Encouraging Innovation in Medicine

The IIT Mumbai recently held a tech fest. It was an extraordinary opportunity for engineering students from around the country to participate in diverse competitions like making robots, harnessing renewable sources of energy, designing ecofriendly houses, building boats that run on solar power and making machines out of junkyard scrap. Most good engineering institutes have this kind of technical festival, apart from the cultural festivals which medical colleges also hold.

My plea is that we need to have some kind of parallel in medical institutes to foster a sense of innovation and creativity in medical students which is systematically crushed during the years in a medical school. If we encourage our students to innovate we are sure to discover better and cheaper ways to practice medicine. It could be simple things like an easier way to collect urine in a newborn, or take the temperature or to auscultate heart sounds. Not everything in medicine needs FDA approval or long drawn out clinical trials.

Efficiency isn't everything and we must learn to cultivate creativity(1).

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REFERENCES

1. Shaywitz DA and Ausiello DA. Preserving creativity in medicine. PLoS Med 2004; 1: e34.

Hypomelanosis of Ito with Tessellated Fundus and Polymicrogyria

Hypomelanosis of Ito appears to be the third most common neurocutaneous disease after neurofibromatosis and tuberous sclerosis. The bizarre, patterned, hypopigmented macules usually appear during the first year of life or at birth in sharply demarcated whorls, patches or streaks that follow the lines of Blaschko. The lesions appear as a negative image of incontinentia pigmenti. Multiple extracutaneous abnormalities involving the nervous system, eyes, musculoskeletal, hair, head, face, dental, cardiovascular, genito-urinary system and other organ anomalies can occur in most of the patients. We report an interesting case of Hypomelanosis of Ito with tessellated fundus and polymicrogyria.

A 4 years old male child was brought with recurrent episodes of generalized tonic clonic seizures since 8 months of age. There was global developmental delay, hypotonia and mental retardation. On examination, multiple whorled like hypopigmented macules were present over abdomen, chest, back and both lower limbs arranged along the lines of Blaschko since birth (Fig. 1). The palms, soles and mucous membrane were spared. The fundus showed pale disc, tortous vessels around the disc, radial patchy streaks of hypopigmentation and tessellated background (Fig. 2). EEG showed generalized epileptiform discharges. CT and MRI scan brain showed hemispheric asymmetry with atrophy of right cerebral hemisphere and ballooning of right lateral ventricle. MRI brain demonstrated polymicrogyria at right perisylvian and parietal thinning of corpus callosum and region, periventricular hyperintense signal.

Classical tessellated fundus in Hypomelanosis of Ito has been reported only in two children in literature(1). Also, there are very few reports about polymicrogyria in Hypomelanosis of Ito(2,3).

INDIAN PEDIATRICS