Inauguration of the Net Metering System for Online Solar Power and New CGSI Logo by Lok Janshakti Party (LJP), Maharashtra State President & National Treasurer Shri. Shamim Hava

Consumer Awareness Seminar on ‘Safety of Electrical & Electronic Equipments’
Inauguration of the Net Metering System for Online Solar Power and New CGSI Logo

Milk Quality Testing Program at The SIA College of Higher Education, Dombivili, Maharashtra
Air pollution control can save the health of millions of people in India

In India, millions of premature deaths take place due to air pollution. The American Association for Advancement of Science (AAAS) represented by scientists from USA, Canada, China, and India in the annual meeting held in Washington reported that nearly 1.4 million people were, killed in India during 2013 due to air pollution. No doubt, air pollution is a risk factor globally and it is important for India to control the air quality Indians breathe. On war footing, India has to reduce the burning of wood, dung, crop residues, and any other burning materials to reduce air pollution, even in village kitchens. Govt. of India’s program of introducing LPG Gas and solar energy heating in villages is the right thing to implement.

Pollution of the environment takes place from many causes. One of the main culprits is the inevitable use of burning coal in power plants. This creates dust pollution during mining, pulverizing, and transporting to long distances. The chimneys of the power plants give out dark smoke consisting of soot, carbon dioxide and other gases leading to atmospheric pollution of the air. India has plenty of sunshine and we should draw future power supply from solar power, which is expensive to start. However, the energy is free of cost.

Air pollution in cities is also due to tremendous increase in vehicles on the road and easy availability of cars and trucks in millions for the public and for exporting goods abroad. Since there is, no parking space nearby more fuel is burnt. Vehicles particularly the older ones emit toxic exhaust gases causing extra pollution. They all carry PUC test report, easily available for an extra price. It is difficult to check the authenticity of the certificates. Air pollution is created in mid air by the exhaust let out by burning fuel of aero planes which pollute the cosmos while landing and take offs. At the aerodromes, one can get strong smell of kerosene and public is not aware of this hazard. Health conscious travelers can only reduce this by avoiding unnecessary air travel in these days of electronic communication and video conferences.

There are cases for business where one travels to same city 2-3 times a week and one should avoid conserving the fuel whose price has come down considerably in recent times.

Recently, in January 2016 the Delhi Municipal Corporation, imposed a rule to run vehicles on odd and even days on an experimental basis for 2 weeks but there was commotion and inconvenience to the public and schoolchildren in particular. The result was not much beneficial as the pollution level had not decreased significantly but there was less traffic jams and movement of the vehicles was smooth. Car-pooling should be compulsory and public transport must be stream lined, punctual, and comfortable.

If one wants to live a healthy life and breathe clean air, one must avoid even procuring a second car. Vehicle owners must realize that air pollution affects everyone and in the interest of healthy living share the vacant seats with the needy, amounting to social service.

Air pollution is measured in terms of Air Quality Index (AQI), which is very much beyond the limit of 200. Particulate matter (PM 2.5 maximum) is included in AQI, which varies and becomes high depending on road dust, wind pattern and climate change. The increasing poor quality of air is a concern for the public as a health hazard due to the presence of toxic chemicals, like nitric oxide, carbon monoxide, carbon dioxide, hydrocarbons, etc., as breathing this lead to respiratory diseases. Children and the elderly are more prone to this hazard, needing hospitalization and Medicare. Schoolchildren must be educated about environment pollution and planting of trees around, which gives out oxygen, which is essential for breathing. Indiscriminate cutting of trees to build high-rise buildings must stop.

Particulate matter in the form of dust is a dangerous pollutant in air affecting the health of the public leading to lung infection and heart disease. Particles smaller than 10 microns is dangerous as they can enter the human respiratory system and penetrate deeply into the lungs causing adverse effects. The demolition of old buildings and construction of high-rise towers is the source of inorganic dust of sand, cement etc., which is going on in most of the cities. The demolished materials are transported to long distances for dumping creating dust all over creating polluted air resulting in sinusitis, bronchitis, congestion in chest, asthma etc. In public places like railway stations, bus stands and gardens, garbage consisting of paper, trash, cigarette butts, sweepers burn plastics, dry leaves etc., leading to hazardous smoke, dust, and toxins like dioxin and chlorine from plastics.

Pollution Board has stringent regulations but no action is taken as no one is complaining, as people are not aware and not complaining. People staying in high-rise buildings feel safe but get polluted air and nano particles travel up and these may get into the lungs easily and do the damage. Educating the masses and creating public awareness is one way and schoolchildren must be, told about the danger to the health. Planting trees and garden around the building is to be compulsory. Trees have to be grown and kept alive wherever possible.

Garbage disposal and waste treatment methods must be implemented. Simply dumping the garbage like what havoc created recently in Deonar, a Mumbai suburb is an eye opener. It leads to obnoxious gases affecting health and the fire created haze, smog, irritation of eyes and even schools had to be closed. This lesson should be of National interest, as this event should not occur in other cities. Regulators have to act fast and public co-operation is needed to segregate dry waste from wet waste in their house/building/areas. Judicious uses of plastics in packaging to be followed as these are not biodegradable.

Nature gives clean air, which is polluted by the ever-growing population. It is the duty of every Indian to control and reduce air pollution for the benefit of humanity and enjoy good health and celebrate World Environment Day, on 5June every year.

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I Dr. S. G. Bhat, hereby declare that the particulars given above are true to the best of my knowledge and belief.

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Dr. S. G. Bhat
Publisher, Printer, Editor

Keemat: March – April 2016
Healthy Food: Unwarranted free advice given by enthusiastic nonmedical persons goes like, ‘Eat a variety of foods every day’ meaning, ‘Eat a variety of nutrient dense foods every day’. Japanese Monk might say ‘eat at least thirty different foods each day’. A consumer should be very cautious when somebody offers something free to him/her. Different, countries have different approach for food enjoyment and food variety. However, fact remains that if properly eaten, food in right quantity can be good for overall health of a person. People tend to take a casual view of the foods they consume, focusing on one or two ingredients such as cholesterol, sugar or may be iron. One ill effect of this habit is that they put labels on food and start believing that yoghurt is ‘good’ for them while chocolate is ‘bad’. In fact, it’s the way they use food that determines whether it’s a good or bad choice. A properly read Nutritional Label of food products will help them to meet their specific nutritional goals. This depends on what they are trying to achieve and what else they eat over the course of the day.

Some of the foods like, banana with milk might be a great afternoon snack for a hungry athlete or a player. Kilocalorie (kilo joule) budget is a mean to determine, and once you start paying it, you can enjoy the diet. One of the problems with the simplistic branding of foods as ‘good’ and ‘bad’ is that it can lead to narrow and rigid eating. Some people try to follow a ‘good diet’ by giving up all the foods they consider ‘bad’. Sportsmen are particularly skilled at this as there are many athletes who are motivated and good at self-discipline. This focus can easily be extended to breakfast, lunch, and dinner. Of course, other factors such as fussy eating, real or perceived food intolerances, poor domestic skills and a tight budget can all lead to a narrow, unvarying diet.

We will try to understand what is at stake; we need to appreciate how complex our food really is. Nutrients and food chemicals do not exist in isolation and are not consumed that way. There is more to an orange than vitamin C and more to meat than protein. What’s more, each food is greater than the sum of its components, because the chemicals in a food interact with each other and with the chemicals in other foods eaten at the same time. Hence, a food pairing is very important while advising on diet. Although some popular diet books have spread the myth that certain foods shouldn’t be eaten in combination. The truth is that the nutritional, as also assimilation quality of a meal is often improved by mixing and matching foods. For example, fortification of iron in cereal foods is better absorbed in the presence of vitamin C, making a glass of orange juice a clever accompaniment to one’s breakfast cereal.

A new trend in nutrition is the recognition that people have barely begun to learn about the full range of chemical and physical properties of food. Our food is full of ‘known unknowns’ and ‘unknown unknowns’ as well as all the things we do not know about. We often discover that a certain group of people enjoys unusually good health or a low risk of developing the diseases of ageing like heart diseases and like some forms of cardiovascular diseases. This is often attributed to their dietary patterns. For example, the fact that they eat lots of fruits and vegetables or certain types of oils. We next jump to the conclusion that the health benefit comes from a well-known nutrient found in these singled out foods and that we could add this benefit by taking the nutrient in pill/powdered form.

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Media continue to report on our identification of ranges of antioxidants and active ingredients in plant foods often termed ‘phytochemicals’ / ‘phytonutrients’. While supplements and functional foods (foods to which some special ingredients are added) can contribute to nutritional goals, at this stage they lag well behind the genius of Mother Nature. In the future, with improved knowledge, we may be able to unravel some of her mysteries to make firm recommendations about phytoneutrients.

Healthy Insurance: The increased incidence of lifestyle-related diseases and the spiraling costs of health care have made it necessary for you to get health insurance coverage. You can get yourself and your family, which includes your spouse, children, parents, and other dependents, covered under health insurance. If you or members of your family are affected by a medical emergency, you will be flooded with exorbitant medical bills, and health insurance will be handy.

Health Insurance Benefits: Health insurance offers a number of unique benefits. After using a health insurance calculator, your premium is determined, and once you start paying it, you can enjoy the benefits of your health insurance policy. With a variety of senior citizen health insurance plans available, it is possible to gain access to the best medical care for your aged parents as well. In addition to mitigating your financial worries in the event of medical emergencies, opting for health insurance offers tax benefits as well. In the current scenario, when all perquisites are being taxed, being covered under health insurance helps lower your tax liability. Below, you will find a brief explanation of the deductions available as per the Income Tax Act with respect to the current financial year (2015-16).

U/s 80D: If you are covered by a plan that provides health insurance for family, which includes yourself, your spouse, and your dependent children, you can avail an exemption up to INR 25,000. If you take health insurance for parents – who are senior citizens – as well, you can claim a deduction of INR 30,000 from your gross taxable income.

U/s 80DD: If you have paid the medical insurance premium for a handicapped dependent relative, you can claim a deduction of up to Rs 75,000 (the disability being between 40% and 80%). In case the disability is severe, then the Income Tax Act provides a deduction of up to Rs 1,25,000 based on the medical expenditure incurred.

U/s 80DDB: Under this section, you can claim deduction on medical expenses incurred by you for the treatment of a patient suffering from certain health issues as specified in your contract. These include dementia, AIDS, Parkinson’s, chronic renal failure, malignant cancers, thalassemia, hematological disorders, and other specified neurological diseases. In any such case, you can claim a deduction of Rs 40,000. For senior citizens, the upper cap is set at Rs 1,00,000. If you are covered only for the medical treatment of a very senior citizen, the maximum tax limit is Rs 80,000.

U/s 80U: Under this section, any Indian citizen who suffers from not less than 40% of disability is eligible for tax deduction of up to Rs 75,000. In case of severe disability, the maximum tax limit is Rs 1,25,000. So, you have to agree that investing in health insurance is a wise choice, both in terms of safety, as well as in terms of tax benefits. It also has a positive effect on your financial planning. In fact, there has been a steady growth in the percentage of individuals getting health insurance coverage thanks to the availability of health insurance online.

Where to Buy Health Insurance: You can buy a mediclaim policy online from any of the insurance companies offering health insurance. But be sure to examine the fine print in the health insurance policies for any exclusions, sub-limits, and co-pay.

If you are looking for the best health insurance in India, you can compare the premiums and coverage offered by various players in this industry. As a tax-saving instrument and a cushion against unforeseen health issues, health insurance is your best bet. It is also a great way to ensure your family’s safety in the event of a medical emergency.

Family floater plans can help you achieve this. Before you decide on a plan, research the various institutions offering them. Once you have compared your data, sign up for the best health insurance policy today, and enjoy a life without worry.
13 years after losing daughter, Colaba couple gets ₹68.8 lakh

**MEDICAL NEGLIGENCE** Kaberi Roy passed away in 2003 after developing complications post-surgery

Kanchan Chaudhari

* kanchan.chaudhari@indiatimes.com

**MUMBAI:** A doctor couple from Colaba will get ₹68.8 lakh from Bombay Hospital for medical negligence in treating their 29-year-old daughter.

According to the complaint, on June 27, 2002, Kaberi Roy was taken to a local physician after she complained of acute abdominal pain. She was diagnosed with appendicitis and advised surgery. According to the complaint, the doctors did not take proper post-operative care. They alleged Kaberi developed generalised oedema and delirium on June 29. She died on the same day.

Refuting the allegations, Dr Chitlangra said he had operated on the patient with high standards of professional skill and knowledge, and the entire treatment was as per the standard procedure. The hospital said that when Kaberi’s condition worsened on June 29, Dr Agarwal attended to her immediately.

The national consumer commission, however, found fault in the treatment. “It was the duty of the OPD (Dr Chitlangra) to attend to the patient during emergency hours. Thus, if the OPD had not breached his duty of care to the patient, the patient would not have died. The national commission is yet to make the final decision,” said the national commission.

The national consumer commission has directed the hospital to pay the couple ₹68.8 lakh compensation, along with interest at the rate of 6% on an annuity, from 2003.

**NHRC DID NOT HEAR CASES AGAINST PRIVATE HOSPITALS**

NHRC did not hear cases against private hospitals. The fact remains that owing to the negligence of the staff of sub-district hospital, Indapur, she (Sheetal Bankar) had to face serious difficulties and suffer mental agony.

**JUSTICE CYRIAC JOSEPH,** acting chairperson, NHRC

In another case, the bench awarded ₹2 lakh compensation to Suresh Naik, whose right leg was amputated below the knee. Sheetal Bankar and her husband Rahul (above) will be paid ₹1 lakh. HT PHOTOS

**Hospital to pay ₹1 lakh to woman who was wrongly declared HIV-positive**

Pryank Vora

* pryank.vora@indiatimes.com

**MUMBAI:** The National Human Rights Commission (NHRC) on Wednesday ordered a sub-district hospital to pay ₹1 lakh compensation to a resident of Pune district for an erroneous diagnosis that she was suffering from HIV.

The NHRC, which is hearing complaints of medical negligence filed against hospitals by patients, is scheduled to look at 100 cases from Maharashtra, Gujarat, Rajasthan and Madan and Diu.

The three benches of NHRC, which met the two-day hearing on Wednesday, did not take up any complaints which were pending in any court of law.

Sheetal Bankar, 24, said that doctors from a hospital in Indapur told her she was suffering from HIV infection when she was eight months pregnant.

Bankar said she did not know that she was tested for the disease.

Rahul, her husband, told the commission that the doctors at the hospital did not tell him that his wife’s medical report mentioned that she had HIV.

“They told me to take her to another centre for confirmation. Earlier, she had tested positive for Hepatitis B and we thought that could be the reason for referring my wife to another hospital,” said Rahul. The commission recommended that the patients seek justice from the consumer forums.

The NHRC also asked the directorate of health services of Maharashtra, Dr Sajal Pawar, about the presence of a standard operating protocol for handling trauma cases.
MUMBAI, (GNI): People from all walks of life made a beeline to the Consumer Grievance Redressal Camp by CGSI (Consumer Guidance Society of India) in Navi Mumbai. Members from CGSI (Consumer Guidance Society of India) advocated on consumer awareness education and provided consulting solutions to scores of complaints brought up by consumers from Navi Mumbai and nearby areas at MGM College of Law.

Apart from the visitors, the event was also well attended by MGM law college students, who witnessed the practical aspects of Consumer Protection Rights, in line with their curriculum. The Redressal camp addressed nearly 15 complaints right from Medical Insurance, Property frauds and other issues. CGSI also provided a live demonstration of its Electronic Milk Analyzer, which analyzed nearly 30 milk samples brought by the students.

While addressing the students, Santosh Shukla, Jt. Secretary, CGSI said, "Consumer is supposed to be the king but doesn’t behave like one. As a buyer of a service, we must be aware of our rights and we must take efforts to know it completely. Duping of consumers is still a rampant practice in our society where people become victims due to their lack of knowledge about goods or services they purchase.” Whenever consumers buy a policy they must ensure whether the policy is meant for them, as various policies are meant for different people, bearing various amounts of premium etc. Second place where consumers make a mistake in medical policies is that they do not reveal their complete medical information including medical history and requirements. Often the documentation is incomplete and we entrust a third party agent to take care of the formalities, this leads consumers to be ignorant about technical details about their policy,” said Dr. Kamath, Secretary, CGSI.

“We are very happy to have been a part of this forum, as a part of our law curriculum we are teaching about consumer protection rights and I am glad that our students received hands-on experience on this subject. We look forward to have such similar camps in our campus,” said Dr. Geeta Shrivastava, Principal, MGM College of Law.

OVERWHELMING RESPONSE TO CONSUMER GRIEVANCE REDRESSAL CAMP BY CGSI IN NAVI MUMBAI
Sumant (Global News Network)

‘Developer can’t build things not included in promotional material’

WHAT WAS THE DISPUTE

- The builder failed to obtain completion and occupancy certificate from Pune Municipal Corporation
- The builder responded to the consumer complaint saying the entire project was not yet complete
- In 2011, flat purchasers of the two buildings constructed by a Pune-based developer, had approached the Pune District Consumer Forum after the builder failed to form and register a co-operative housing society
- The builder failed to obtain completion and occupancy certificate from Pune Municipal Corporation
- The builder responded to the consumer complaint saying the entire project was not yet complete

Keemat: March – April 2016
How to Create Your Personal Happiness Plan

Ranjan Varma, Founder: Happinesswala

I have made some horrible choices in life. And predictably, there was a time when I was totally down and life did not seem to be worth living. I survived those dark days. And as they say, what doesn't kill you makes you stronger. I survived and then took charge of my own life. I improved my health, went for amazing treks, started running, connected with people and started trying out new experiences. I have taken that amazing journey from a wreck to a happy soul. I want to share that happiness. This post is about the process of taking charge. It's about how to create your personal happiness plan.

In those dark days, I've often heard myself say, "I wish I could do this or that". And if you asked me about my plan how to do this/that, I'll have no answers. Though I knew that, "If wishes are horses, beggars would ride", I was not converting those wishes into actionable goals. Because then I'll have to plan for those goals, and work on it. They remained just wishful thinking. I rationalized that the best laid plans are intervened by things beyond our control and they never work as planned. There are always some minor or major hiccups on the way. But when I was cynical about how plans don't work, an Eisenhower quote reminded me that, "In preparing for battle I have always found that plans are useless, but planning is indispensable." Benjamin Franklin, infact, goes on to say that, "By failing to prepare, you are preparing to fail."

Now isn't happiness the purpose of our life? But it struck me that I did not have a happiness plan! I decided that I needed a personal happiness plan. And since I did not find a template for a happiness plan anywhere, I built one for myself. But this template was not made in a day/week or even a month. It has taken the last 5 years of my life to build this template. And it's been an amazing journey for me. I am writing this post because I believe that the template would be of use to readers even though everybody will have a different and personalized happiness plan. The structure and the principles of a happiness plan would be common. Let's begin.

What's a Happiness Plan?

While we are increasingly conscious of creating a work plan, financial plan, a health plan, etc, have we ever pondered over our happiness plan? A happiness plan could be a holistic plan for yourself, your money, health, work and relationships. Our personal happiness is possibly the sum total of our happiness with health, wealth and relationships. Happiness plan is a critical exercise in living a rich and meaningful life. A happiness plan is a road map to help you achieve your life's goals.

Here are three basic questions that you will answer during happiness planning:

1. Where are you today? What is your current happiness score?
2. Where do you want to get to? What is your vision of your future self?
3. Will you be able to get there? How do you plan to achieve your vision?

During the planning process you analyze where you stand today and what your happiness goals are. Then, you quantify what resources you need to meet those goals, and quantify the time period during which you want to achieve these goals. So, are you ready to create a happiness plan for yourself? Let's discuss the steps in some details.

**Step 1: What's my current Happiness Score?**

The first step is to be aware of our current happiness levels. While I was grateful for the good things in my life, there were several areas where I needed to improve. Life is a product of the choices that we make from time to time. There are certain lifestyle choices that I have made earlier which impacted my fitness and health levels adversely. It's about gathering data about ourselves and assessing our present strength and weaknesses. Let’s find out our happiness score. And as soon as do that, we will know how to improve.

**Step 2: Analyzing and evaluating the happiness score**

It's time we get brutally honest about ourselves. But it's even more important to stop beating ourselves for past failures. After analyzing our current situation it's time to determine what must be done to achieve the happiness. I created a happiness folder for myself where I started posting my dreams, gratitude and happy memories from childhood to things that made me happy in my life. I call this my personal happiness album.

**Step 3: Developing a Happiness Action Plan**

In my ongoing research on happiness, I have found numerous ways of pursuing happiness. The popular happiness gurus are the spiritual gurus. There are other happiness gurus, who may not be popular, but serve an important part on our happiness score. Yes, they are the wellness experts and the financial planners. I believe that our personal happiness is not built on one thing like money or spirituality but on the three pillars of health, wealth and relationships.

If you want to grow your happiness, you need to have your own definition of what makes you happy. What kind of experiences that you need and want in your life. In other words, make lists. The list should contain everything you need to create the best version of yourself. It’s going to be a list which you need to continually improve upon. A happiness goal could be travelling, cleaning up, planting trees or doing some charity/social work.

Here’s an example list of happiness goals: Accepting yourself, Giving, Relating to people, Exercising, Being grateful, Trying out new things, bouncing back, Finding meaning of life, etc. It's tine to list your goals, categorize them as short term, medium and long term goals, under the three pillars of health, wealth and relationships.

<table>
<thead>
<tr>
<th>Category</th>
<th>Examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health</td>
<td>Exercising, Trekking, Salsa, Running, Meditating, etc</td>
</tr>
<tr>
<td>Wealth</td>
<td>Retirement planning, planning for children's education / marriage, Exotic Holidays</td>
</tr>
<tr>
<td>Relationships</td>
<td>Relating to people at work and family</td>
</tr>
<tr>
<td>Self</td>
<td>Accepting yourself, Loving yourself</td>
</tr>
<tr>
<td>Improvement</td>
<td>Being grateful, giving, Travelling &amp; trying new experiences, finding meaning in life</td>
</tr>
</tbody>
</table>

**Step 4: Implementing the happiness action plan**

To implement your happiness plan, you need a sound board who can listen to you, encourages you and at the same time gives you brutally honest feedback. You need a Happiness buddy! It's very difficult to get a happiness buddy. Perhaps you alone may have to play the role! The best way to play the happiness buddy role yourself is when you go out for a walk/run. It's also important to realize the power of taking

Keemat: March – April 2016
Step 5: Reviewing the happiness plan
Every three months or so, you need to fix up an appointment with your happiness buddy. As we discussed, you can be your own happiness buddy too. Maybe every six months, it's a great idea to go on a vacation for one day all alone.

Step 6: Developing Equanimity skills
At the end of it, no one is getting out of this world alive! So why get overly excited over things like money or fame. Life is a constant struggle where we constantly strive to balance things. Life is not a “happy-ever-after” story. The world is getting hotter and angrier. While it is important to relate to people around you, it’s best done without anger and other negative emotions. So it’s a great idea to develop our equanimity skills.

It’s said that the nature of the soul is equanimity. It ain’t easy and it’s not for the faint hearted. Maybe we can attempt this step at a much later date.

MUMBAI: A 37-year-old French woman from Andheri has been cheated of Rs 29 lakh by a Lebanese national she met on professional networking site LinkedIn. The BKC cyber police have registered the offence on Thursday, a senior crime branch official confirmed to the Hindustan Times. Noreal Ludvin, the chief finance officer at a financial consulting firm, told the police the accused, a man named Carlos Obeid, got in touch with her and said he was the CFO of the Mubadala Development Company. The two shared a professional association for a while, and in course of conversation, discussed about arranging a loan for a client of Ludvin’s firm. Obeid promised to arrange a $100-million loan from Waha Capital, an Abu Dhabi-based investment company. He got Ludvin to deposit Rs 29 lakh as the loan-processing fee. Obeid also claimed to be on the board directors in this company, a source said. Interestingly, the website of Waha Capital shows Carlos Obeid as a board member. This has led the police to believe someone may have stolen Obeid’s identity to cheat Ludvin.

“The two communicated over emails, and during these communications, the accused managed to gain the woman’s trust and made her deposit US $44,800 (approx Rs 29 lakh) in a bank account,” said an officer, not wishing to be named. The officer said the complainant deposited the money, as it was supposed to be a loan-fee. Obeid also claimed to be the CFO of the company and promised to arrange a loan. The police are getting the IP address of the system the accused was using.

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A delay in the loan and suspicious responses from Obeid prompted her to check his credentials. She realized she had been cheated and approached the police. The BKC cyber police have registered a case under sections 419 (cheating by man’s trust), 420 (cheating) of the Indian Penal Code and section 66D (cheating by personation by using computer resource) of the Information Technology Act.

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More fall prey to cybercriminals this yr

ONLINE CHEATING

Till Nov, 748 cases registered in the city as compared to last year’s 524; cyber experts said little is being done to secure data

EVERY POLICE STATION GETS 3-4 COMPLAINTS A DAY

Every police station, on an average, gets three to four complaints on cybercrime. Police stations in the city lack infrastructure and expertise to investigate cybercrime cases.

STATES CYBERCRIME CONTROL PROJECT

- The project was first decided at the Meeting Bureau and then implemented in this state. It has been a major task for the police to deal with the menace.
- Formation of a cyber cell in each police station, as well as the city police headquarters, to deal with the menace.
- Training of police personnel in cyber-crime investigation.
- Development of a web-based portal for reporting cyber-crime.
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POLICE CHIEF MEETS REPRESENTATIVE OF BDS

Commissioner of police

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City Police yet to get four cyber cells, but gets a DCP Cyber

Not only the cyber cells in other states are lacking, the cyber police stations in the city are also understaffed.

With just 1 cyber cell, city awaits four more

Vijay Kumar Yadav

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The cyber cells in the city are to be strengthened, and the city police are waiting for the fourth cyber cell.

Sinaghad College of Pharmacy (SCOP), Vadgaon, Pune organized a University of Pune sponsored Two days National level seminar on “Myths and Facts for Food Safety and Standards” during January 19-20, 2016. This seminar was aimed at faculty, researchers, and students of Pharmacy, Science, Food, Nutrition, HMCT courses and other stakeholders working in the field of food safety and standards. Principal of the college, Dr. K. N. Gujar along with the chief guest for the seminar Mr. Vijay P. Patil, President, Maharashtra State Pharmacy Council, inaugurated the event. Other renowned speakers scientists, doctors, social activists, food administrative officers as well as food expert guided delegates on various aspects. Dr. Sanjay Natu (Paediatrician), Mr. Vinay Oswal (Director, NAFARI), Dr. R. V. Gadre (Chief Scientist, CSIR-NCL), Dr. Sitaram Dixit (Chairman, Consumer Guidance Society of India), Ms. Rita Date (Nutritionist & Food Expert), Mr. S. R. Kekare (Joint Commissioner, Food, FDA, M.S.) and Mr. Y. H. Dhane (Food Safety Officer, FDA, M.S.) delivered the lectures. Dr. H. K. Jain coordinated the seminar and more than 70 delegates from different colleges of Maharashtra and other states participated in this seminar. Report by Dr. H. K. Jain (See Page 19)
Q.1. What is Electronic Clearing Service (ECS)?
Ans: ECS is an electronic mode of payment / receipt for transactions that are repetitive and periodic in nature. ECS is used by institutions for making bulk payment of amounts towards distribution of dividend, interest, salary, pension, etc., or for bulk collection of amounts towards telephone / electricity / water dues, cess / tax collections, loan instalment repayments, periodic investments in mutual funds, insurance premium etc. Essentially, ECS facilitates bulk transfer of monies from one bank account to many bank accounts or vice versa. ECS includes transactions processed under National Automated Clearing House (NACH) operated by National Payments Corporation of India (NPCI).

Q.2. What are the variants of ECS? In what way are they different from each other?
Ans: Primarily, there are two variants of ECS - ECS Credit and ECS Debit.

ECS Credit is used by an institution for affording credit to a large number of beneficiaries (for instance, employees, investors etc.) having accounts with bank branches at various locations within the jurisdiction of a ECS Centre by raising a single debit to the bank account of the user institution. ECS Credit enables payment of amounts towards distribution of dividend, interest, salary, pension, etc., of the user institution.

ECS Debit is used by an institution for raising debits to a large number of accounts (for instance, consumers of utility services, borrowers, investors in mutual funds etc.) maintained with bank branches at various locations within the jurisdiction of an ECS Centre for single credit to the bank account of the user institution. ECS Debit is useful for payment of telephone / electricity / water bills, cess / tax collections, loan installment repayments, periodic investments in mutual funds, insurance premium etc., that are periodic or repetitive in nature and payable to the user institution by large number of customers etc.

Q.3. At how many places in the country is ECS Scheme available?
Ans: Based on the geographical location of branches covered, there are three broad categories of ECS Schemes – Local ECS, Regional ECS, and National ECS. These schemes are operated either by RBI or by the designated commercial banks. NACH is also one of the form of ECS system operated by NPCI and further details about NACH is available at NPCI web site under the link http://www.npci.org.in/clearing_faq.aspx.

Local ECS – this is operating at 81 centres / locations across the country. At each of these ECS centres, the branch coverage is restricted to the geographical coverage of the clearing house, generally covering one city and/or satellite towns and suburbs adjoining the city.

Regional ECS – this is operating at 9 centres / locations at various parts of the country. RECS facilitates the coverage all core-banking-enabled branches in a State or group of States and can be used by institutions desirous of reaching beneficiaries within the State / group of States. The system too takes advantage of the core banking system in banks. Accordingly, even though the inter-bank settlement takes place centrally at one location in the State, the actual customers under the Scheme may have their accounts at various bank branches across the length and breadth of the State / group of States.

National ECS – this is the centralized version of ECS Credit, which was launched in October 2008. The Scheme is operated at Mumbai and facilitates the coverage all core-banking-enabled branches located anywhere in the country. This system too takes advantage of the core banking system in banks. Accordingly, even though the inter-bank settlement takes place centrally at one location at Mumbai, the actual customers under the Scheme may have their accounts at various bank branches across the length and breadth of the country. Banks are free to add any of their core-banking-enabled branches in NACH irrespective of their location. Details of NECS Scheme are available on the website of RBI at http://www.rbi.org.in/scripts/bs_viewcontent.aspx?id=2345.

The list of centres where the ECS facility is available has been placed on the website of Reserve Bank of India at http://www.rbi.org.in/Scripts/ECSUserView.aspx?id=26.

Similarly, the centre-wise list of bank branches participating at each location is available on the website of Reserve Bank of India at http://www.rbi.org.in/Scripts/ECSUserView.aspx?id=27.

ECS (CREDIT)

Q.4. Who can initiate an ECS Credit transaction?
Ans: ECS Credit payments can be initiated by any institution (called ECS Credit User) which needs to make bulk or repetitive payments to a number of beneficiaries. The institutional User has to first register with an ECS Centre. The User has to also obtain the consent of beneficiaries (i.e., the recipients of salary, pension, dividend, interest etc.) and get their bank account particulars prior to participation in the ECS Credit scheme. ECS Credit payments can be put through by the ECS User only through his / her bank (known as the Sponsor bank). ECS Credits are afforded to the beneficiary account holders (known as destination account holders) through the beneficiary account holders’ bank (known as the destination bank). The beneficiary account holders are required to give mandates to the user institutions to enable them to afford credit to their bank accounts through the ECS Credit mechanism.

Q.5. How does the ECS Credit Scheme work?
Ans: The User intending to effect payments through ECS Credit has to submit details of the beneficiaries (like name, bank / branch / account number of the beneficiary, MICR code of the destination bank branch, etc.), date on which credit is to be afforded to the beneficiaries, etc., in a specified format (called the input file) through its sponsor bank to one of the ECS Centres where it is registered as a User. The bank managing the ECS Centre then debits the account of the sponsor bank on the scheduled settlement day and credits the accounts of the destination banks, for onward credit to the accounts of the ultimate beneficiaries with the destination bank branches. Further details about the ECS Credit scheme are contained in the Procedural Guidelines and available on the website of Reserve Bank of India at http://www.rbi.org.in/Scripts/ECSUserView.aspx?id=1.

Q.6. What is a MICR Code?
Ans: MICR is an acronym for Magnetic Ink Character Recognition. The MICR Code is a numeric code that uniquely identifies a bank-branch participating in the ECS Credit scheme. This is a 9 digit code to identify the location of the bank branch; the first 3 characters represent the city, the next 3 the bank and the last 3 the branch. The MICR Code allotted to a bank branch is printed on the MICR band of cheques issued by bank branches.

Q.7. How does a beneficiary participate in ECS Credit Scheme?
Ans: The beneficiary has to furnish a mandate to the user institution giving consent to avail the ECS Credit facility. The mandate contains details of his / her bank branch, account particulars, and authorises the user institution to afford credit to his / her account with the destination bank branch.

Q.8. Is it necessary for user institutions to collect the mandates from beneficiaries?
Ans: Yes, in addition to the consent of the beneficiaries, the mandate also provides important information related to bank account details etc., which are useful for the user institution to transfer funds to the right accounts. A model mandate form has been prescribed for the purpose and is available in the ECS Credit Procedural Guidelines.
Q.9. Is there scope for the beneficiary to alter the mandate under the ECS Credit Scheme?
Ans: Yes. In case the information / account particulars contained in the mandate undergo any change, the beneficiary has to notify the changes to the User Institution so that the correct information can be incorporated in its records. This will ensure that transactions do not get rejected at the beneficiary's bank branch due to inconsistencies/mismatch in the data sent by the user institution.

Q.10. Can ECS be used to transfer funds to Non Resident External (NRE) and Non Resident Ordinary (NRO) accounts?
Ans: Yes. ECS can be used to transfer funds to NRE and NRO accounts in the country. This, however, is subject to the adherence to the provisions of the Foreign Exchange Management Act, 2000 (FEMA) and Wire Transfer Guidelines.

Q.11. Will beneficiaries be intimated of credits afforded to their account under the ECS Credit Scheme?
Ans: It is the responsibility of the user institution to communicate to the beneficiary the details of credit that is being afforded to his/her account, indicating the proposed date of credit, amount, and related particulars of the payment. Destination banks have been advised to ensure that the pass books / statements given to the beneficiary account holders reflect particulars of the transaction / credit provided by the ECS user institutions. The beneficiaries can match the entries in the passbook / account statement with the advice received by them from the User Institutions. Many banks also give mobile alerts / messages to customers after credit of such funds to accounts.

Q.12. What will happen if credit is not afforded to the account of the beneficiary?
Ans: If a Destination Bank is not in a position to credit the beneficiary account due to any reason, the same would be returned to the ECS Centre to enable the ECS Centre to pass on the uncredited items to the User Institution through the Sponsor Bank. The User Institution can then initiate payment through alternate modes to the beneficiary. In case of delayed credit by the destination bank, the destination bank would be liable to pay penal interest (at the prevailing RBI LAF Repo rate plus two percent) from the due date of credit till the date of actual credit. Such penal interest should be credited to the Destination Account Holder’s account even if no claim is lodged to the effect by the Destination Account Holder.

Q.13. What are the advantages of the ECS Credit Scheme to the beneficiary?
Ans: ECS Credit offers many advantages to the beneficiary –
- The beneficiary need not visit his/her bank for depositing the paper instruments, which he would have otherwise received had he not opted for ECS Credit.
- The beneficiary need not be apprehensive of loss / theft of physical instruments or the likelihood of fraudulent encashment thereof.
- Cost effective.
- The beneficiary receives the funds right on the due date.

Q.14. How does the ECS Credit Scheme benefit User Institutions?
Ans: User institutions enjoy many advantages as well. For instance,
- Savings on administrative machinery and costs of printing, dispatch, and reconciliation of paper instruments that would have been used had beneficiaries not opted for ECS Credit.
- Avoid chances of loss / theft of instruments in transit, likelihood of fraudulent encashment of paper instruments, etc. and subsequent correspondence / litigation.
- Efficient payment mode ensuring that the beneficiaries get credit on a designated date.
- Cost effective.

Q.15. Are there any advantages of the ECS Credit Scheme to the banking system?
Ans: Yes, the banking system too benefits from ECS Credit Scheme such as –
- Freedom from paper handling and the resultant disadvantages of handling, presenting and monitoring paper instruments presented in clearing. Ease of processing and return for the destination bank branches.
- Smooth process of reconciliation for the sponsor banks.
- Cost effective.

Q.16. Is there any limit on the value of individual transactions in ECS Credit?
Ans: No. There is no value limit on the amount of individual transactions.

Q.17. What are the processing / service charges levied under ECS Credit?
Ans: The Reserve Bank of India has deregulated the charges to be levied by sponsor banks from user institutions. The sponsor banks are, however, required to disclose the charges in a transparent manner. With effect from 1st July 2011, originating banks are required to pay a nominal charge of 25 paise per transaction to the Clearing house and destination bank respectively. Destination bank branches have been directed to afford ECS Credit free of charge to the beneficiary account holders.

ECS (DEBIT)

Q.18. Who can initiate a ECS Debit transaction?
Ans: ECS Debit transaction can be initiated by any institution (called ECS Debit User) which has to receive / collect amounts towards telephone / electricity / water dues, cess / tax collections, loan installment repayments, periodic investments in mutual funds, insurance premium etc. It is a Scheme under which an account holder with a bank branch can authorise an ECS User to recover an amount at a prescribed frequency by raising a debit to his/her bank account. The User institution has to first register with an ECS Centre. The User institution has to also obtain the authorization (mandate) from its customers for debiting their account along with their bank account particulars prior to participation in the ECS Debit scheme. The mandate has to be duly verified by the beneficiary's bank. A copy of the mandate should be available on record with the destination bank where the customer has a bank account.

Q.19. How does the ECS Debit Scheme work?
Ans: The ECS Debit User intending to collect receivables through ECS Debit has to submit details of the customers (like name, bank / branch / account number of the customer, MICR code of the destination bank branch, etc.), date on which the customer’s account is to be debited, etc., in a specified format (called the input file) through its sponsor bank to the ECS Centre. The bank managing the ECS Centre then passes on the debits to the destination banks for onward debit to the customer’s account with the destination bank branch and credits the sponsor bank’s account for onward credit to the User Institution. Destination bank branches will treat the electronic instructions received from the ECS Centre on par with the physical cheques and accordingly debit the customer accounts maintained with them. All the unsuccessful debits are returned to the sponsor bank through the ECS Centre (for onward return to the User Institution) within the specified time frame. For further details about the ECS Debit scheme, the ECS Debit Procedural Guidelines – available on the website of RBI at
Q.20. What are the advantages of ECS Debit Scheme to the customers?

Ans: The advantages of ECS Debit to customers are many and include,
- ECS Debit mandates will take care of automatic debit to customer accounts on the due dates without customers having to visit bank branches / collection centres of utility service providers etc.
- Customers need not keep track of due date for payments.
- The debits to customer accounts would be monitored by the ECS Users, and the customers alerted accordingly.
- Cost effective.

Q.21. How does the ECS Debit Scheme benefit user institutions?

Ans: User institutions enjoy many benefits from the ECS Debit Scheme like,
- Savings on administrative machinery and costs of collecting the cheques from customers, presenting in clearing, monitoring their realisation and reconciliation.
- Better cash management because of realisation / recovery of dues on due dates promptly and efficiently.
- Avoids chances of loss / theft of instruments in transit, likelihood of fraudulent access to the paper instruments and encashment thereof.
- Realisation of payments on a uniform date instead of fragmented receipts spread over many days.
- Cost effective.

Q.22. What are the advantages of ECS Debit Scheme to the banking system?

Ans: The banking system has many benefits from ECS Debit such as –
- Freedom from paper handling and the resultant disadvantages of handling, receiving and monitoring paper instruments presented in clearing.
- Ease of processing and return for the destination bank branches. Destination bank branches can debit the customers’ accounts after matching the account number of the customer in their database and due verification of existence of valid mandate and its particulars. With core banking systems in place and straight through processing, this process can be completed with minimal manual intervention.
- Smooth process of reconciliation for the sponsor banks.
- Cost effective.

Q.23. Can the mandate once given by a customer be withdrawn or stopped?

Ans: Yes. In case of any need to withdraw or stop a mandate the customer can do so by approaching the user institution to withdraw the mandate. The account holder / customer can also withdraw the mandate / debit instruction directly from his / her banker without involvement of the User institution. The withdrawal instructions of a customer in such cases would be treated equivalent to a ‘stop payment’ instruction in cheque clearing system. However, as a matter of best practice, the customer may also provide prior notice or intimation of mandate withdrawal to the ECS user institution well in time, so as to ensure that the input files submitted by the user institution does not include the ECS Debit details in respect of the withdrawn / stopped mandates, leading to avoidable returns/rejections etc.

Q.24. Can a customer stipulate any ceiling on the amount of debit, purpose, or validity period of the mandate under the ECS Debit Scheme?

Ans: Yes. It is left to the choice of the individual customer and the ECS user to decide these aspects. The mandate can contain a ceiling on the maximum amount of debit; specify the purpose of debit and validity period of the mandate.

Q.25. Is there any limit on the value of Individual transactions in ECS Debit?

Ans: No. There is no value limit on the amount of individual transactions that can be collected by ECS Debit.

Q.26. What are the processing / service charges levied under ECS Debit?

Ans: The Reserve Bank of India has deregulated the charges to be levied by sponsor banks from user institutions. The sponsor banks are, however, required to disclose the charges in a transparent manner. With effect from 1st July 2011, originating banks are required to pay a nominal charge of 25 paise and 50 paise per transaction to the Clearing house and destination bank respectively. Bank branches do not generally levy processing / service charges for debiting the accounts of customers maintained with them.

Retail chain fined Rs. 1 Lakh for taking Rs. 90 more.

Retail chain Big Bazaar has been directed by a consumer forum in the city to pay a fine of Rs 1 lakh for overcharging a customer. The forum directed the supermarket to deposit Rs 80,000 in consumer legal aid account and asked it to give Rs 20,000 damages to east Delhi resident Sarita Narain for “cheating” and “harassing” her.

The east district consumer forum held that charging anything above the maximum retail price (MRP), as had happened in the case, is absolutely illegal. Narain had been charged Rs 90 extra. It also asked the chief commissioner (income tax), secretary (finance) of the Central government and secretary (finance), Delhi government, to scrutinize Big Bazaar’s account to find out if the retail chain has cheated other customers in a similar manner. “The departments of trade & taxes and income tax should jointly take action to scrutinize Big Bazaar’s accounts to find out the mischief they have committed with customers and recover from them with penalty and tax due thereon the amount which they have overcharged in excess,” the forum said, in its order.

The incident took place on June 13, 2012 when Narain bought goods worth Rs 3,512.80 from Big Bazaar. After reaching home, she found out she had been charged Rs 160 for turmeric powder with a printed MRP of Rs 90 and Rs 40 each for two soaps with an MRP of Rs 30 each. The respondent (Big Bazaar) submitted before the forum that they “never had the intention to dupe” Narain and claimed that the alleged overbilling was an “inadvertent oversight.” “The overbilling...is an inadvertent oversight committed by a staff of the respondent and not a deliberate act of the respondent to sell the goods on price above MRP to the complainant,” it told the court.

The bench headed by N A Zaidi, however, seemed unimpressed with the argument and Big Bazaar fined 1 L for taking 90 more from buyer held that the respondent clearly indulged in unfair trade practice. "By and large, customers do not pay so much attention at the time of making the payment and by scrutinizing the bill at home, it is the duty of the seller or the service provider to be honest and charge the customers the MRP (maximum retail price) including or excluding tax, as the case may be. Big Bazaar is a big retail chain and by indulging in this kind of unfair trade practices and methods, they are cheating the public and making huge profits...”, said the bench, also comprising Poonam Malhotra.

(Courtesy: Sana Shakil | TNN | New Delhi)
Most people dismiss their widening waistlines as a cosmetic or minor concern, but this notion of middle age can hurt your health far more than your self-esteem. Several studies, both international and in India, have clearly established a link between a midriff bulge and high blood pressure, heart disease and diabetes.

In India, a apple-shaped body is more common among men, with women usually putting on fat around the hips and thighs to develop a pear-shaped body. In India, more women than men have belly fat, which affects one in two people aged 50 and more. Studies show a rise in the number of more than 7,000 people from across the country, including urban and rural Rajasthan, Uttar Pradesh, West Bengal, Assam, Maharashtra, and Karnataka.

The study, which was published in the online journal BMJ Open last week, found an increase in the number of people surveyed who were overweight or obese, defined as a BMI of more than 25 kg/m2. While more than one in three in the age group had a midriff bulge defined as a waist size of more than 90 cm (35.4 inches) for men, and more than 80 cm (31.4 inches) for women. Two-thirds (67%) of men among the older and almost half (48%) among women in middle age had a belly.

TUMMY TROUBLE

More worrisome are the findings of a yet-unpublished study of more than 500 people in the 50 to 60 age group, conducted by the All India Institute of Medical Sciences (AIIMS) in New Delhi, which found risks associated with abdominal fat higher among women. "Our study found that risk of the metabolic syndrome, which puts people at risk of high blood pressure, diabetes and heart attacks, was about 1.5—fold higher in women and more than 2—fold higher in women with large waistlines," says lead author Dr. Naval Vikram, additional professor of medicine, AIIMS.

The AIIMS study compared the different measures of obesity as predictors of metabolic syndrome and found waist size was better than body weight and waist-to-hip ratio (WHtR) in predicting metabolic syndrome risk. WHtR cut-off of more than 0.5 was however a better predictor for hypertension.

The quality of fat that accumulates in the abdomen is to blame. "Visceral fat releases fatty acids and hormones into the blood that push up inflammation, bad cholesterol, triglycerides, blood glucose, and blood pressure, adding to risk of metabolic diseases," says

FAT LOT OF WORRY

Visceral fat, deposited deep within the body, surrounds and pads the gaps between abdominal organs such as the liver, kidneys and intestines. It induces metabolic changes that push up total cholesterol and LDL (bad) cholesterol, lower HDL (good) cholesterol, raise blood pressure and cause insulin resistance.

SAD FILMS MAY LEAD TO MORE POPCORN, WEIGHT GAIN

People who watched tearjerkers eat more popcorn than those watching comedies or action films, a US study reports. In lab settings, film-goers ate 26% more popcorn when watching the tragedy Love Story than when watching the comedy Sweet Home Alabama. After weighing discarded popcorn and counting popcorn boxes in film theatres, researchers found that people who watched tearjerkers ate, on average, 5% more popcorn than those who watched the more upbeat My Big Fat Greek Wedding. Action and adventure movies also lead television viewers to eat more calories, but only if the foods are within arm’s reach.

SIGNS OF TROUBLE

You are more likely to have visceral fat if you...

- Don’t sleep at least six to seven hours a day
- Eat processed foods high in trans fats, additives, synthetic flavourings and preservatives
- Are crash-dietering
- Have more than two alcoholic drinks a day
- Are highly stressed and inactive
- Have a fatty liver
- Have a belly or a bulging midriff

FIVE WAYS TO FLAT ABS

1. Aerobic exercises are the most effective in burning visceral belly fat. Do abdominal crunches. They work the muscles on the front and side.
2. Do crunches using a stability ball and dumbbells.
3. Do core-strengthening exercises. Your core is made up of your abdominal muscles, the muscles of your lower back, pelvic floor and hips — more than 15 muscles in all. Try planks, especially side planks.
4. Maintain a good neutral posture while you walk or sit. Sit straight and upright. Tuck your abs while you walk or exercise.
5. Eat more fibre. For every 10 g of fibre you eat daily, your belly will carry almost 4% less fat. Two apples, or two cups of broccoli, will give you 10 g of belly-flattening fibre. Incorporate foods like avocados in your diet.

Apoorva Dutt

ILLUSTRATION: SAIKISHNA RAJAR

LOSING IT: QUICK TIPS

Eat fresh fruits, vegetables, legumes and whole grains
Exercise for at least 40 minutes a day
Do strength training (weight exercises)
Lower stress; cut back on alcohol

Keemat: March – April 2016
Green tea, enjoyed by millions for its numerous health benefits, may have adverse effects if taken in high doses, a new study in fruit flies suggests. Researchers discovered that excessive consumption of green tea adversely affected development and reproduction in fruit flies. However, it is unclear whether it could have the same impact on humans.

Nutraceuticals such as green tea are largely unregulated, they said. Researchers investigated the effects of green tea toxicity on Drosophila melanogaster. They found that larvae exposed to 10 mg of green tea were slower to develop, were born smaller, and exhibited a dramatic decline in the number of emerged offspring.

It also caused morphological abnormalities in reproductive organs, such as testicular and ovarian atrophy. Researchers found that in other tests with mice and dogs, green tea compounds in large amounts reduced body weight and, in mice, negatively affected embryo development.

Courtesy: The Times of India
A simple condition like pneumonia had a 15-year-old woman from Gorakhpur, Uttar Pradesh, going in and out of hospital until she was finally referred to specialists all the way in Delhi.

Even here, the critical care unit at Sir Ganga Ram Hospital had a tough time treating her. "She was in the ICU for three months because the bacteria she was infected with was resistant to multiple drugs," says Dr Sumit Ray, vice-chairman of the critical care unit at Sir Ganga Ram Hospital. She finally responded to a combination of a fifth-generation drug and a first-line antibiotic.

"Antibiotics have to be very judiciously prescribed. Most patients from small towns come to us after having undergone multiple courses of strong antibiotics and are already resistant to a specific line of drugs," says Dr Satish Mehta, chairman Institute of Critical Care & Anaesthesiology, Medanta in Gurugram, Haryana.

With drugs that were effective earlier not being effective anymore, because of internal or environmental factors, doctors are being forced to prescribe stronger and stronger antibiotics.

"The real worry with these drugs is that the stronger antibiotics are toxic as they can damage the kidneys and liver," says Dr Praveen Panditwala, internal medical expert at Mumbai's Wockhardt Hospital.

OVERUSE, MISUSE

Overuse and misuse are leading to growing antibiotic resistance worldwide, including in India, with the most recent red flag coming from the All India Institute of Medical Sciences (AIIMS), where researchers found antibiotics in water samples collected from the Yamuna - in quantities high enough to cause drug resistance.

Three classes of antibiotics were found - fluoroquinolones, which is used to treat respiratory and urinary tract infections, and Macrolides and Penicillins, both broad-spectrum antibiotics used for a large range of bacterial infections such as pneumonia, scarlet fever and rheumatic fever.

"Resistance to antibiotics is definitely on the rise, more so in the past two to three years, and there has been at least a 5% to 10% year-on-year increase," says Dr Pardwala. "It's very worrying.

Prescription antibiotics are widely available in India, often without a prescription. In India, a World Health Organisation survey released this week reporting that India and China were the only two countries of the dozen surveyed where people bought antibiotics online. In India, 2% people reported buying antibiotics online compared to 5% in China.

Studies show 90% of diseases get better with about 30-40 medicines, but India has more than 70,000 medicines approved for use. Clearly there is room for abuse and misuse," says Dr Siddharth Satpathy, head, department of hospital administration, AIIMS.

"People over 65 are immune-compromised, and transplant patients rarely respond to first-line antibiotics any more. We are finding high resistance to second-line antibiotics too," says Dr Chandra Wadh, honorary consultant in clinical microbiology at Ganga Ram Hospital. "Earlier I’d say the antibiotics pipeline would dry up in 10 years, now I see it happening in 5 years."

STRONGER DOSES

The result is doctors prescribing stronger antibiotics that are more expensive and have stronger side effects. "In about 20% to 40% ICU patients, we have to step up to stronger antibiotics," says Dr Hatot.

Adding to the problem is that hard-to-treat infections have moved out of the ICUs and hospitals and into the community.

Medicines now account for about half of total ICU billing, with new-age antibiotics called Carbapenems being prescribed for infections known or suspected to be caused by multi-drug-resistant bacteria.

"If we don’t use what we have with reserve, we’re going to need the newer molecules more and more, and they are beyond the reach of many in terms of affordability," says Dr Hatot.

Mumbai businessman Bhagwan Punjabi, for instance, recently took multiple courses of the same antibiotic for a urinary tract infection.

Since the medicines, prescribed by his family physician, offered him temporary relief, he continued taking the drugs, which were handed over to him by the physician’s compouder.

"Every time the thrice-a-day dose ended, the symptoms — fatigue, pain and horrible burning when I urinated — increased. This continued for 20 days," says the 55-year-old businessman from Mumbai.

Finally, he consulted Dr Anil Ballani, a consultant physician at Mumbai’s Hinduja Healthcare hospital, who, after running a urine culture test, had to increase the antibiotic dosage, prescribing injections twice a day for 15 days.

"His body was resistance to the first type of antibiotic," says Dr Ballani. "Only after I ran a culture test could I determine which medicines would work, in what dosage."

SELF-MEDICATION

This combination of overmedication by doctors and self-medication by patients is key reasons why instances of antibiotic resistance are on the rise in India.

"In India everyone is a doctor until proven otherwise," adds Dr Ballani. "Your neighbour who was running fever a month ago will offer the left over medicine if you show similar symptoms. Homeopaths prescribe antibiotics freely. Unfortunately, in our country we have no regulation on prescription and sale of antibiotics."

Some hospitals, like Wockhardt, have put antibiotic-resistance awareness policies in place. The hospital keeps certain antibiotics on a ‘reserved’ list. "A doctor has to state in writing the reason he or she wants to prescribe these drugs," says Dr Pardwala.

"The idea is to make them think twice before prescribing.""}

"Most hospitals in the country don't have a comprehensive antibiotic policy and a large number of doctors prescribe antibiotics based on their own experiences. Easy availability of antibiotics adds to the misuse, which isn’t the case abroad. When we go abroad we take essential medicines along because we don't get anything over-the-counter," said Dr Satpathy.
Anatomy of kidneys and awareness: most of us are born with 2 kidneys unlike late Prime Minister Indira Gandhi who was born with just one kidney. Blood vessels arising from the ureter, which is a branch from the heart, connect to the kidney and the renal vein takes deoxygenated blood from the kidneys back to the heart and the ureter collects filtered urine down to the bladder for ejecting out of the body. Inside the kidney, the nephrons act like a filter and there are 10 lakhs nephrons in each kidney. Nephron is a functional unit that expels waste into the urine while blood and proteins remain in the filter.

Functions of kidney: To balance body’s fluid content and adjust the body volume for the amount of water that should remain in the body. Kidney maintains acid-base balance. People with kidney problem have more acid in their blood because it is not getting filtered and are advised not to have coconut water and sour things as they contain Potassium. Kidney needs hormones like erythropoietin, which makes red blood cells. Vitamin D is also important to have strong bones and healthy kidneys.

Causes of acute renal failure: When someone has kidney failure or problem requiring dialysis, whether it is permanent is decided by the cause of injury to the kidney. Two types of injury to the kidney occur, one, which is acute and usually temporary in nature, and the second is chronic and permanent.

- There are 3 types of injury: Prerenal – disease is not in the kidney but drop in blood pressure with diarrhea and vomiting and consequently patient is dehydrated with less blood flowing into the kidney.

Intrarenal – inside the kidney is difficult to treat. There are certain drugs and toxins, which should not be given to those with weak kidneys and must monitor medicines.

Forced renal - if the path of urine from a normal kidney to the bladder has an obstruction due to stone or prostate enlargement. Prerenal and forced renal are easy to treat and are reversible.

Statistics: Of the total number of dead people worldwide, 2/3rd died (36mn) from noncommunicable diseases like diabetes, blood pressure, stroke, kidney failure etc. India is likely to become diabetes capital by 2020 unless things change. With diabetes, incidence of kidney and heart diseases increase dramatically. Someone having heart disease is more likely to have a kidney problem and should get their kidneys checked. It is possible to delay the onset of renal failure and dialysis with proper treatment. Different causes of renal failure ultimately land the patient on dialysis.

Chronic kidney disease: The highest percentage of diabetic and high blood pressure, which can be treated. Dr. Deshpande advocated that once a year one should get checked for diabetes and blood pressure. People with heart disease should check for protein in urine, which is the first sign of injury to the kidney. Extent of injury is variable within the people. Therefore, doctors across the world divided the same into stages (I – just started with injury and V – already on dialysis), stratified them to understand better and tell the patient what to expect and treat them accordingly.

Symptoms and Signs: Symptoms of kidney failure are so silent that you are very unlikely to pick them up at an early stage. Symptoms viz. feeling fatigued; trouble in concentration; poor appetite; trouble sleeping, muscle cramps at night; swollen feet, dry thick skin and need to urinate more often. So look for symptoms actively. If you wait for the disease to give trouble and show symptoms, we will be catching stage IV and V and paying penalty for the same. Hence, it is important to detect early.

How can we prevent it? We cannot prevent it totally but practice secondary prevention i.e. early detection and management of modifiable risk factors thereby arrest the disease and don’t allow galloping rapidly. Thus, control sugar and pressure, do not smoke, and do not to get overweight and take salt restricted diet.

General symptoms: Very few patients have swelling of face, legs, and body at early stages (II and III). This cannot be seen with chronic renal failure (nephritic syndrome).

High Blood Pressure: silent disease and killer. Check pressure and if it is high, treat it. Kidney disease is silent and easily incarnate.

Tests to assess kidney function: Serum Creatinine (a blood measurement) by no means is a sensitive test for picking up the disease early. Dr. Deshpande stated it is not a sensitive test as some people who have given one of their kidneys to a family member in need have creatinine levels is within normal limits. If you can lose 50% of kidney without rise in creatinine, it cannot be a sensitive test but specific. Even if it goes by 0.1 or 0.2, it is indicative of some problem. Creatine levels of a frail lady and body builder like Mike Tyson (eats 2 kg meat a day) respectively at 0.6 and 1.4 are not comparable based on age, weight, exercise, diet, etc.

With ageing, there is some decline in kidney function measured in terms of GFR (Glomerular Filtration Rate) which is a specific test for kidney. After 50 years of age, one may lose 1% of function every year despite being healthy. Biological age and chronological age do not match. How you live, your life will determine how your kidneys are when you are at 80 years. For instance, a female of 76 donated one kidney to her daughter of 45 and after 5 years; creatinine is still less than 1 in one kidney. All of us are different biologically, chronological age might be same, but our functions might be vastly different.

Kidneys and Heart share relation: every heart patient can have an early kidney problem and vice versa, so it is important to look for both.

Causes of kidney injury: Diabetes, pressure, obesity, painkillers, heavy metals, environmental risk factors, obstructions, genetic factors, infections etc. It is not necessarily due to one factor alone but can be more than one. How it happens is not known at molecular level. At a particular stage, it becomes irreversible.

Protect your kidney to save your heart: Kidney is a permanent organ. The same is not true for brain and heart and even at the age of 70 years you will find new blood and new skin but not new cells in kidney and brain. These are permanent organs and injury is not reversible.

How to maintain a healthy kidney?

- Smoke cessation is important. Smoking damages blood vessels and kidneys have a large amount of blood vessels in them.

- Exercise.

- Diet restriction of salt (Potassium) i.e. consumption of salt, our body conserves it leading to hypertension and it has to be expelled out of kidneys, so salt restriction will be of paramount importance blood pressure. How gold is for women, salt is for body.
- **High protein intake.** Animal proteins are notorious when it comes to injury to the kidney; by being vegetarian, it is easy to control protein in the diet. Our protein intake is 30-40 gms a day on average, which is okay for kidney. People who are meat eaters have to be conscious of this because their protein intake may be too much for the kidney to manage.

- **Lipid control:** lifestyle modification and certain drugs are needed to control cholesterol properly to prevent kidney injury.

- **Control of obesity:** control blood sugar, blood pressure and avoid nephrotoxic drugs. Be careful of antibiotics consumed regularly, painkillers like Paracetamol, Brufen etc. that are developed into habit because of stressful life. Hence, pick up disease early and intervene.

**Modifiable risk factors:** Potassium free food for which find your own equation and adjust.

**Treatment of chronic kidney disease:** Correct anemia, good hemoglobin for heart and kidney, treatment of bone disease and avoid drugs in high doses, which needs kidney to remove them.

**Cost of renal replacement therapy:** With sparse resources, dialysis is an expensive treatment while considering affordability in our country.

- Average cost in our city may vary from 20,000 - 25,000 a month through private hospitals, to 7,000-10,000 in charity institutes where donors subsidize the cost.

**Kidney transplant** is the easiest possible treatment, which is also practical. It is better than dialysis because somebody with transplant is likely to live longer than somebody with dialysis. Expenditure will be less after the initial cost is taken care of; you will be more productive, able to afford and maintain your own expenses because you will be more likely to be working. Therefore, promote transplantation in a big way. Dr. Deshpande appealed that people should remember that we don’t need to burn our organs when we die and concluded it is much better to pass them on to somebody who is in much greater need of it here in this world. The biggest donation you can possibly make is donating part of your body.

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**Revealing credit card details to fraudster costs city man ₹2 lakh**

**HT Correspondent**

Mumbai: A 29-year-old businessman from Sanjay Gandhi Hospital, was allegedly cheated of Rs2.11 lakh by cyber fraudsters who misused his credit card details.

The card details were used to book travel tickets online.

The fraudster masqueraded as a bank employee to successfully obtain the credit card details of victim Chintan Shah.

“I got a call for an upgrade to my credit card from platinum to titanium on September 16,” Shah told HT.

He said that the caller had copied the tune used by the automated system deployed by the bank. “The fraudster had copied the music of the Interactive Voice Response (IVR) system of the bank which has issued me the card.”

This led him to believe that the call was genuine, Shah said.

“As I thought the call was from the bank, I gave the credit card details to the caller,” said Shah.

Unluckily for Shah, the call was part of a sophisticated fraud. Having obtained the details of the credit card, the fraudster used the details to log in to the netbanking account belonging to Shah.

“The caller, after taking the details told me that the new card will be issued in a period of fifteen days, and that I will not be able to use my card till then,” said Shah.

The caller, who now had access to Shah’s netbanking account, changed his registered e-mail address and telephone number so that Shah would not get any information about the transactions fraudulently made in his name.

“When I did not receive the card till October 23, I called up the bank seeking details. I was shocked when they told me that my credit card had been blocked because of non-payment of dues,” said Shah. The fraudulent transactions exceeded his card’s limit, he said.

When Shah queried the bank about the transactions made in his name, he learned about transactions amounting to Rs2.11 lakh that included six transactions on an Indian online travel agency’s website.

“The fraudster had booked air tickets in six transactions. He then cancelled the air tickets, and the amount was credited to the e-wallet he had created on the travel portal,” said Shah.

On October 29, Shah approached the Sanjay Gandhi Hospital in this regard. “My statement was recorded, and I had given a written letter to the police. They said that a first information report (FIR) will be registered soon,” said Shah.

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**LACK OF SLEEP CAN LOWER YOUR IMMUNITY**

Sleeplessness does more than leave you groggy and irritable. It also affects your physical health. People who get less than six hours are over four times more likely to catch a cold than those who sleep for seven hours or more. older US researchers in the Journal Sleep. For the study, researchers monitored the sleep patterns of 164 adults for seven days and gave them nose drops containing the common cold virus. Lack of sleep raised their susceptibility to the cold virus more than social background and cigarette and alcohol use.
A man went to a pet shop to buy a talking parrot. He saw a parrot with a red string tied to one of his legs and a blue one to the other. He asks the shopkeeper, "What are these strings for?" The shopkeeper replies, "If you pull the red string, the parrot speaks French, and if you pull the blue one he speaks English!" The man asks, "Wow! And what if I pull both the strings?" The parrot screams from the cage, "I will fall down, you stupid!"

A man approaches a priest and tells him, "Father, I have a problem. I have these two talking female parrots, but they only know how to say one thing. They keep saying, "Hi, we are hot. Do you want a date?" That's terrible!" the priest exclaimed. "But I do have a solution to your problem. Bring your two parrots over to my house and I will put them with my two male talking parrots to whom I have taught to pray and read the bible. My parrots will then teach your parrots to stop saying that terrible phrase, and your female parrots will learn to pray and worship." Therefore, the next day, the woman brings her female parrots to the priest's house. The priest's two male parrots are holding rosary beads and praying in their cage. The woman puts her female talking parrots in with the male talking Parrots, and the female parrots say, "Hi, we're hot. Do you want a date?" One male parrot looks over at the other male parrot and screams, "Put your Bible away Idiot, our prayers have been answered!"

**Question:** What do you call 1 Pakistani on the moon?  
**Answer:** Problem.

**Question:** What do you call 10 Pakistanis on the moon?  
**Answer:** Problem.

**Question:** What do you call a 100 Pakistanis on the moon?  
**Answer:** Problem.

**Question:** What do you call ALL the Pakistanis on the moon?  
**Answer:** All Problems Solved!


In a divorce court, a woman requests the judge: "Your honor, I want to divorce my husband."  
"But why?" asks the judge. She replies, "Because he is not faithful to me." The judge asks, "How do you know?"  
She replies, "My lord, not a single child of mine resembles him." A wife, one evening, drew her husband's attention to the couple next door and says, "Do you see that couple? How devoted they are? He kisses her every time they meet. Why don't you do that?"  
He says, "I would love to, but I don't know her well enough." A man was telling his friends, "When my wife is infuriated, she starts shouting at me, my children and even at our dogs and nobody dares answer her." One of his friends asked, "When you are angry, what do you do?" The man replies, "I also shout angrily at the windows and doors of the house, and none of them dares to answer back."  

"You looked troubled," I told my friend, "what's your problem?" He replied, "I'm going to be a father." "That's wonderful," I said. "What's wonderful? My wife does not know about it yet." Teacher: Why hurricanes were usually named after women?  
Naughty Jonny Answers: Because when they arrive, they are wet and wild, but when they go, they take away your house and car.

A woman is complaining to a neighbor that her husband always comes home late, no matter how much she tries to stop him.  
"Take my advice," says the neighbor. "Do what I did. Once my husband came home at three o'clock in the morning, and from my bed, I called out, "Is that you, Jim?" and that cured him.  
"Cured him!" asked the woman, "but how?"  
The neighbor says, "You see, his name is Bill."

A man goes to a shrink and says, "Doctor, my wife is unfaithful to me. Every evening, she goes to Larry's bar and picks up men. In fact, she sleeps with anybody who asks her! I am going crazy. What do you think I should do?"  
"Relax," says the Doctor, "take a deep breath and calm down. Now, tell me, exactly where is Larry's bar?"

John was on his deathbed and gasped pitifully.  
"Give me one last request, dear," he says.  
"Of course, John," his wife said softly.  
"Six months after I die," he says, "I want you to marry Bob."  
"But I thought you hated Bob," she says.  
With his last breath John says, "I do!"

A woman was having an affair during the day while her husband is at work. Her 9-year-old son comes home unexpectedly, sees them, and hides in the bedroom closet to watch. The woman's husband also comes home. She puts her lover in the closet, not realizing that the little boy is in there already. The little boy says, "Dark in here."  
The man says, "Yes, it is."  
Boy - "I have a baseball."  
Man - "That's nice."  
Boy - "Want to buy it?"  
Man - "No, thanks."  
Boy - "My dad's outside."  
Man - "OK, how much?"  
Boy - "$750"  
In the next few weeks, it happens again that the boy and the lover are in the closet together.  
Boy - "Dark in here."  
Man - "Yes, it is."  
Boy - "I have a baseball glove."  
The lover remembering the last time, asks the boy, "How much?"  
Boy - "$750"  
Man - "Fine."  
A few days later, the father says to the boy, "Grab your glove, let's go outside, and have a game of catch."  
The boy says, "I can't, I sold my baseball and my glove."  
The father asks, "How much did you sell them for?"  
Boy - "$1,000"  
The father says, "That's terrible to overcharge your friends like that... that is way more than those two things cost. I'm going to take you to church and make you confess."  
They go to the church; the father makes the little boy sit in the confession booth, and closes the door.  
The boy says, "Dark in here."  
The priest says, "Don't start that sheet again"

Santa was going to Chandigarh from Pune by an Air-India plane. He was allotted the middle seat in one of the 3-seats array. Santa got into the plane, and sat on the window side seat, reserved for an old woman. After some time the old woman comes and requests Santa to leave the side seat. Santa tells, "I want to see the view from the window and shall not leave."  
The old woman then complains to the airhostess, who comes and requests Santa to leave the seat. Santa is adamant and does not leave. The airhostess then tells the Asst. Capt. who also comes and requests, but in vain. Finally, the Captain comes and whispers something to Santa, who immediately leaves the side seat and returns to the middle seat. Astonished, the airhostess and the Asst. Capt. asks the Captain what he told to Santa.  
The Captain replies, "Oh! I just told him that only the middle seats would go to Chandigarh. All others will go to Jalandhar."
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