

WEEKLY NEWSLETTER OF
THE ROTARY CLUB OF
TRIVANDRUM CENTRAL



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WEEKLY NEWSLETTER (ONAM SPECIAL)



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FAMILY MEETING (ONAM)



The meeting #1763, Family meet & Onam celebration, was called to order by the President on the 19th October, at 07.35 pm at the Hotel Horizon. Total 28 rotarians & 17 Anns/annettes attended. Rtn Usha Rajan read out the Rotary Invocation.

In his presidential address, Rtn Capt PRK Kartha welcomed the members, Anns and annettes. He wished all assembled a Happy Onam 2024.

He touched upon the need for completing the subscriptions for Ente Kanmani project.

Minutes of Meeting #1762 was read out by the secretary.



The CSR financial assistance of ₹ 5 Lakhs, for house construction for Mrs Rine from Vellarada was handed over by the President along with the Project Chair Rtn Donn Thomas. This was followed by a few words from the recipient, Mrs Rine, who thanked all RCTC members. The President highlighted that the CSR fund, first of its kind in the District 3211, got allotted due to the sustained efforts of Rtn PDG Suresh Mathew.

The President introduced & welcomed renowned musician, Mr Venugopalan Nair who had kindly agreed to be the judge for the RISE competition.

Rtn Thomas Vincent proposed the vote of thanks.

After the National Anthem, the meeting was adjourned for fellowship, dinner and cultural activities at 7.55 pm.



GIVING HOME TO HOMELESS (A CSR PROJECT EXECUTED BY RCTC)



Article by
Rtn Donn Thomas
Chair - Service Projects

Rotary Club of Trivandrum Central, is extremely humbled to announce yet another significant donation of Rs Five lakh, donated by "Martin Trust - Chennai" through RCTC, extended to Mrs. Rini L a resident of Dalumugham Village in Vellarada Panchayat, on the 19th of October 2024 on the event of the clubs Onam celebration & Family meet. Rini is a dedicated mother of two, who has been navigating challenging circumstances, including caring for her elderly mother while managing the responsibilities of her household. With a husband struggling with alcoholism, she has worked tirelessly as a housemaid to support her family.

For years, Rini has dreamt of building a home for her children, making numerous attempts to save the necessary funds. Unfortunately, her efforts were often thwarted by her husband's situation. In her pursuit of assistance, Rini reached out to various organizations, ultimately finding support from the "Martin Trust" in Chennai. Recognizing the genuineness of her request, they decided to sponsor her housing project through their CSR fund, with the stipulation to put up the request through a reputed rotary club in Kerala.

Martin Trust, referred the case to PDG Suresh Mathew, through whom Mrs. Rini's request was presented to the board - Rotary Club of Trivandrum Central (RCTC) on September 8, 2024. The board unanimously endorsed the project proposal, and decided to move forward with the project. The site details and location was verified and reported to the Trust to their satisfaction.

The present condition at site is that Mrs. Rini has been able to complete construction of the foundation on her own property and the donated fund will be utilized for completion of her dream home. As the construction progress at site we will provide updates and photographs to keep all our members informed about the progress.



GIVING HOME TO HOMELESS (CONTD) (A CSR PROJECT EXECUTED BY RCTC)



This project has been recognized by Rotary District 3211 as a landmark achievement, being the first CSR initiative in the Rotary District. Rotary District Governor Sudhi Jabbar praised the project, highlighting it as a testament to the power of determination and teamwork, encouraging other Rotary clubs to explore similar CSR opportunities.



We wish Mrs. Rini and her family all the best as they move closer to realizing their dream of a home. We also extend our heartfelt gratitude to our own fellow Rotarian PDG Suresh Mathew, our president Capt.Rtn Kartha , and all the team members who have contributed to making this young mother's dream come true.

A TRF PROJECT TO LEARN FROM



**Article shared by
Rtn PDG Suresh Mathew**

Sharing an inspiring story from Mumbai that could be done with the TRF support. When can we replicate such models in our district ?? Another compelling reason to support TRF

Today was an historic day. First patient treated at our Rs. 2.2 Cr. HBOT (Hyper Baric Oxygen Therapy) center in Dr. R. N. Cooper Municipal Hospital and Medical College. This will lead to a big impact on overall health of Mumbai. Why? Understand it. This patient, RL (name withheld due to right of patient for privacy) has been suffering from diabetes for last 15 years. Since last one year, her right foot sensations became abnormal. Doppler showed that blood supply to the foot has become less leading to low oxygen levels in the tissues. This patient would certainly suffer from gangrene of the foot leading to amputation!!

Multiple sessions of HBOT are needed to provide very high oxygen supply to tissues, to save her from possible gangrene and amputation.

And cost? Outside in private, cost is Rs. 6000 to 10000 per session. 10 to 12 sessions become very costly.

But in Cooper Hospital, at Rotary club of Mumbai West Coast-GIC HBOT center? ONLY Rs. 150/- per session!!! Is it not a great support to needy patients - poor and not-so-poor?

Friends, we have started salvaging limbs from today onwards. An iconic Rotary project improving health of such oxygen starved patients in Mumbai!

Huge satisfaction ... no less! God is certainly kind to us!

PDG Dr. Bal Inamdar

THE ROTARY FOUNDATION



YEARS OF DOING GOOD IN THE WORLD

BREAST CANCER AWARENESS



**Article by
Rtn Dr Jayakumar**

In medical circles, especially in oncology, October is also known as 'Pink October', due to spreading awareness about Breast Cancer. This year's theme is 'No one should face breast cancer, alone'. Breast cancer is a curable disease if detected early.

Breast cancer can present various symptoms, and the approach to diagnosis and treatment involves multiple steps.

Symptoms of Breast Cancer:

1. Lump or Mass: A noticeable lump in the breast or underarm area.
2. Changes in Breast Shape or Size: Noticeable alterations in the contour or size of the breast.
3. Skin Changes: Dimpling, puckering, or changes in texture (like the skin of an orange).
4. Nipple Changes: Discharge, inversion, or abnormal appearance.
5. Pain: Persistent pain in or near the breast or nipple.

Do not wait until you get these symptoms. Every woman over 30 should do a self-test to assess the risk. The correct time to do such a test is a week after the menstrual cycle ends.

Steps for Breast Self-Examination:

Visual Inspection:

- Stand in front of a mirror with your arms at your sides.
- Look for any changes in shape, size, or contour.
- Raise your arms above your head and look for the same changes.
- Observe the skin for any dimpling, puckering, or irritation.
- Check if there is any discharge from the nipples.

Physical Examination (Lying Down):

- Lie down on your back with your right arm behind your head.
- Use the pads of your fingers on your left hand to examine your right breast.
- Start at the outer edge of the breast and move in circular patterns toward the nipple.
- Apply varying pressure: light for the surface, medium for deeper tissue, and firm for the chest wall.
- Feel for any lumps, or thickening

Physical Examination (Standing Up):

- Raise your right arm above your head, and use your left hand to examine your right breast.
- Repeat the process for the left breast using your right hand.

BREAST CANCER AWARENESS (CONTD)

BREAST SELF EXAMINATION



Check your breasts once a month, 7-10 days after your periods start. If you're not menstruating, pick any date.



Examine your breasts with raised arms, then with both hands on your hip bones, then with arms down and relaxed.



Look for any physical changes, e.g. lumps or swelling, redness or rash, any changes in the shape or position of the nipples.



Gently squeeze each nipple to check it for pain or discharge.



Raise one hand and use the pads of 3 or 4 fingers of another hand. Examine your armpit first.



To check breast start at the outer edge and move toward the nipple. Cover as small section at a time as you can.



Do the same moving your fingertips up and downwards, then in round movements, starting from the outer part.



Do the same steps lying on your back. Use a pillow under the shoulder if you want to.



If you have any questions or doubts, visit your doctor. Do mammography annually after 40. Take care of your breast!

- **MRI:** Used in certain cases for further evaluation or in high-risk individuals.
- **Genetic Testing:** For those with a family history of breast cancer, testing for BRCA1 and BRCA2 gene mutations may be recommended.

Treatment for Breast Cancer:

1. **Surgery:** Options include lumpectomy (removal of the tumor) or mastectomy (removal of one or both breasts).
2. **Radiation Therapy:** Targeted radiation to kill cancer cells, often used after surgery.
3. **Chemotherapy:** Use of drugs to destroy cancer cells, typically before or after surgery.
4. **Hormonal Therapy:** For hormone receptor-positive cancers, medications can block hormones that fuel cancer growth.
5. **Targeted Therapy:** Drugs that specifically target cancer cell's characteristics (e.g., HER2-positive breast cancer).

What to Look For:

- Lumps or masses that feel different from the surrounding tissue.
- Changes in the skin, such as redness or texture changes.
- Swelling or lump in the underarm area.
- Changes in the nipple, such as scaling, discharge, or inversion.

Tests for Breast Cancer:

1. **Mammography:** An X-ray of the breast, usually used for screening.
2. **Ultrasound:** Often used to further evaluate a lump found during a mammogram or physical examination.
3. **Biopsy:** Removal of tissue for analysis to determine if cancer cells are present. Types include fine-needle aspiration, core needle biopsy, and surgical biopsy.

Follow-Up:

After treatment, regular follow-ups with healthcare providers are essential to monitor for any signs of recurrence.

Next Steps:

Meet a healthcare professional. Early detection can significantly improve treatment outcomes.

SIX THINKING HATS



**Article by
Rtn Flt Lt Shibu Varghese**

The Six Thinking Hats is a problem-solving and decision-making tool developed by Edward de Bono. It encourages group members to think more effectively by using six distinct perspectives, represented by different colored hats. Here's a breakdown of each hat:

1. White Hat (Facts & Information)

- Focus: Data gathering and objective information.
- Questions to Consider: What do we know? What information do we have? What do we need to find out?
- Example: In creating a new smartphone, the team reviews market research data, sales figures, and customer feedback. They note that consumers are looking for longer battery life and improved camera features.

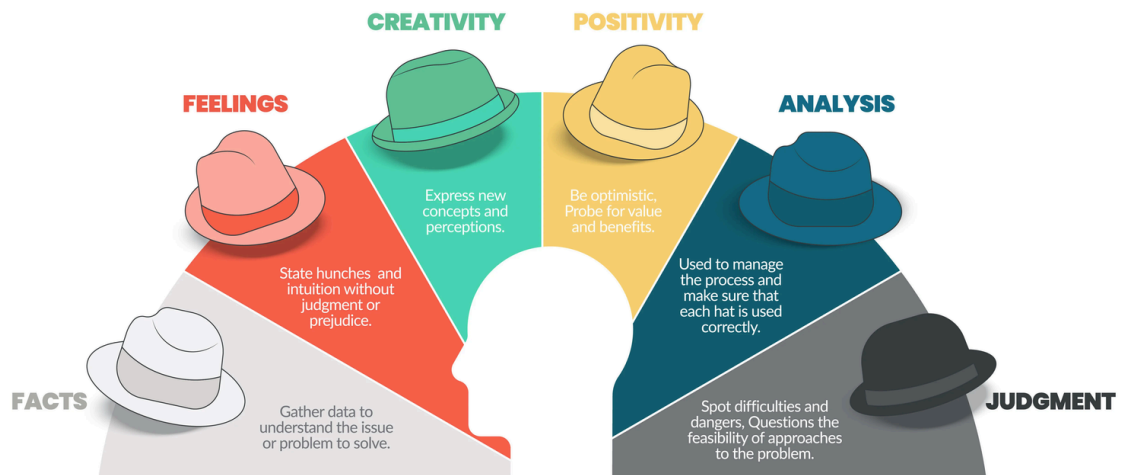
2. Red Hat (Feelings & Emotions)

- Focus: Emotion-based perspectives, including feelings and intuitions.
- Questions to Consider: How do we feel about this idea or product? What are our gut reactions?
- Example: During a brainstorming meeting, team members express their excitement about the potential camera features but also voice concerns about the product's price point. A team member may feel that a higher price could alienate budget-conscious consumers.

3. Black Hat (Caution & Critical Thinking)

- Focus: Identifying risks and potential downsides.
- Questions to Consider: What could go wrong? What are the weaknesses or negatives?
- Example: The team discusses possible drawbacks, such as the complexity of the new software that could lead to user frustration or the risk of supply chain issues affecting production schedules. They acknowledge that high production costs might reduce profit margins.

SIX THINKING HATS (CONTD)



4. Yellow Hat (Benefits & Positivity)

- **Focus:** Optimism and positive aspects.
- **Questions** to Consider: What are the benefits? How could this improve our situation?
- **Example:** Team members explore how the new features could lead to higher customer satisfaction and increased sales. They consider the product's potential to attract new customers and how a unique marketing strategy could position them as leaders in innovation.

5. Green Hat (Creativity & Ideas)

- **Focus:** Generating new ideas and creative thinking.
- **Questions** to Consider: What new approaches can we take? How can we innovate?
- **Example:** The team brainstorms innovative features, like an AI-assisted camera that automatically adjusts settings for perfect photos or a solar-powered charging option. They encourage wild ideas, allowing free-thinking and imaginative solutions.

6. Blue Hat (Management & Process)

- **Focus:** Organizing the thinking process and managing the discussion.
- **Questions** to Consider: What is our next step? How will we move forward?
- **Example:** A team leader wraps up the meeting by summarizing the key points from each hat discussion. They set action items based on the ideas generated, assign responsibilities for further research, and plan a follow-up meeting to assess progress.

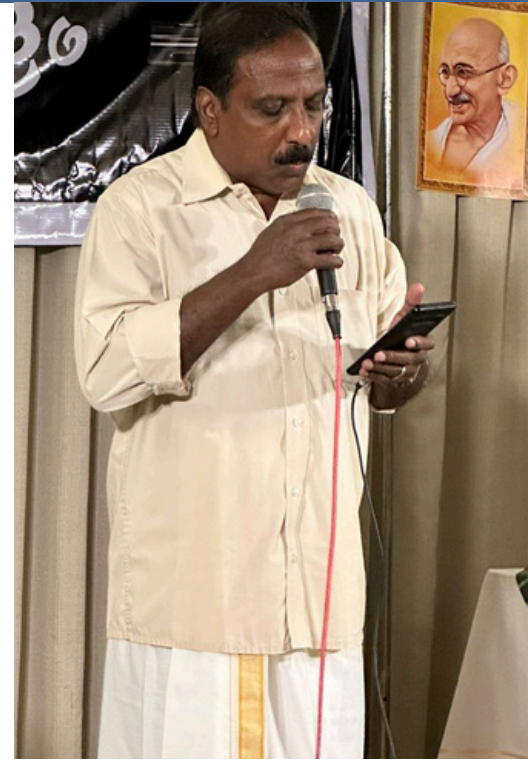
Application of the Hats

By using the Six Thinking Hats method, teams can work collaboratively and ensure a comprehensive approach to problem-solving. This method not only enhances creativity and critical thinking but also fosters a more inclusive and balanced dialogue among team members, leading to better outcomes in group discussions and decision-making.

FAMILY ENTERTAINMENT (SKIT)



OUR SINGERS



QUESTIONING THE LADIES



BIRTHDAYS & ANNIVERSARIES (OCTOBER)

BIRTHDAYS



Rtn Dr Ranjit Suseelan – 12 Oct

Rtn Adv Stanley Mathew John – 15 Oct

Rtn Shashi Kumar Menon – 15 Oct

Rtn George Samuel – 21 Oct

Rtn Achamma Kuruvila – 25 Oct

Rtn Janardhanan Nair – 25 Oct



ANNIVERSARIES

**If you set your goals
ridiculously high and it's a
failure, you will fail above
everyone else's success.**

-James Cameron

HUMOUR IN UNIFORM



"We're out of crayons ..."

