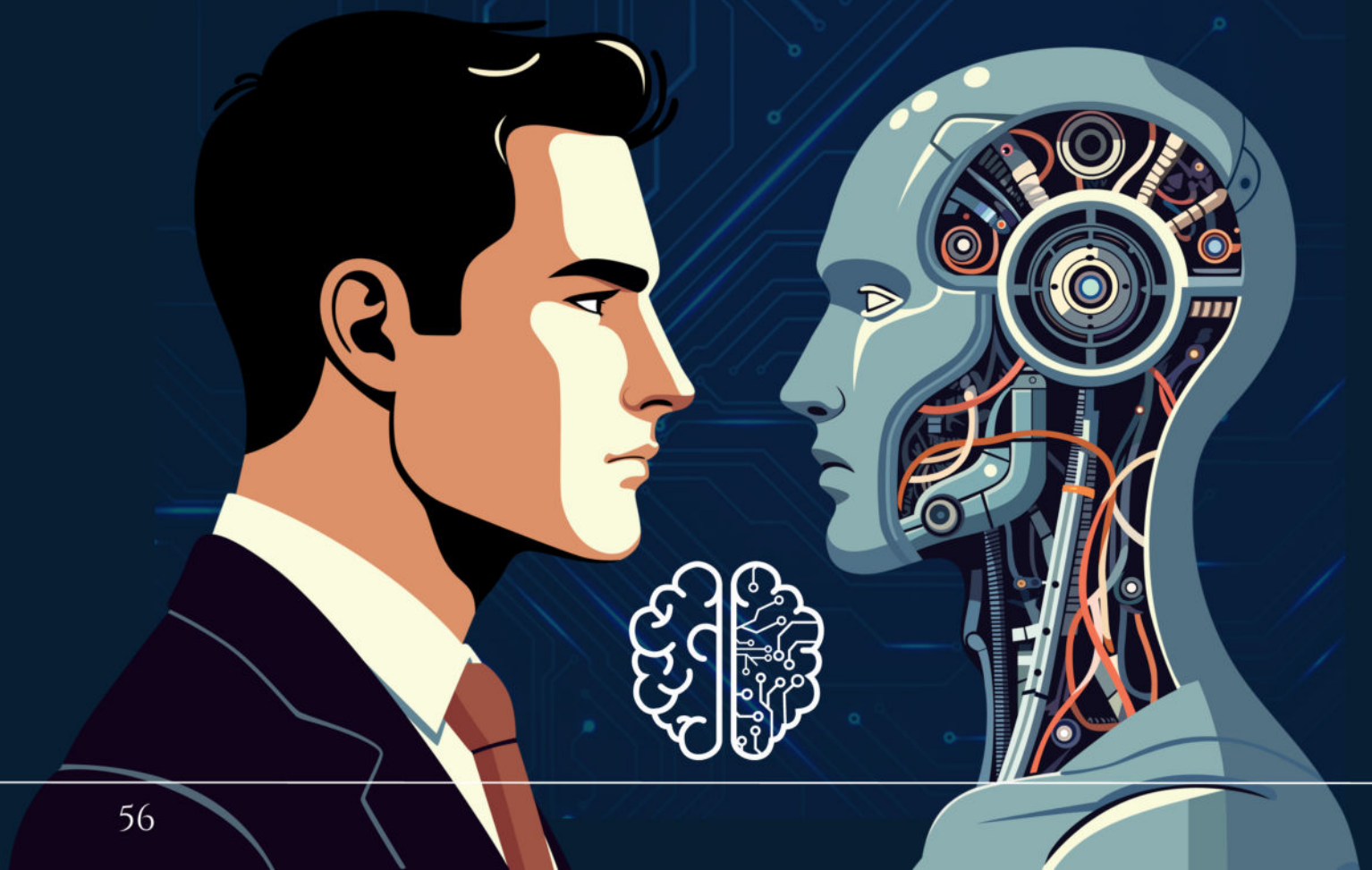
TRANSFORMING HEALTHCARE THROUGH AI

THE DAWN OF A NEW ERA

By Matheesha Halpage

When we speak of artificial intelligence (AI) in healthcare, we are not merely discussing a technological upgrade; we are witnessing a paradigm shift as profound as algebra's birth in mathematics, a revolution redefining how we understand, diagnose, and treat the human body. AI is not the future waiting at the door; it is the pulse already coursing through the veins of modern medicine. From diagnostics to drug discovery, from patient engagement to predictive analytics, AI is transforming the healthcare landscape in ways both subtle and seismic.

As the landscape of healthcare undergoes rapid and profound transformation, medical students who are poised to become tomorrow's healers find themselves at the forefront of an this revolution. Artificial intelligence (AI) is no longer a futuristic concept but an essential, transformative force reshaping diagnosis, treatment, and patient care. Embracing AI is not optional; it is an imperative skill that will empower clinicians to deliver precision medicine with remarkable speed and accuracy, ultimately expanding the boundaries of human expertise.



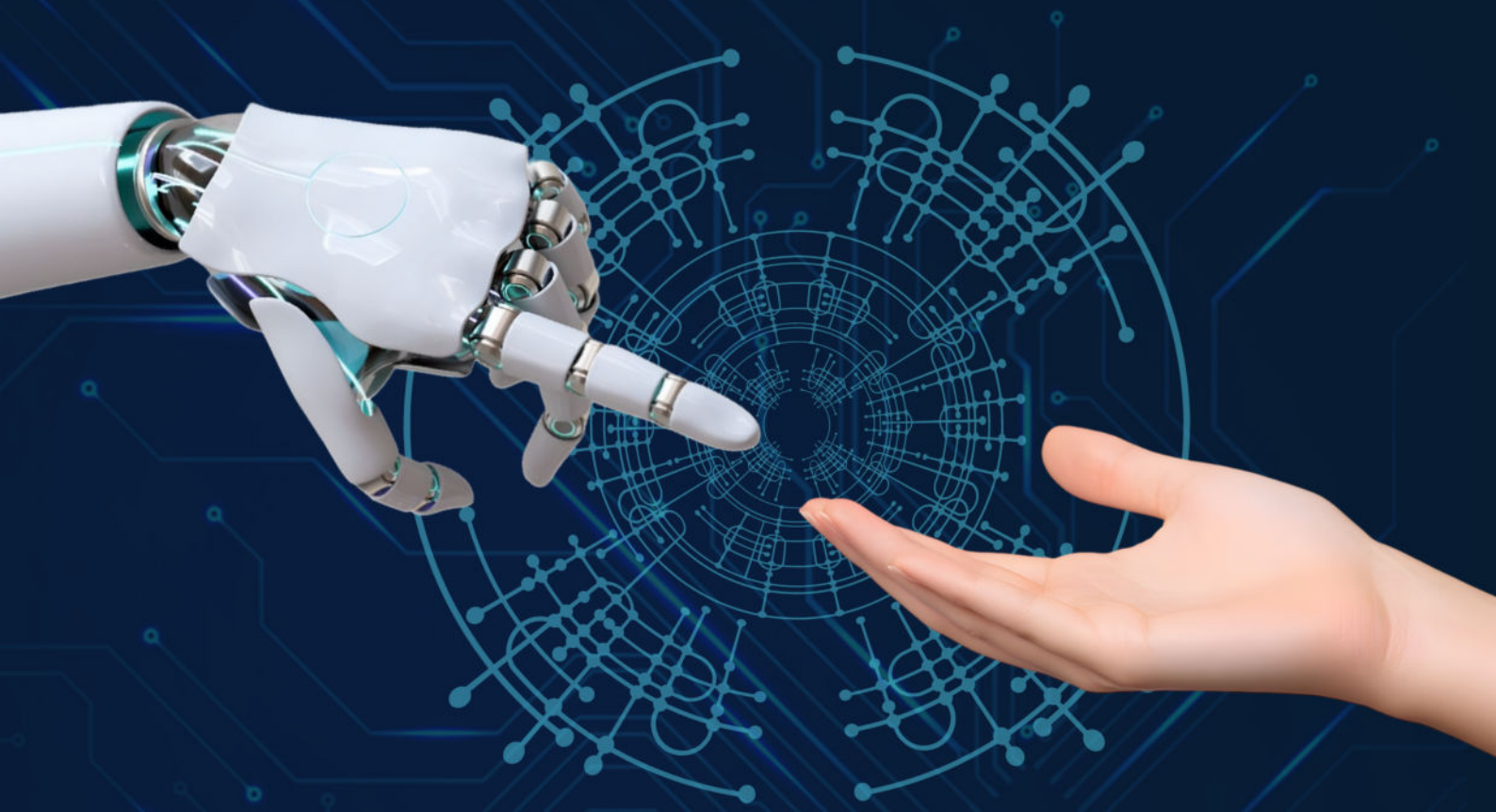
The notion that artificial intelligence will replace physicians is an alluring illusion. The truth lies in collaboration, not replacement. AI thrives in managing vast datasets, uncovering latent patterns, and providing probabilistic insights, but it lacks the human essence: empathy, moral judgment, and the contextual nuance that defines clinical excellence. Physicians remain irreplaceable as interpreters and ethical gatekeepers, ensuring that AI's recommendations are not just efficient, but humane. Regulatory bodies and professional organizations are constructing robust frameworks to ensure the safe, fair deployment of AI.

This isn't an unchecked technological wildfire, it's a careful choreography between precision and compassion, innovation and integrity. At the frontier of this transformation lies multimodal AI systems that integrate text, images, numerical data, and sound into a singular diagnostic vision. Tools like ChestLink and retinal imaging algorithms that predict Parkinson's years in advance are no longer science fiction; they are the early beats of a revolution already underway. Beneath these breakthroughs are the unsung heroes, physicians and researchers who label and curate the datasets AI learns from. Their quiet labour forms the bedrock of every innovation, and they deserve both recognition and reward as the invisible hands shaping the future of care.

This revolution arrives at a time of immense strain: healthcare systems worldwide are buckling under the weight of rising patient loads and dwindling specialist numbers. In the UK, for instance, nearly 10% of all NHS outpatient visits are ophthalmic, stretching resources thin and leading to delayed treatments that sometimes cost patients their sight

AI offers a path forward not just as a diagnostic tool, but as a force that can reshape clinic. al workflows, optimize staff deployment, and deliver timely care. From interpreting thousands of daily scans to accelerating drug discovery and biomarker research, AI is expanding what is possible in medicine. With user-friendly, no-code platforms, clinicians are now empowered to develop their own AI models, tools that can detect what even human eyes cannot, like gender from a retinal scan. This participatory model ensures technology evolves in tandem with clinical reality, not apart from it. Yet, challenges persist.

AI systems can act as opaque "black boxes," raising concerns about accountability, transparency, and interpretability. High-profile cases like Google DeepMind's unauthorized use of NHS patient data underscore the importance of trust, consent, and privacy. For AI to be a true partner in healing, it must not only be powerful, it must be principled. We are standing at a pivotal moment, akin to the dawn of the personal computing era. The choices we make today will determine whether AI becomes a cold, detached force, or a trusted companion on the sacred path of care.



We stand at the threshold of a paradigm shift, where algorithms illuminate and clinicians elevate, where data directs but compassion anchors. The fusion of AI and medicine is no longer tomorrow's dream; it is today's challenge and opportunity. For the healers of the future, fluency in AI is the new literacy of care. Yet with this power comes a deeper duty: to wield it with wisdom, protect patient privacy, and always keep humanity at the centre. If embraced with courage and conscience, AI won't replace the human touch, it will deepen it, forging a future that is more precise, more predictive, and more profoundly human.

The Ultimate Med School Checklist

- [ ] 1. Work on research topics you're interested in
- [ ] 2. Join student medical associations or specialty clubs
- [ ] 3. Attend workshops, webinars, and conferences
- [ ] 4. Keep an updated CV and LinkedIn
- [ ] 5. Build mentoring relationships early
- [ ] 6. Start a mini research or journal project
- [ ] 7. Capture milestones like white coat, first patient, first surgery
- [ ] 8. Access to online resources: PubMed, UpToDate, Lecturio
- [ ] 9. Anatomy atlas (Netter's/ Gray's) Clinical skills handbook
- [ ] 10. Weekly review & flashcard routine

"Have a positive attitude and enjoy !"

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MEDCON '25

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24- 25 OCTOBER 2025

Ivane Javakhishvili
Tbilisi State University

In dialogue with THE HEADS

Guncha Shaikh
Conference Director

Conferences like MEDCON play a powerful role in shaping the professional growth and readiness of medical students. “Each year, the event brings participants face-to-face with the realities of modern medicine the challenges, breakthroughs, responsibilities, and humanity that define the field.” Sessions led by experts who have managed global outbreaks, guided research, or made complex clinical decisions help students see medicine as a dynamic, evolving discipline that requires continuous learning. Through workshops, discussions, and real world scenarios, they experience the urgency, collaboration, and critical thinking essential in healthcare. MEDCON also offers students their first meaningful exposure to leadership, teamwork, and professional responsibility. Whether presenting, volunteering, or engaging in activities, they build confidence, communication skills, and a clearer sense of purpose. Many return to their universities with renewed motivation, broader perspectives, and a genuine readiness to enter the medical world with integrity and ambition.

Inchara Dhanvanthri
Co-Head of PR & Marketing

MedCon25 highlighted how rapidly infectious diseases are evolving, emphasising the need for future doctors to stay adaptable and evidence driven. The conference reinforced medicine’s growing interconnect, with keynotes linking ‘gut brain health’, ‘immunity’, ‘infection’, and ‘microbial activity’. A strong focus on global responsibility; especially antimicrobial resistance showed that stewardship must begin with students themselves. The research panel encouraged early involvement in inquiry, proving that “impact starts with curiosity.” Organisational experiences and hands-on workshops further demonstrated the essential role of communication, teamwork, leadership, and practical skills in preparing confident and competent doctors for a rapidly changing healthcare world.

Insha S Khan
Head of Organisation & Programme planning

The theme "Outbreaks to Breakthroughs" encourages students to adopt a broader, globally minded approach to health and disease prevention. By reflecting on major outbreaks like COVID-19 and Ebola, the theme highlights the importance of integrating research, data analysis, and cross-disciplinary collaboration involving medicine, data science, public policy, and global partnerships. It also strengthens student advocacy by promoting accountability and a deeper understanding of equitable solutions. Ultimately, the theme motivates emerging professionals to view outbreaks as opportunities for innovation, inspiring them to contribute to stronger, more prepared global health systems.

Mandrika Frenando
Head of Finance & Budgeting

"Collaboration is at the core of infectious disease medicine, and MedCon exemplified this by uniting students from around the world studying in Georgia." The conference created a dynamic environment where diverse perspectives came together through shared learning, joint case discussions, and teamwork driven workshops that mirrored real epidemic response scenarios. Students learned not only to exchange ideas but also to work toward a common goal, even when approaches differed; much like real-world outbreak management.

Beyond collaboration, MedCon significantly strengthened students' professional growth. Expert talks, research panels, and immersive workshops especially pandemic simulations built confidence, sharpened clinical reasoning, and enhanced practical readiness. For many participants, MedCon offered their first tangible glimpse into confronting public health challenges and stepping into the responsibilities of future doctors.

WORKSHOPS HIGHLIGHTS

"I attended the incision and abscess workshop as well as the foreign body removal and suturing workshop, and they were incredibly valuable. Getting this hands-on exposure early really gave me an advantage and broadened my clinical skills.

The sessions were well organized, with clear demonstrations and small-group practice that made learning more effective and engaging. The selection of workshops felt very practical and aligned with what we'll need as future doctors.

Overall, the experience strengthened my confidence, expanded my skill set, added meaningful value to my CV, and gave me the chance to learn and network with doctors and fellow medical students in a professional environment."

Esther Aregbesola,
GIMSOC Ambassador

WORKSHOPS HIGHLIGHTS

> “Working in small groups alongside my peers added another meaningful layer to the experience. As medical students, truly hands-on opportunities are rare, so being able to practice these essential skills was invaluable for our development as future physicians. Overall, Medcon broadened my perspective and strengthened my understanding of infectious disease management in a way that will significantly shape my clinical approach moving forward.”

Oluwatamilore Adeyemi,
GIMSOC Ambassador

Decoding the DATA

An Exclusive Glimpse at the Award-Winning Poster

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MEDCON'25
OUTBREAKS TO BREAKTHROUGHS
24TH & 25TH OCTOBER, 2025

EMERGING SUPERBUG: NOVEL ANTIBIOTIC USE IN A CASE OF MDR TYPHOID

Ganesh Chandrashekar[1]*, Hima Mahesha[1]*, Nikith Austin D'Souza[2]
[1]Georgian-American University, Medical School, Tbilisi, Georgia
[2]Assistant Professor of Paediatrics, St. John's Medical College Hospital, Bengaluru, India

BACKGROUND

- *Salmonella Typhi* causes over 4.5 million cases of enteric fever and nearly 9,000 deaths annually in India, representing more than half the global burden.
- Classical multidrug resistance (chloramphenicol, ampicillin, cotrimoxazole) declined from 65% in the early 1990s to near zero by 2020, but nearly 99% of strains now resist fluoroquinolones.
- Resistance to third-generation cephalosporins and azithromycin remains low (~3%) but is rising regionally, highlighting the need for surveillance and vaccine introduction.

CASE DESCRIPTION

- 16-year-old, partially immunized male with high-grade fever, chills, headache, myalgia, dry nocturnal cough (12 days).
- Examination: sick, pale, hepatomegaly noted.
- Labs: leucopenia, Widal positive for *S. Typhi* OH antibodies, false-positive scrub typhus IgM.
- Blood culture: *S. Typhi* resistant to ceftriaxone.
- Initial ceftriaxone failed; meropenem and azithromycin also ineffective after 10 days.
- Infectious diseases consultation led to addition of ceftazidime–avibactam, resulting in improvement.
- Case notified to ICMR; source tracing and genotype studies started.

DISCUSSION

- Ceftazidime–avibactam led to rapid clinical improvement after failure of conventional antibiotics.
- Patient discharged with continued IV treatment.
- Delayed typhoid vaccination planned.
- Health authorities began surveillance and genotype tracing.

Category	Details
Patient Age	16 years
Presentation	12 days fever, chills, headache, myalgia, dry nocturnal cough
Clinical Exam	Sick-looking, pale, hepatomegaly noted
Lab Findings	Leucopenia; Widal positive for *S. Typhi* OH antibodies; scrub typhus IgM false positive
Culture & Resistance	*S. Typhi* resistant to ceftriaxone
Initial Treatment Days 1–12	Empirical ceftriaxone initiated, but fever, myalgia, and leucopenia persisted.
Subsequent Therapy Days 13–20	Switched to meropenem + azithromycin after AST showed ceftriaxone resistance
Advanced Therapy Day 21	Added ceftazidime–avibactam after infectious diseases consult and literature review

CONCLUSION

- Rising MDR *Salmonella Typhi* highlights the value of novel antibiotics like ceftazidime–avibactam.
- Resistance to fluoroquinolones and cephalosporins complicates therapy.
- False-positive serology can delay diagnosis.
- Surveillance, rational antibiotic use, and vaccination are key to disease control.

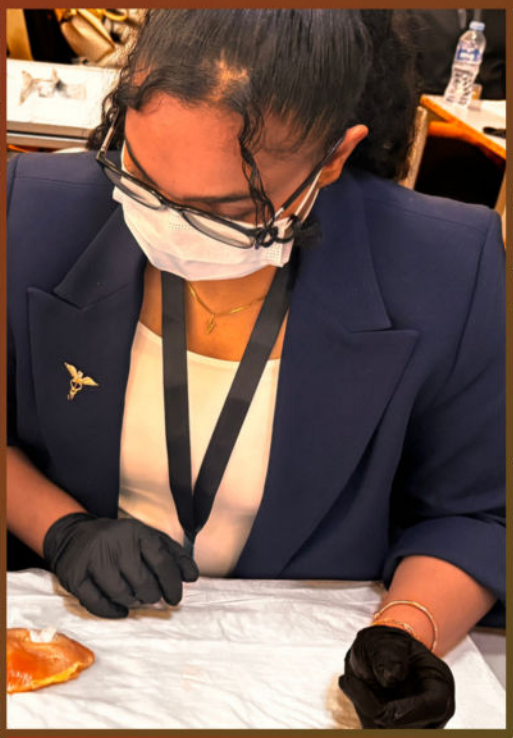
SCAN ME!

Blueprints *of* Brilliance

Fleeting moments, grand vision—MEDCON'25 highlights & quick frames

Three days. Countless ideas. One contagious energy.

MEDCON'25 came alive with precision, passion, and purpose.
Day 1 set the pace with engaging workshops and hands-on practical sessions that turned the venue into a buzzing hub of innovation.

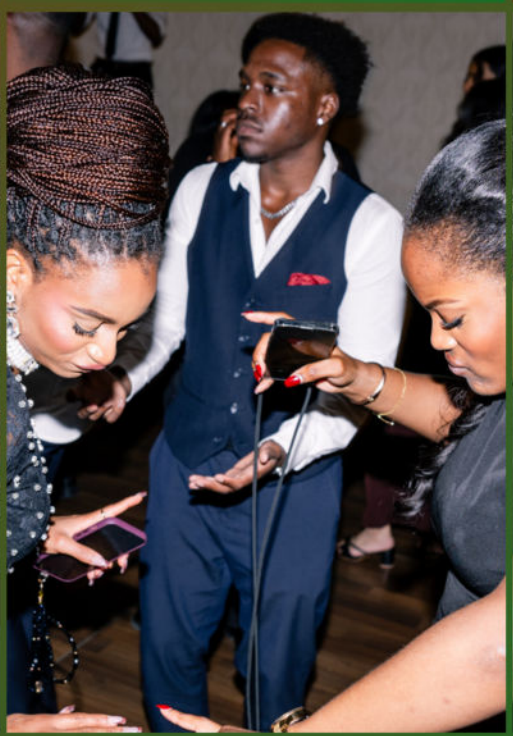


Serious science, real smiles.

Students and mentors turned learning into something truly alive. Day 2 deepened the experience through collaborative workshops and interactive demonstrations that blended curiosity, skill, and genuine enthusiasm.

Two days of science, a night of sparkle and celebration.

The conversations didn't end — they just moved to the dance floor. Day 3 brought the Gala Night to life with joyful performances, well-deserved awards, great food, and a party that wrapped MEDCON'25 in unforgettable style.



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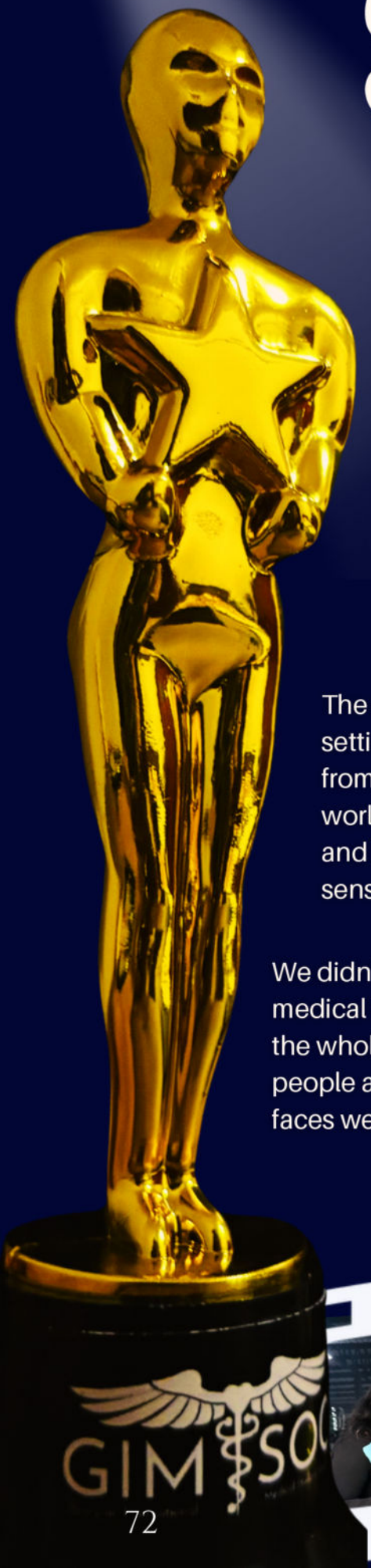
A NIGHT OF CONNECTION & CELEBRATION



On the 23rd of November 2025, GIMSOC came together for something simple but meaningful. It brought together executives and subcommittee members for an evening dedicated to bonding, appreciation, and a well-earned break after months of hard work.

The mixer followed a potluck-style theme, instantly setting the tone for the night. Everyone brought food from their own cultures, turning the room into a mini world tour of flavors. Sharing meals, swapping recipes, and laughing over who made what created a cozy sense of family that you just can't fake.

We didn't stop at food. The night was filled with games, from medical trivia that stretched our brains to charades that had the whole room shouting and laughing. The games mixed people across committees, making it easy to connect with faces we normally only see during meetings.

The evening wrapped up with a warm award segment, where committee heads and subcommittee members were recognized for their work. Nothing formal, nothing stiff; just genuine applause, big smiles, and people cheering for their teams.

We also took a moment to look back on MEDCON and how smoothly the three-day conference went. The mixer reminded us that what made MEDCON possible wasn't luck; it was every person in the room, showing up, contributing, and carrying GIMSOC together.

In the end, the mixer felt like exactly what we needed: good food, good energy, good people. A reminder that behind every event and every achievement, it's teamwork that keeps GIMSOC strong.

ANSWER KEY

QUIZ TIME

Answers

1. Enalapril
2. Sulfonyureas
3. Tetracycline
4. Metronidazole
5. Salbutamol
6. Ibuprofen

CROSSWORD

Across

1. Mumps
6. Leprosy
7. Nosocomial
9. TCells
10. Malaria
11. Ebola
12. Lyme

Down

1. Measles
2. Water
3. Hepatits
4. Fungi
5. Bacterium
8. Blood

WORD SHUFFLE

Answers

- Anatomy
- Surgery
- Doctor
- Injury
- Symptom
- Biopsy
- Vaccine
- Patient
- Virus
- Benign
- Neuron
- Ulcer

ANSWER KEY

CURE QUEST: ORIGINS

1. First implanted Cardiac Pacemaker, 1958 — Sweden
2. Identification of Tuberculosis pathogen — Germany
3. Smallpox vaccine — England
4. Stethoscope invention — France
5. Bronze scalpels and forceps (discovered in tombs) — Egypt
6. First Human Heart Transplant, 1967 — Cape Town, South Africa
7. Sushruta Samhita – Rhinoplasty and Cataract surgery — Varanasi, India
8. Early Documentation of Acupuncture and moxibustion — Hunan, China
9. Herbal Anesthesia and Abdominal surgery — Anhui, China
10. First demonstration of Ether anesthesia, 1846 — Boston, USA
11. CPR Development and Defibrillation refinement — Baltimore, USA
12. Discovery of Chagas Disease – American trypanosomiasis — Brazil
13. Earliest known Cranial surgeries with high survival rates — Peru
14. First HPV vaccine — Australia
15. Discovery of Insulin — Toronto, Canada

Thanks & ACKNOWLEDGEMENT

To our passionate participants,

Your zeal and inquisitiveness are what drives every initiative by GIMSOC. Your interaction, active participation and feedback help us all learn, grow and inspire each other to push past our limits. We are thrilled to have you as part of this journey and be an irreplaceable part of our society.

To our invaluable members and treasured supporters,

Your drive, collaboration and ideas keeps GIMSOC's cogs turning. We are immensely proud of how far we've come together and deeply grateful for your time and effort that has made this possible.

To our exemplary mentors and inspiring physicians,

Your guidance and counsel are the pillars of GIMSOC that elevates every event and every idea. As a constant source of motivation and wisdom, you push our students further and shape the future leaders of healthcare.

To our magnanimous sponsors,

Your constant and generous support is actively shaping the medical society of tomorrow. We are eternally indebted for the opportunities you provide, for the dreams you fulfil and for your steadfast belief in our mission.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