

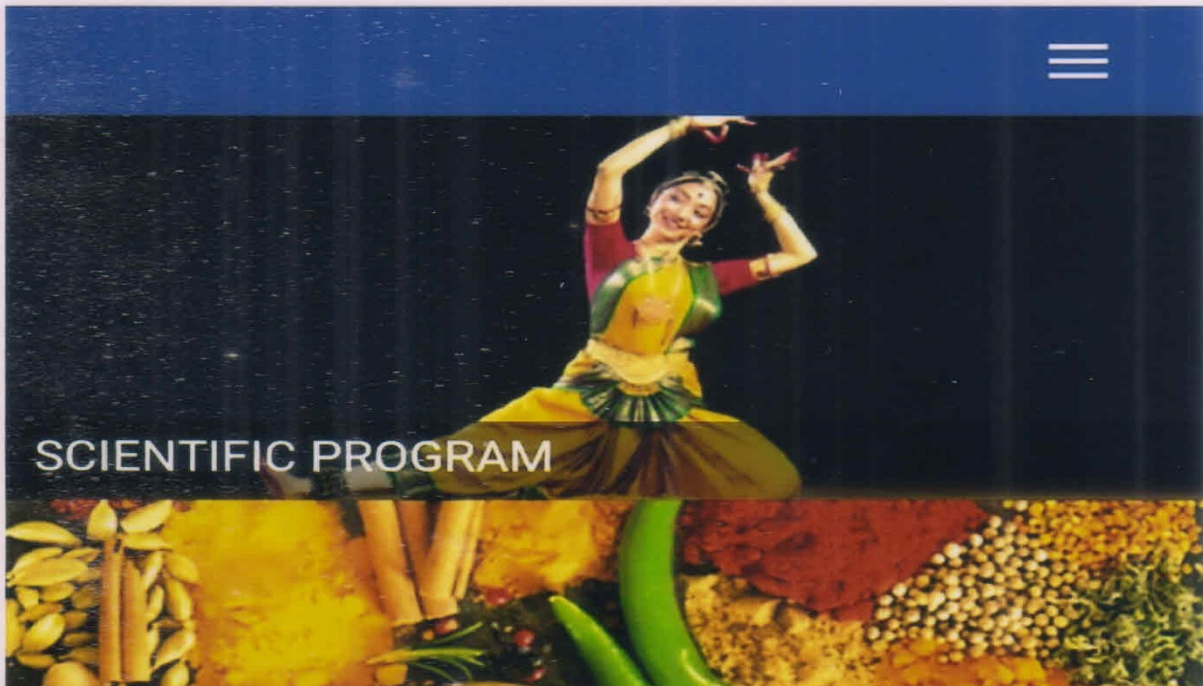




# INTERNATIONAL CHILD NEUROLOGY CONGRESS MUMBAI 2018

**VENUE** : Hotel Grand Hyatt, Kalina, Mumbai

**DATE** : 15 - 18 November 2018.





# ICNC 2018 MUMBAI

PROTECTING THE DEVELOPING BRAIN

International Child Neurology Congress

15<sup>th</sup> - 18<sup>th</sup> November, 2018

Venue : Hotel Grand Hyatt, Kalina, Mumbai

## SCIENTIFIC PROGRAM

### DAY I - THURSDAY 15<sup>th</sup> NOVEMBER

#### HALL A | B | C

TIME	TOPICS	SPEAKER
08:15 - 08:30	Welcome Remark	
08:30 - 09:15	<b>Plenary - 1</b> : <i>Chair - Rashmi Kumar &amp; Vrajesh Udani</i> Non Infective Acute Encephalopathy	Jacob John
09:15 - 10:00	<b>Plenary - 2</b> : <i>Kenneth Mack &amp; Jay Kumar</i> Funny eye and head wiggles and other confusing ocular motor disorders in kids	David Zee
10:00 - 10:30	<b>TEA BREAK</b>	

#### HALL A

10:30 - 12:30	<b>Parallel Session 1 - Infection encephalitis in Asia</b> <i>Chair - Hiroya Nishida &amp; PAM Kunju</i>	Pratibha Singh Ching-Shiang Chi Jung Sook Yeom Hiroya Nishida
10:30 - 11:00	Tropical Encephalitis	
11:00 - 11:30	Enterovirus 71 Encephalitis	
11:30 - 12:00	Neurological complications of neonatal rotavirus infection	
12:00 - 12:30	HHV6 encephalitis	
12:30 - 14:00	<b>Poster Session with LUNCH</b>	
12:45 - 13:15	Poster No: T-001 to T-240 (Presentations from 1:00 pm to 2:00 pm)	
14:00 - 16:00	<b>Platforms 1- CNS infection</b> : <i>Chair - Edward Kijja &amp; Rashmi Kumar</i>	<b>Presenters</b> Lucas Victor Alves Gunvant Oswal Areesha Alam
14:00 - 14:15	Congenital Zika syndrome and infantile spasms	
14:15 - 14:30	G-Therapy: A Hope For Patients With Subacute Sclerosing Panencephalitis!	
14:30 - 14:45	Differentiating Scrub typhus meningoencephalitis from other Acute Encephalitis Syndrome In children in Uttar Pradesh, India	
14:45 - 15:00	Treatment outcome of children with Congenital CMV infection at ICH and Dr: MR Khan Shishu(Children) Hospital	Mashaya Zaman Koil
15:00 - 15:15	Analysis Of 126 Cases Of Acute Encephalitis Syndrome In A Pediatric ICU	Praveen Kumar Shefali Gulati
15:15 - 15:30	Clinico-epidemiological profile and outcome of pediatric neurotuberculosis: a retrospective cohort study	
15:30 - 15:45	Enterovirus-D68 associated acute flaccid myelitis in Europe- Clinical and epidemiological data from European Collaboration	Jay Shetty
15:45 - 16:00	What is the optimal duration of Anti-convulsant therapy for Acute Symptomatic Seizures in Children with Acute Encephalitis Syndrome?	Sumeet R Dhawan
16:00 - 17:30	<b>Tea Symposium 1 - Spasticity treatment in cerebral palsy: improving function in children in low/middle income countries &amp; high income countries</b> <i>Chair - Laura Van De Pol &amp; Nelleke Langerak</i>	Laura Van De Pol Annemieke Buizer
16:00 - 16:15	Introduction of Cases	
16:15 - 16:35	Spasticity Treatment In Children With Cerebral Palsy: Treatment Goals, Treatment Options And Selection Criteria	
16:35 - 16:55	Spasticity Treatment In Low/Middle Income Countries Vs High Income Countries	Jeroen Vermeulen
16:55 - 17:15	Long Term Effects Of Selective Dorsal Rhizotomy On Gait	Nelleke Langerak Laura Van De Pol
17:15 - 17:30	Discussion: Treatment Choices In Low/Middle Income Countries Vs High Income Countries	
17:30 - 18:00	<b>TEA BREAK</b>	
18:00 - 19:30	<b>Inauguration Ceremony</b>	
19:30 - 21:00	<b>Cocktails</b>	

**G-Therapy: A Hope For Patients With Subacute Sclerosing Panencephalitis!**

*Dr. Gunvant Devichand Oswal, Dr.Pooja Shrirang Upasani, Dr. Umesh D. Kalane, Dr.Nandan Yardi, Dr. Anaita Udwadia Hegde*

Last modified: 2018-09-09

**Abstract**

**Introduction:**

Subacute Sclerosing Panencephalitis(SSPE) is relentlessly progressive fatal encephalitis occurring after infection with measles virus with 95% dying within 5-10 years of diagnosis. Conventional treatment has shown limited results. G-therapy has shown beneficial results in SSPE.

**Aims and objectives:**

To investigate efficacy and safety of G-therapy in patients with SSPE.

**Methodology:**

Patients with confirmed diagnosis of SSPE were started on G-therapy (combination of Pharmacopeia approved Homeopathic remedies developed on the principles of Ayurveda and Neurophysiology) with prior consent. Medication was in addition to conventional therapies. They were video recorded prior, during and following treatment. Drug therapy was provided at no cost. Those that did not continue after initial visit were considered as controls.

**Results:**

Study includes 306 SSPE patients who visited our centre from 1999-2017, from all age groups across world. 62.7%(192/306) continued to take treatment while 37.3%(114/306) dropped out.

76%(146/192) showed clinical improvements in motor, mental, speech, daily activities with reduction in myoclonic jerks. 34.9%(67/192) patients showed EEG improvements like disappearance of periodic complexes and improvement/normalisation of background activity.

Patients on G-therapy had longer survival when compared to those who did not continue treatment(p= 0.005). Death was reported in 22.4%(43/192) which was lower(p= 0.025) compared to patients who did not continue treatment(34.2%-39/114).

No adverse effects were noted in any patients.

**Conclusion:**

G-Therapy has shown significant benefits than conventional treatment options with no noted side effects. While not a cure, G-therapy should be considered for patients with SSPE as safe, economical, adjunctive treatment.

**Keywords**

G-Therapy; SSPE; Treatment: Clinical improvement Conference registration is required in order to view papers.

**Dr Oswal Gunvant and his daughter Dr Pooja  
presenting G Therapy Research for a progressive  
Degenerative Lethal Brain Disease SSPE in**

 **Prestigious International Child Neurology  
Congress ICNC18** 

**ALL SSPE PATIENTS WORLDWIDE ARE TREATED  
FREE LIFELONG BY DR OSWAL AND HIS TEAM**

**A Proud Moment for us** 

**Centre for Life Sciences Health and Medicine  
Clover Pinnacle Ridge, Near N.I.B.M,  
Kondhwa, Pune 411048  
India.**

**[www.g-therapy.org](http://www.g-therapy.org)**

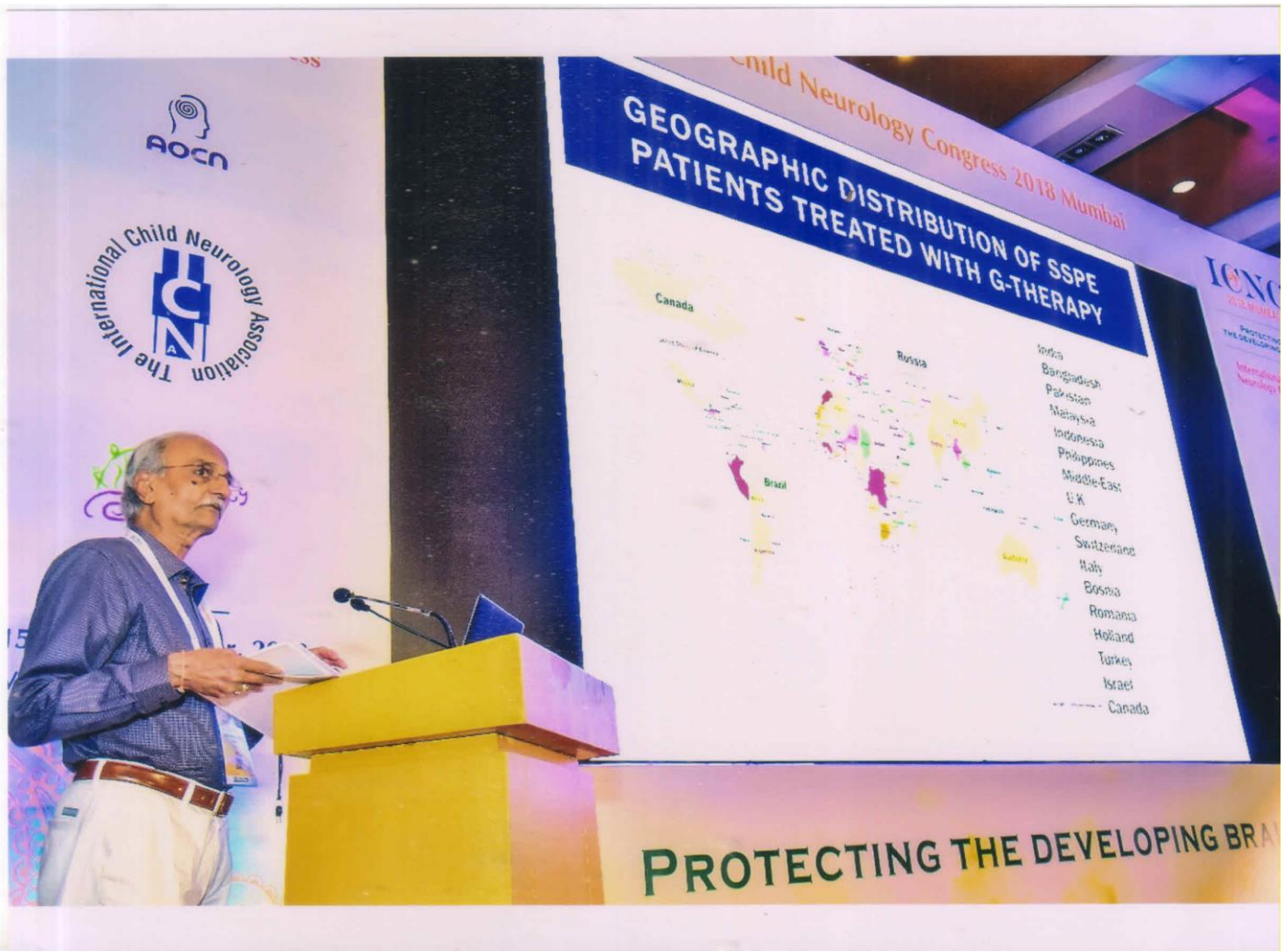
**phone:**

**07757071179**

**08766995577**

**09665333777**





# GEOGRAPHIC DISTRIBUTION OF SSPE PATIENTS TREATED WITH G-THERAPY



The International Child Neurology Association

PROTECTING THE DEVELOPING BRAIN

## SCOPE OF THE PROBLEM : SSPE

- Relentlessly progressive fatal encephalitis, post measles virus infection
- 95% die with in 5 to 10 years of diagnosis
- Conventional treatment – limited results

[J. T. Jabbour, MD](#); D. A. Duenas, M et al  
*JAMA*. 1972;220(7):959-962. 1972



# METHODOLOGY

All patients diagnosed to have SSPE based on DYKEN criteria and CSF studies

Consent taken and Free G-Therapy to all S.S.P.E Patients lifelong

Standard medicines(AEDs and Immuno- modulation- Isoprenosine or I/T Inteferon alpha or others) continued

All patients video-monitored at clinic (and home) pre treatment and during follow-ups by adult or pediatric .Neurologist and or Epileptologist

## Follow up

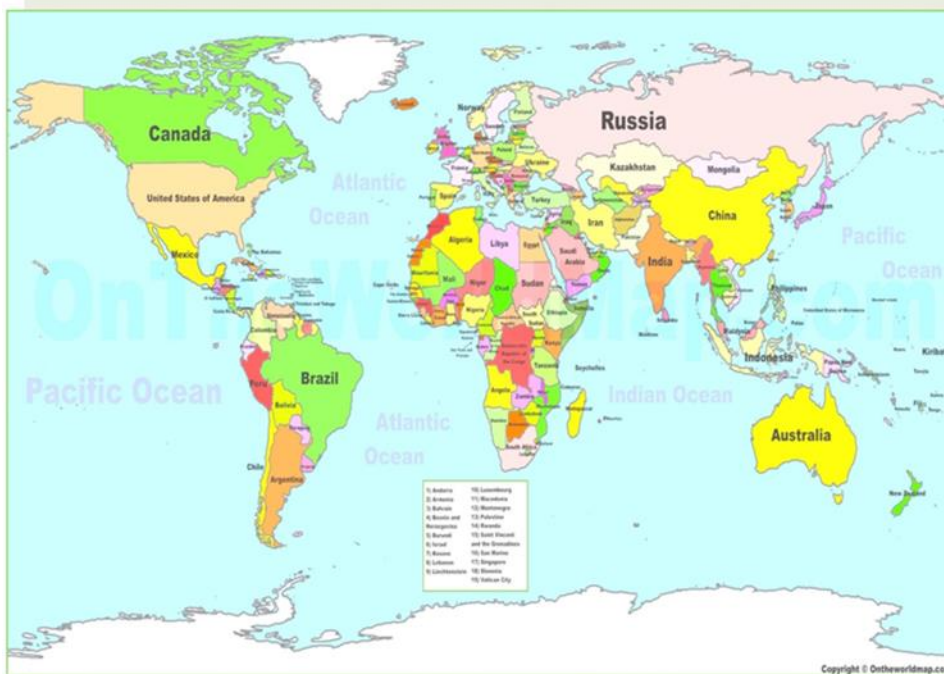
- Clinical evaluations every 3-6 months by adult or pediatric neurologists /Epileptologist
- EEG studies every 3-6 months
- Standard medicines continued, G-therapy was add-on

## DYKEN CRITERIA

- Cognitive decline and myoclonic jerks
- EEG – Periodic complexes, slowing of background
- CSF – Anti measles, Antibody titre
- MRI Studies
- Occasional brain biopsy

Garg RK- 2002 BMJ .PMJ <https://pmj.bmj.com/content/78/916/63>

## GEOGRAPHIC DISTRIBUTION OF SSPE PATIENTS TREATED WITH G-THERAPY



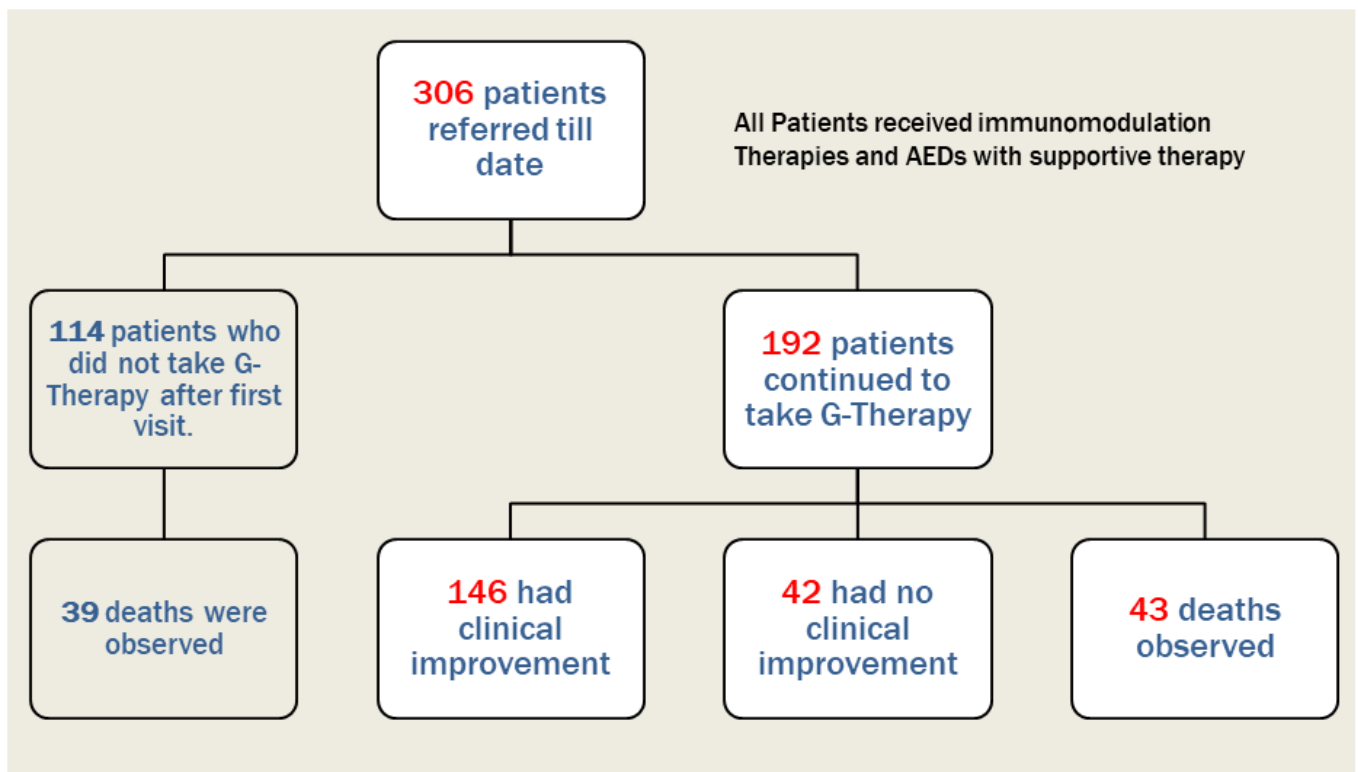
India  
Bangladesh  
Pakistan  
Malaysia  
Indonesia  
Philippines  
Middle-East  
U.K  
Germany  
Switzerland  
Italy  
Bosnia  
Romania  
Holland  
Turkey  
Israel  
Canada

**Patients from all over the World with SSPE are treated free lifelong by Dr Oswal and Dr Pooja Upasani.**

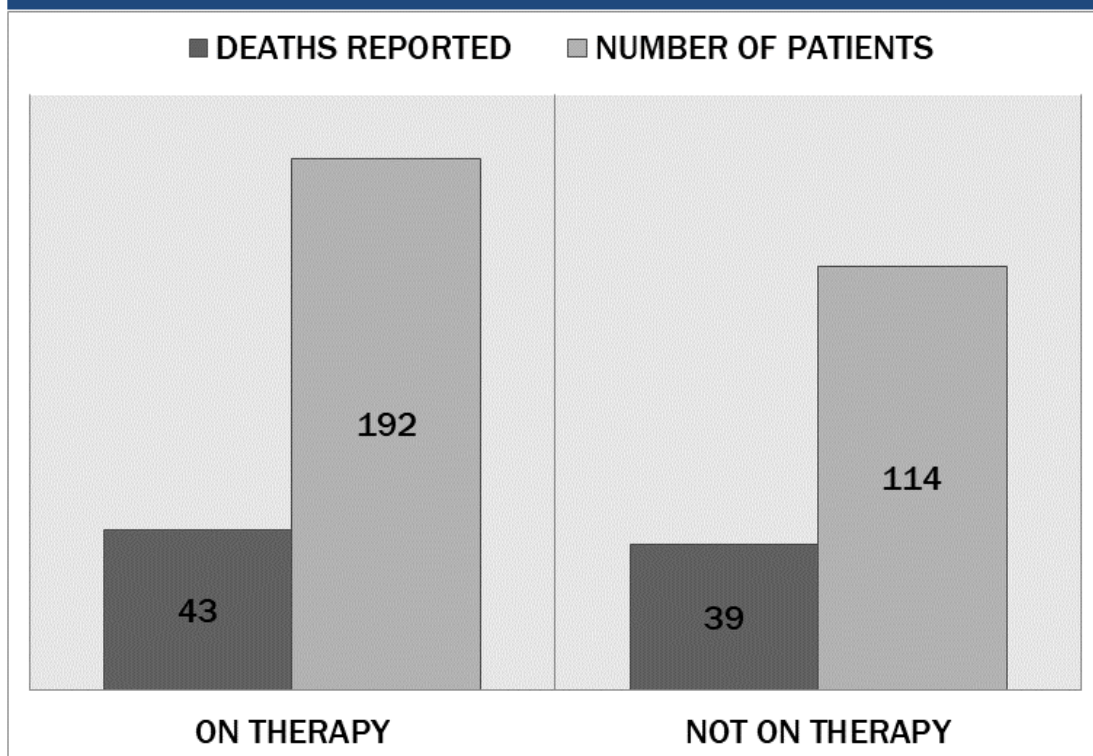
## ABOUT G-THERAPY

- **G-Therapy** draws insights from **Neurophysiology** and **Ayurveda** using a combination of **pharmacopeia approved homeopathic remedies**. These remedies **act at Nano Medicine level** bringing fast, effective recovery. Calcium, potassium and sodium ions are responsible for neurotransmission and G-Therapy is based on one of this principle.
- Thousands of years back, the Indian system of medicine **Ayurveda** suggested that **medicines are most effective** when **given in micro levels**, e.g. through the medium of a carrier in ash form, or via pulverization and dilution in liquid formulations. This approach was named “Sookshma Chikitsa” or medicine in micro doses.
- **Homeopathic remedies** consist of triturated (pulverized) source materials that are diluted to such high extents that not a single molecule of the original substance may be found in remedies that are diluted to C24 and beyond. Because of **high dilutions** these remedies are typically considered to be inherently safe. A recent **study at IIT Mumbai** has shown that **highly diluted homeopathic remedies contain Nano particles of the original substance, thus it acts at Nanomedicine level.**

## OUR DATA

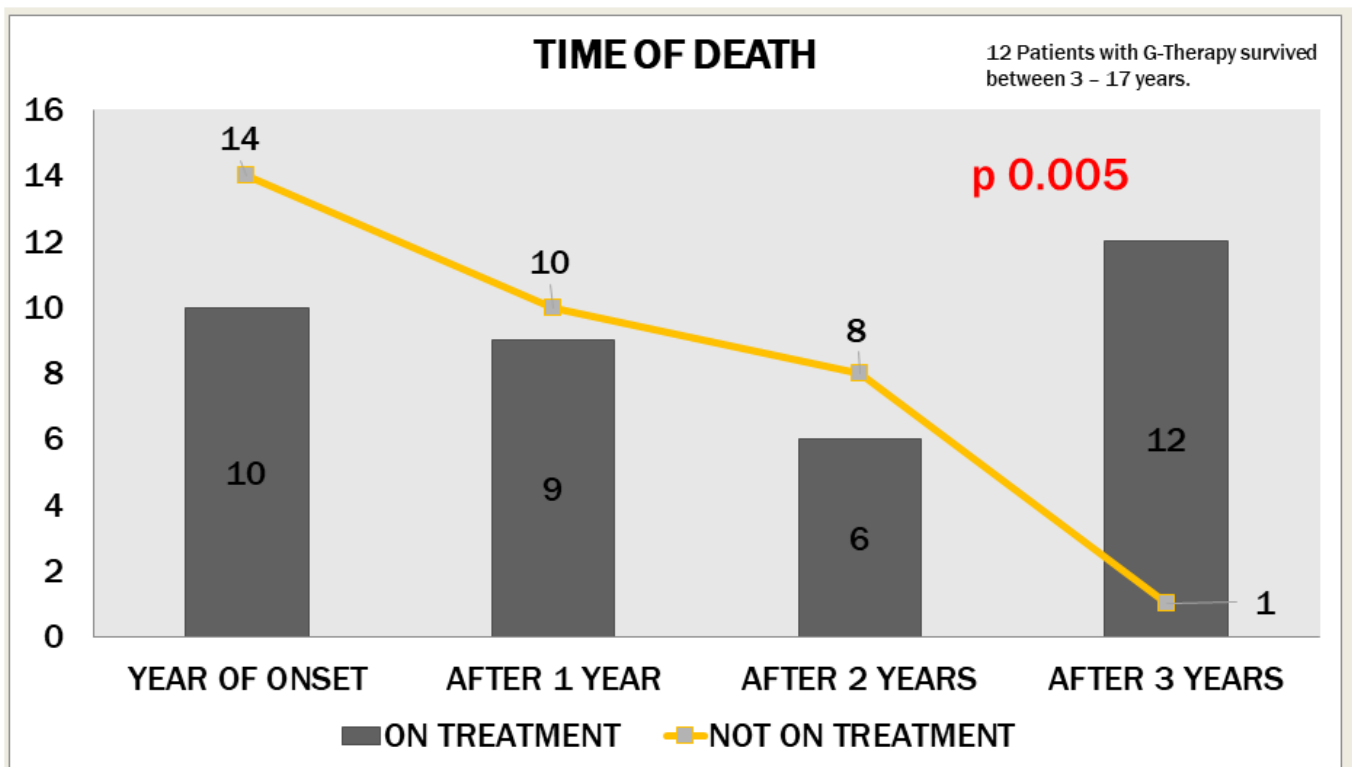


# RESULTS



**p 0.025**

# RESULTS



## RESULTS

### ■ CLINICAL

- ✓ With G-Therapy about 76 % of SSPE patients showed Clinical Improvements as compared to 5 - 10 % of natural remissions in SSPE
- ✓ Even 3rd stage SSPE patients have shown clinical improvements in individual cases
- ✓ Fulminant SSPE patients showed clinical improvements and stabilization of patient's clinical condition
- ✓ Some cases of SSPE have shown stage reversal well documented by clinical criteria (Jabbour)

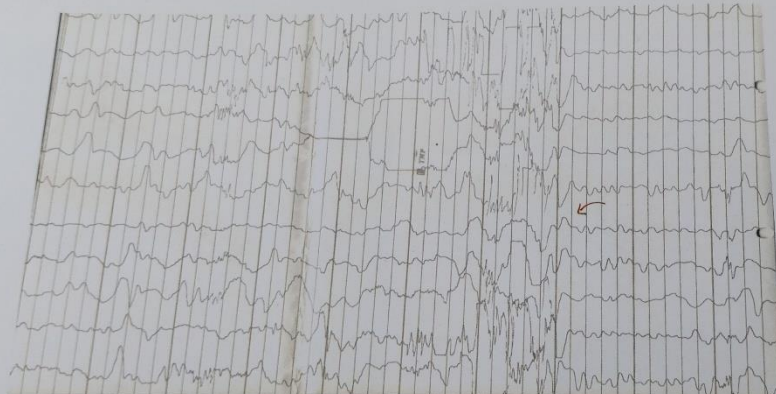


# RESULTS

## ■ BASED ON EEG

- ✓ EEG Improvements were seen in 34.9 % patients of SSPE under G-Therapy. In many patients EEG became normal with good background.
- ✓ Many patients under G-Therapy showed disappearance of periodic complexes and EEG coming to normalcy with reduction in jerks and Clinical improvements.

EEG Before Treatment Showing Periodic Complexes



EEG

JEHANGIR HOSPITAL & MEDICAL CENTRE

PATIENT DETAILS

NAME : MR. N. SRINIVAS  
AGE : 23 Years 6 Months 0 Days  
SEX : M  
ID : 61273  
TEST DATE : 01/08/2003  
TEST TIME : 17:00:00 to 17:30:00  
REFERRED BY : DR. N. S. CHAKRABORTY  
COMMENTS : The background activity microvolts which spread (increased with 3-6 sec.) There is no significant The alpha activity seen Hyperventilation and  
CONCLUSION : THIS EEG IS WITHIN NORMALS A NORMAL INTERMITTENT LESION

JEHANGIR HOSPITAL & MEDICAL CENTRE PUNE 2003

MR. N. SRINIVAS. M / 23Y ON OD  
61273

DR. N. S. CHAKRABORTY

M.D., D.M (NEURO)

DIGITAL VIDEO ELECTROENCEPHALOGRAM

11/08/2003 17:00:00:000

Nml

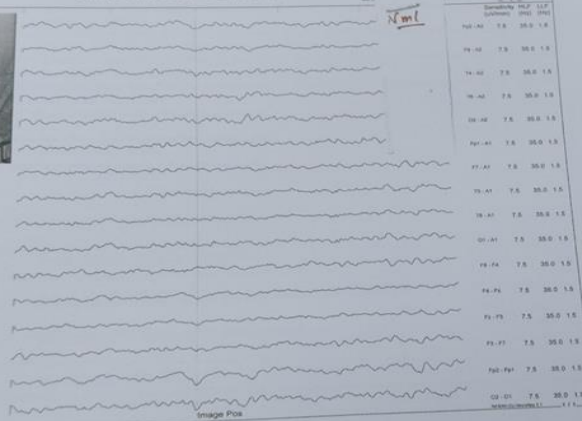


Image P08

WORLDWIDE

## CONCLUSIONS

- Patients on G-Therapy show better survival ratio and lifespan as compared to patients who did not continue G-Therapy
- G-Therapy has shown no side effects
- While not a cure G-Therapy can be considered for patients with SSPE as a safe economical adjunctive treatment.

## ACKNOWLEDGEMENTS

- We are grateful to all pediatric neurologists and adult neurologists who guided us and specially to Dr. Nandan Yardi, Dr. Anaita Udwadia Hegde, Dr. Umesh Kalane, Late Dr. Vasant Pai and to Parents of Children with SSPE for their continuous guidance and support.
- Dr. Oswal and his daughter Dr. Pooja Upasani are committed to give free G-Therapy to all SSPE patients worldwide lifelong as OUR SERVICE TO HUMANITY.



**ICNC** 2018 MUMBAI  
PROTECTING THE DEVELOPING BRAIN



International Child Neurology Congress

# CERTIFICATE

NO: MMC/ACCREDITATION/SPA-0068/2013

CME Code - MMC/MAC/2018/F-011508

This is to certify that

**Dr. GUNVANT DEVICHAND OSWAL**

*has attended & participated as a Delegate during*

**ICNC 2018 Mumbai**

*held at Hotel Grand Hyatt, Kalina, Mumbai from 15th - 18th November, 2018*

*Maharashtra Medical Council has granted 4 (Four) credit hours for Delegate*

Dr. Vrajesh Udani  
Organising Chairmain

Dr. Anaita Hegde  
Organising Secretary

Dr. Viraj Sanghi  
Organising Secretary

Dr. Ingrid Tein  
President, ICNA

Dr. Pankaj Bandarkar  
MMC Observer



**ICNC** 2018 MUMBAI  
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President, ICNA

Dr. Pankaj Bandarkar  
MMC Observer

# RETROSPECTIVE STUDY

Dear Dr. Oswal,

. Just to give you a preliminary review of the retrospective analysis of *the* SSPE, patients sent by you.

We have gone thru 12 patients in detail. Most of the cases show clinical improvement once on your therapy.

Those to show maximum benefit are those started on your therapy soon after onset of the disease.

Once the disease process has been on for a few years the benefits are still seen but of limited value.

The EEC shows significant improvement in most cases too. Actual normalization is seen in a few.

The MRI picture does not show any improvement with therapy indicating that the disease process is ongoing in spite of treatment.

I have no proof but it would be worth investigating the benefits of your therapy as it seems to have obvious neurological benefit at a cellular level. While neural cell function seems to improve the virus still slowly eats into the cell with time.

Thanking you,

Yours sincerely,

Anaita Udwadia-Hegde

Pediatric Neurologist,

Jaslok Hospital and Research Centre Wadia Children's Hospital,

Mumbai, India.

**The First Ever Documentation**  
**Worldwide of**  
**Reversal of EEG changes**  
**In 45 patients of SSPE**  
**With G Therapy**  
**For Your Peer Review**



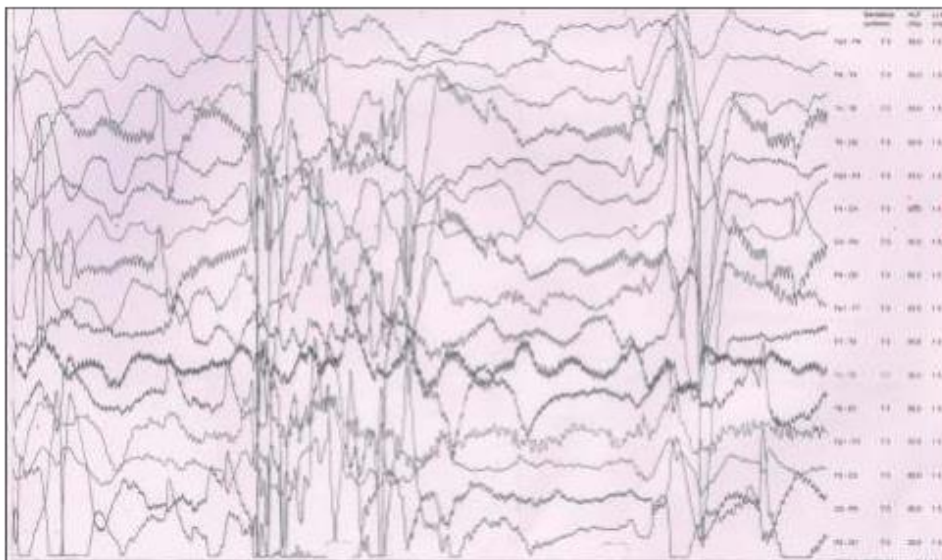
**[www.g-therapy.org](http://www.g-therapy.org)**

**Data of 675 patients of SSPE till September 2020**



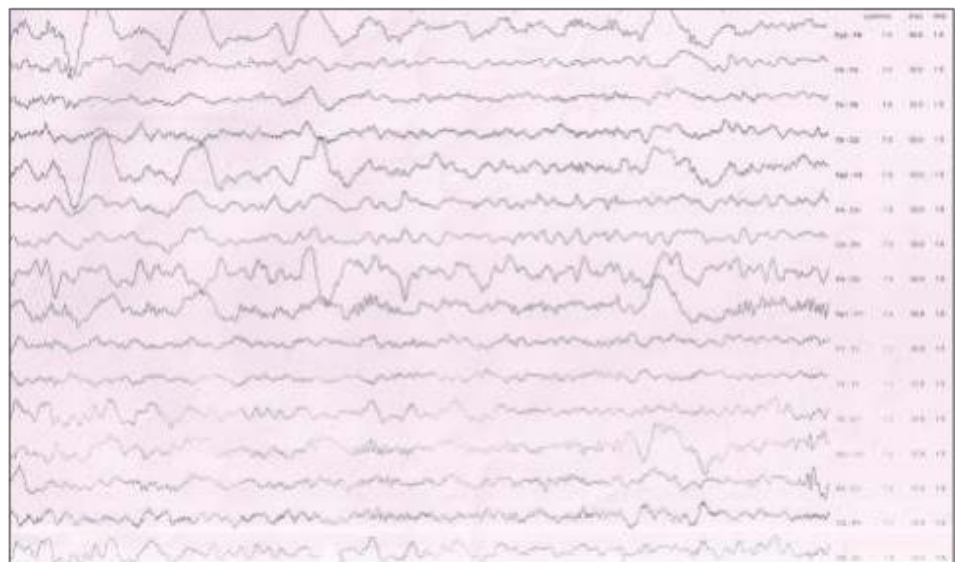
# G-Therapy

## A Hope for Patients with SSPE



EEG Response to G-Therapy

A Study of 45 patients for peer review





## EEG Response to G-Therapy

This presentation shows EEG Studies of 45 patients of SSPE Before G-Therapy and After G-Therapy.

Before G-Therapy graph shows typical periodic complexes and after G-Therapy graph shows disappearances of periodic complexes and normalization of EEG/ improvement in the background activity

All these 45 patients also showed clinical improvements.

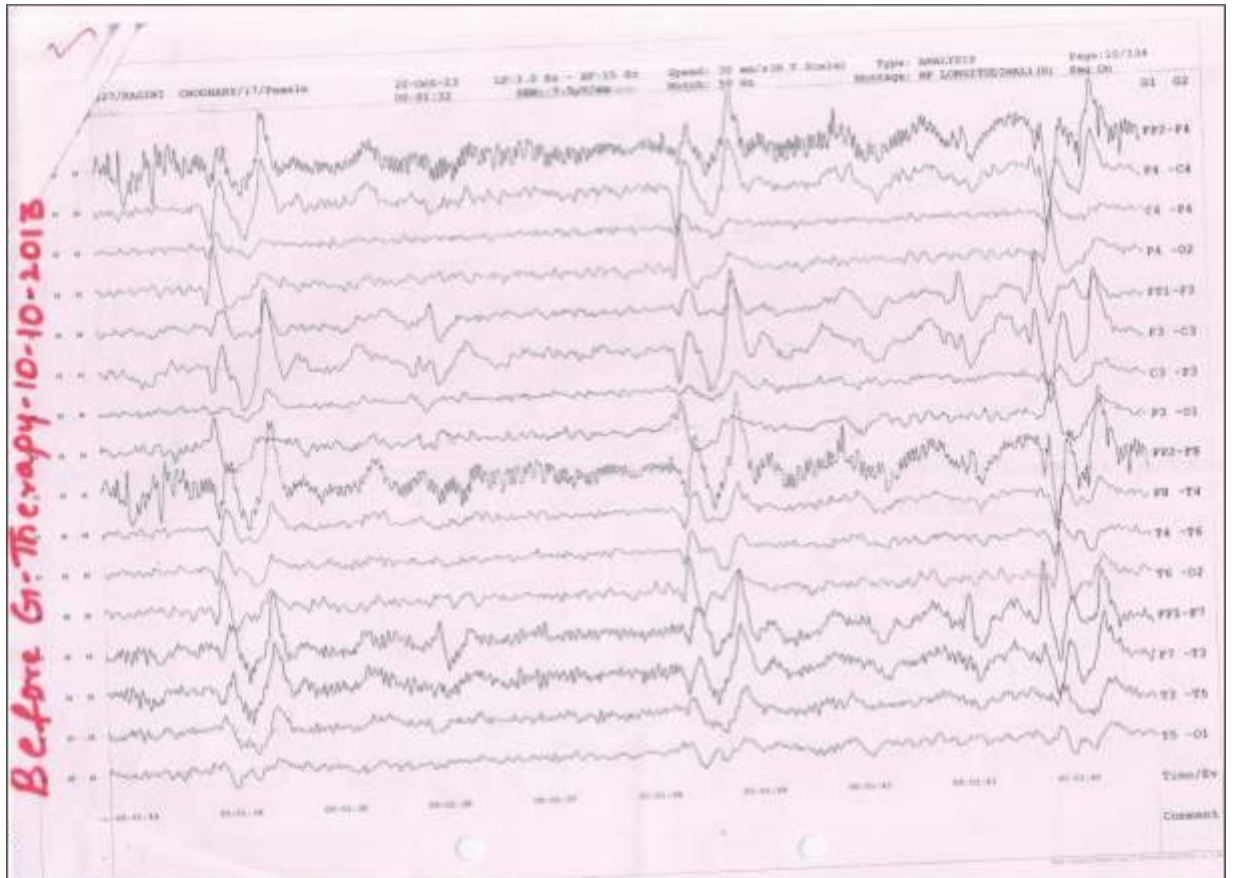


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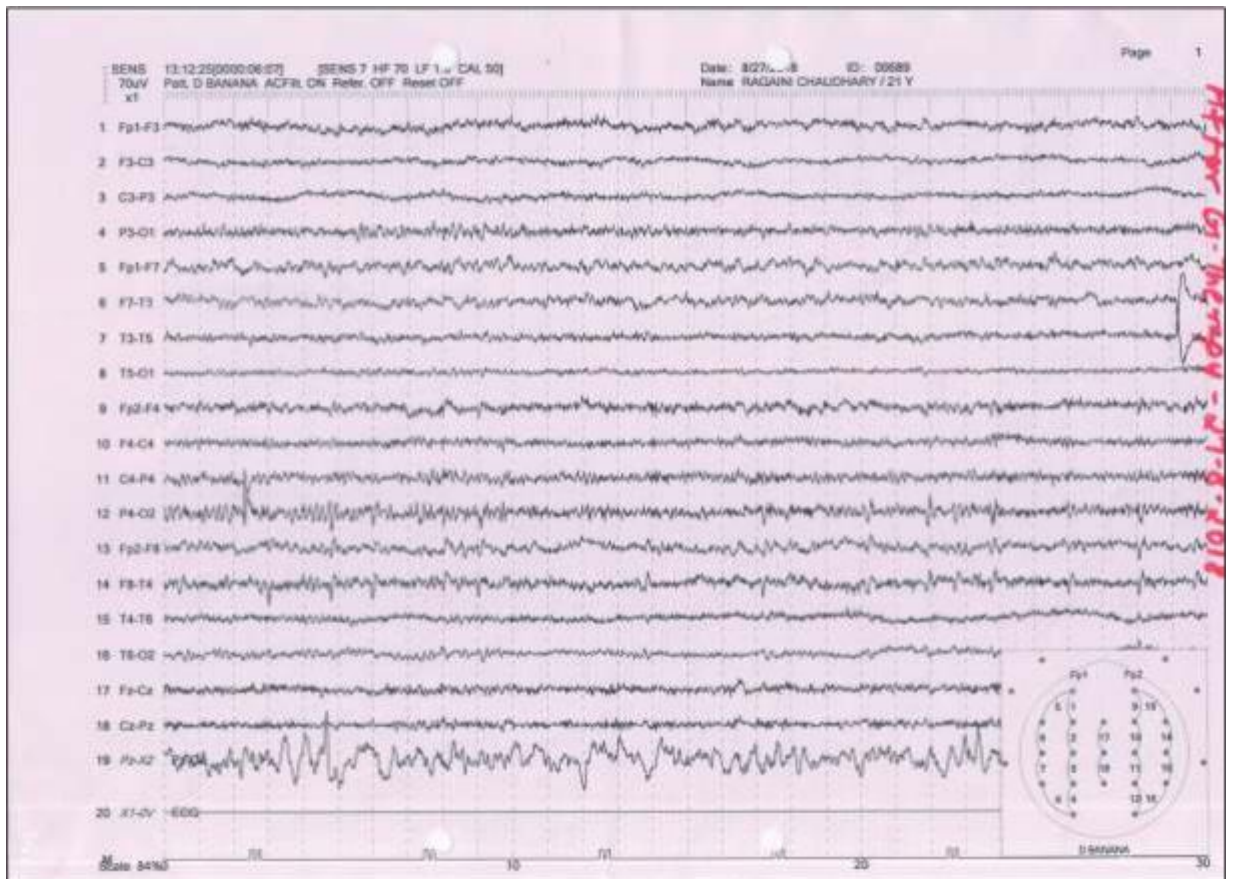


# Case 1

Before  
G Therapy

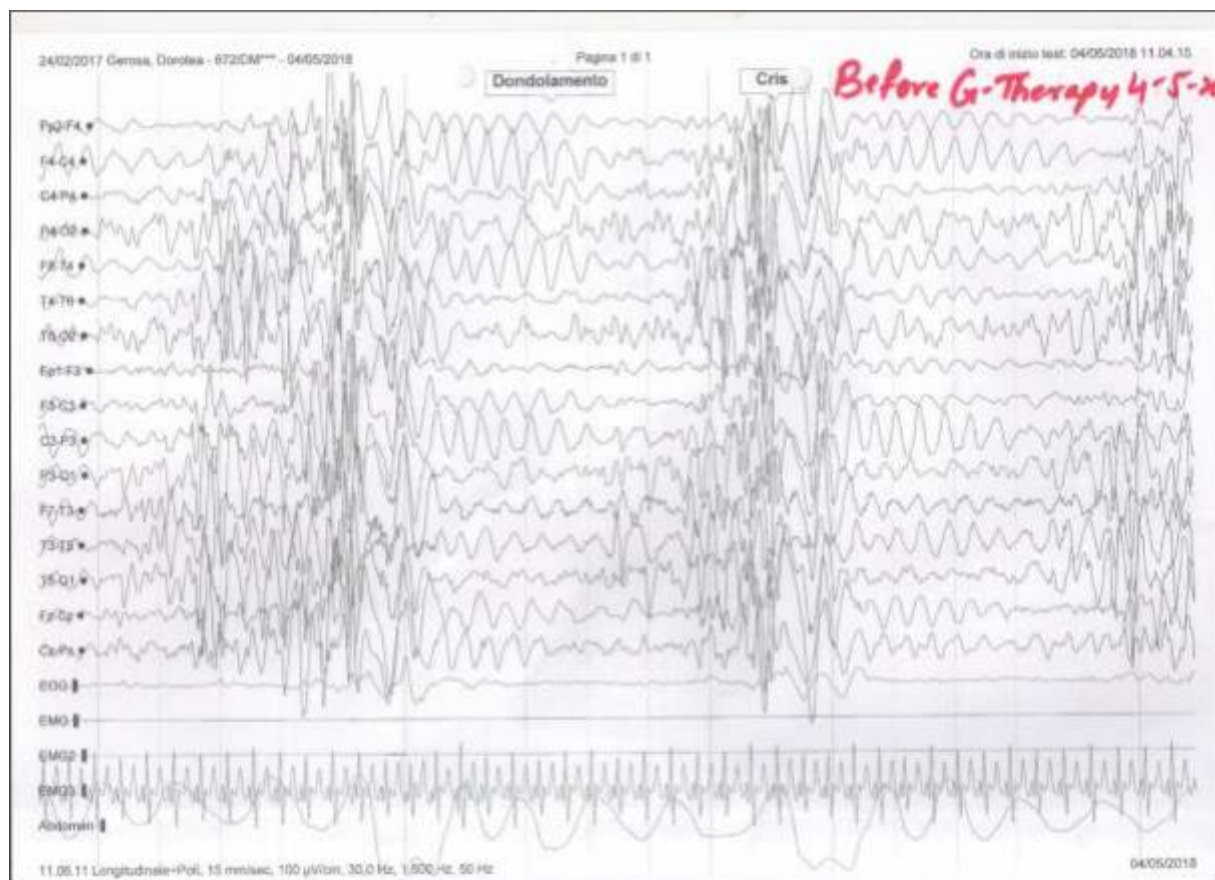


After  
G Therapy

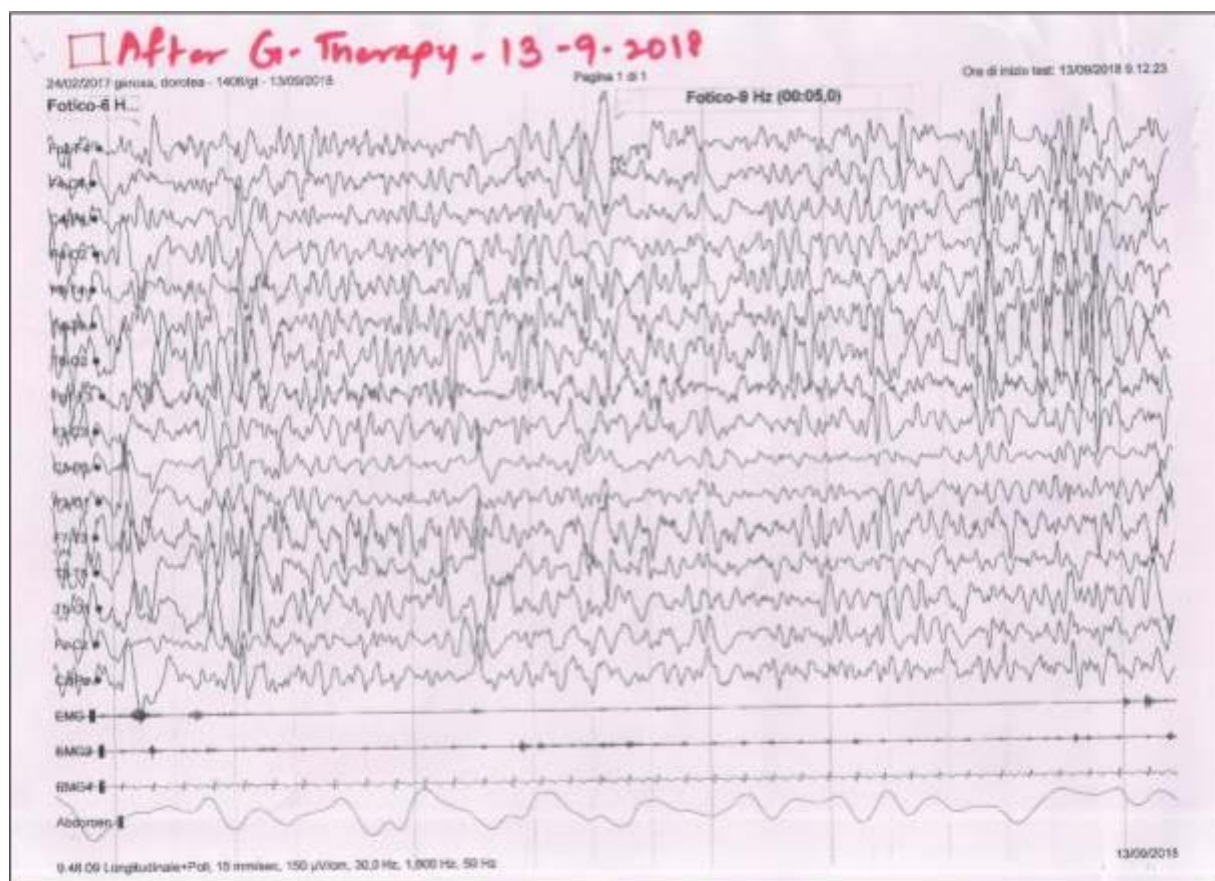




## Case 2



Before  
G Therapy

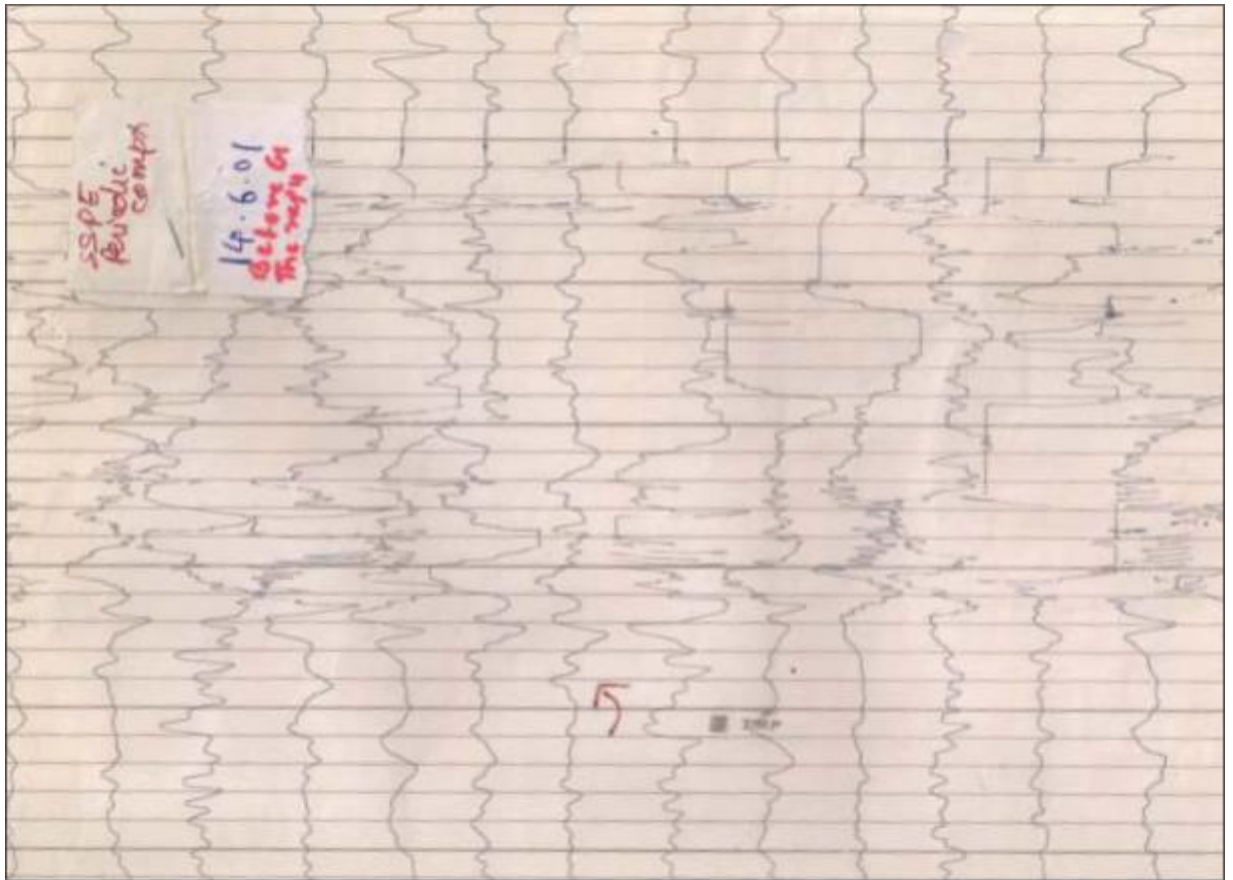


After  
G Therapy

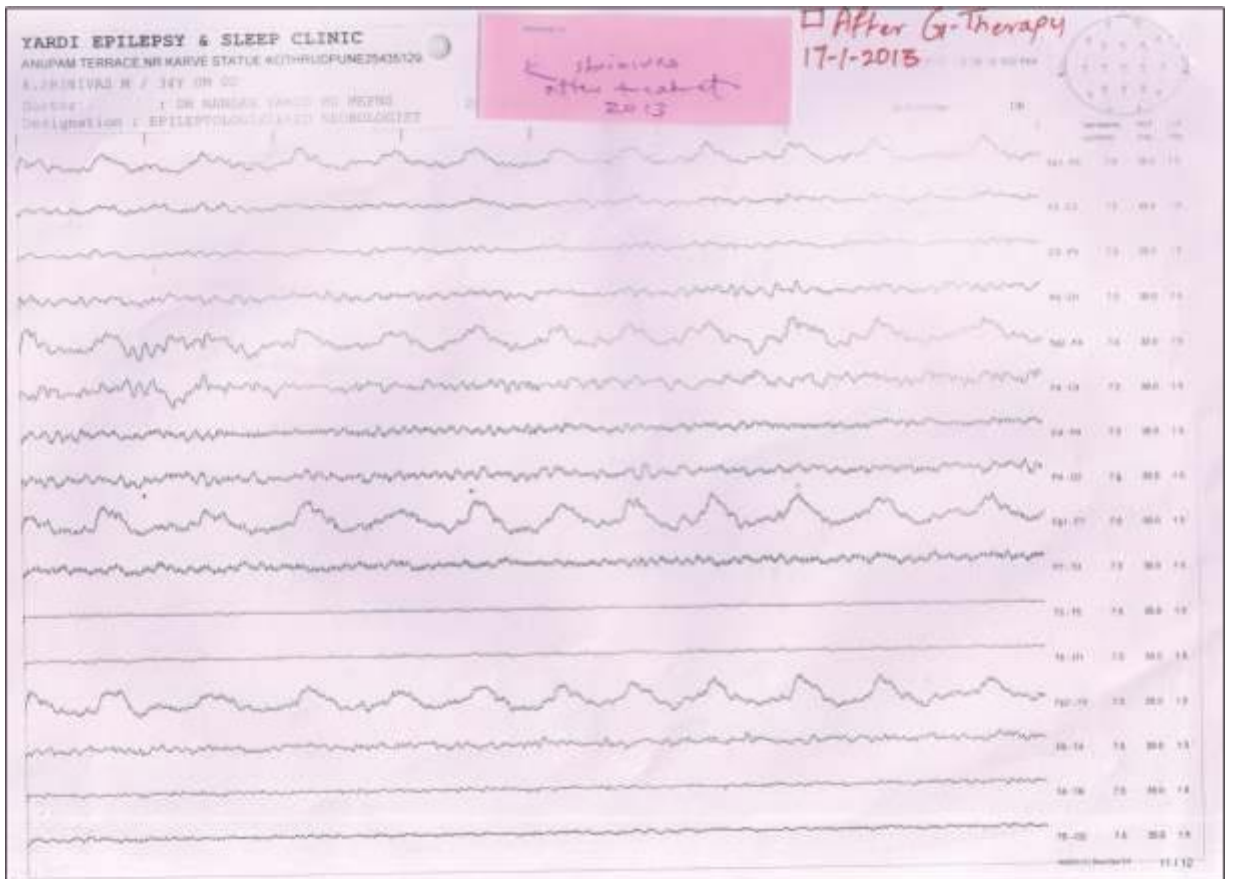


### Case 3

Before  
G Therapy



After  
G Therapy

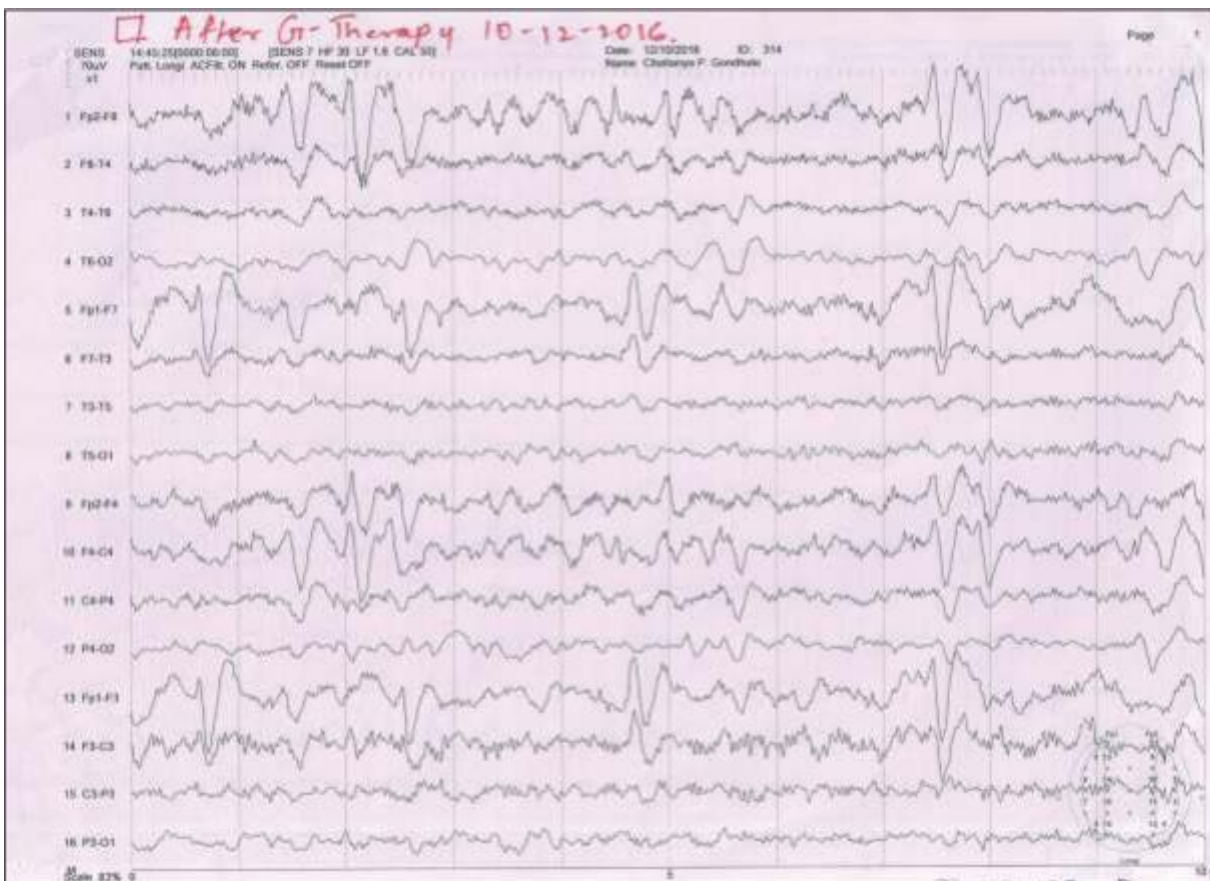




## Case 4



Before  
G Therapy

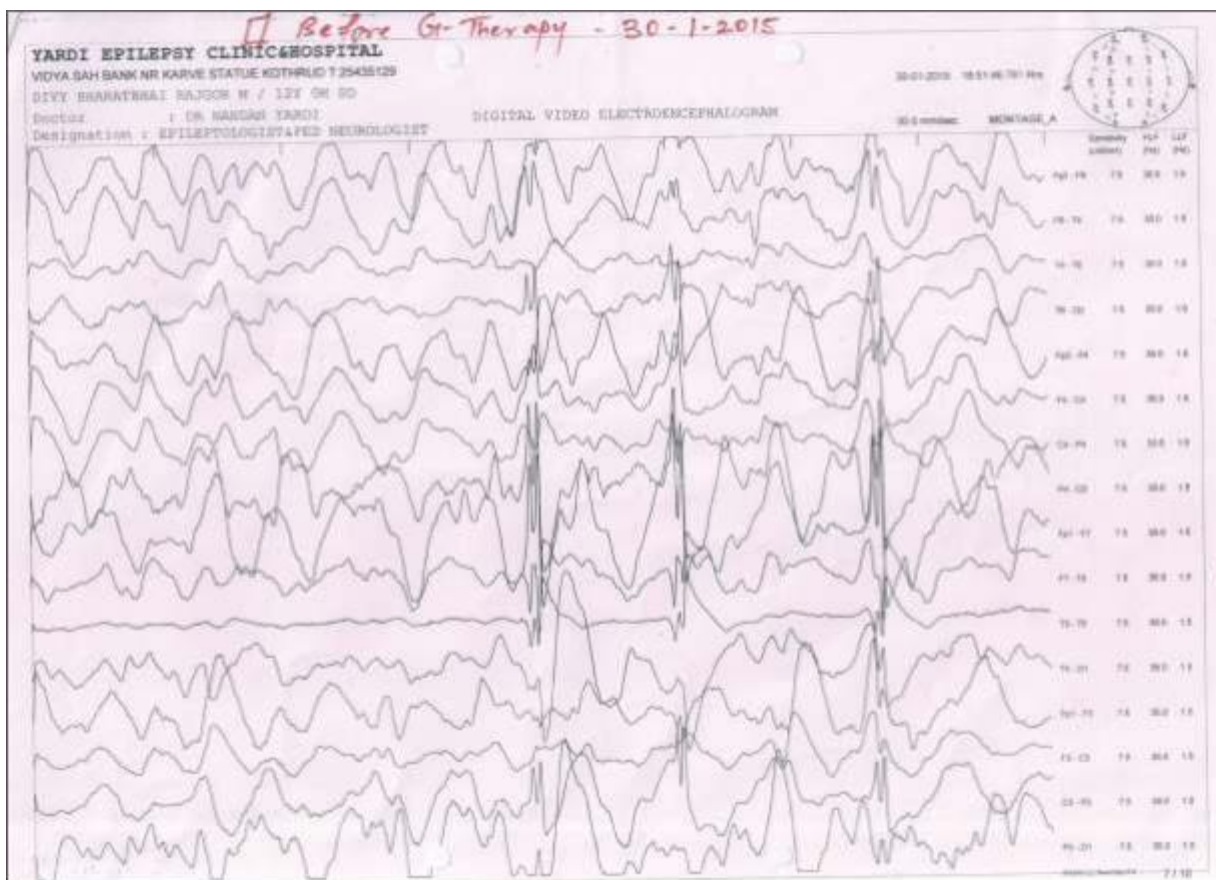


After  
G Therapy

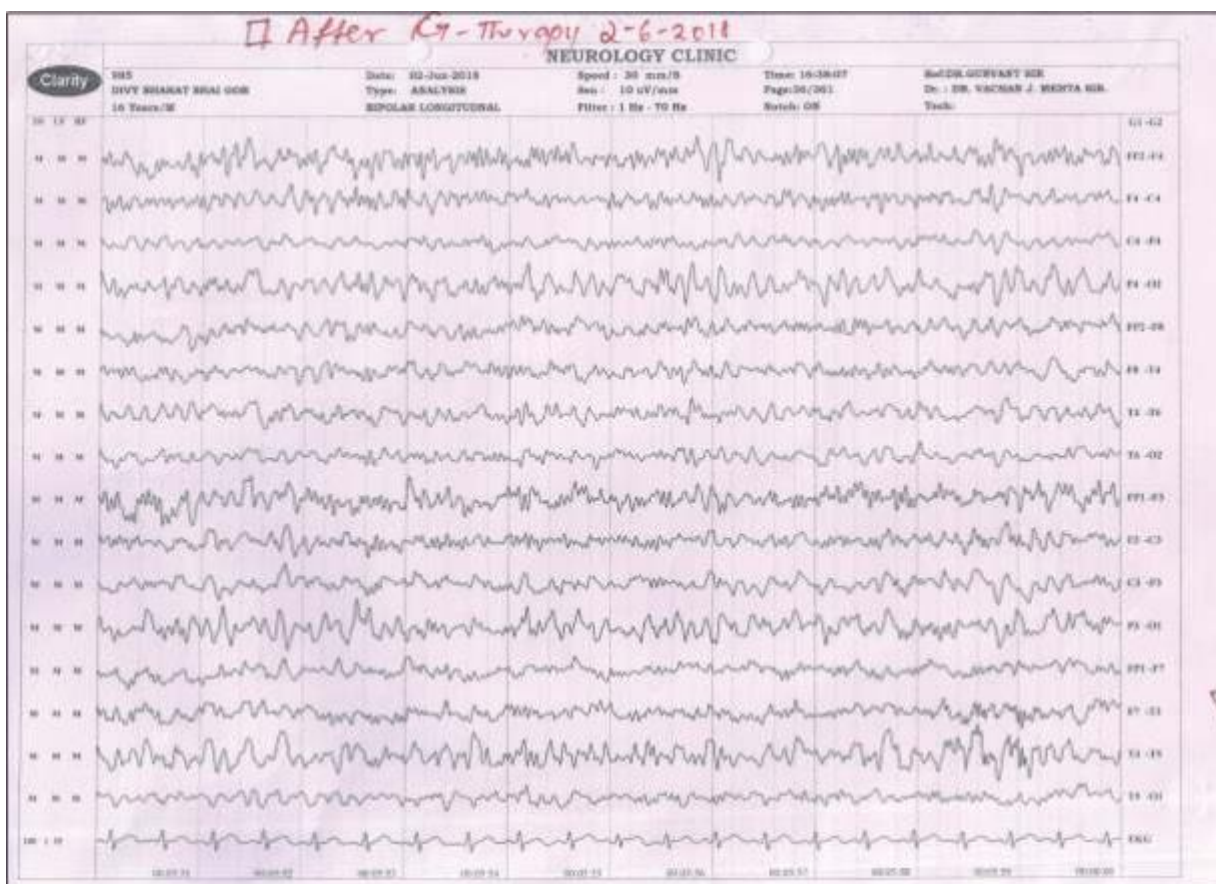


## Case 5

Before  
G Therapy



After  
G Therapy

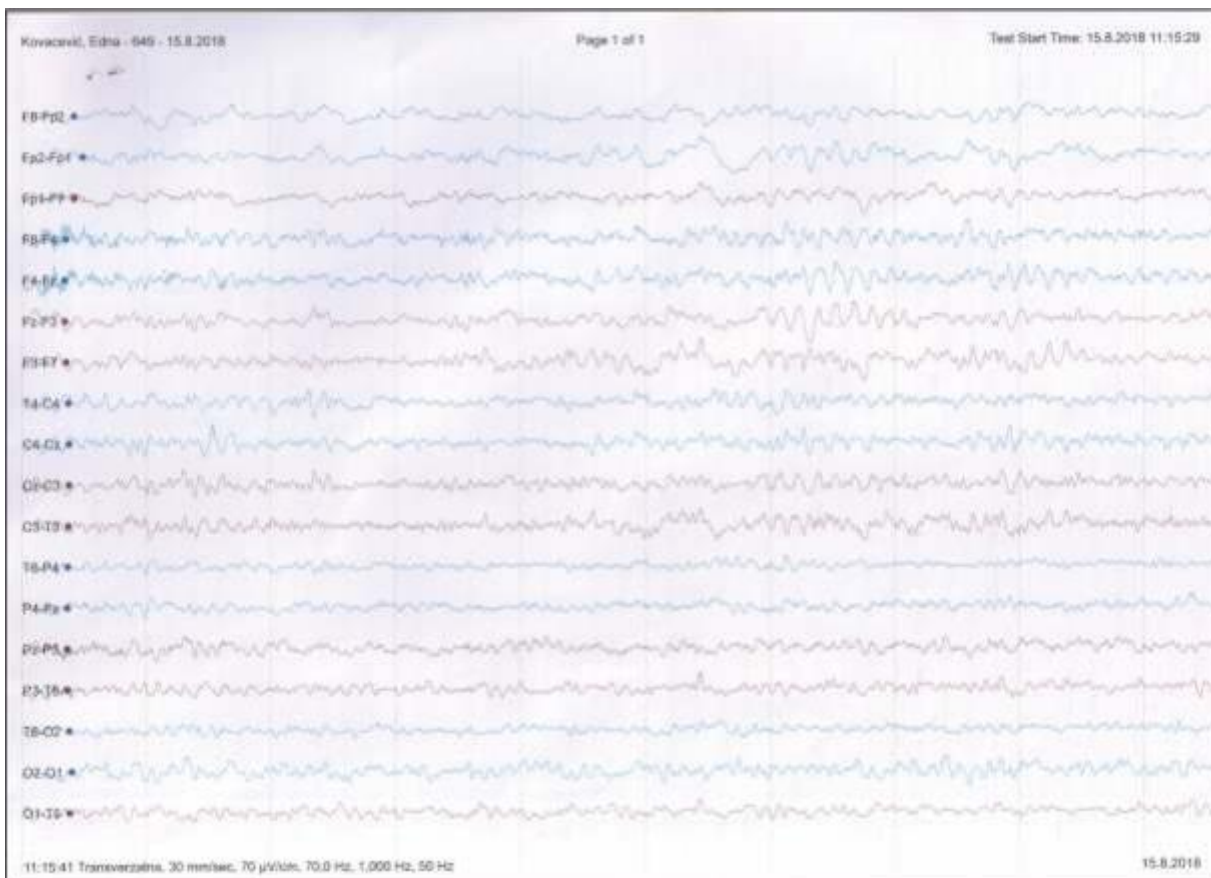




## Case 6



Before  
G Therapy



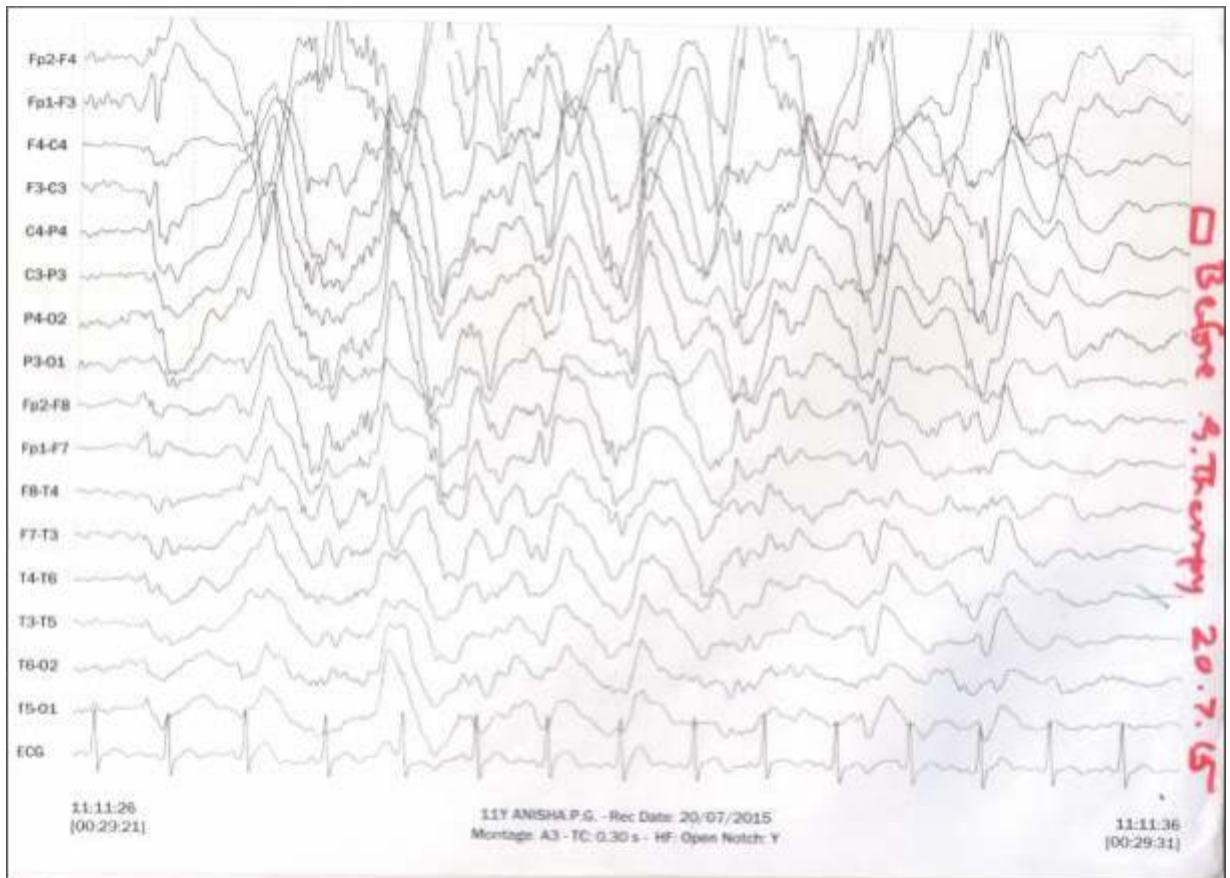
After  
G Therapy



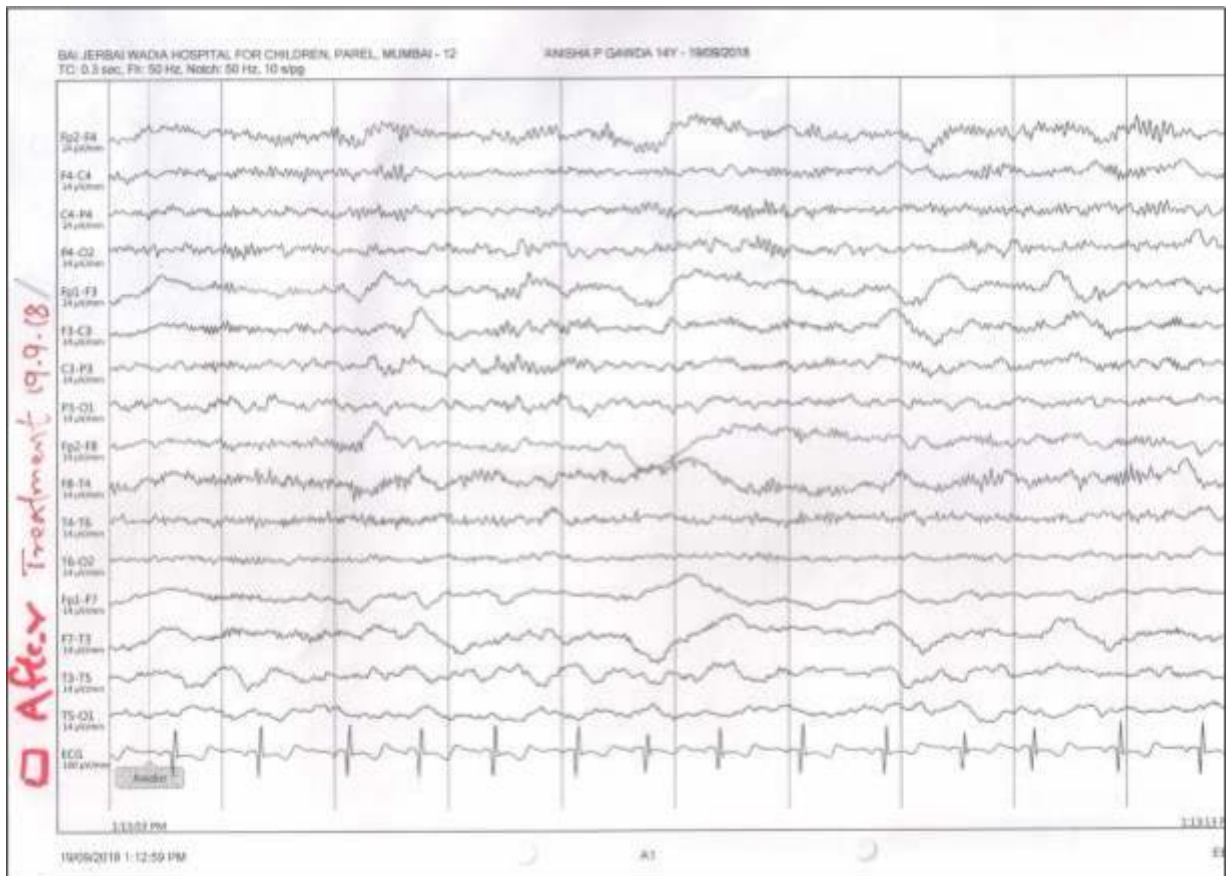


## Case 7

Before  
G Therapy

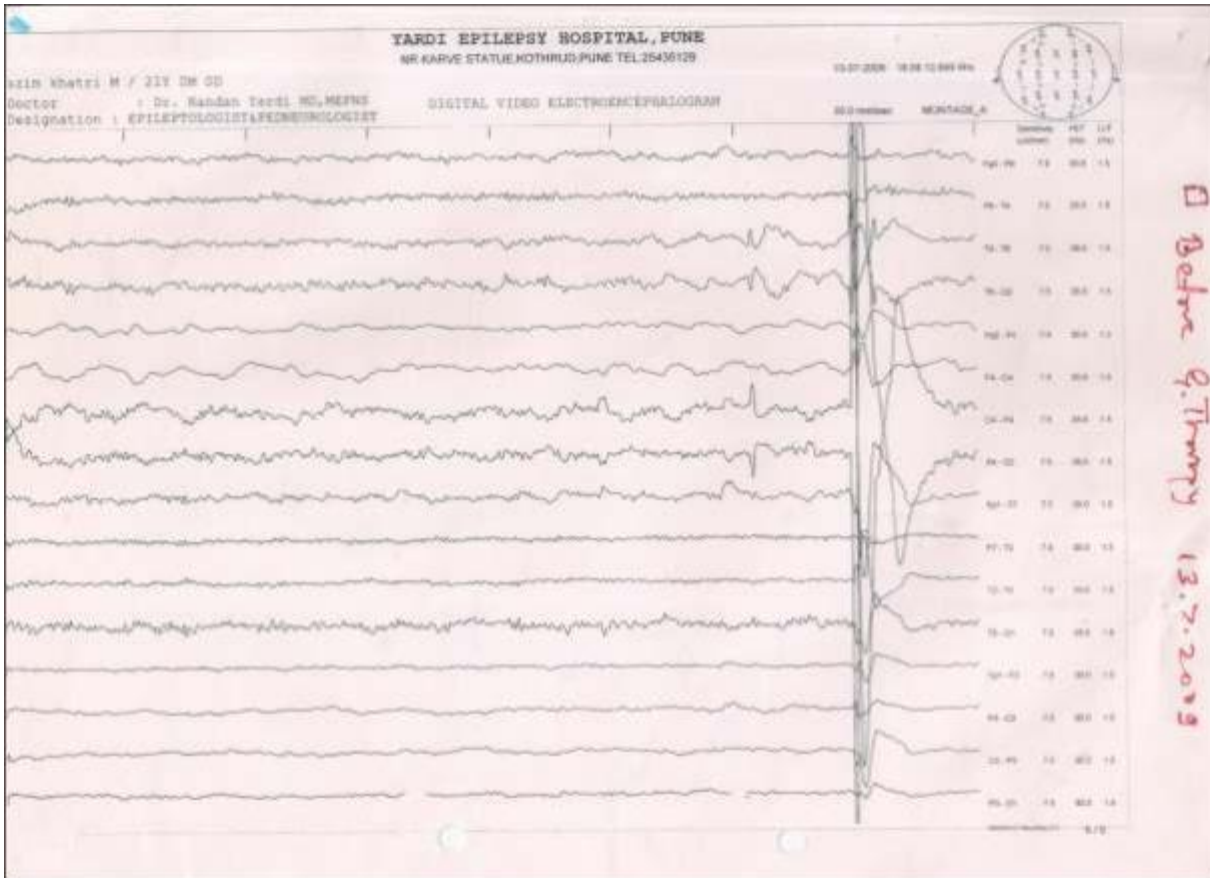


After  
G Therapy



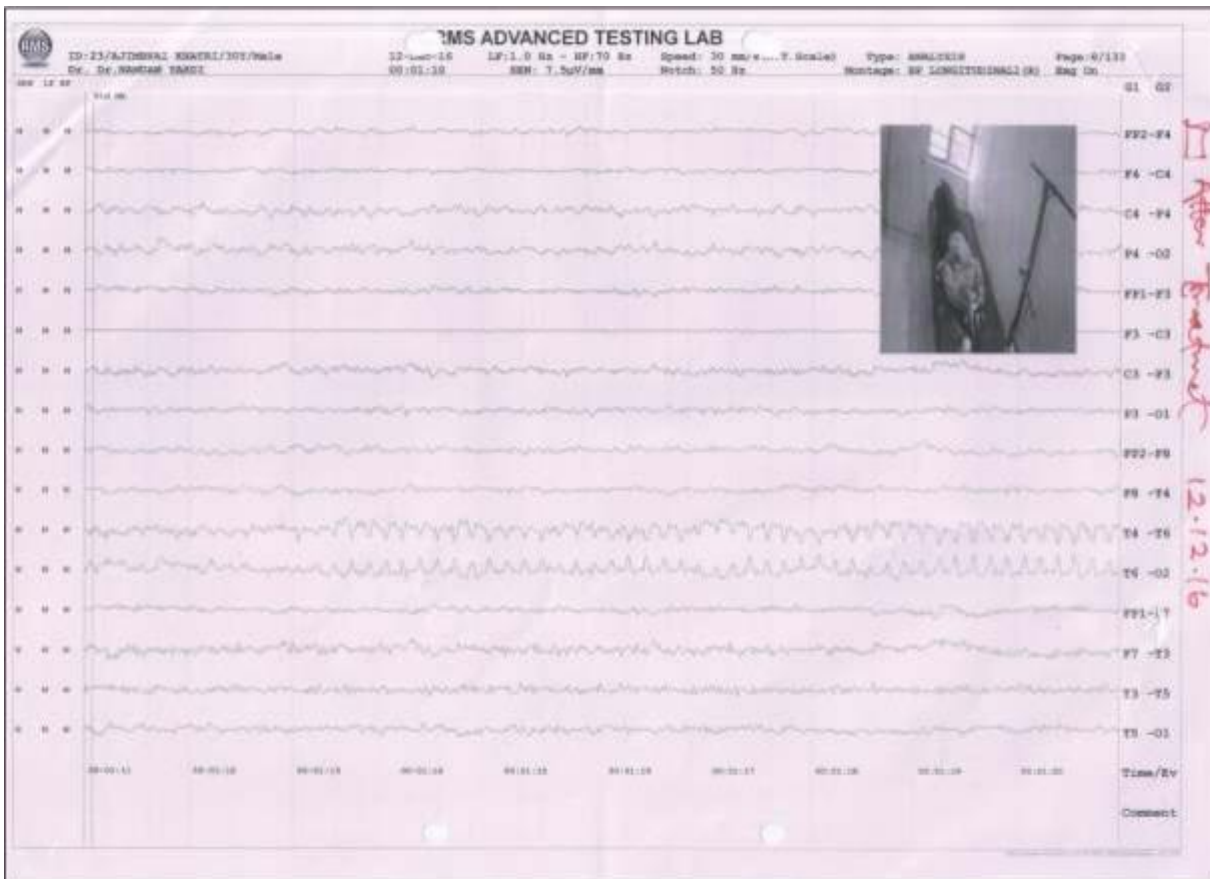


## Case 8



Before G Therapy

Before G Therapy 13.7.2019



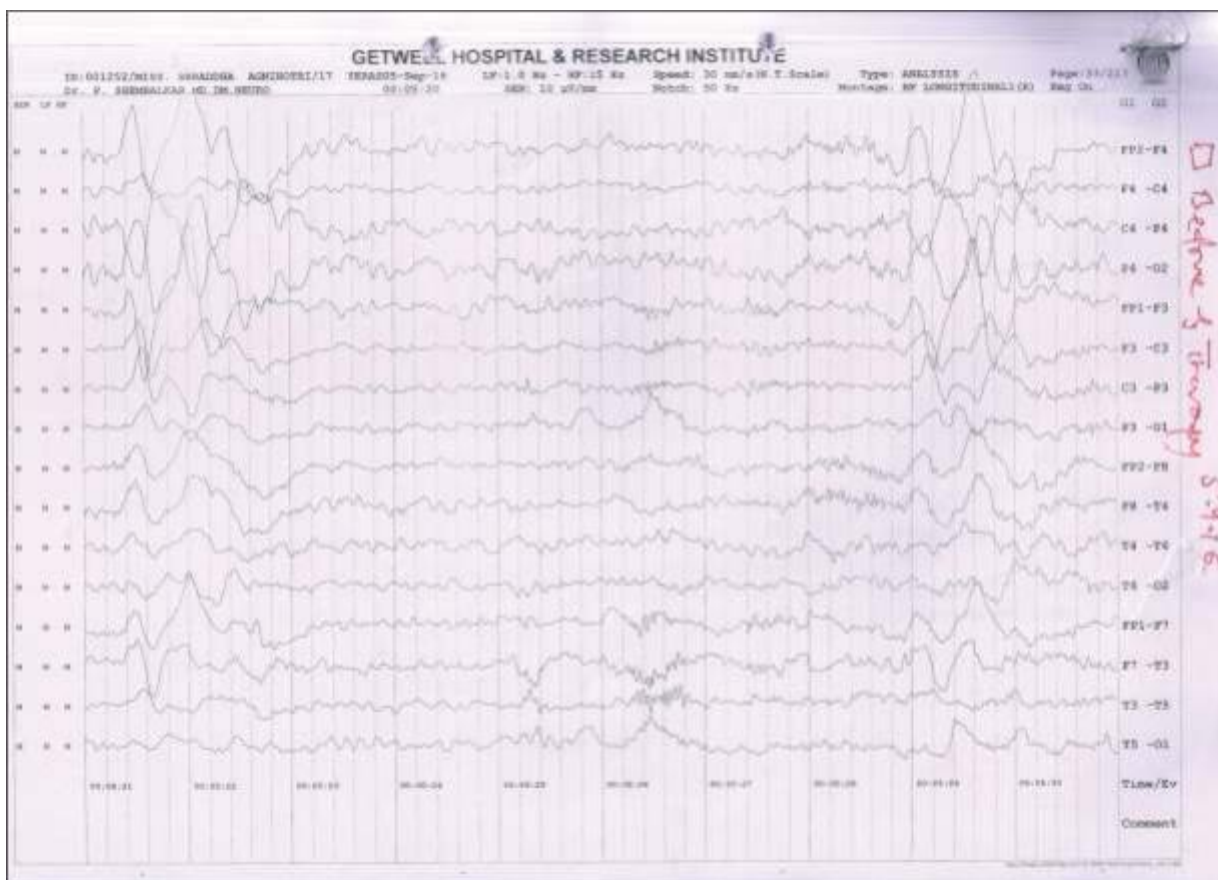
After G Therapy

After G Therapy 12.12.16

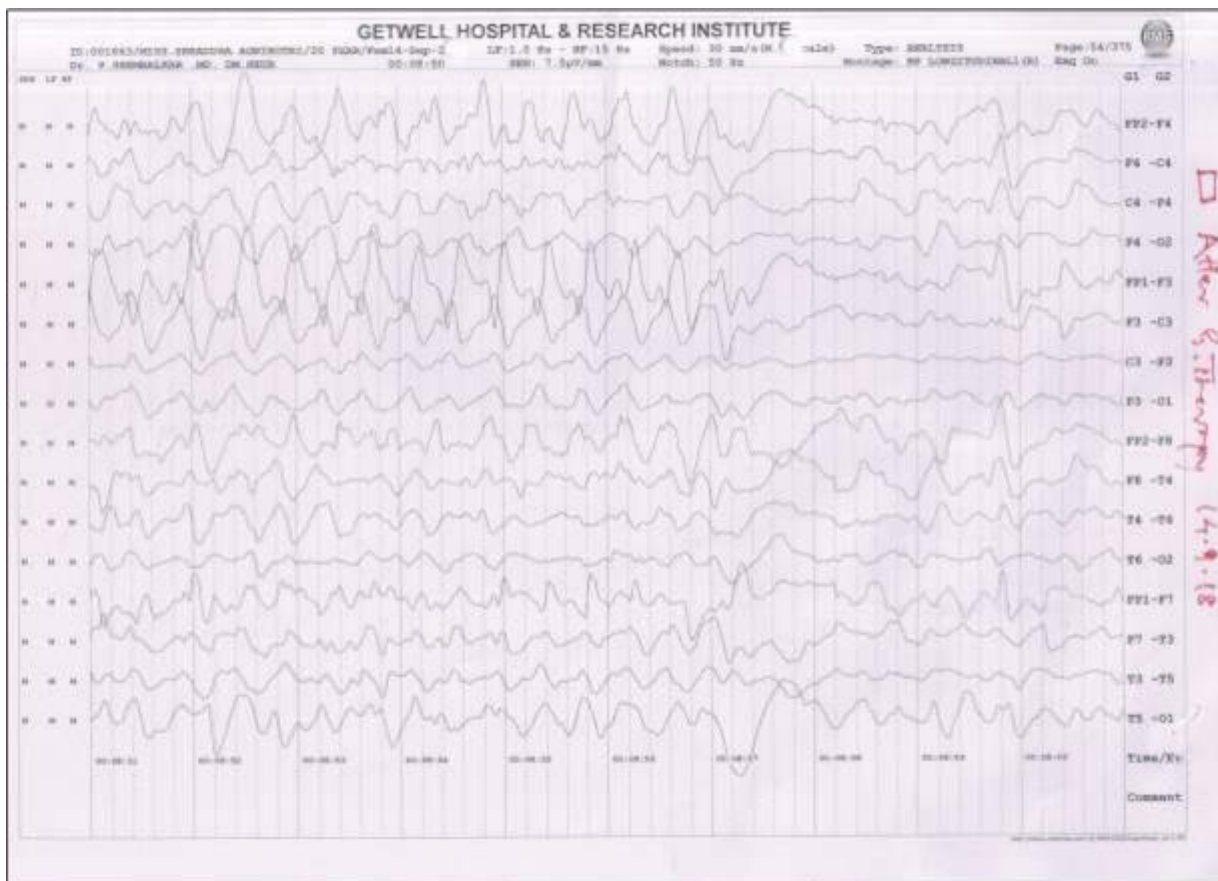


## Case 9

Before  
G Therapy

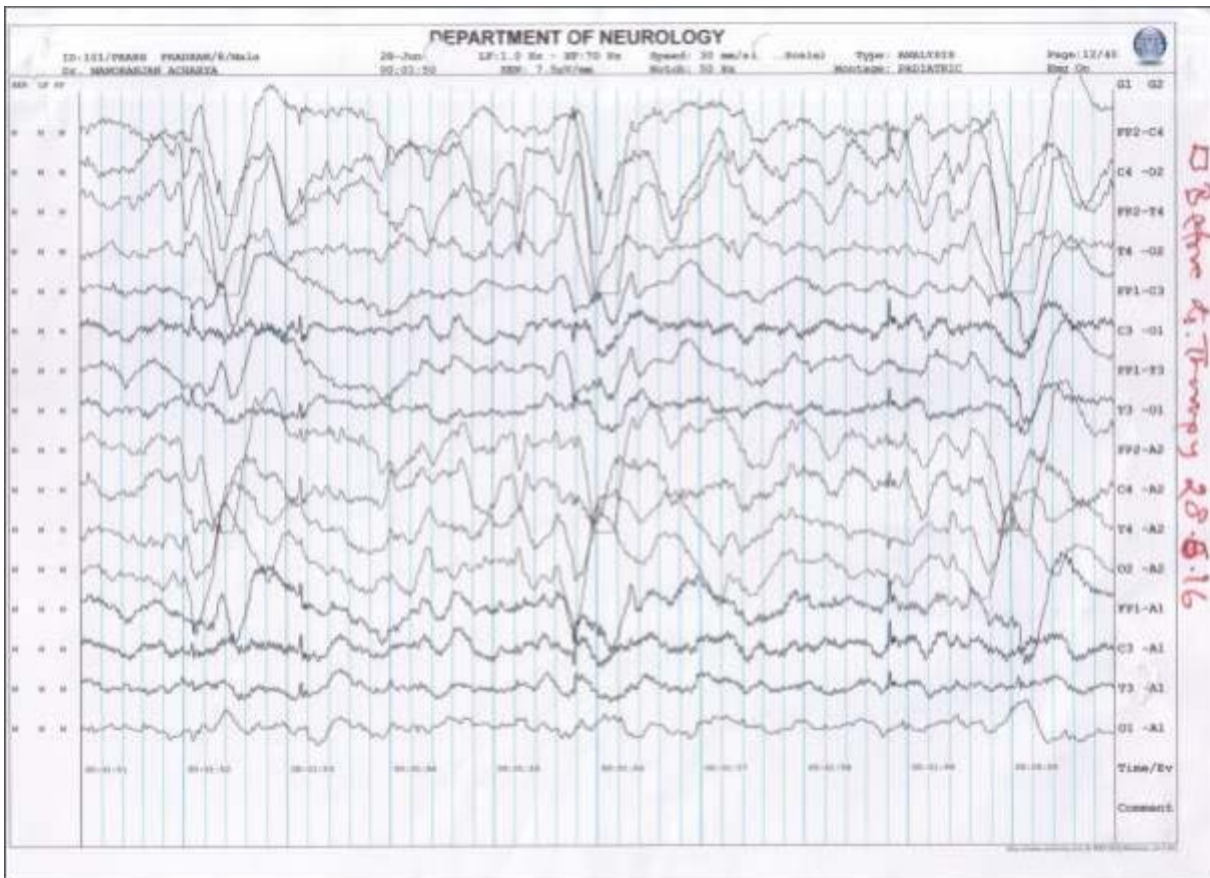


After  
G Therapy

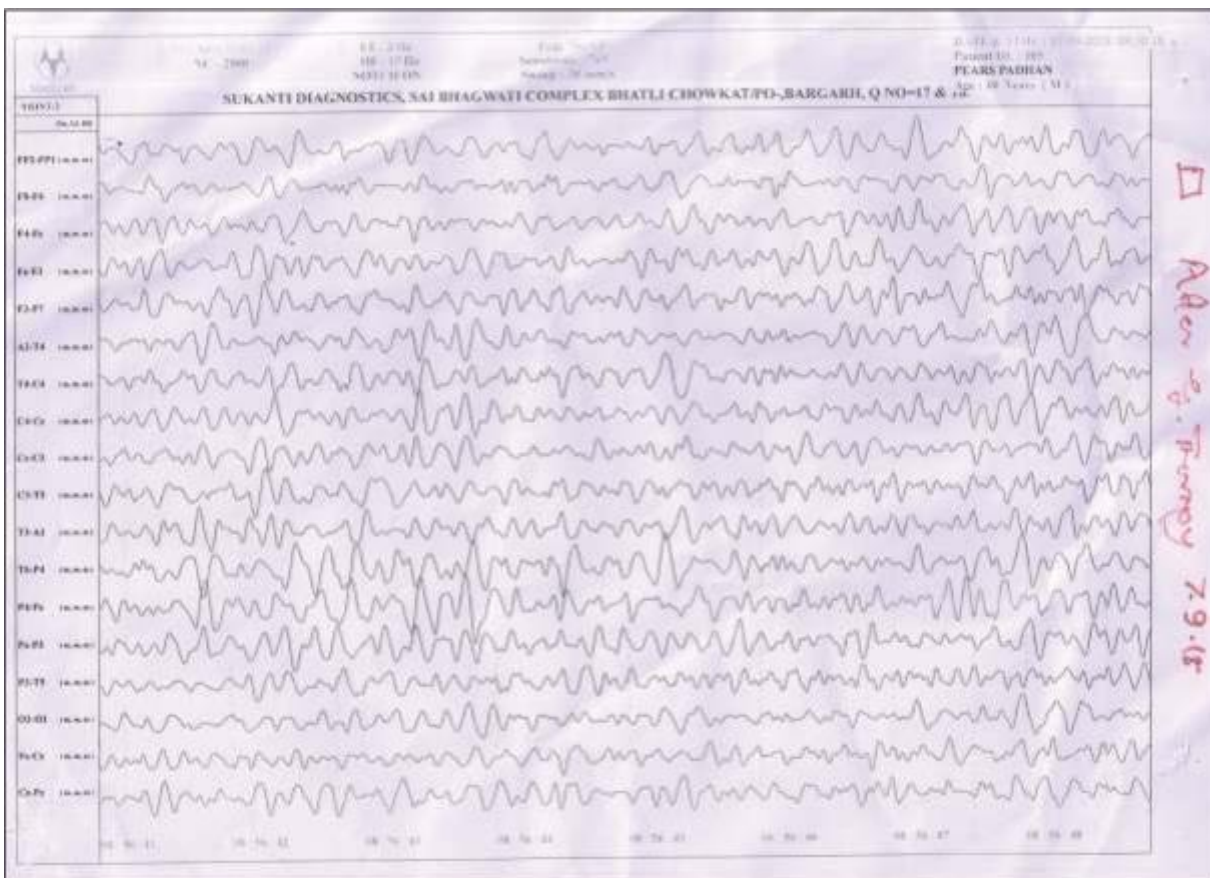




## Case 10



Before  
G Therapy

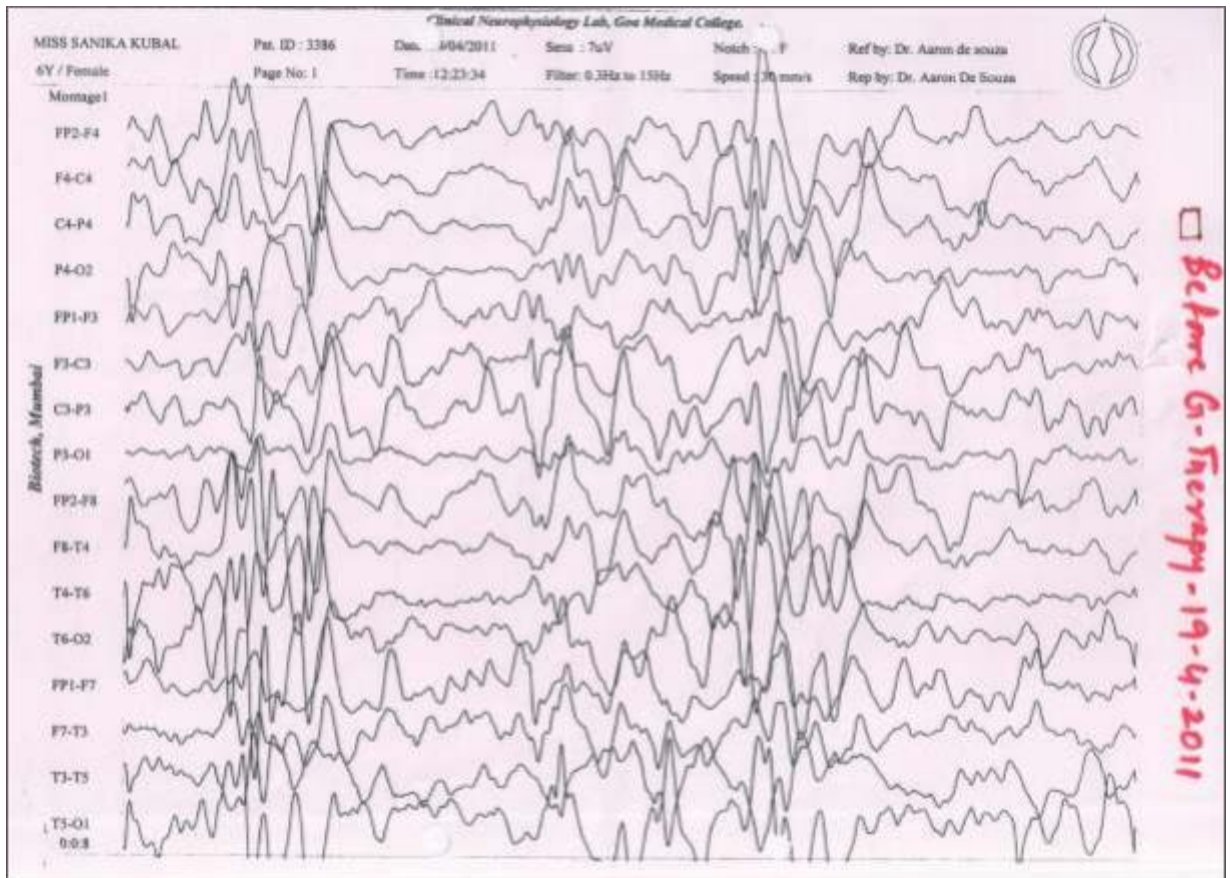


After  
G Therapy

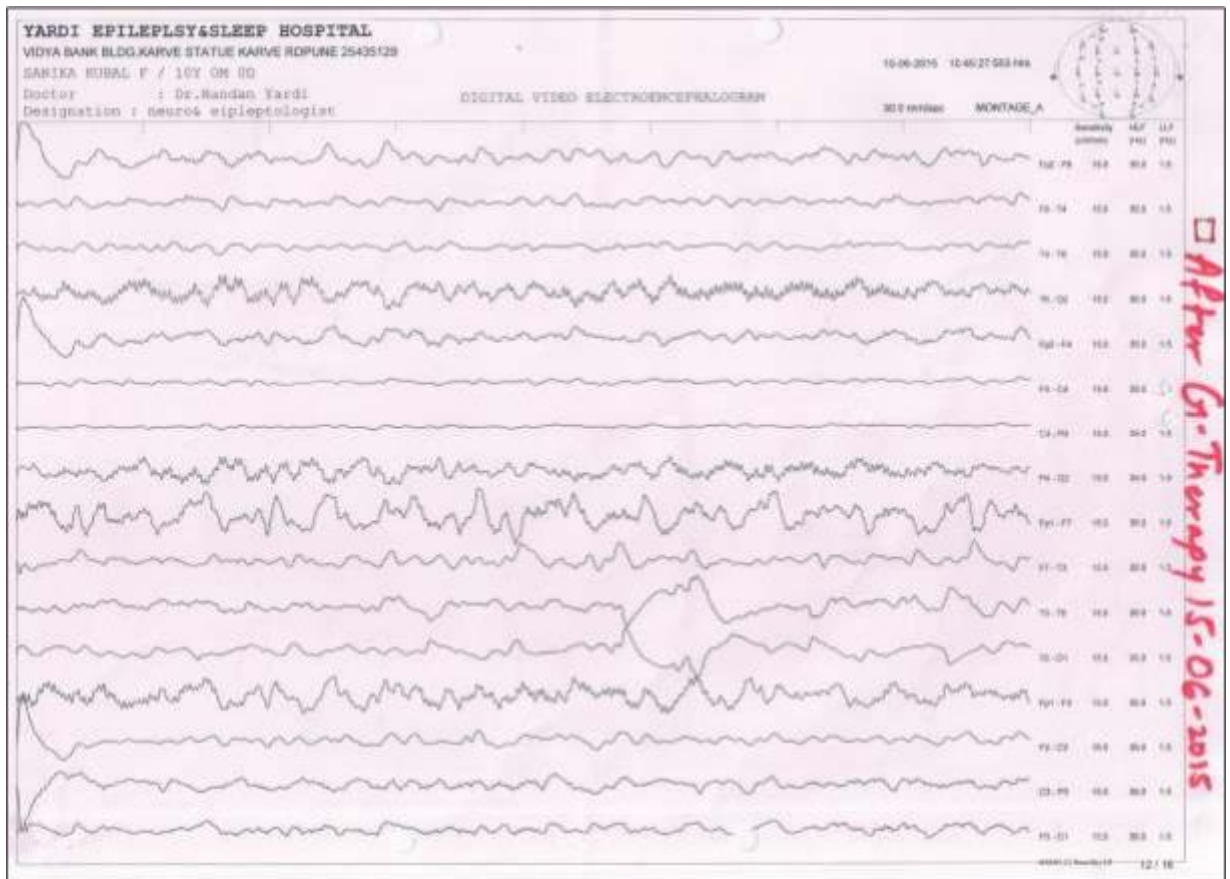


# Case 11

Before  
G Therapy

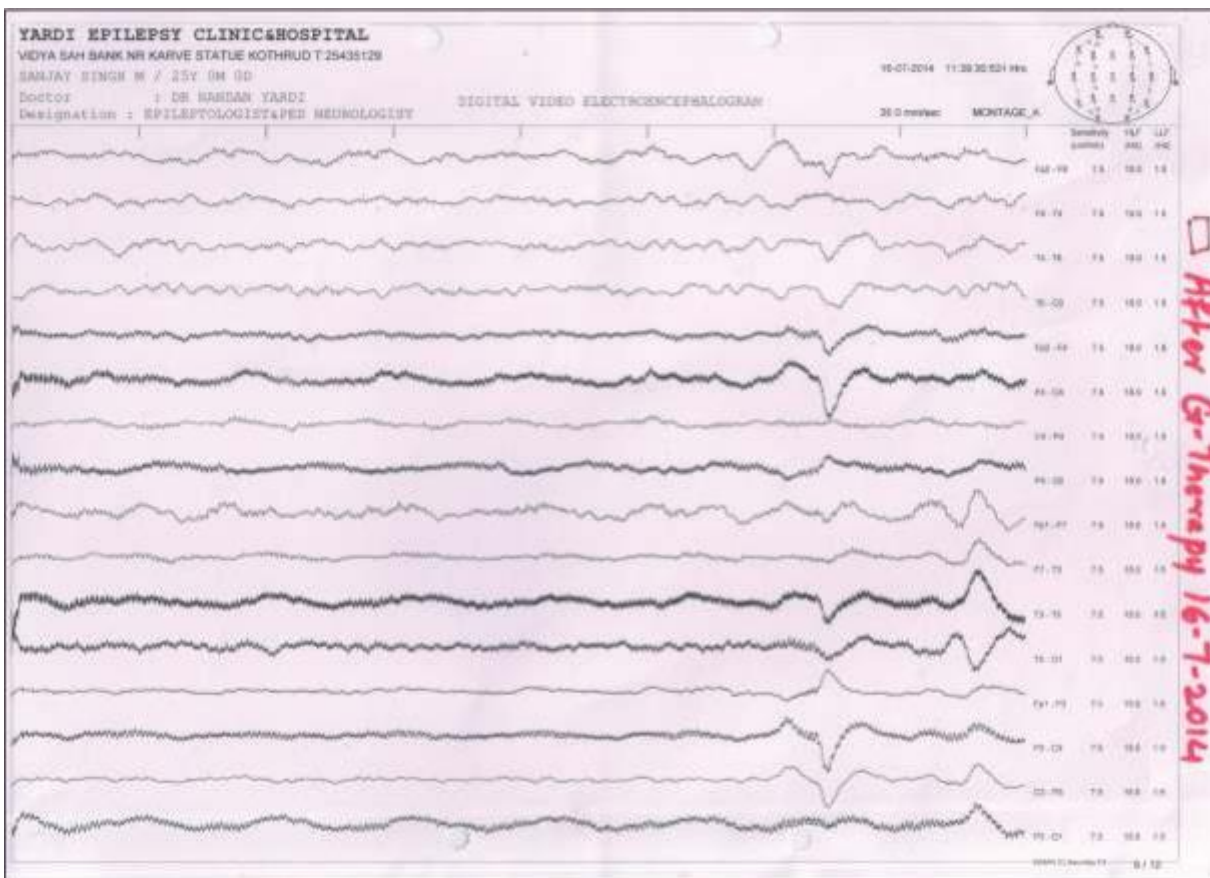


After  
G Therapy





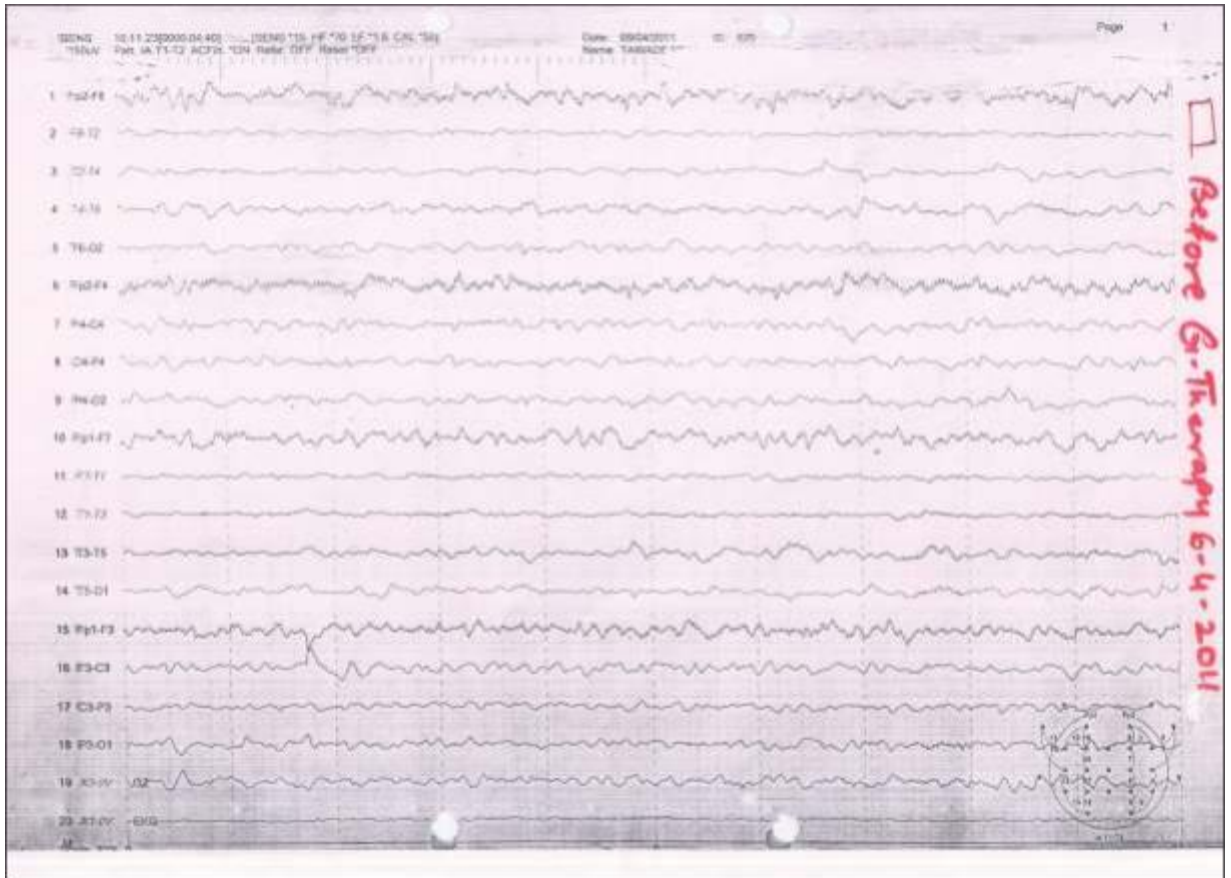
## Case 12





# Case 13

Before  
G Therapy

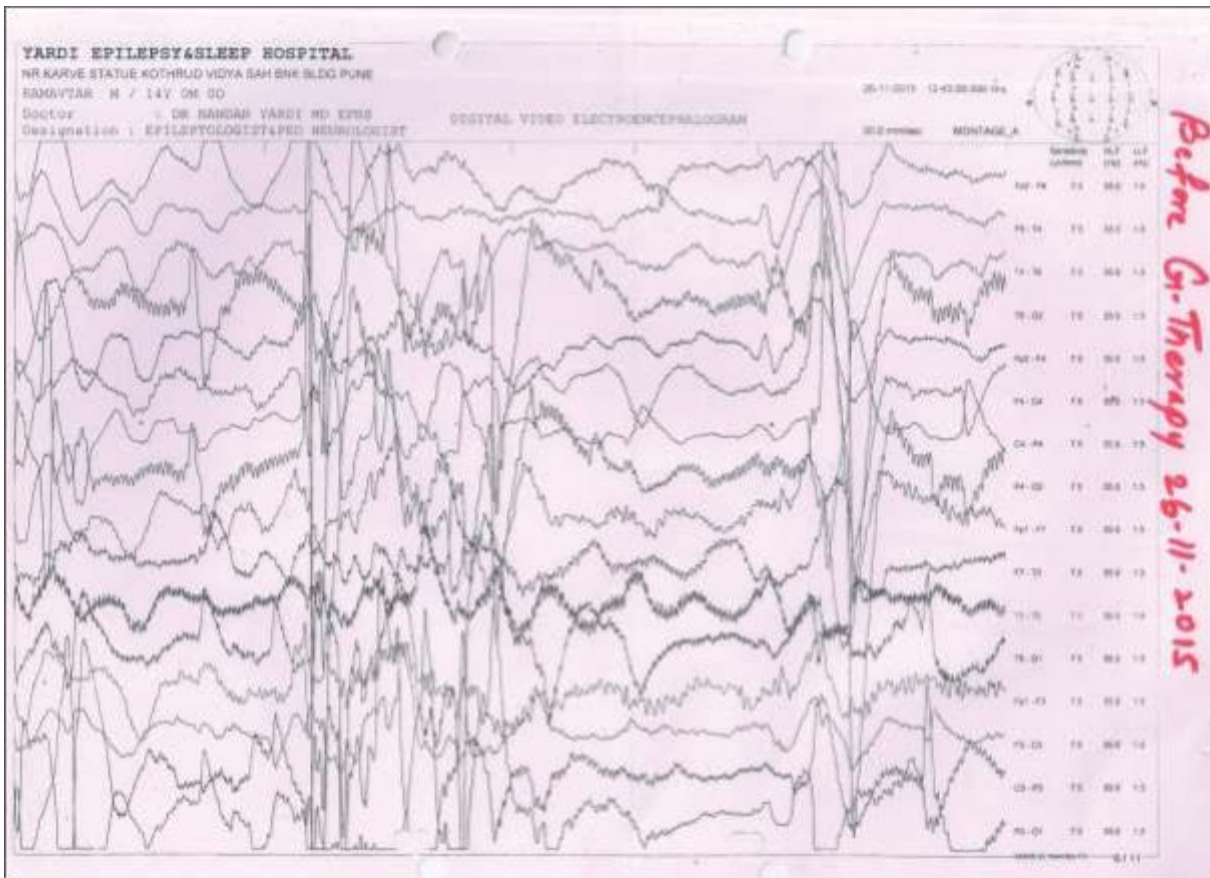


After  
G Therapy

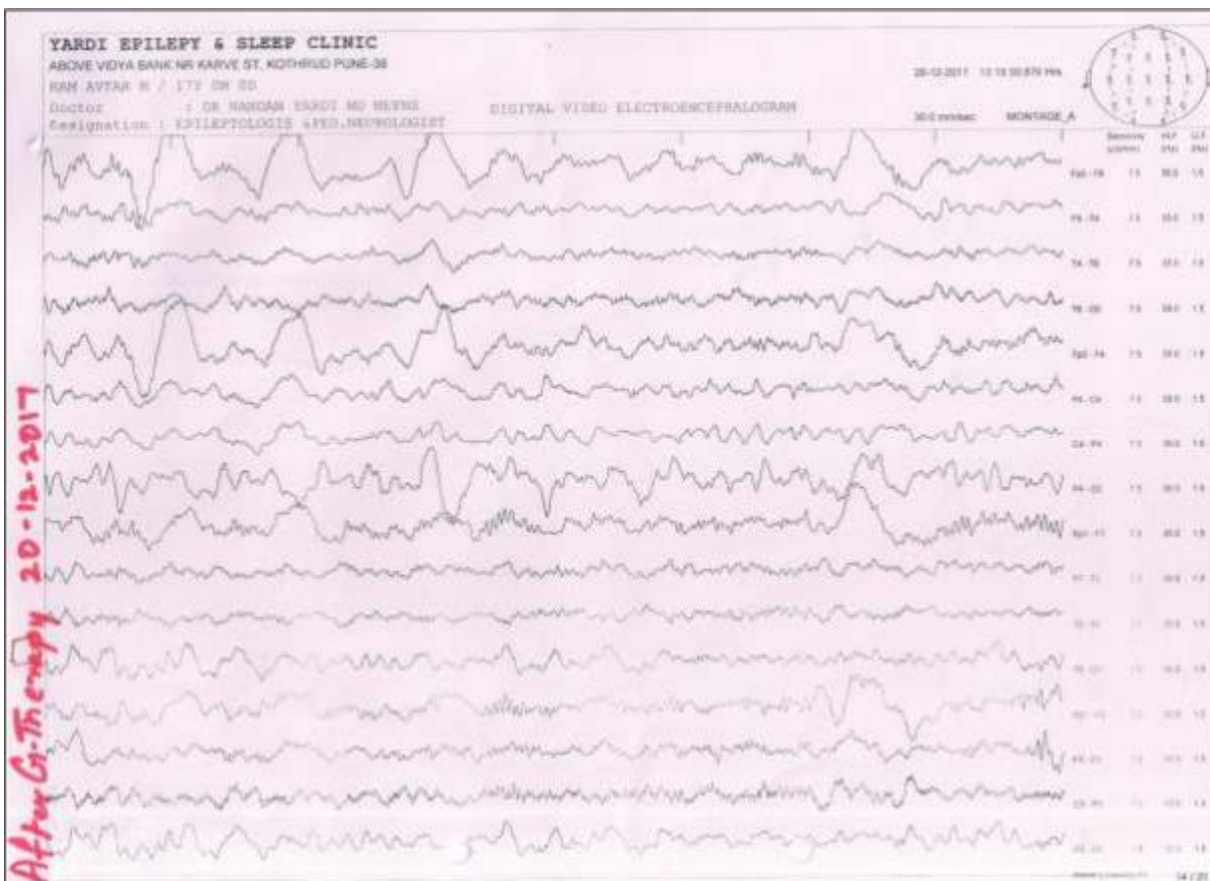




## Case 14



Before  
G Therapy



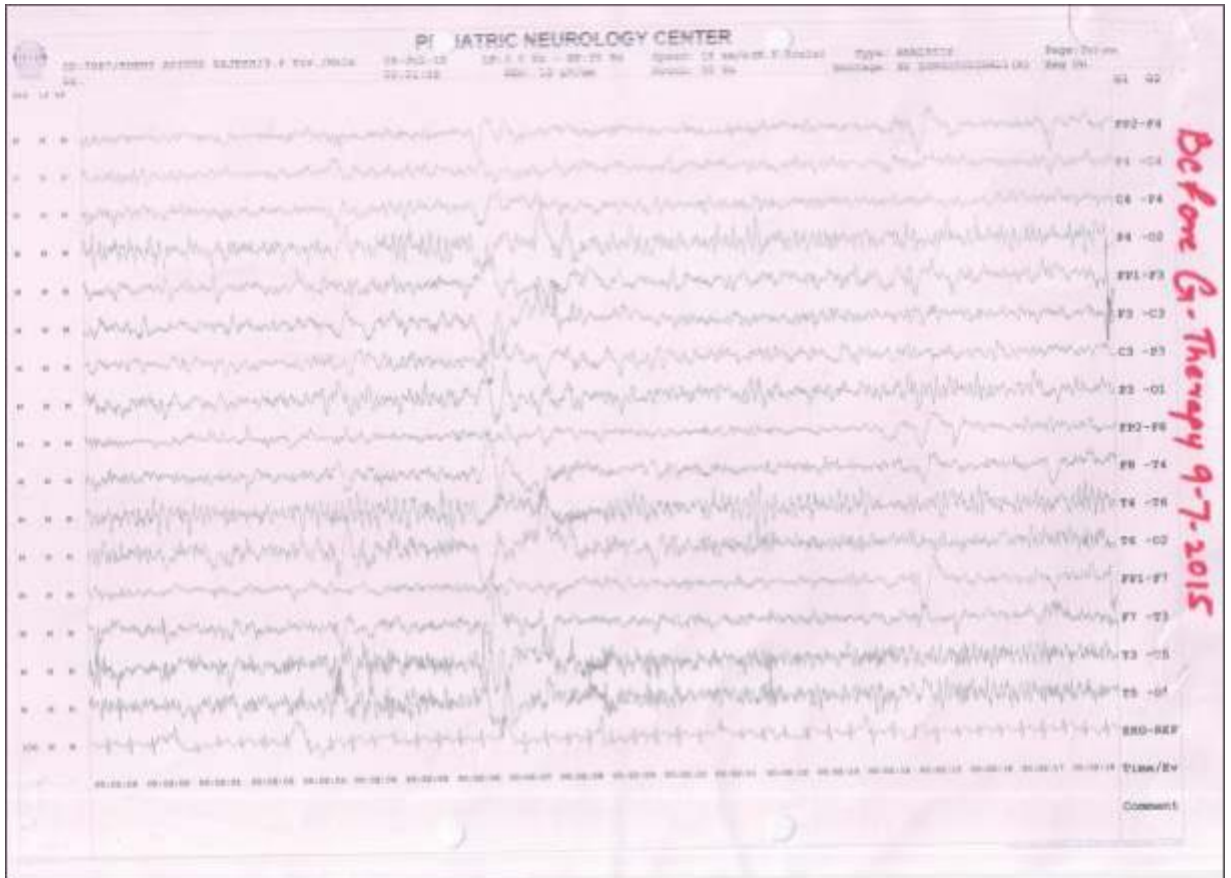
After  
G Therapy





## Case 15

Before  
G Therapy

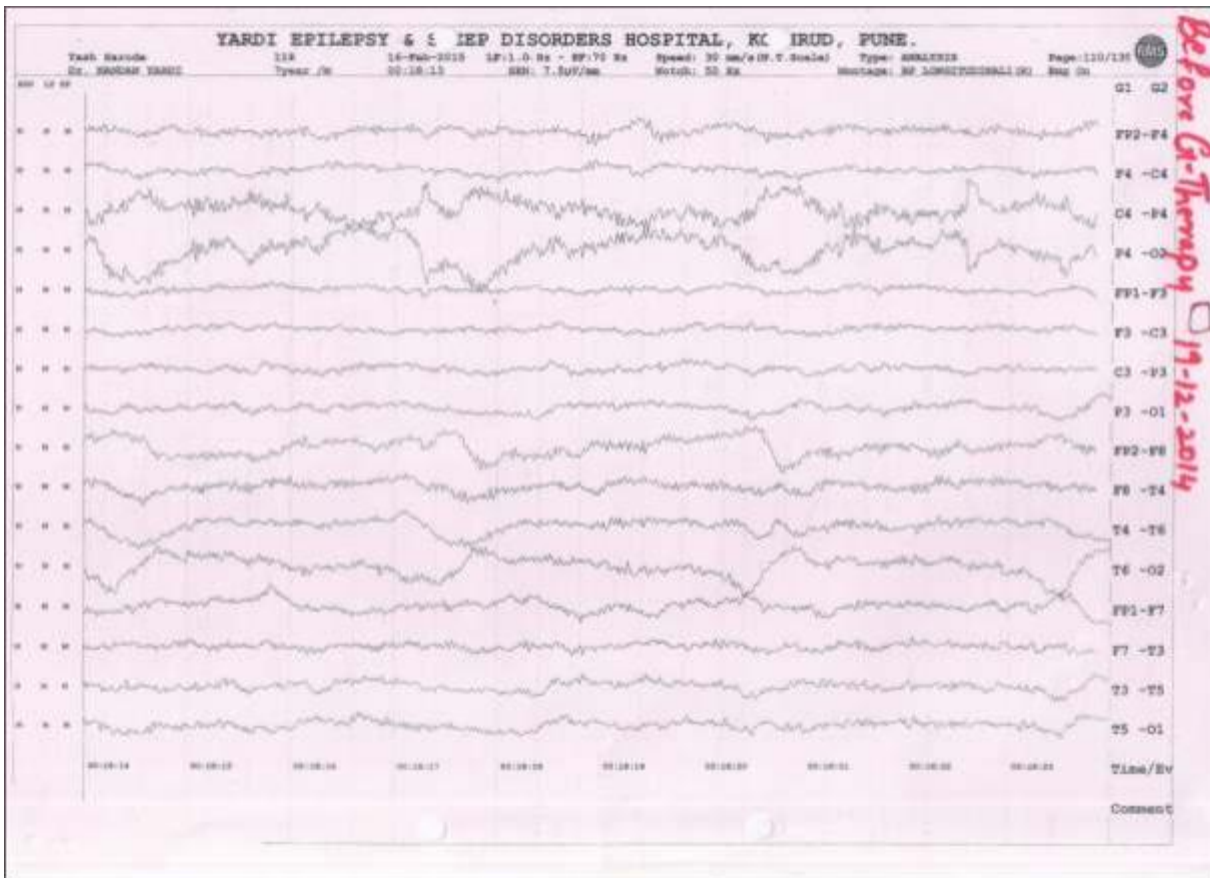


After  
G Therapy

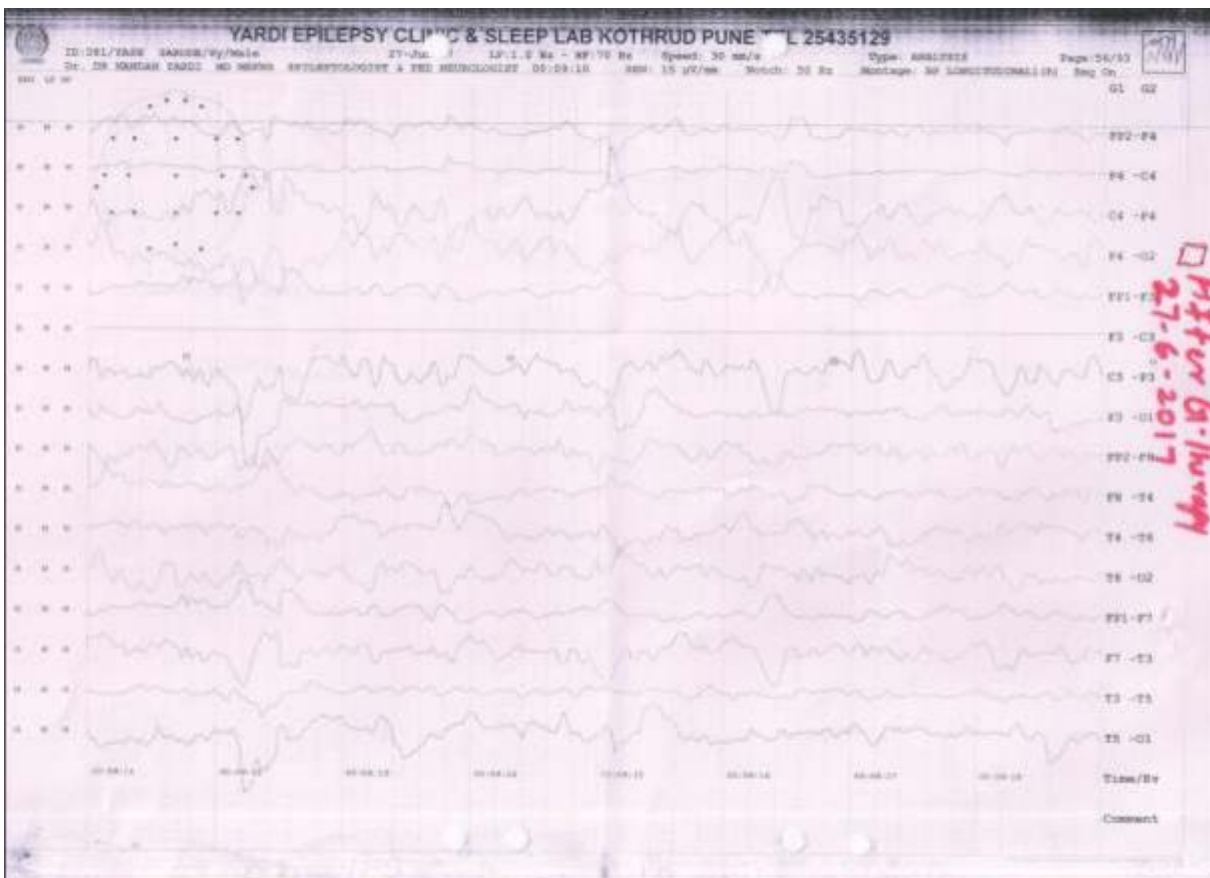




## Case 16



Before  
G Therapy

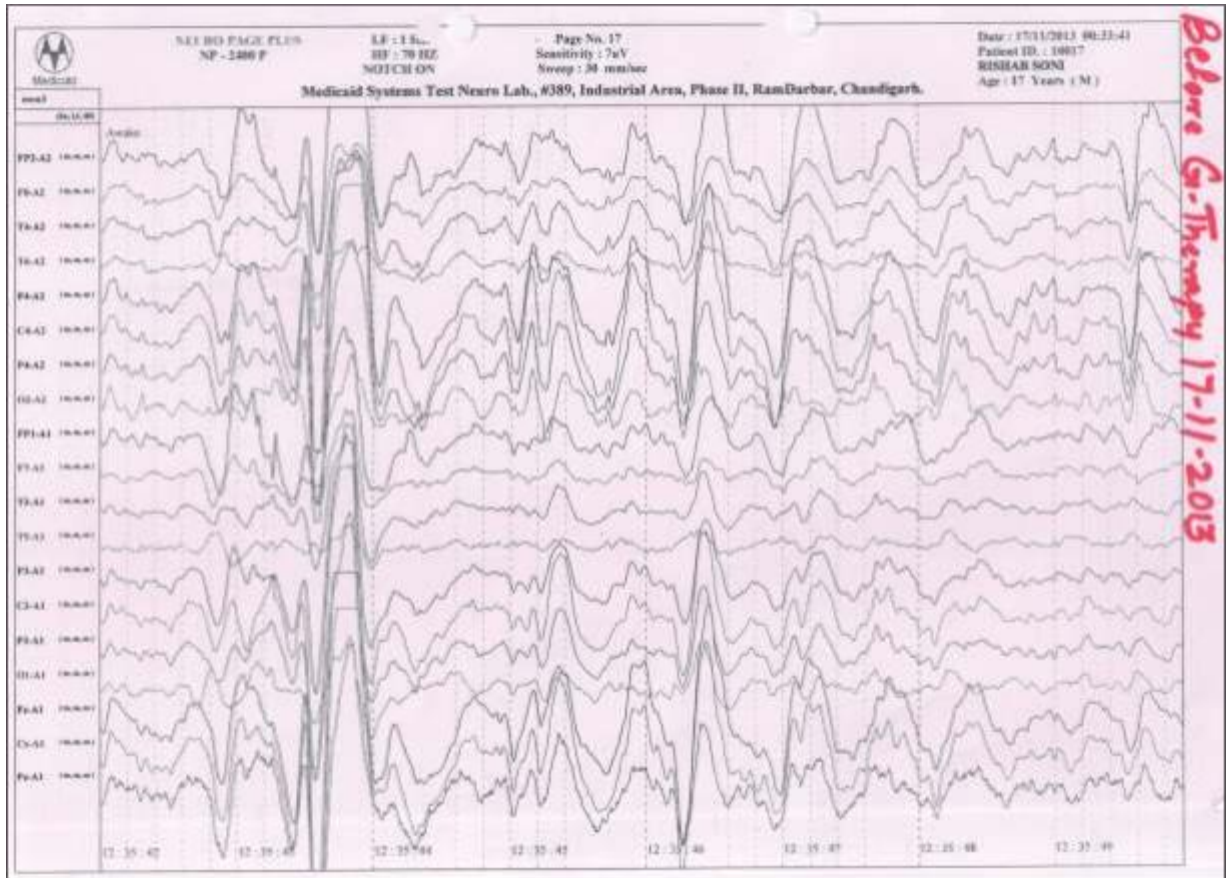


After  
G Therapy

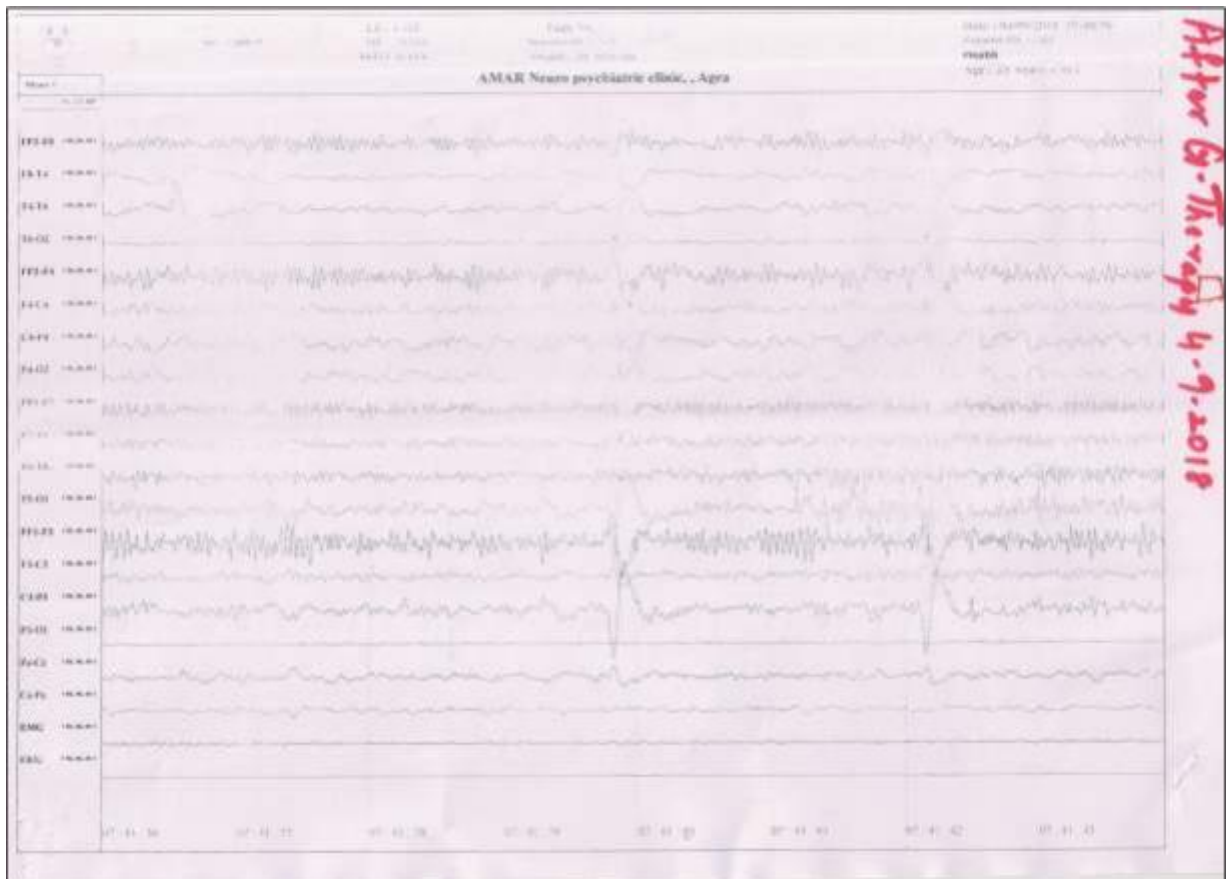


## Case 17

Before  
G Therapy

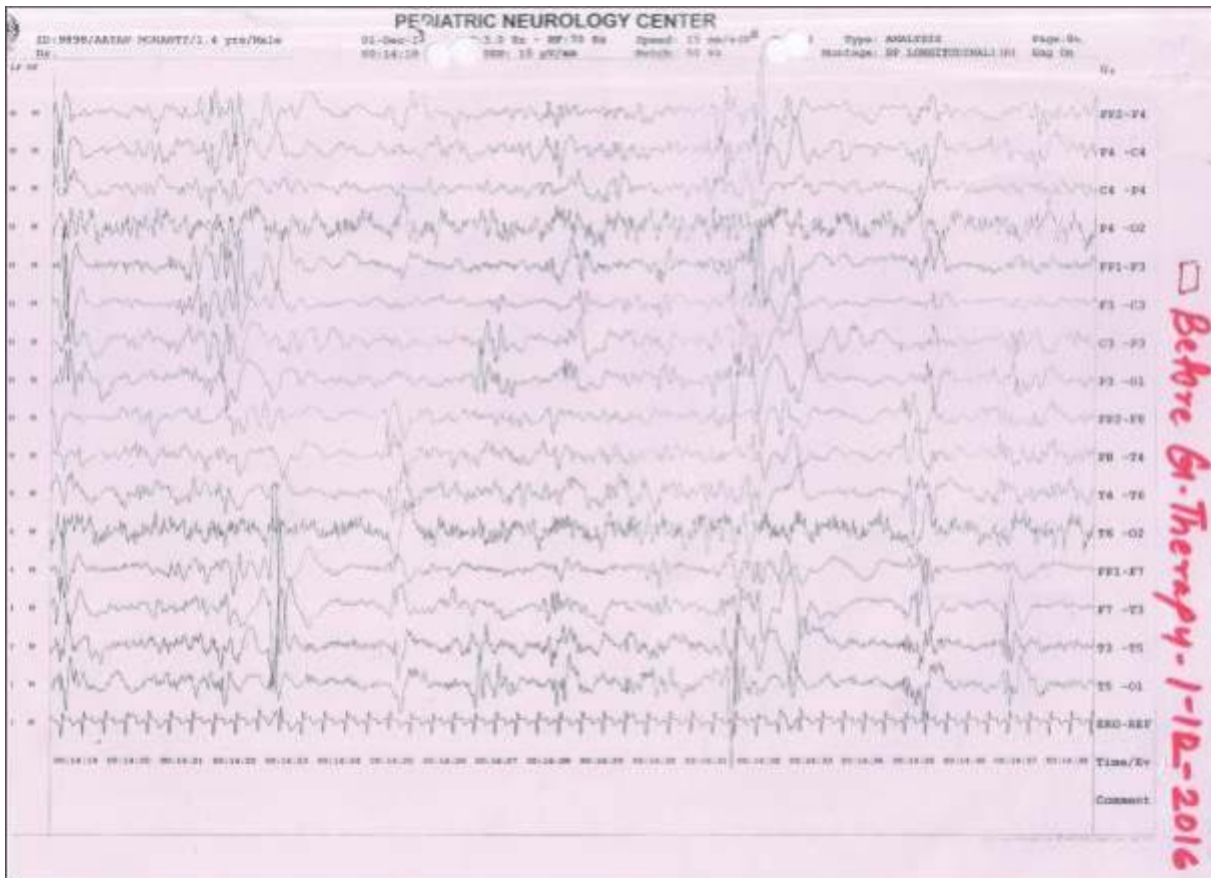


After  
G Therapy

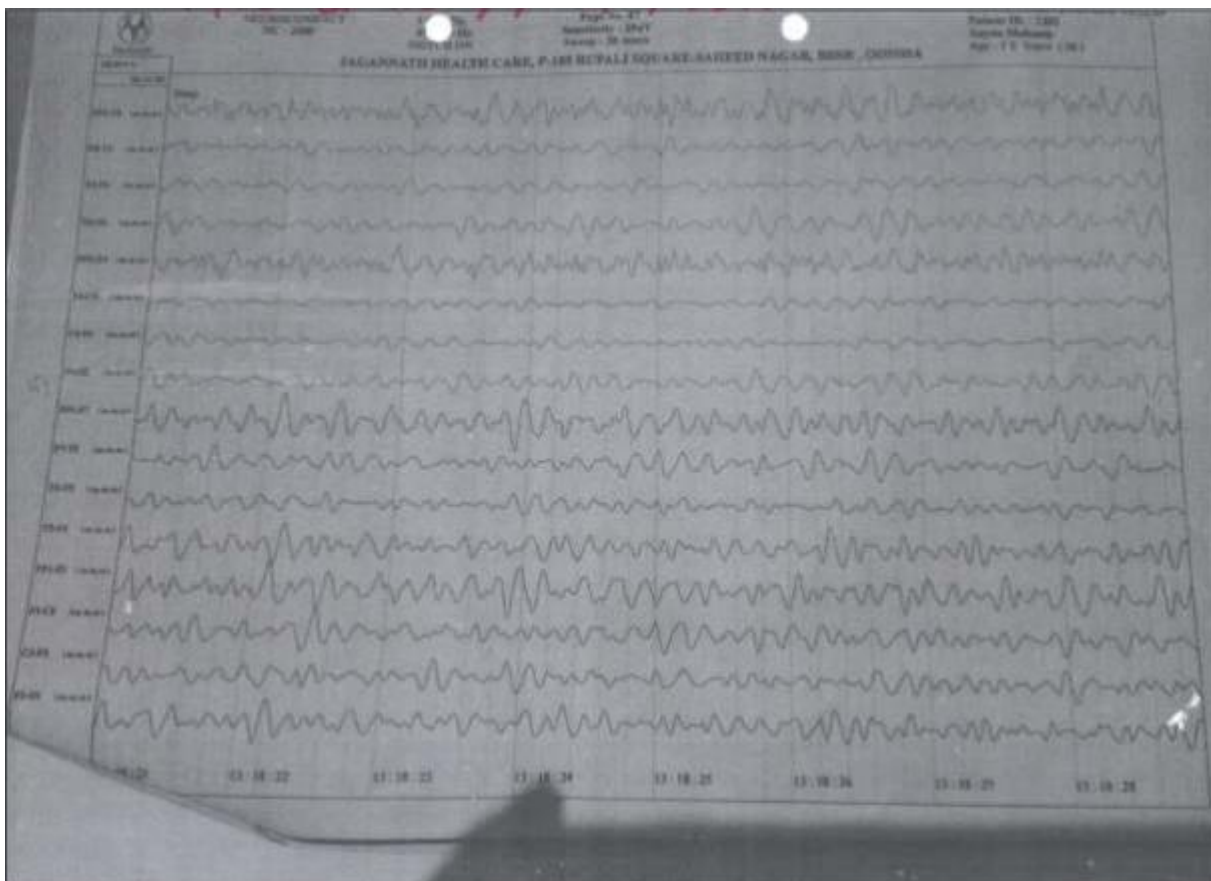




## Case 18



Before  
G Therapy

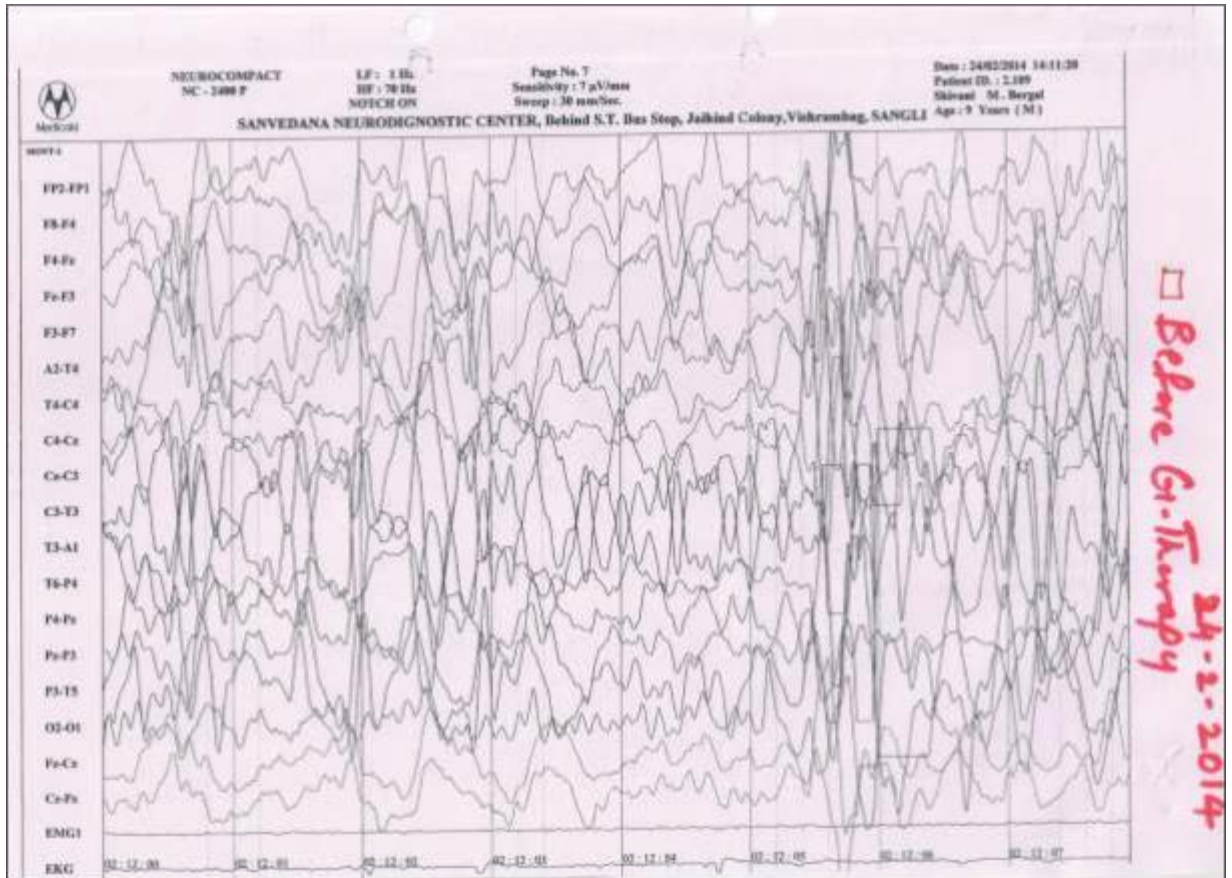


After  
G Therapy

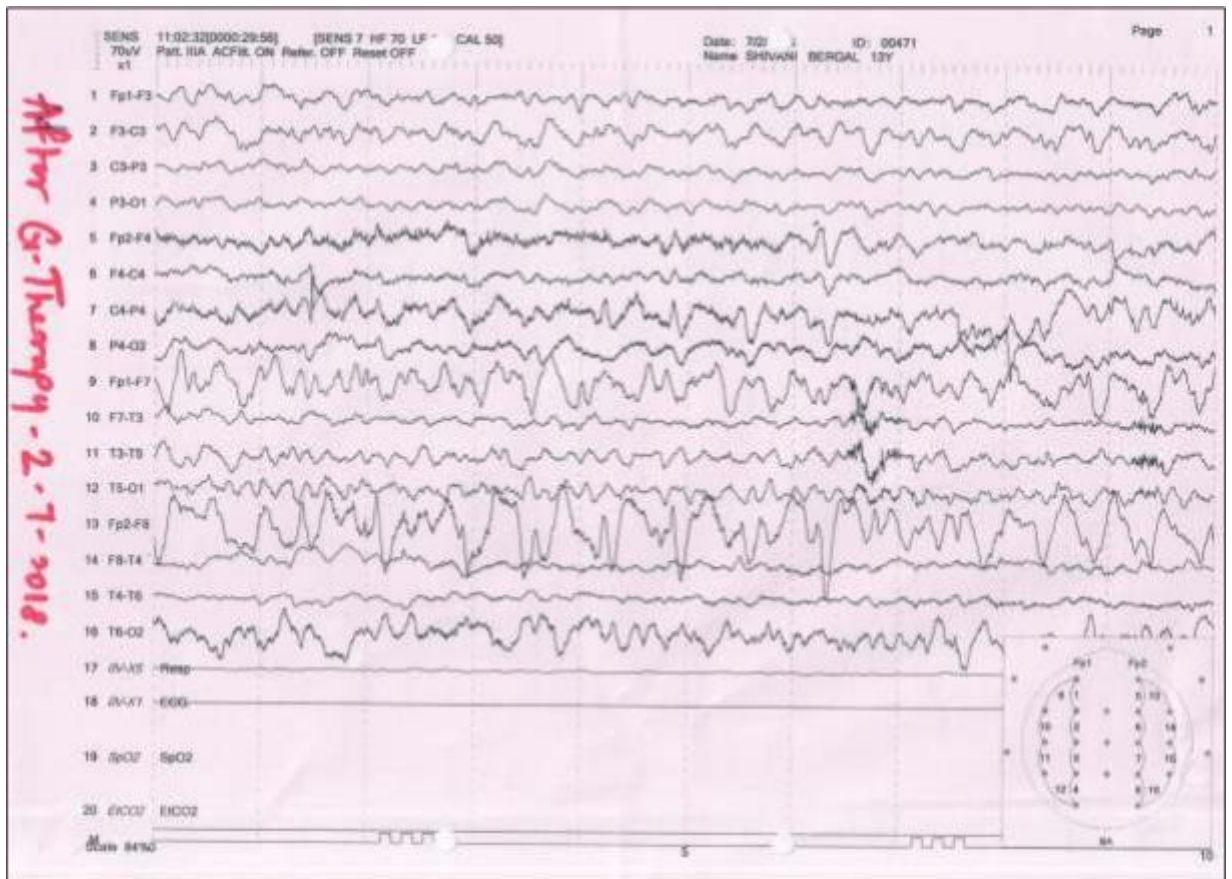


# Case 19

Before  
G Therapy

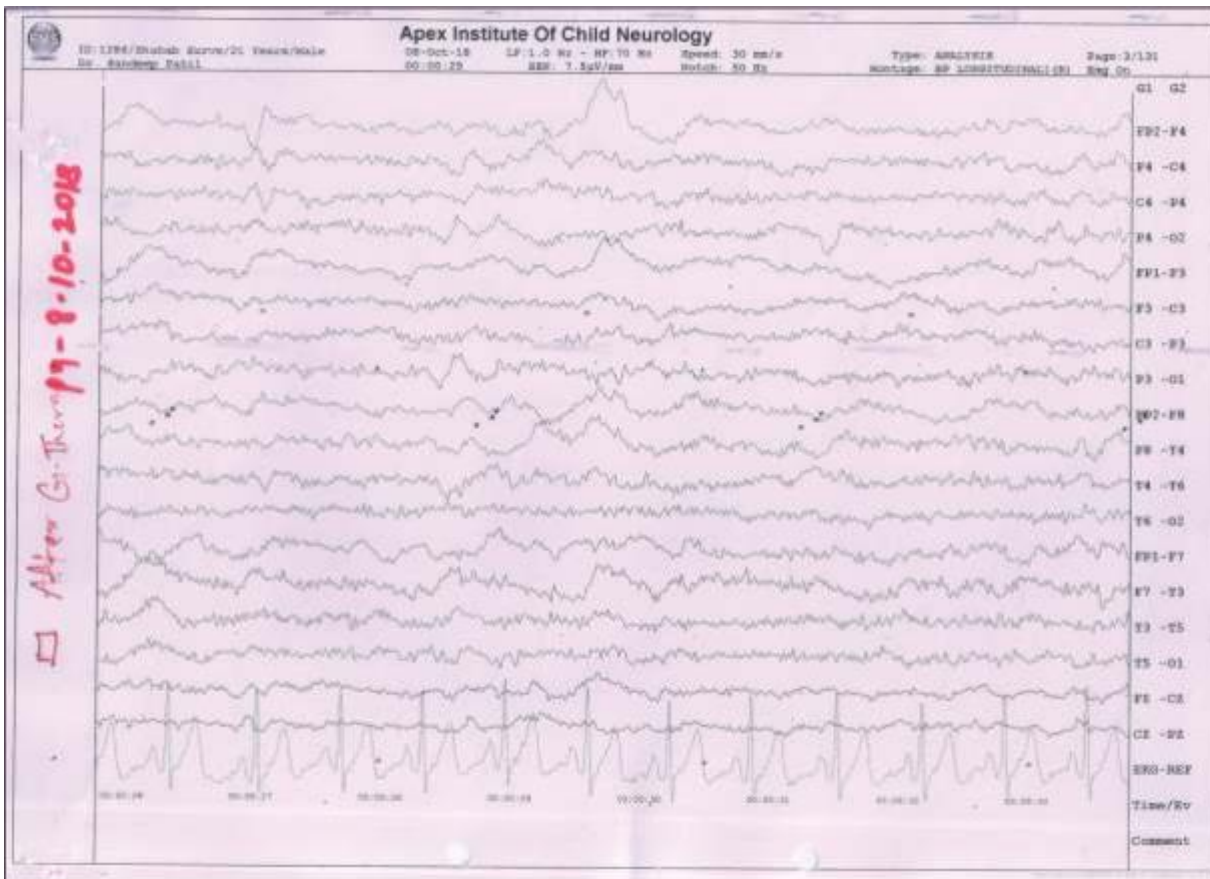
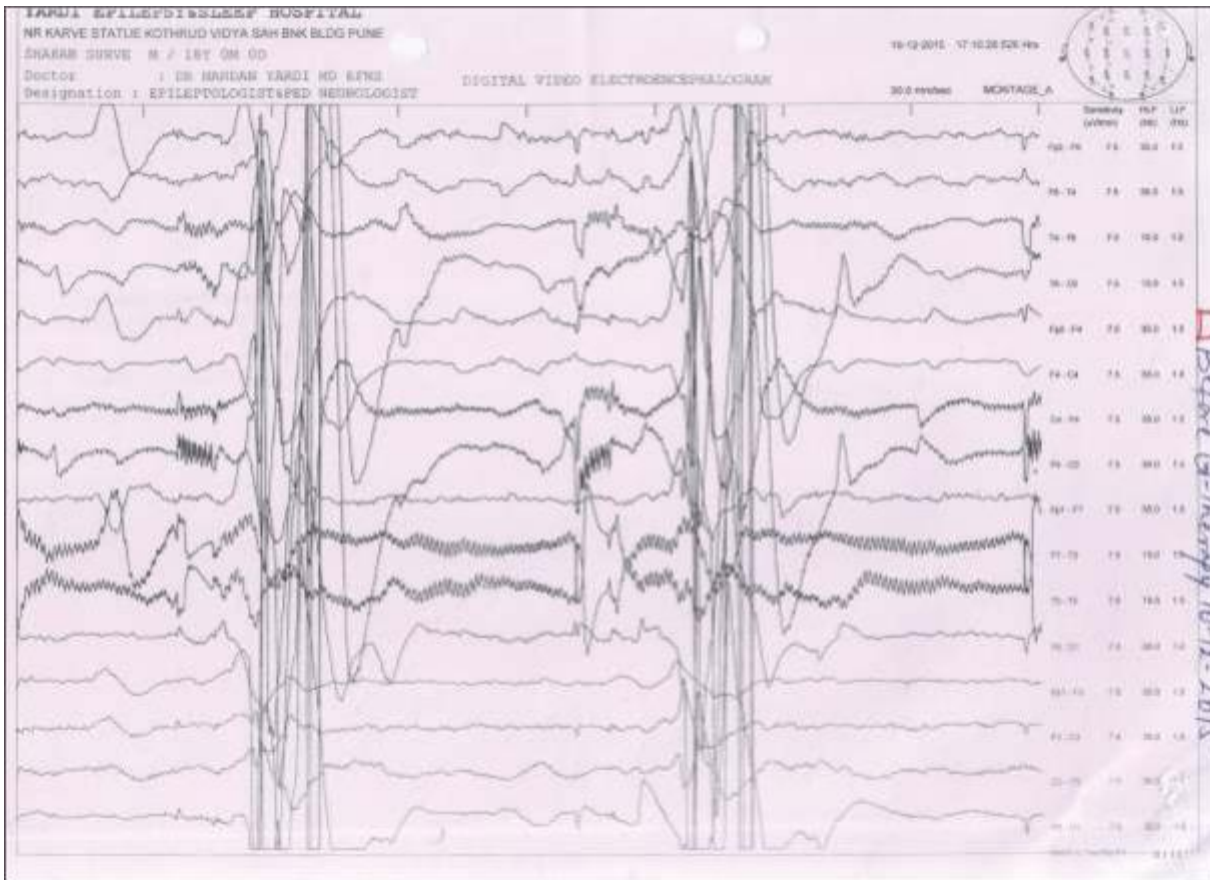


After  
G Therapy





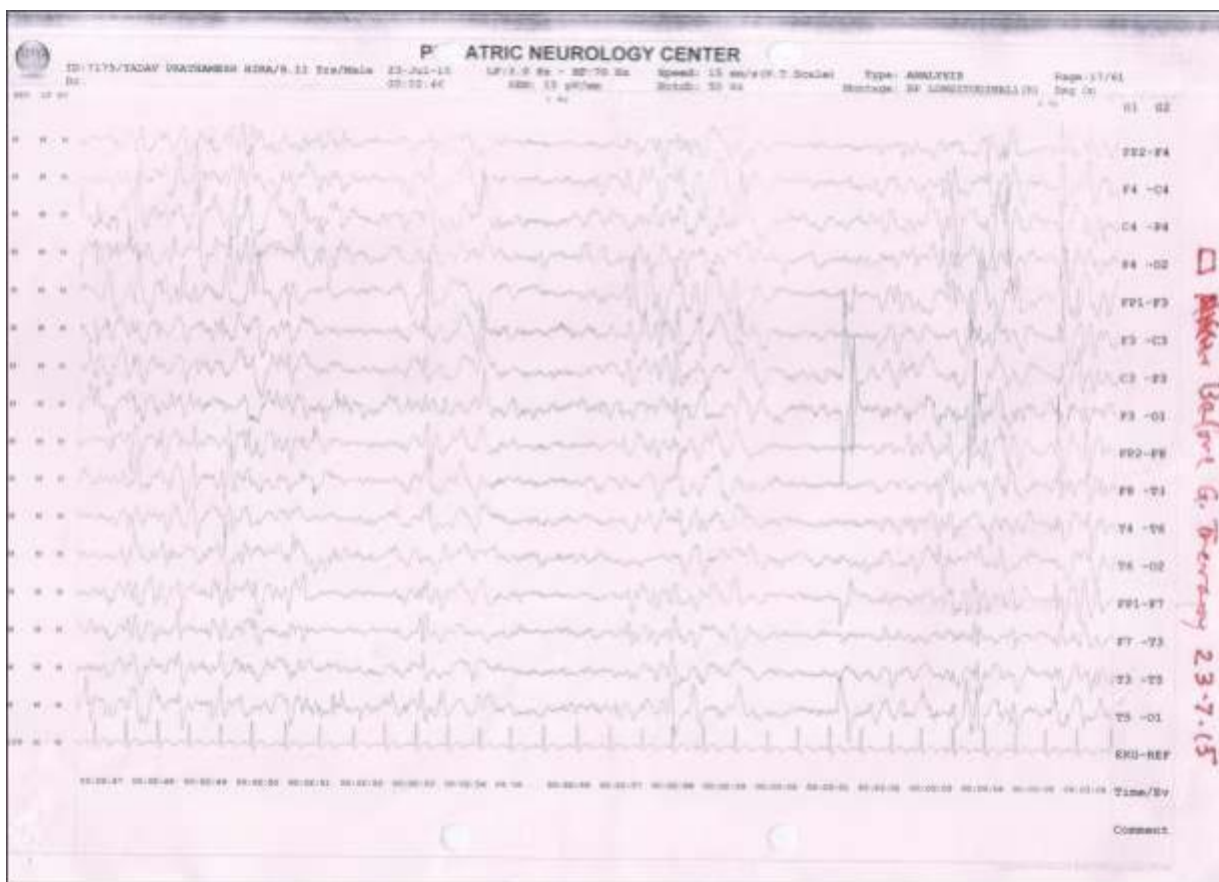
## Case 20



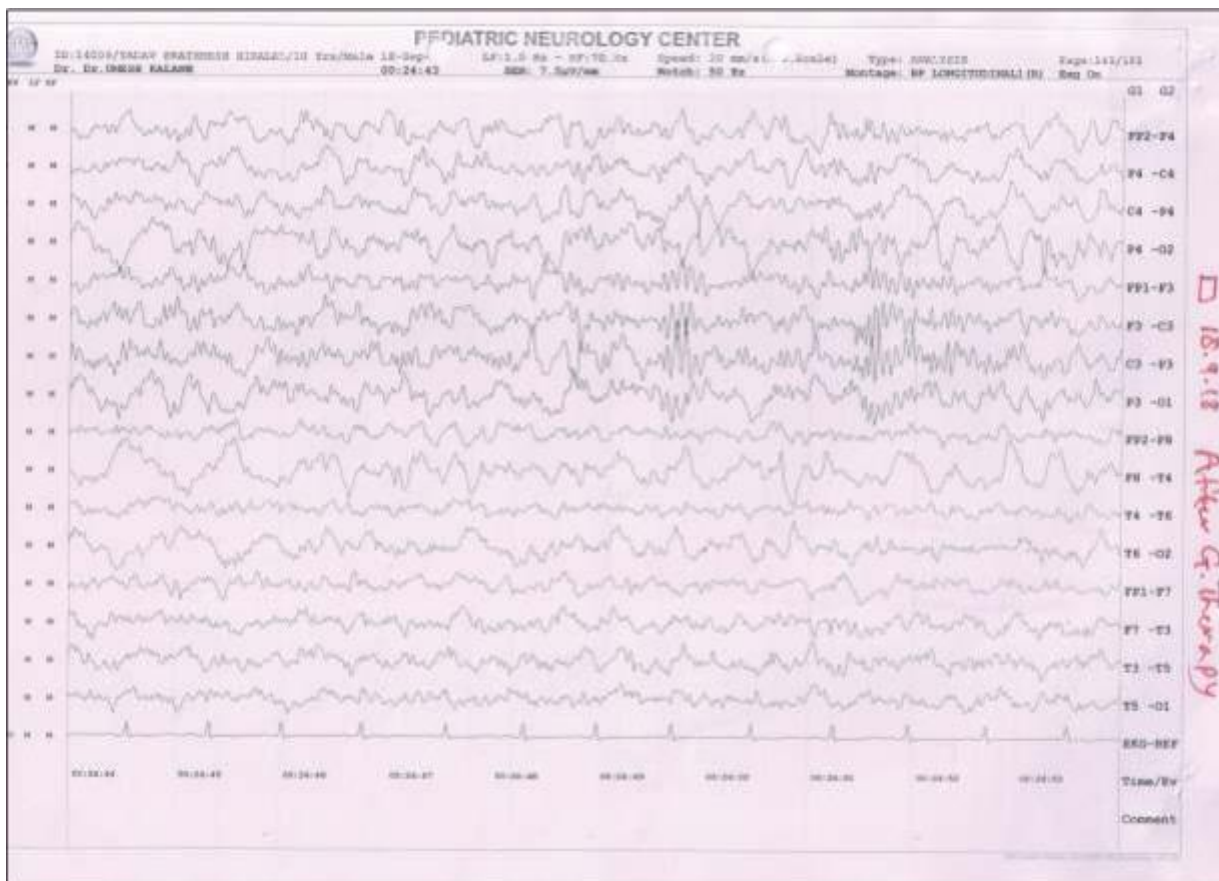


## Case 21

Before  
G Therapy



After  
G Therapy

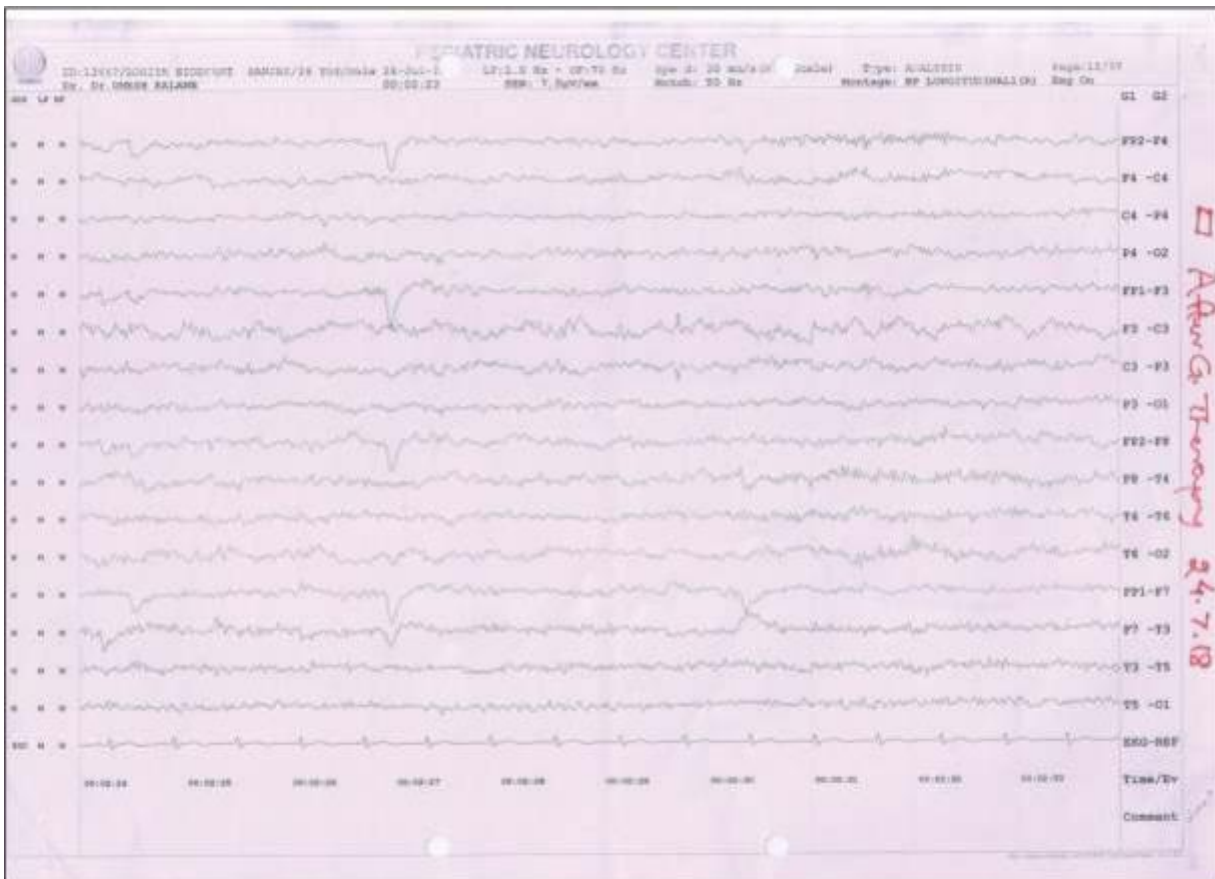




## Case 22



Before  
G Therapy



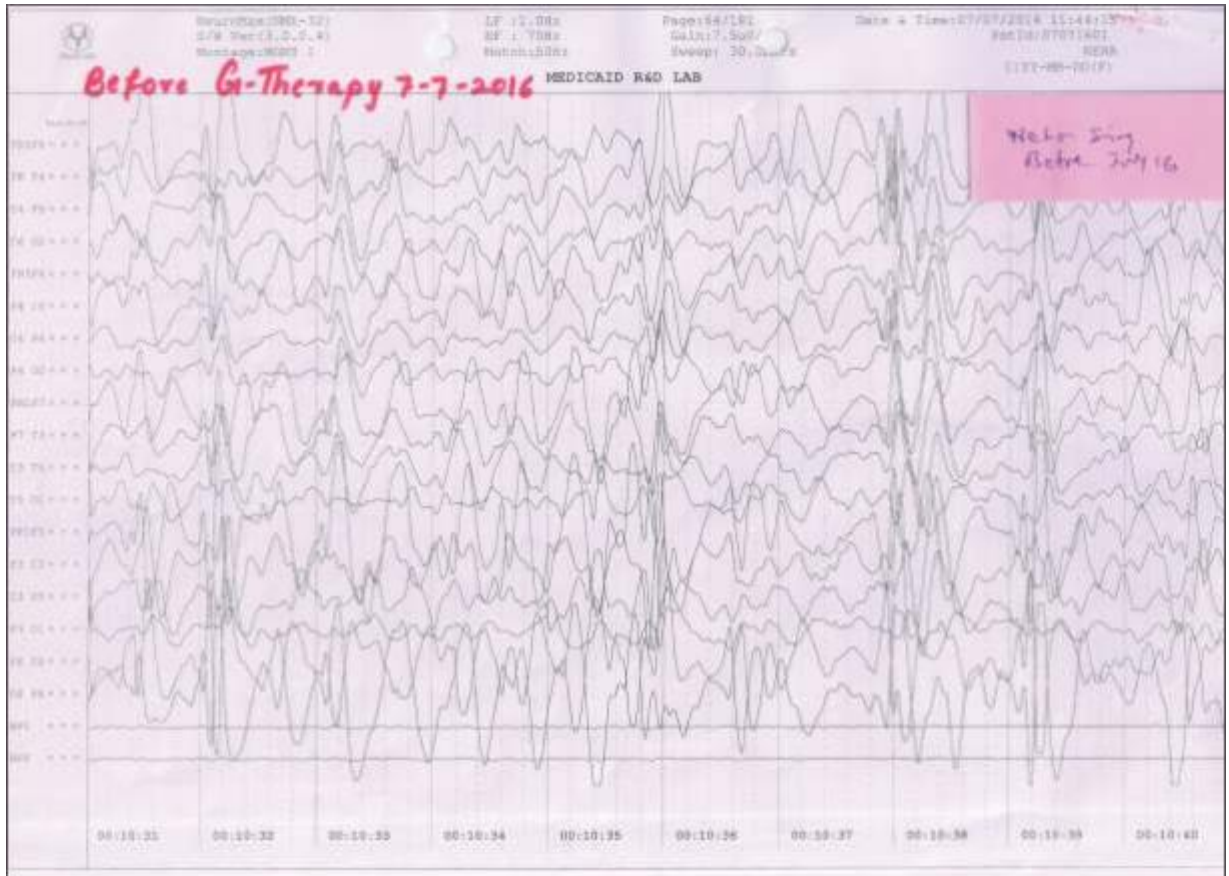
After  
G Therapy





## Case 23

Before  
G Therapy

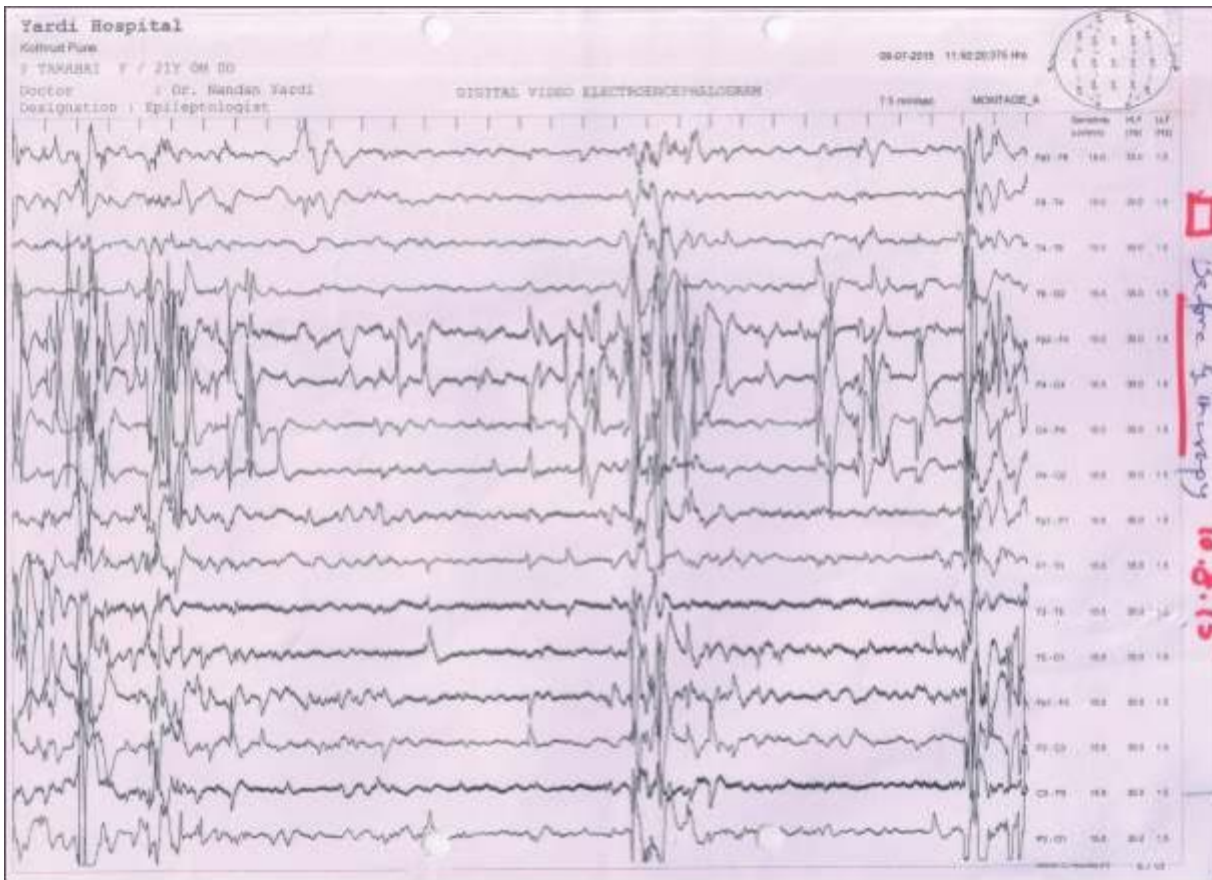


After  
G Therapy

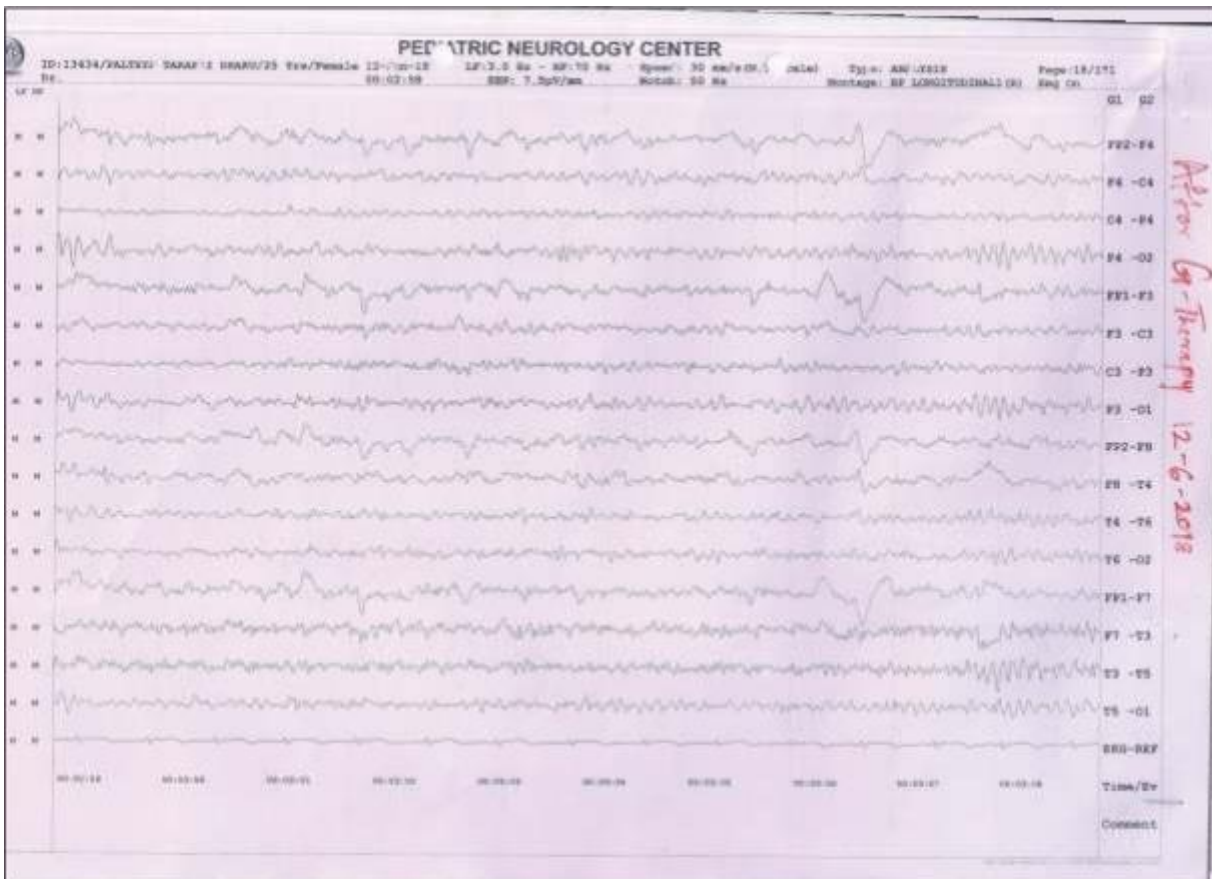




## Case 24



Before  
G Therapy

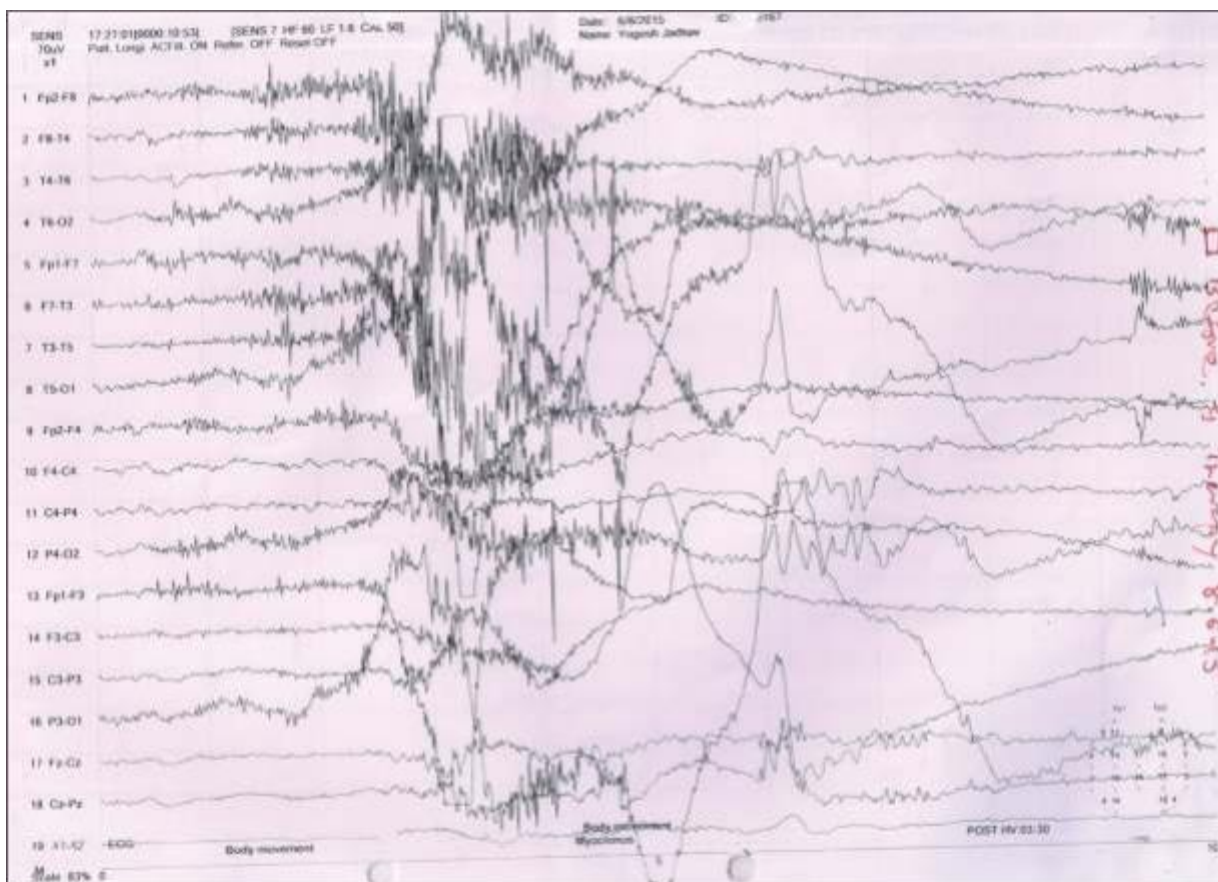


After  
G Therapy

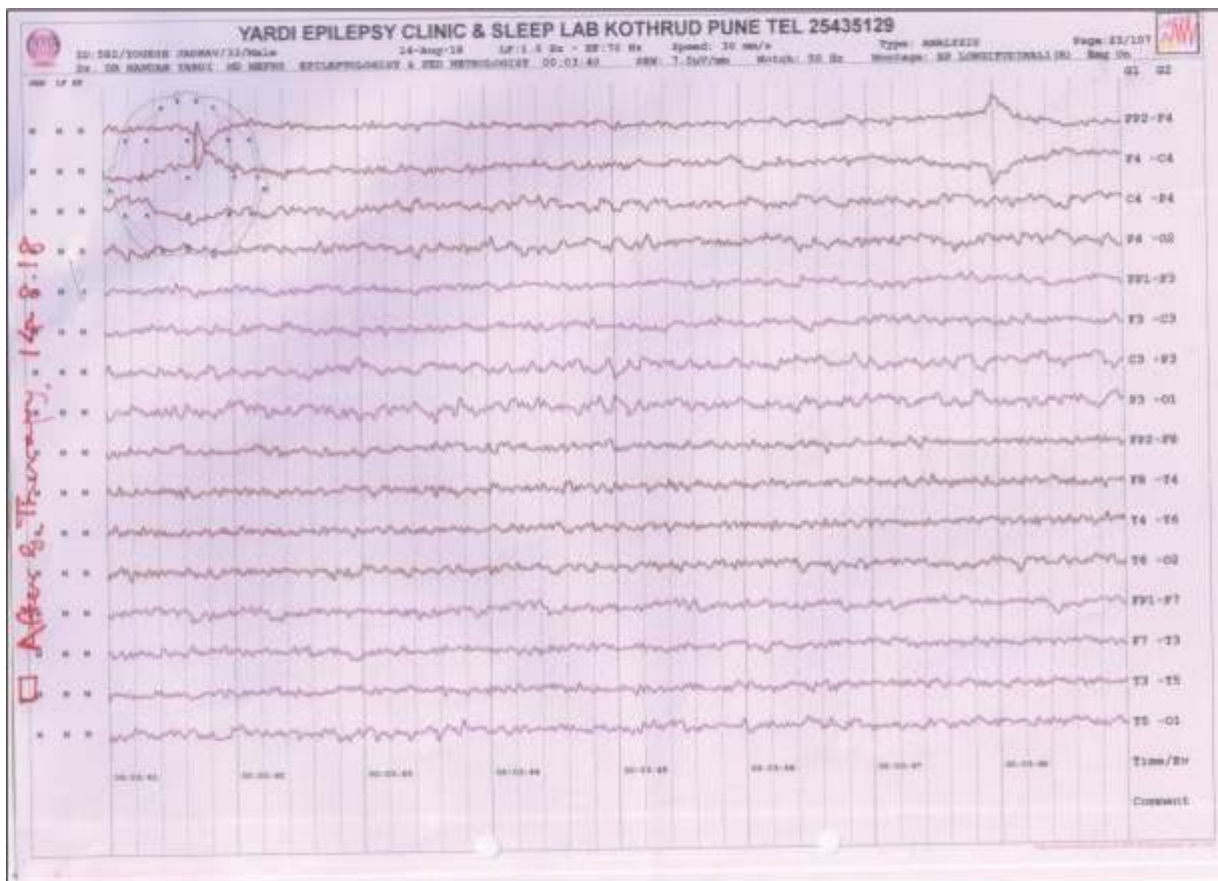


## Case 25

Before  
G Therapy

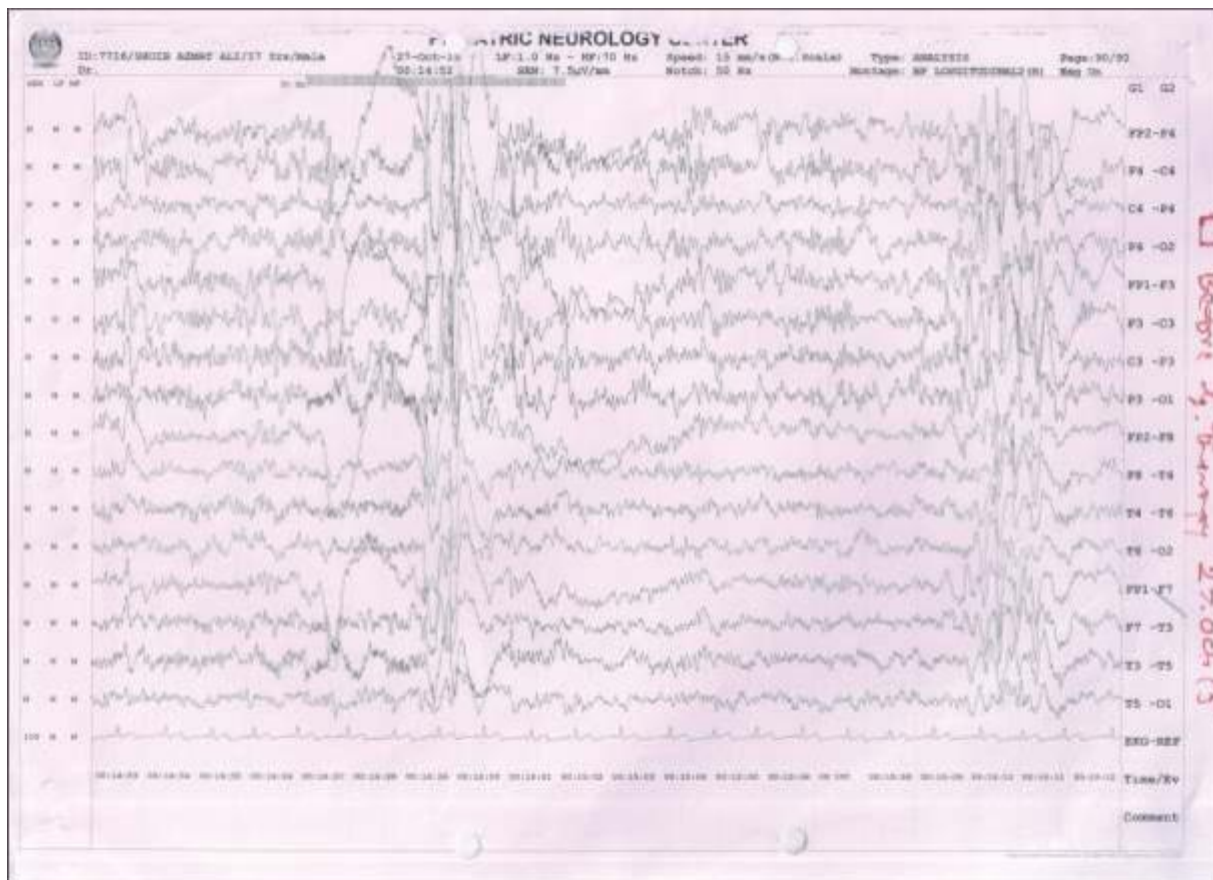


After  
G Therapy

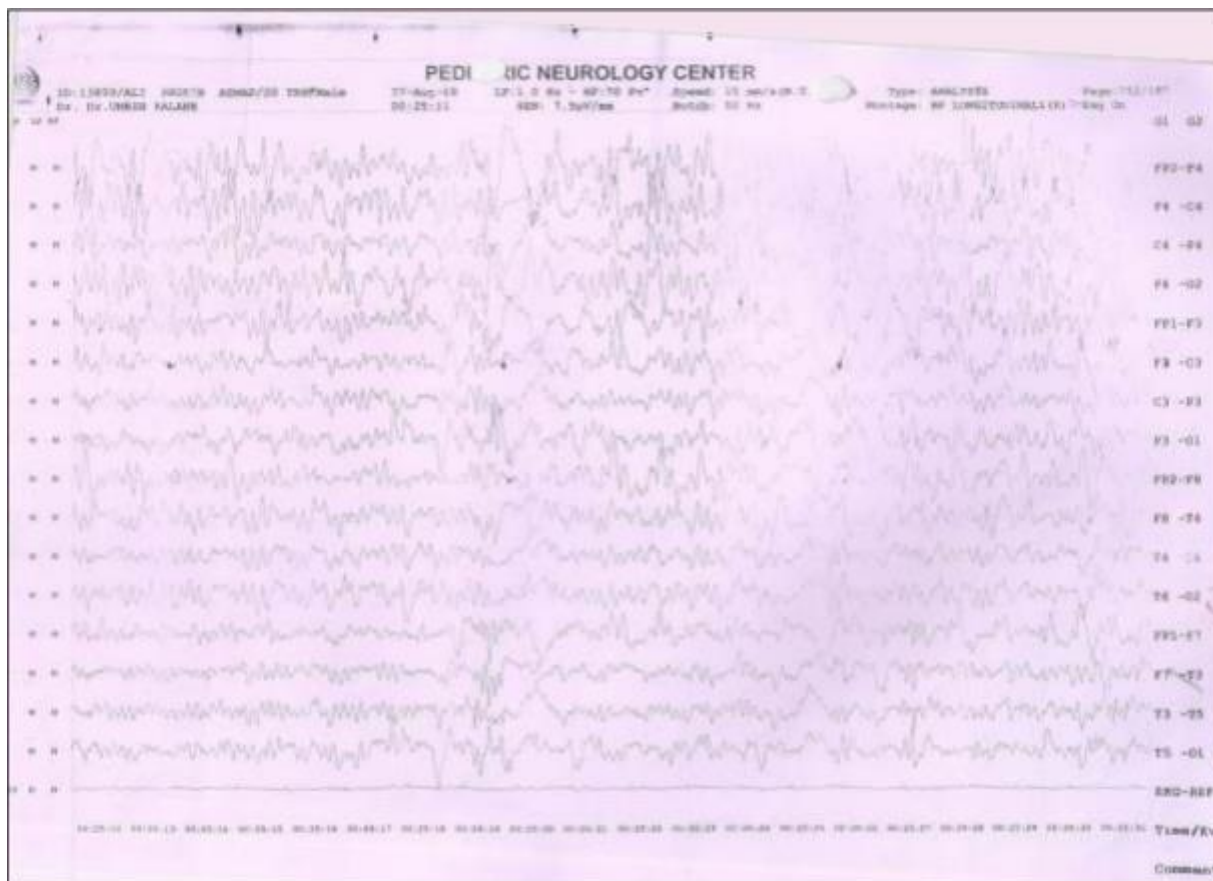




## Case 26



Before  
G Therapy

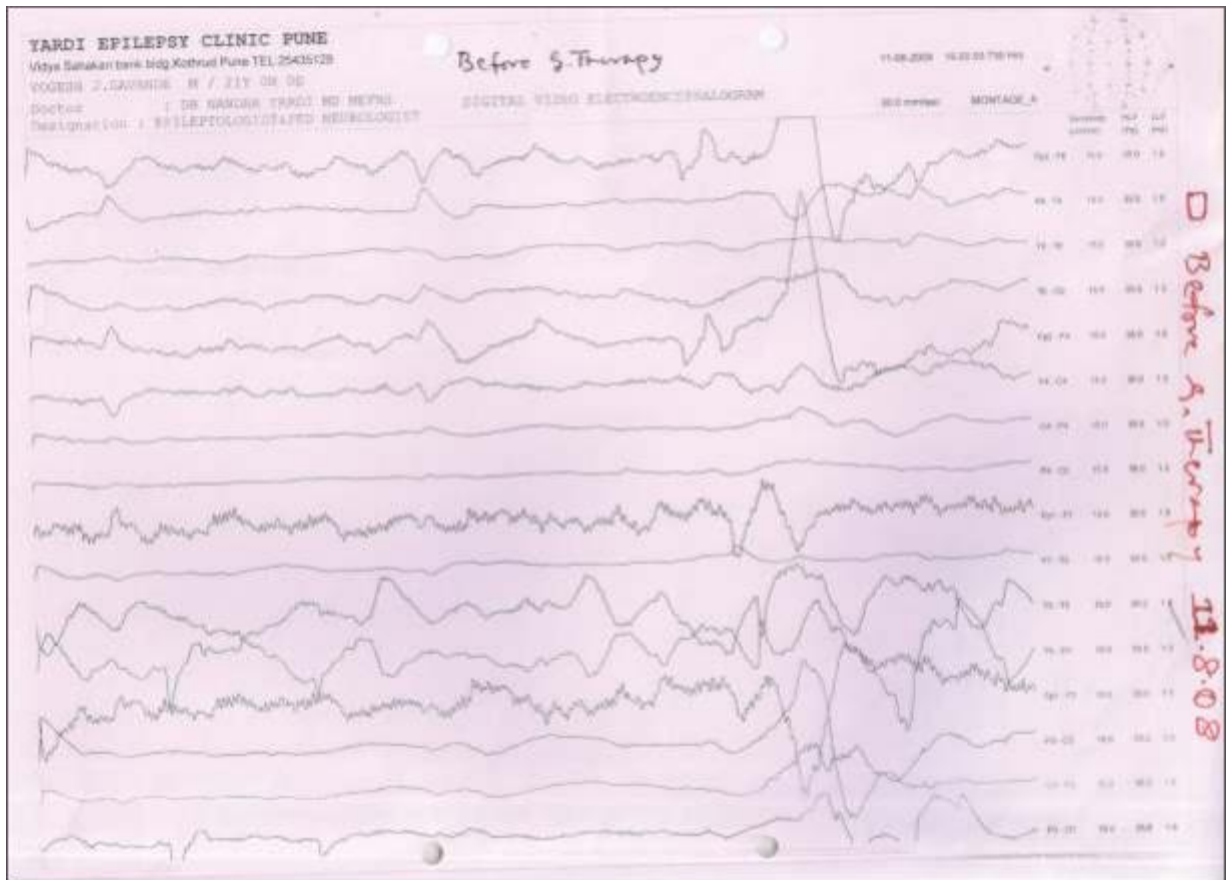


After  
G Therapy

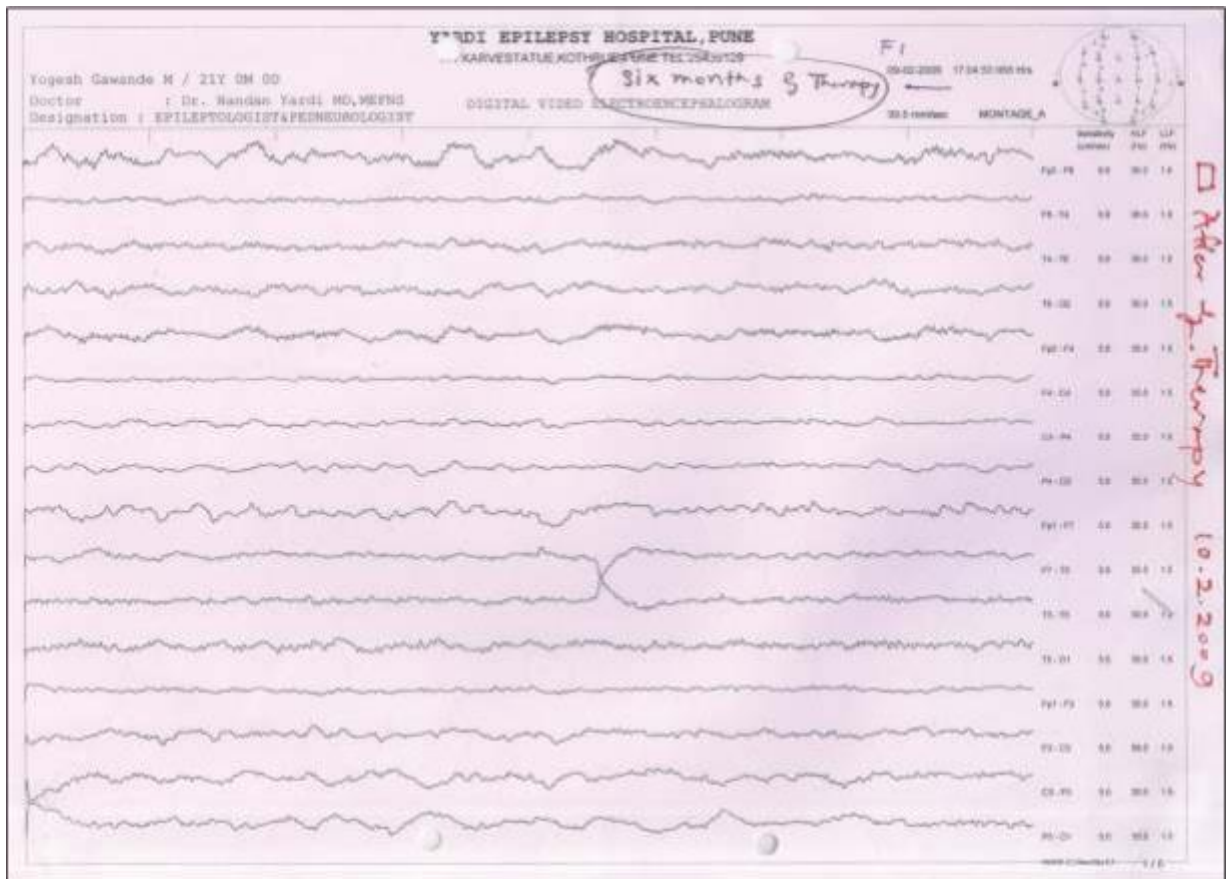


## Case 27

Before  
G Therapy

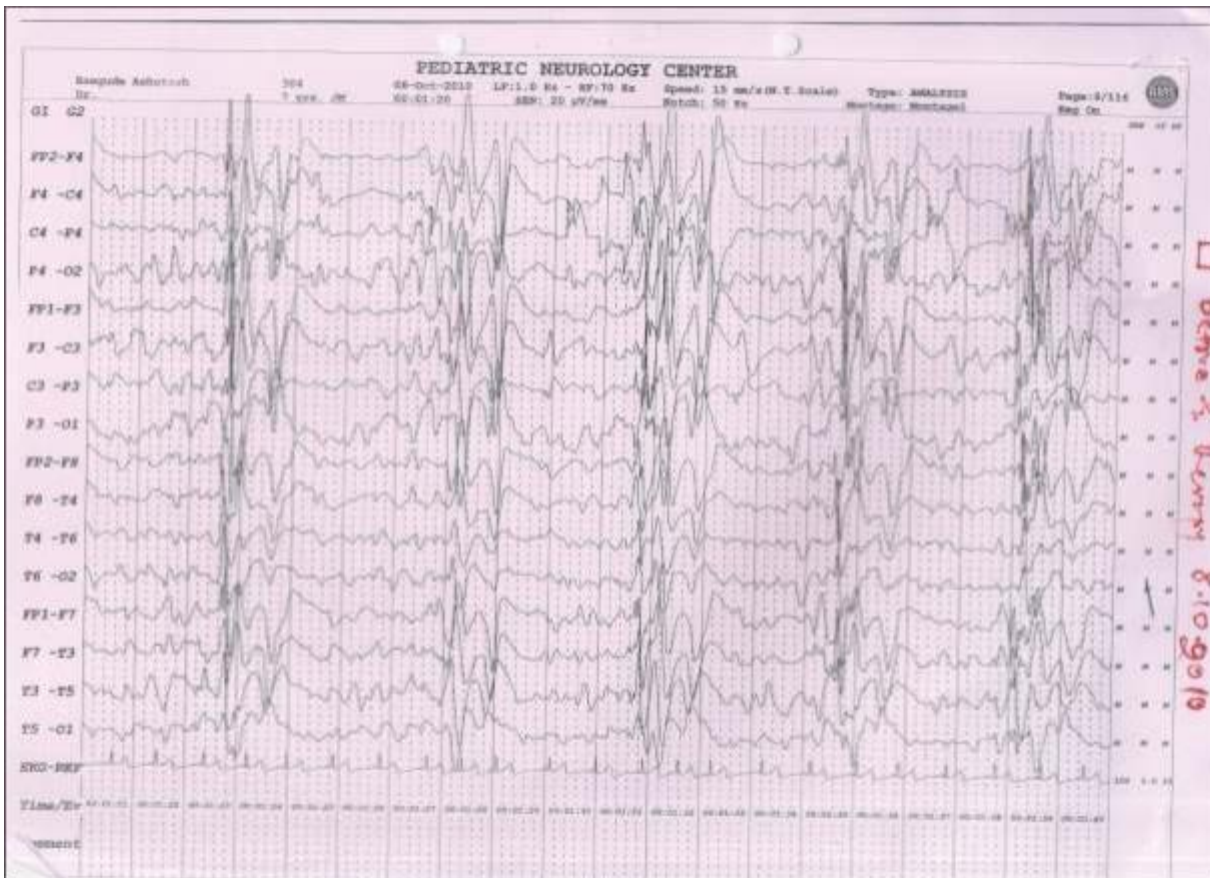


After  
G Therapy

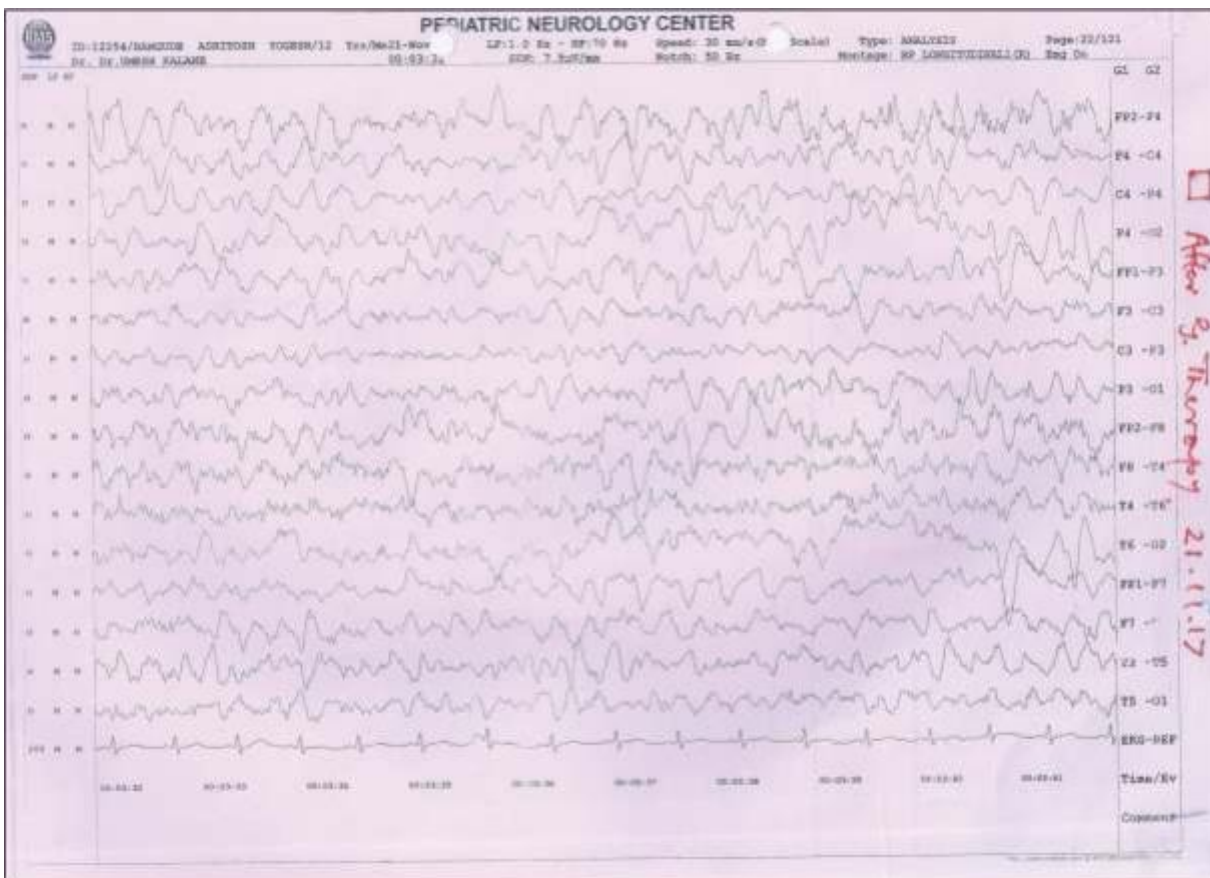




## Case 28



Before  
G Therapy

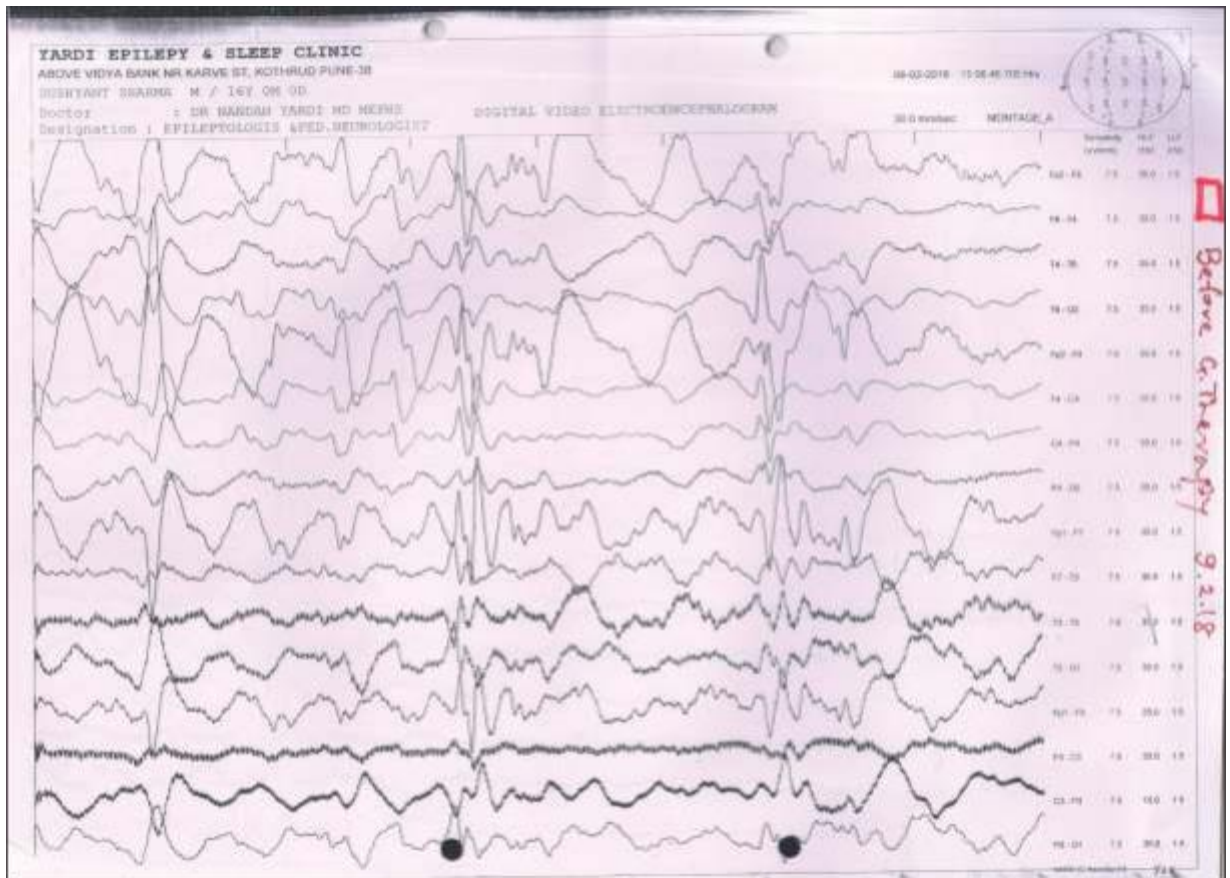


After  
G Therapy

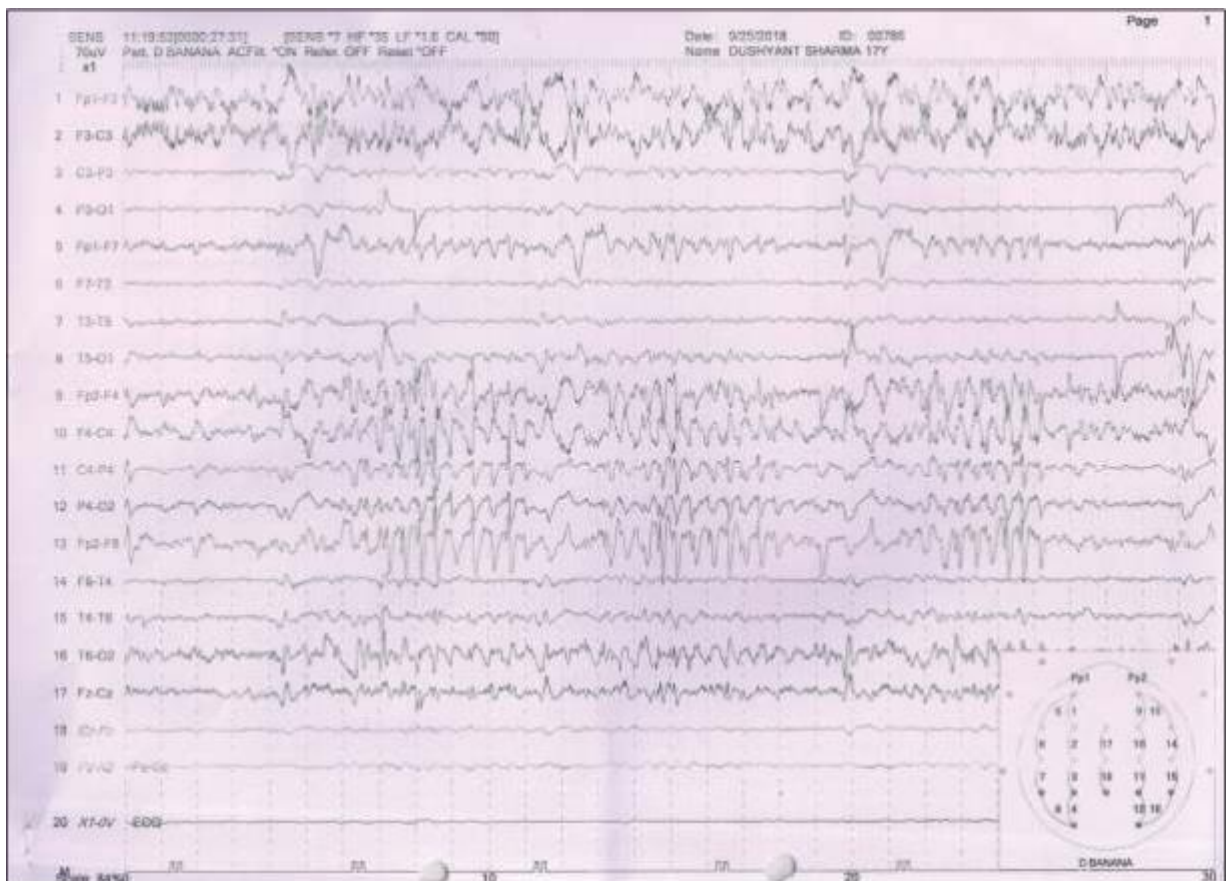


## Case 29

Before  
G Therapy

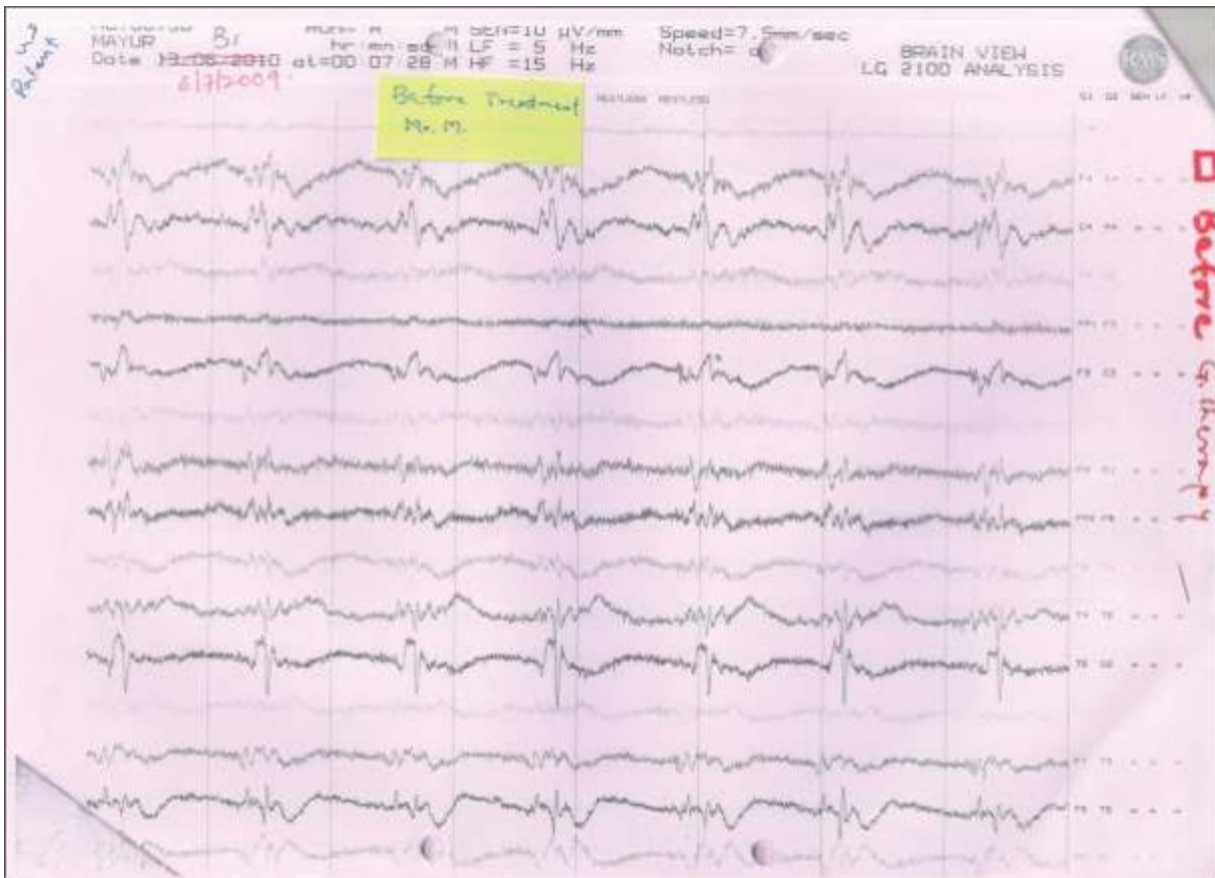


After  
G Therapy

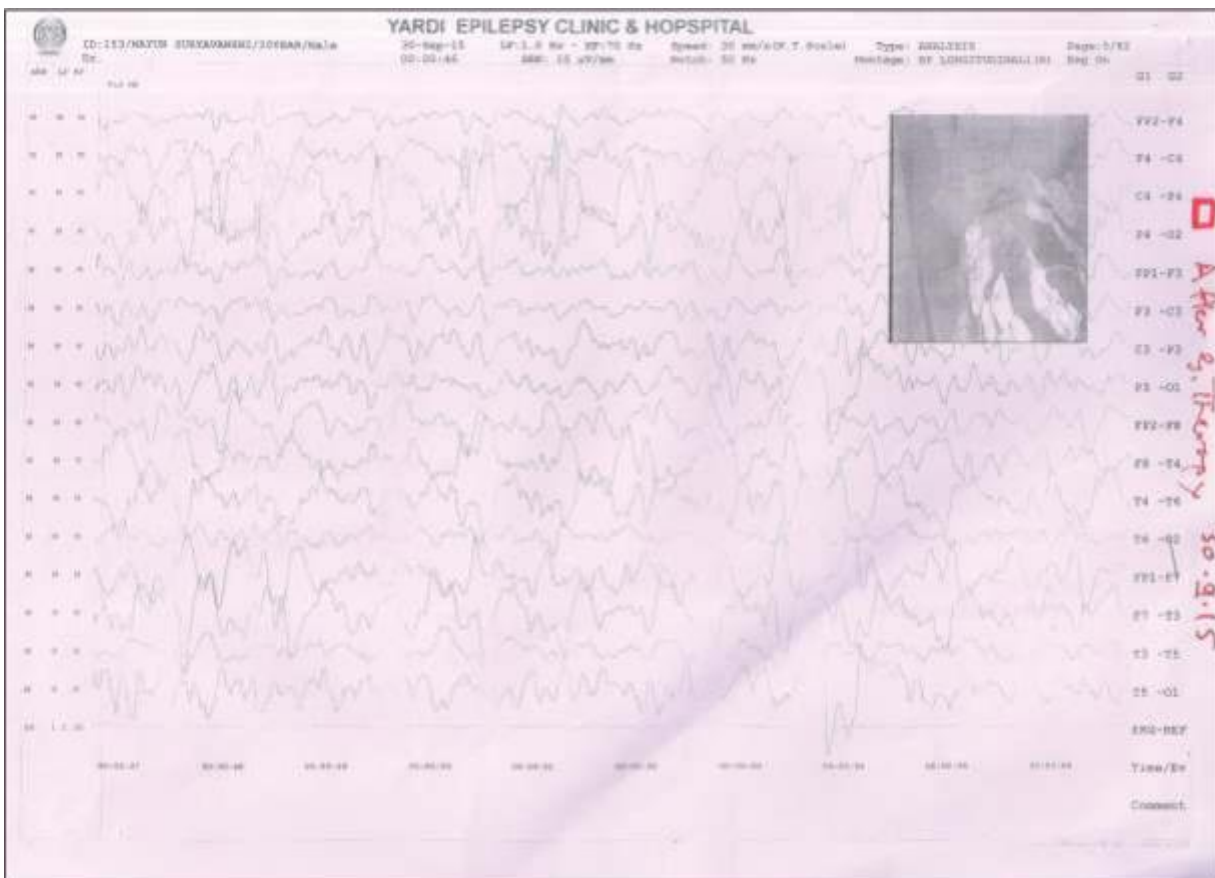




## Case 30



Before  
G Therapy



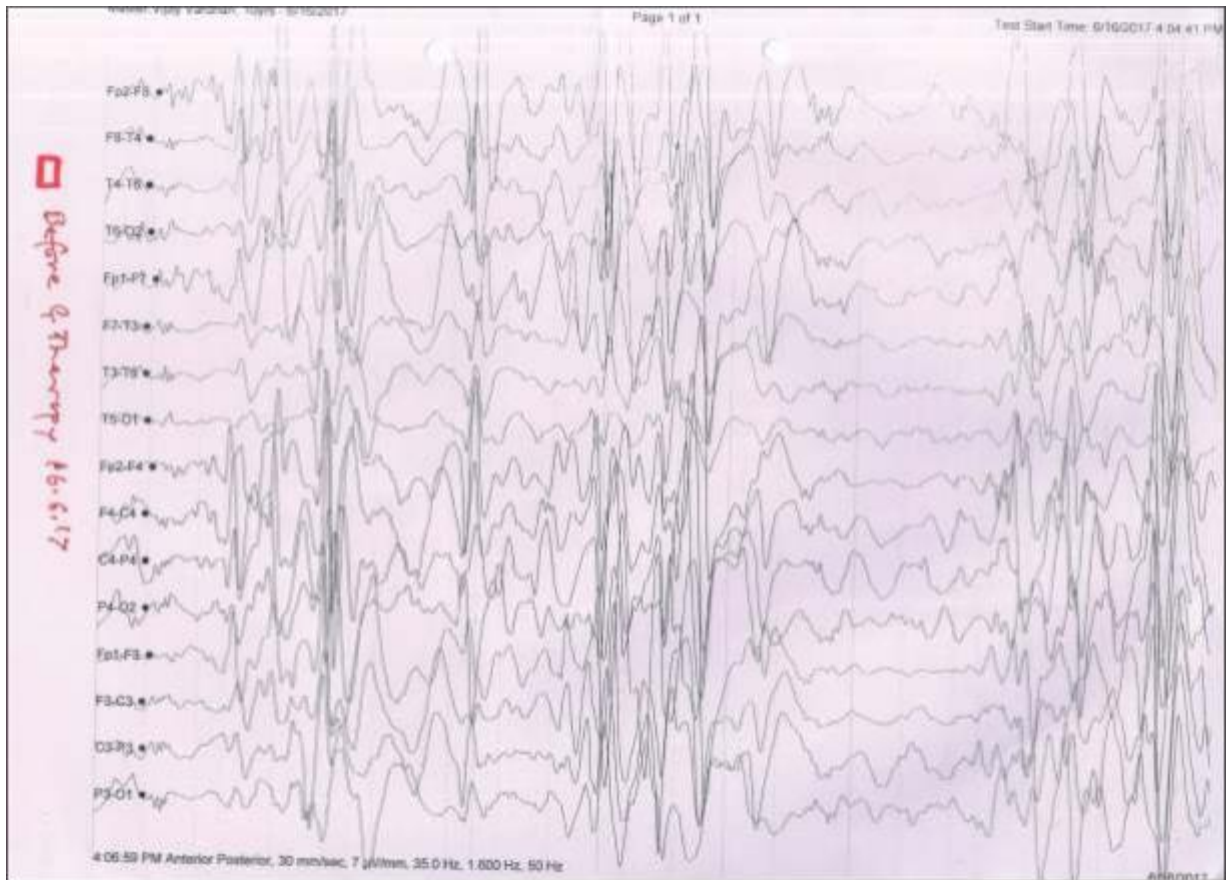
After  
G Therapy



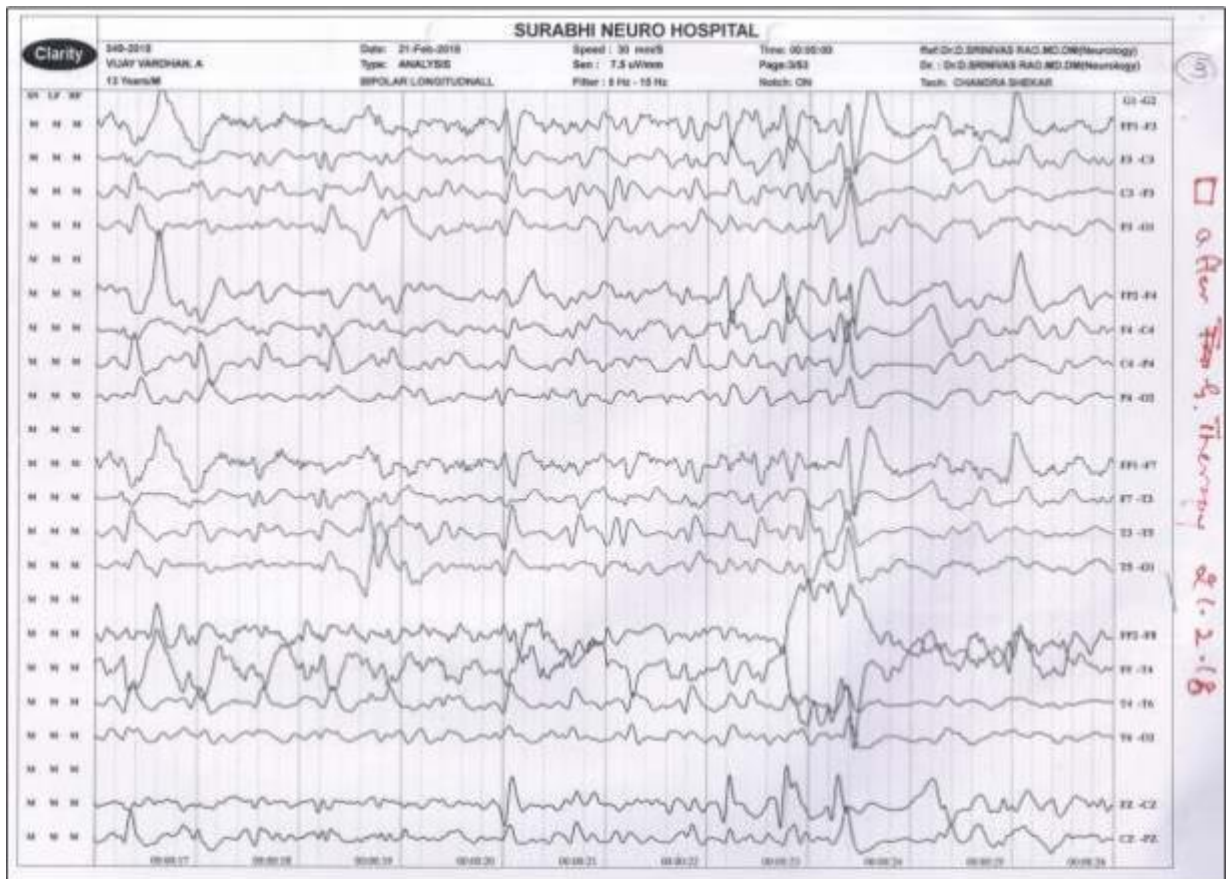


# Case 31

Before  
G Therapy

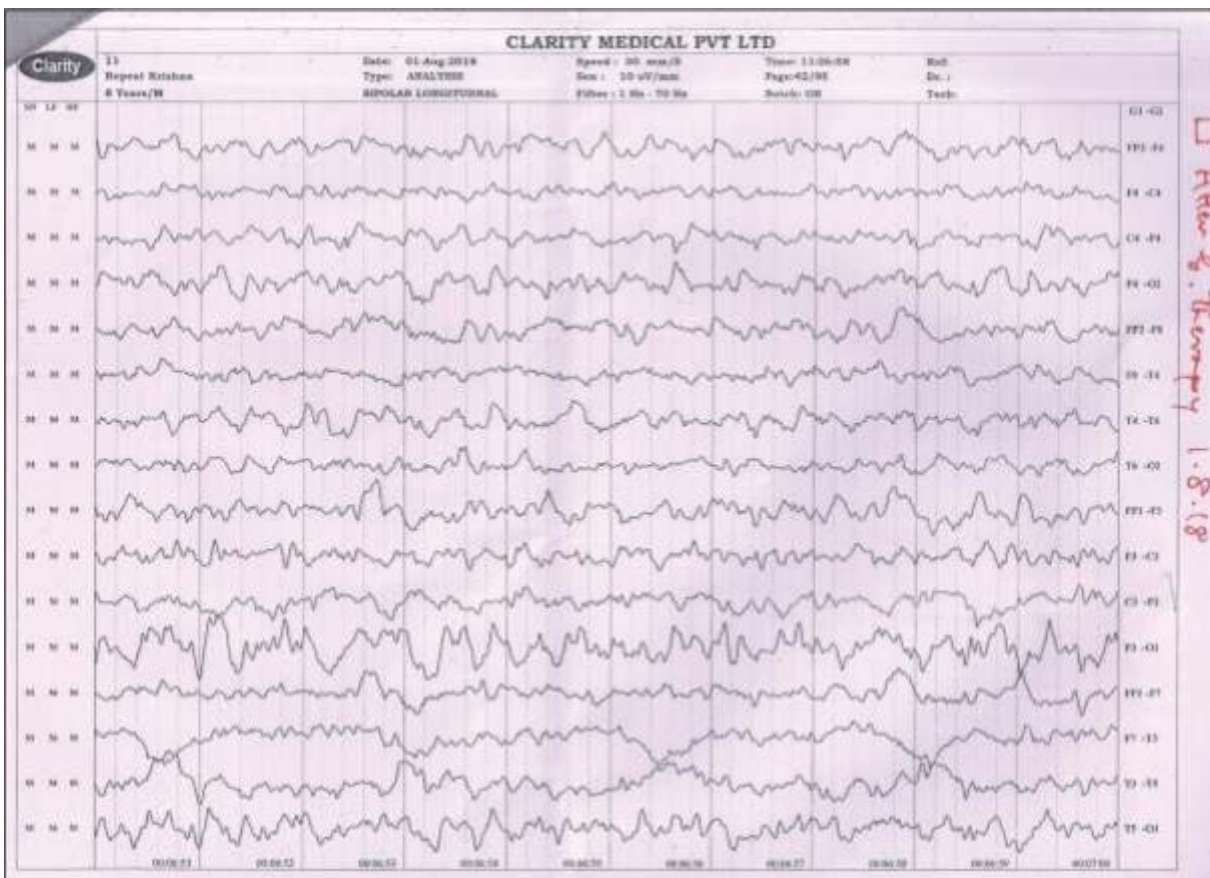
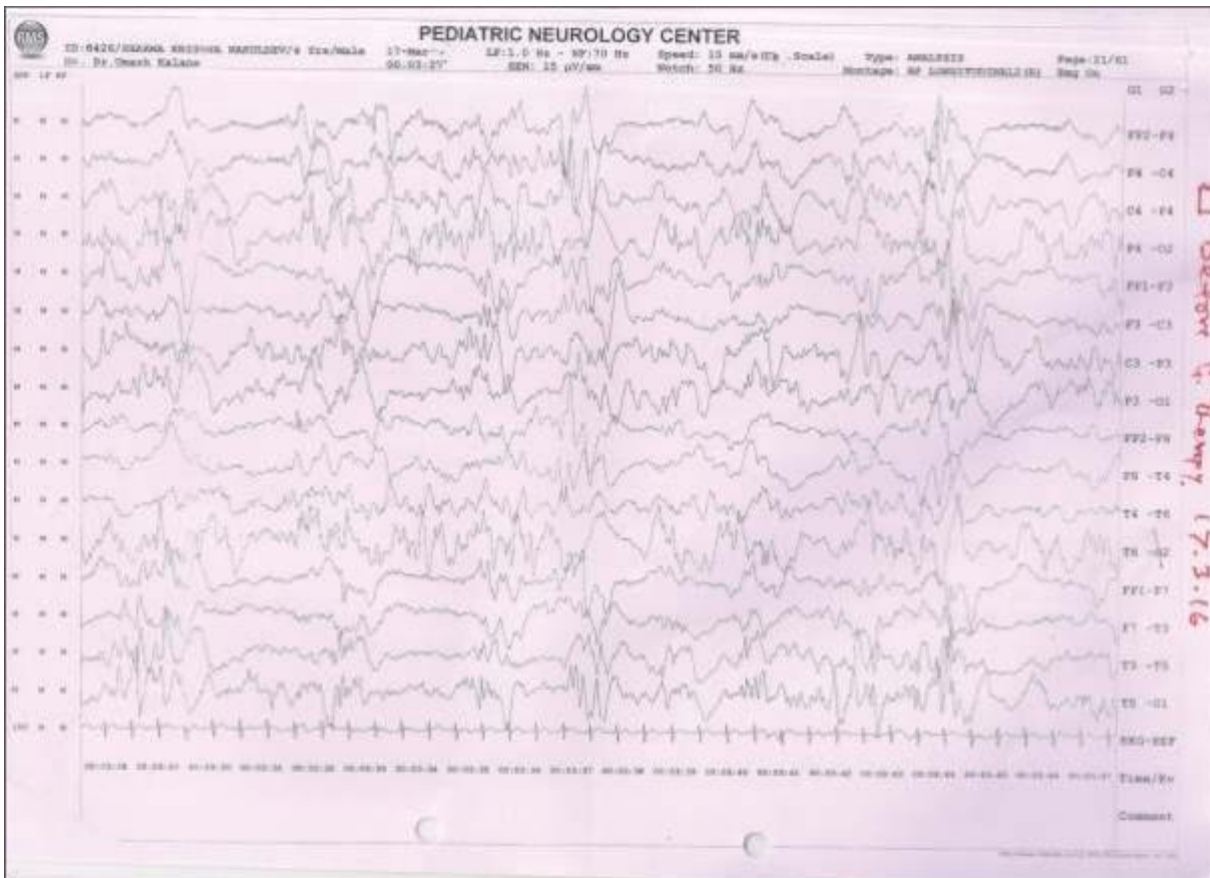


After  
G Therapy





## Case 32



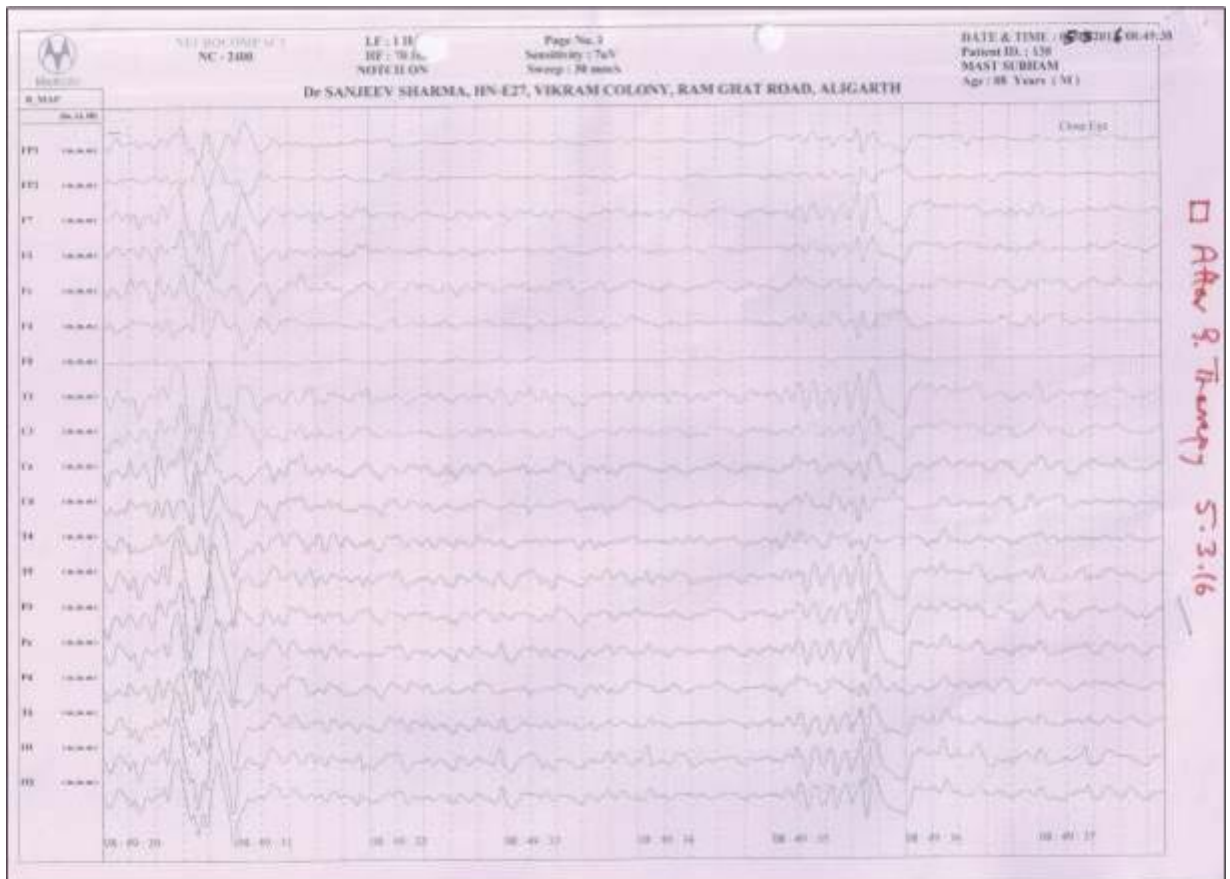


## Case 33

Before  
G Therapy

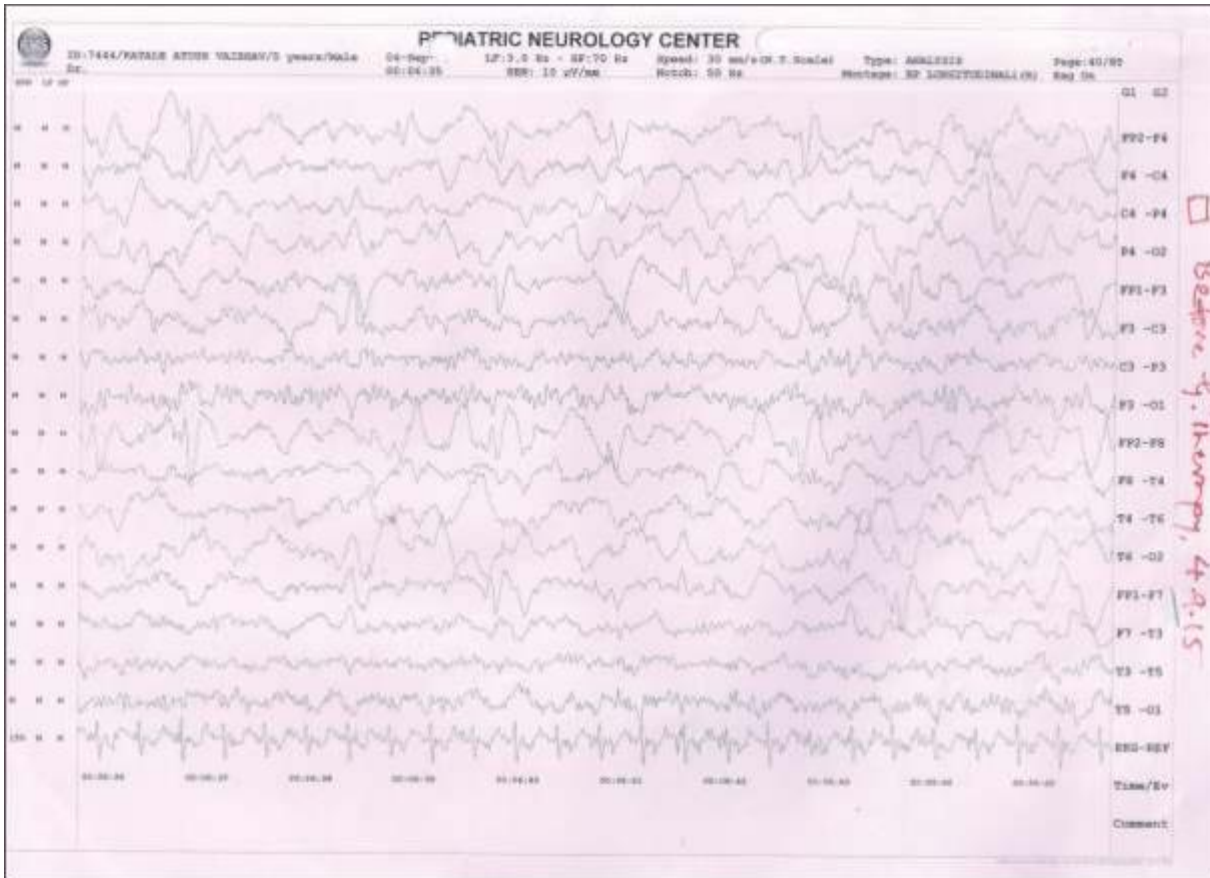


After  
G Therapy



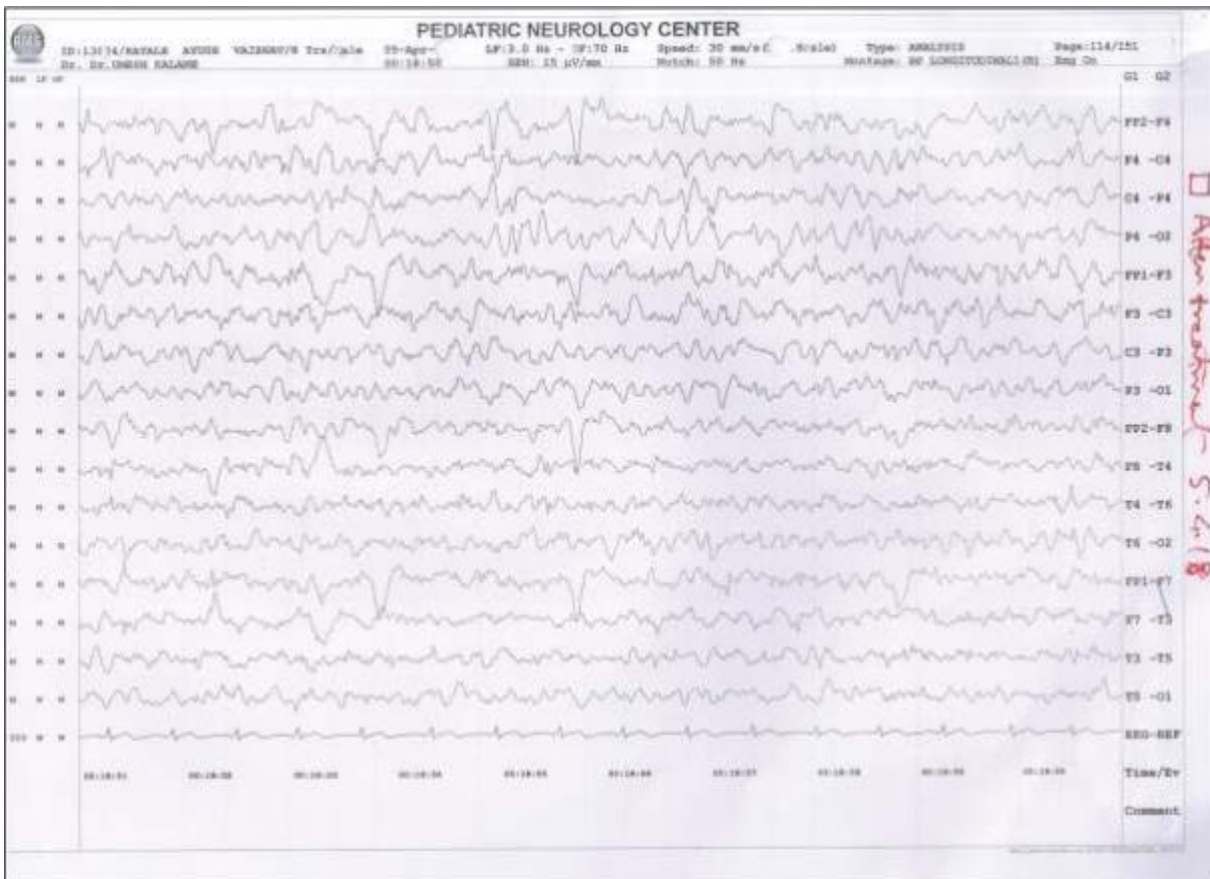


## Case 34



Before  
G Therapy

Before G-Therapy, 4.9.15



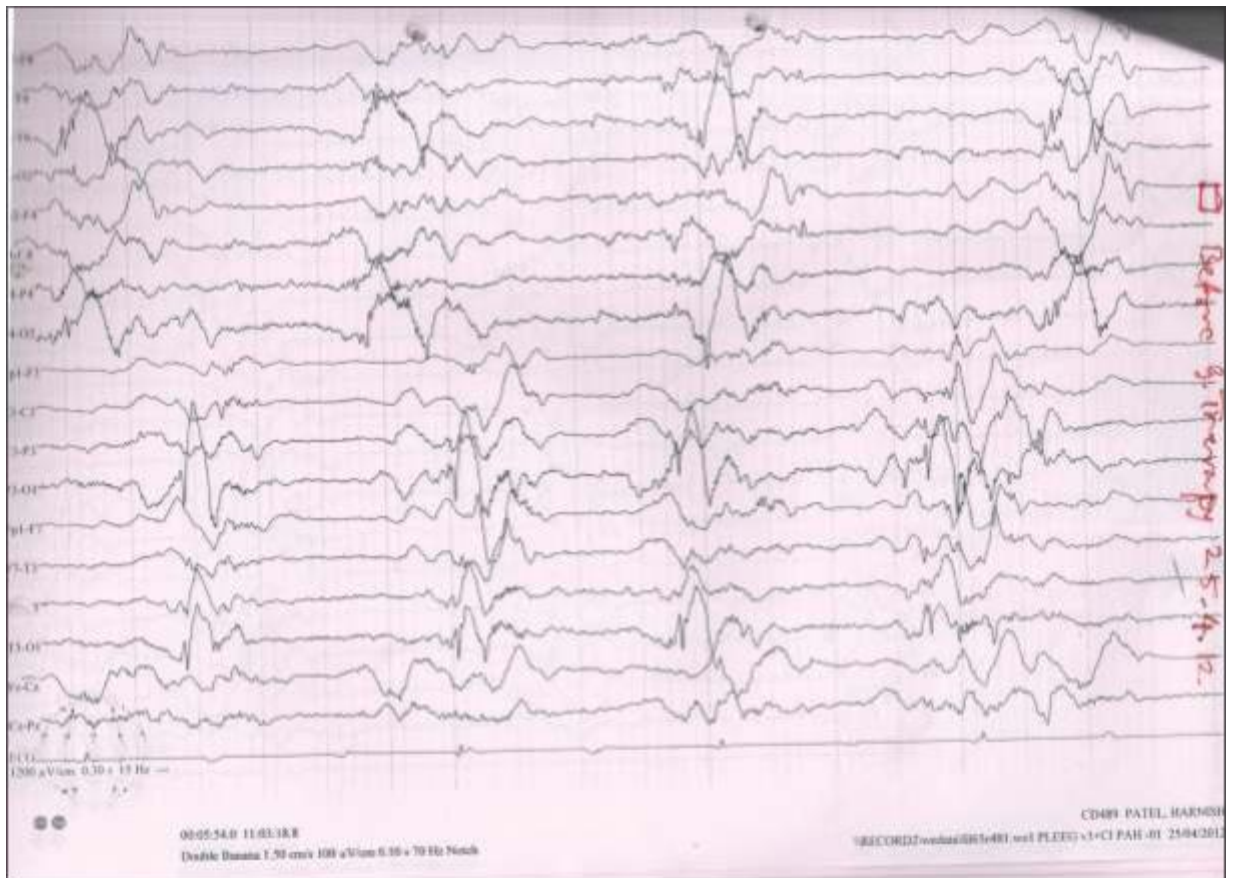
After  
G Therapy

After treatment - 5.4.18

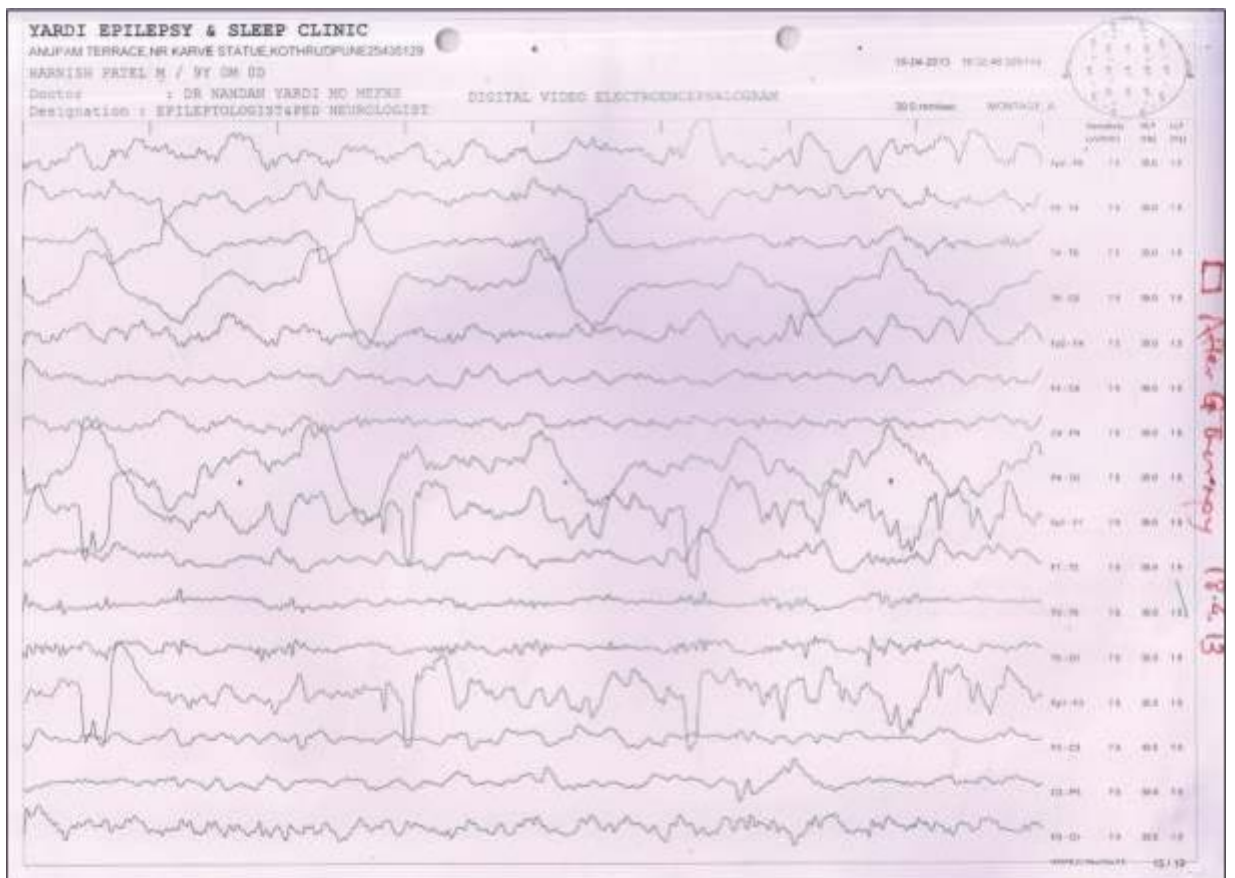


## Case 35

Before  
G Therapy

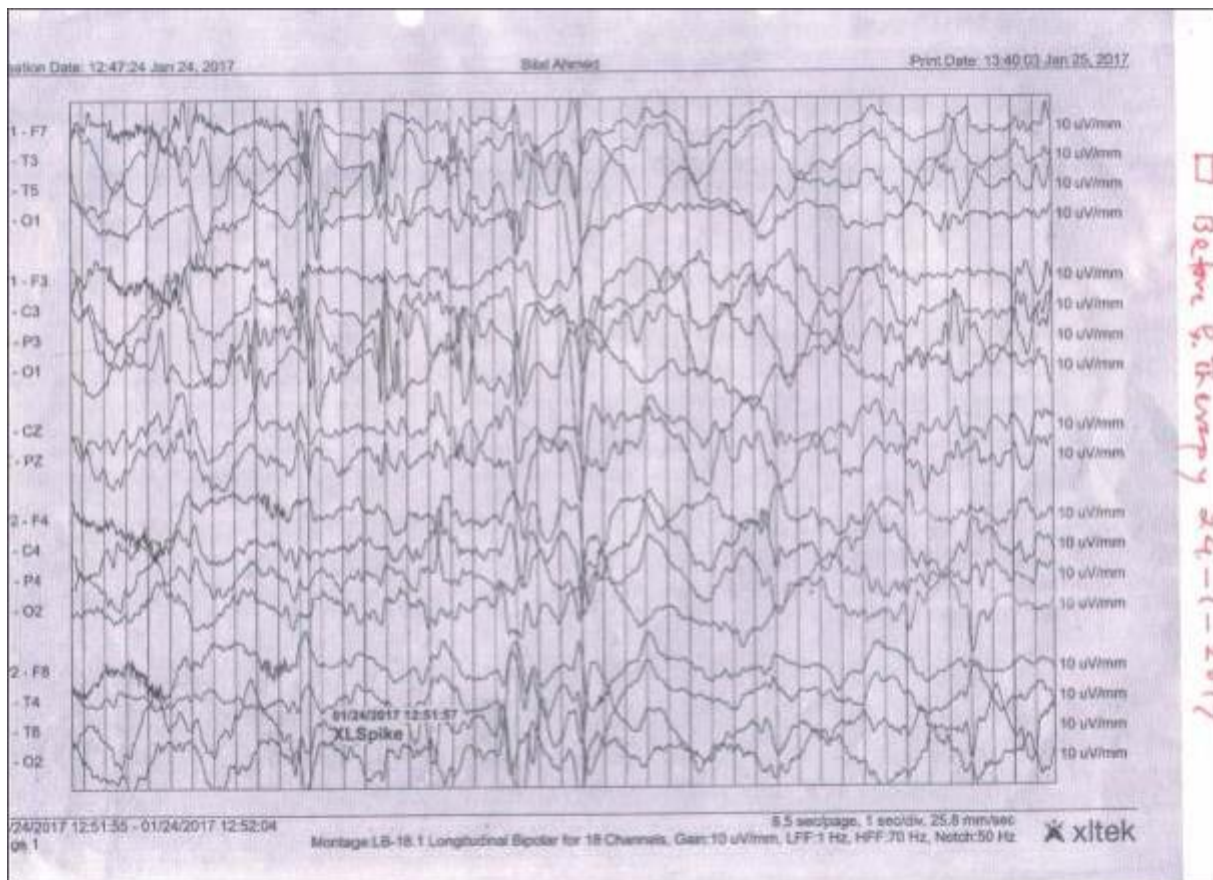


After  
G Therapy



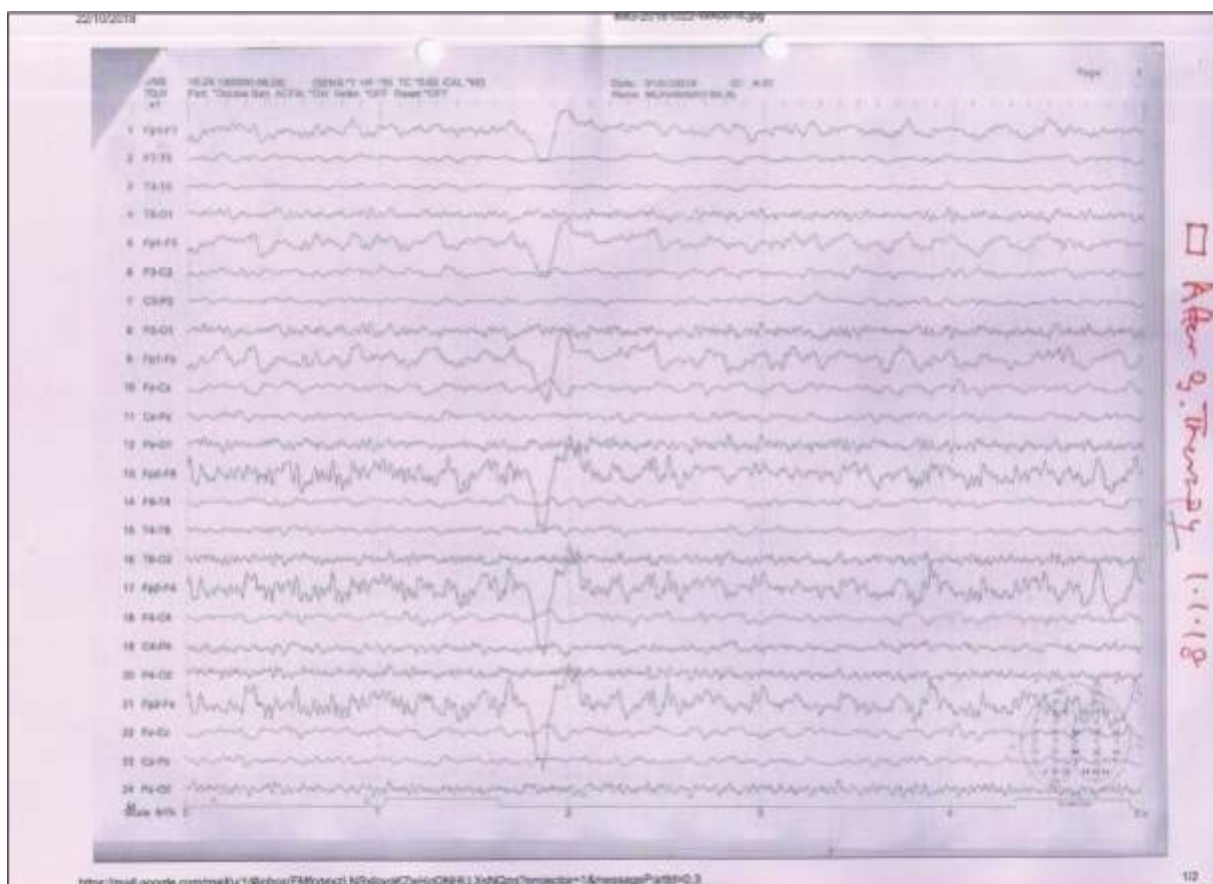


# Case 36



Before G. Therapy 24-1-2017

Before  
G Therapy



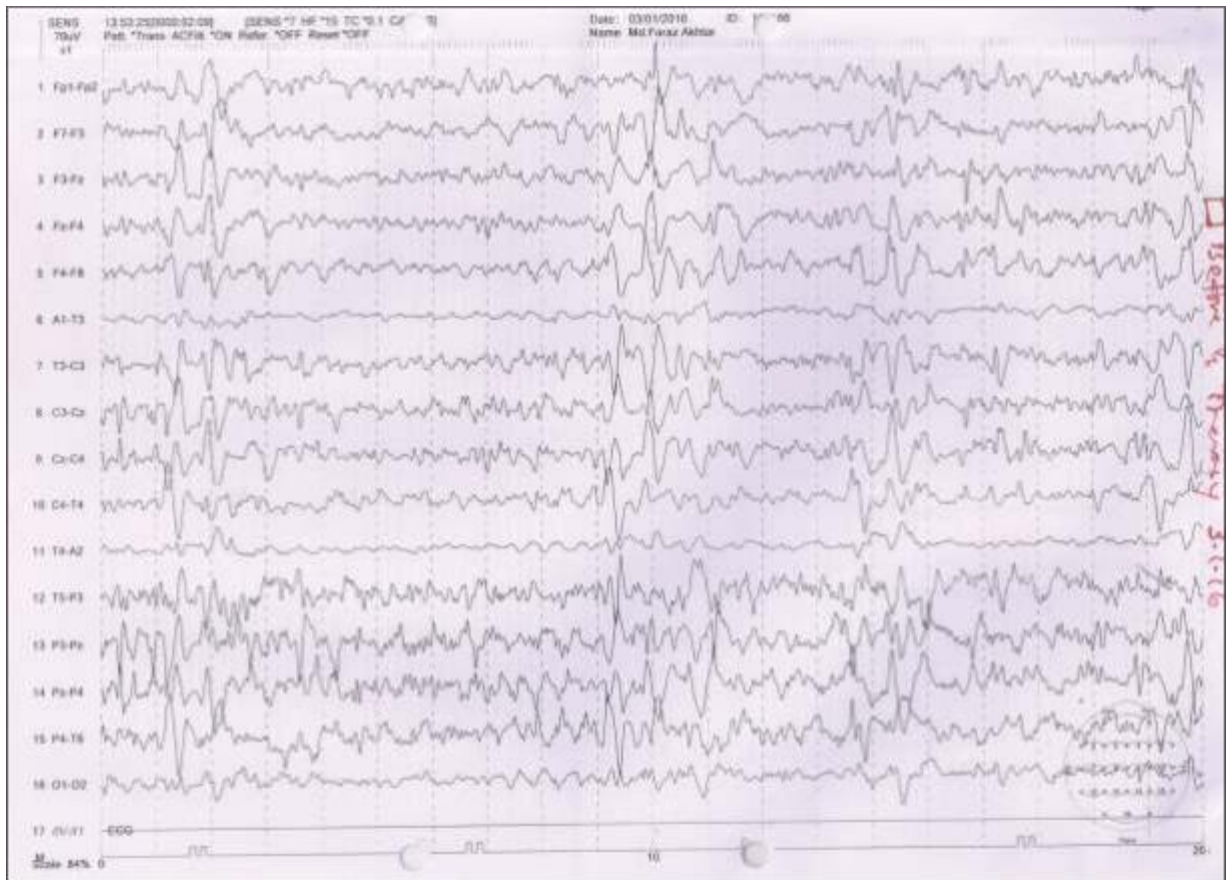
After G. Therapy 1.1.18

After  
G Therapy

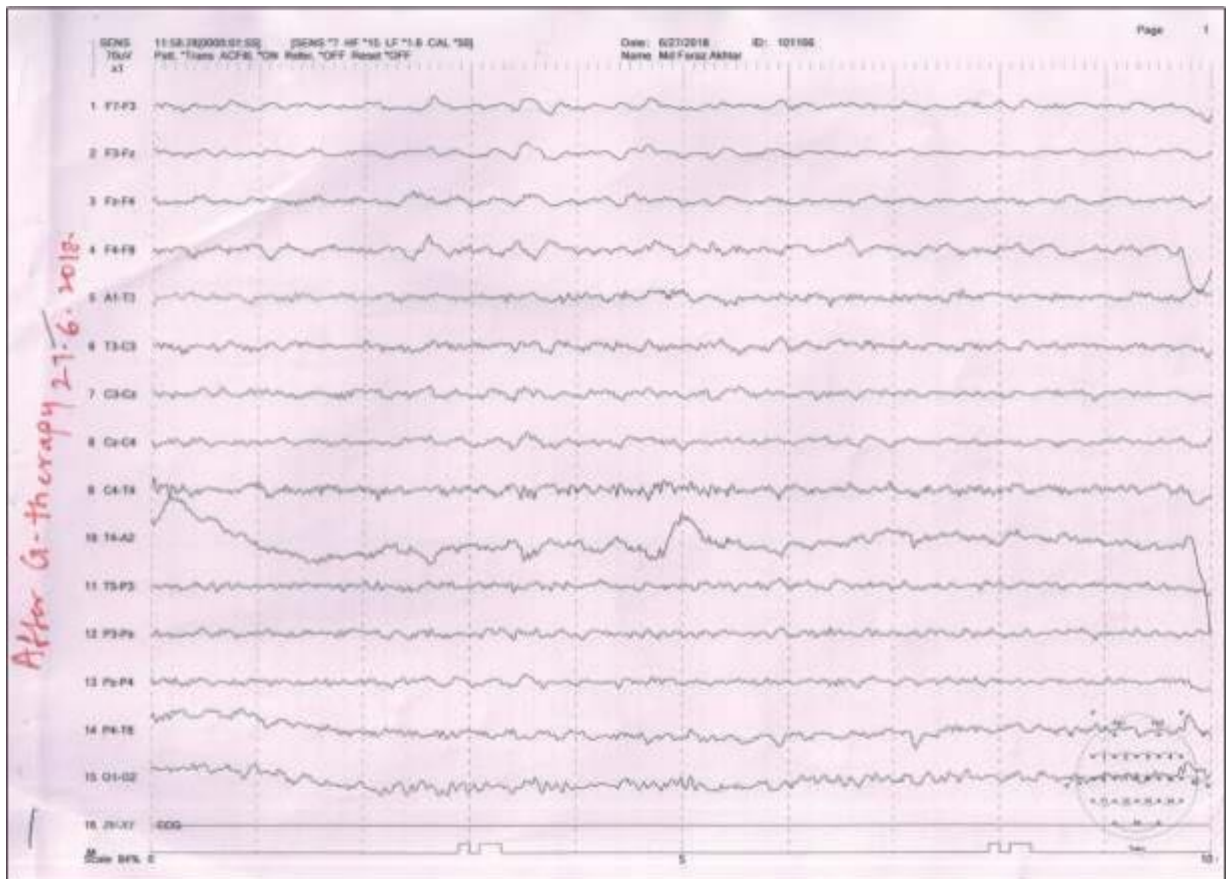


## Case 37

Before  
G Therapy

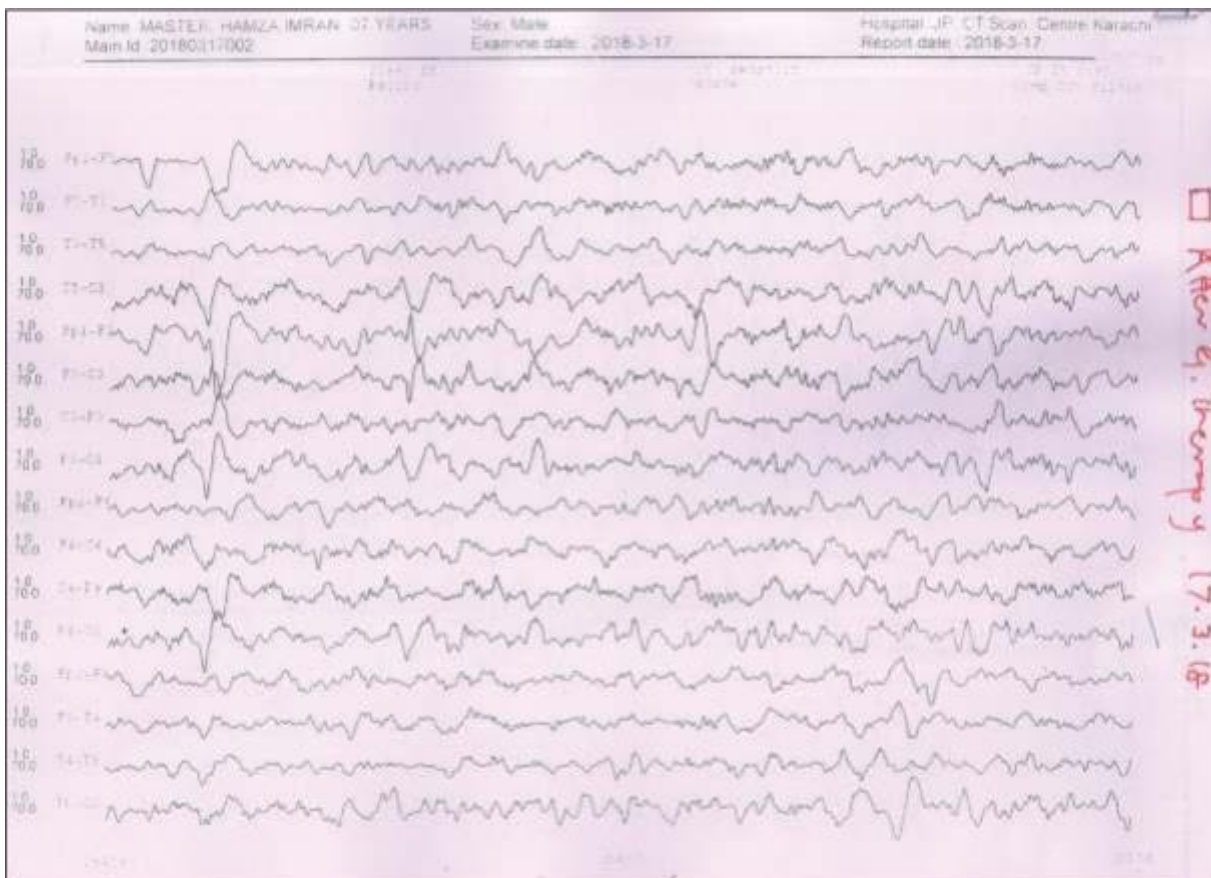
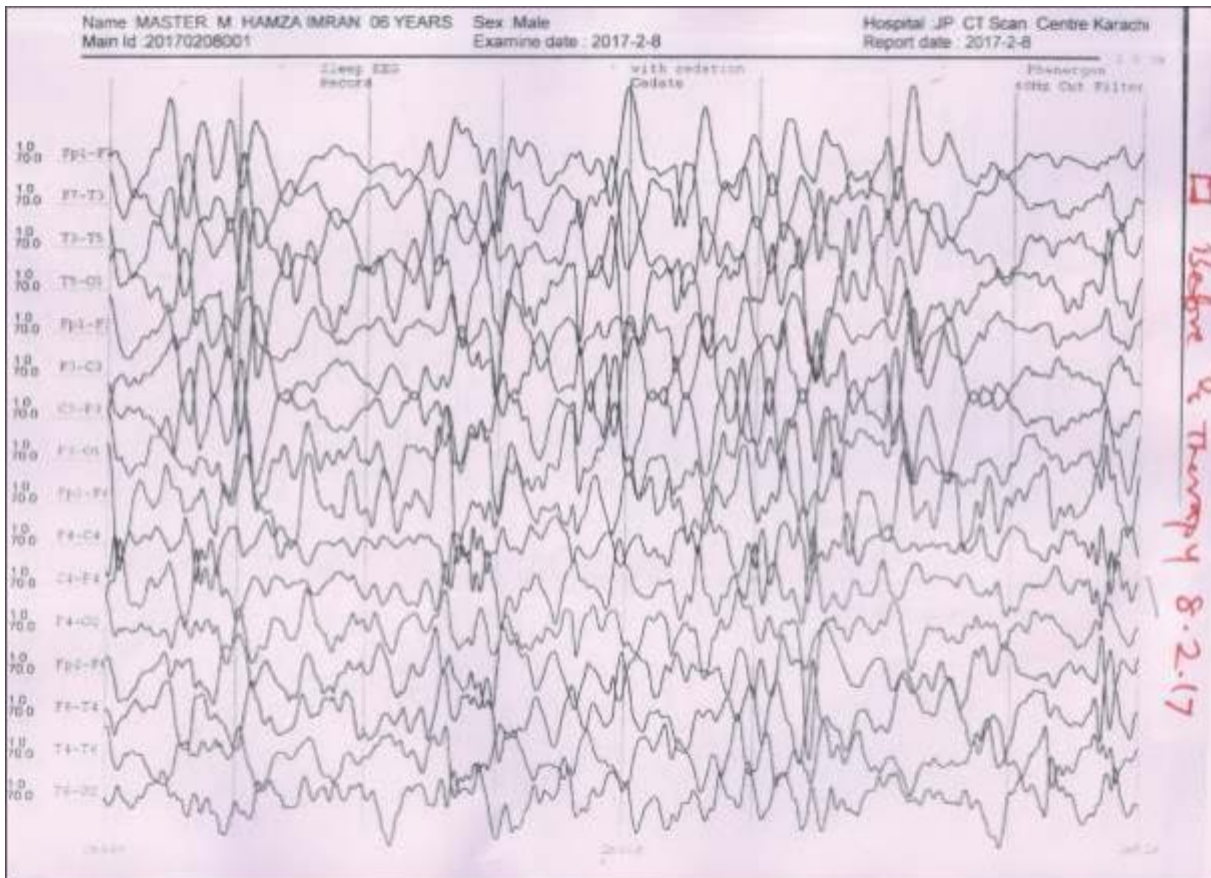


After  
G Therapy





## Case 38

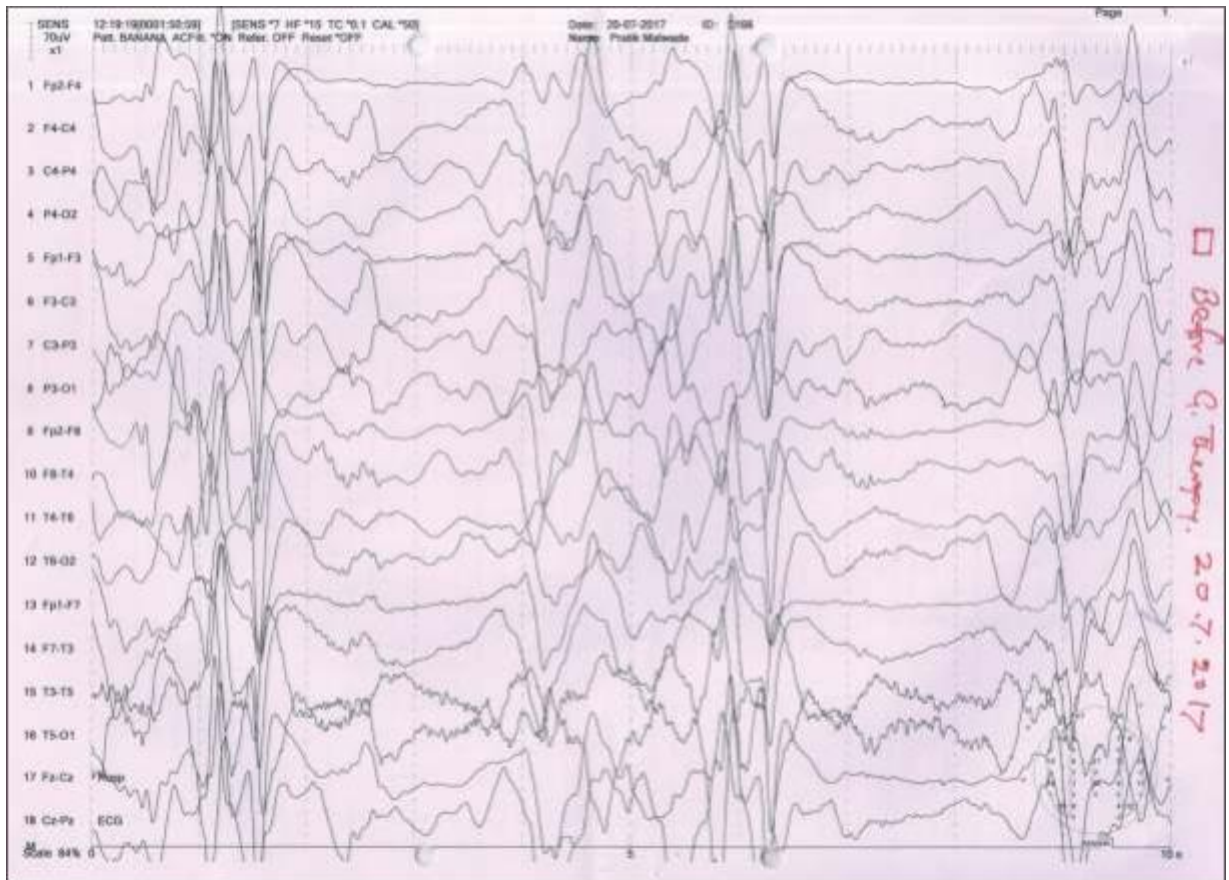




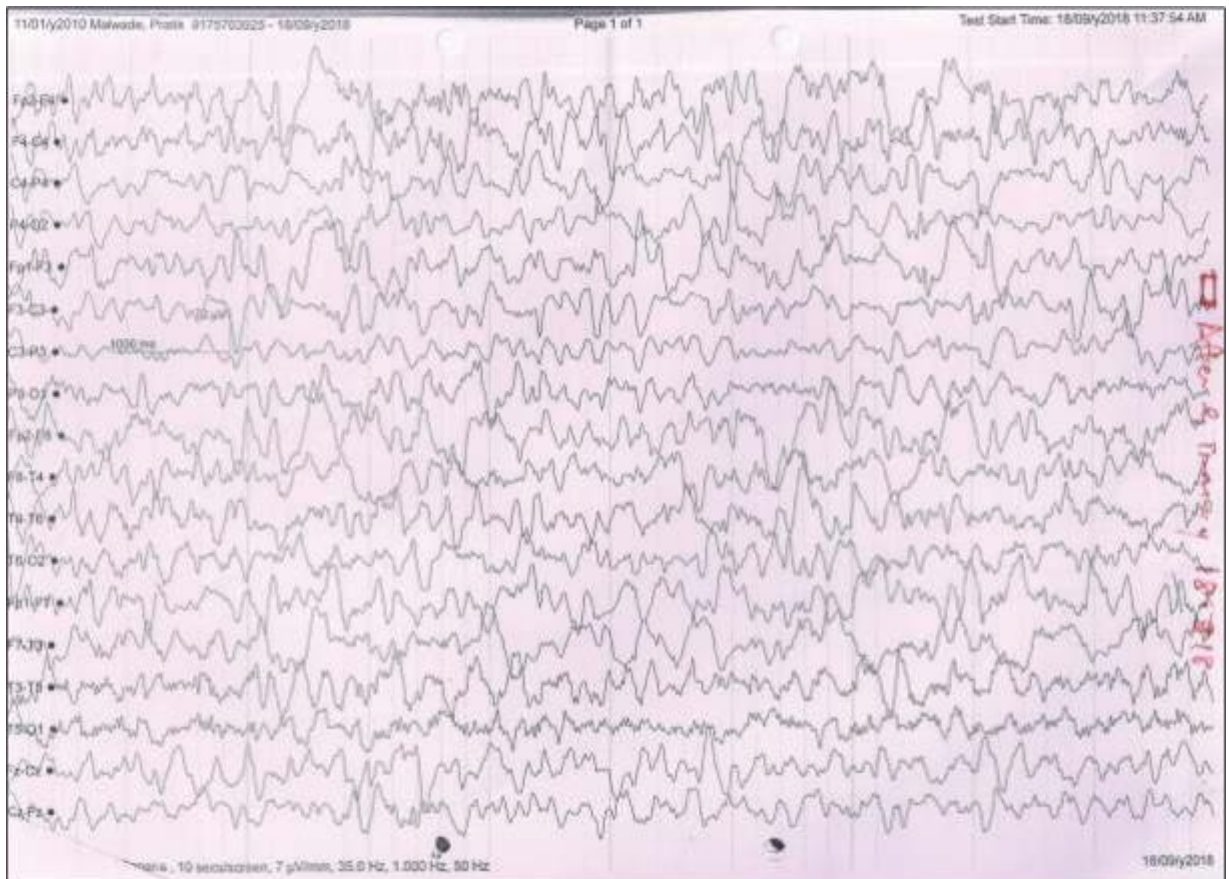


## Case 39

Before  
G Therapy

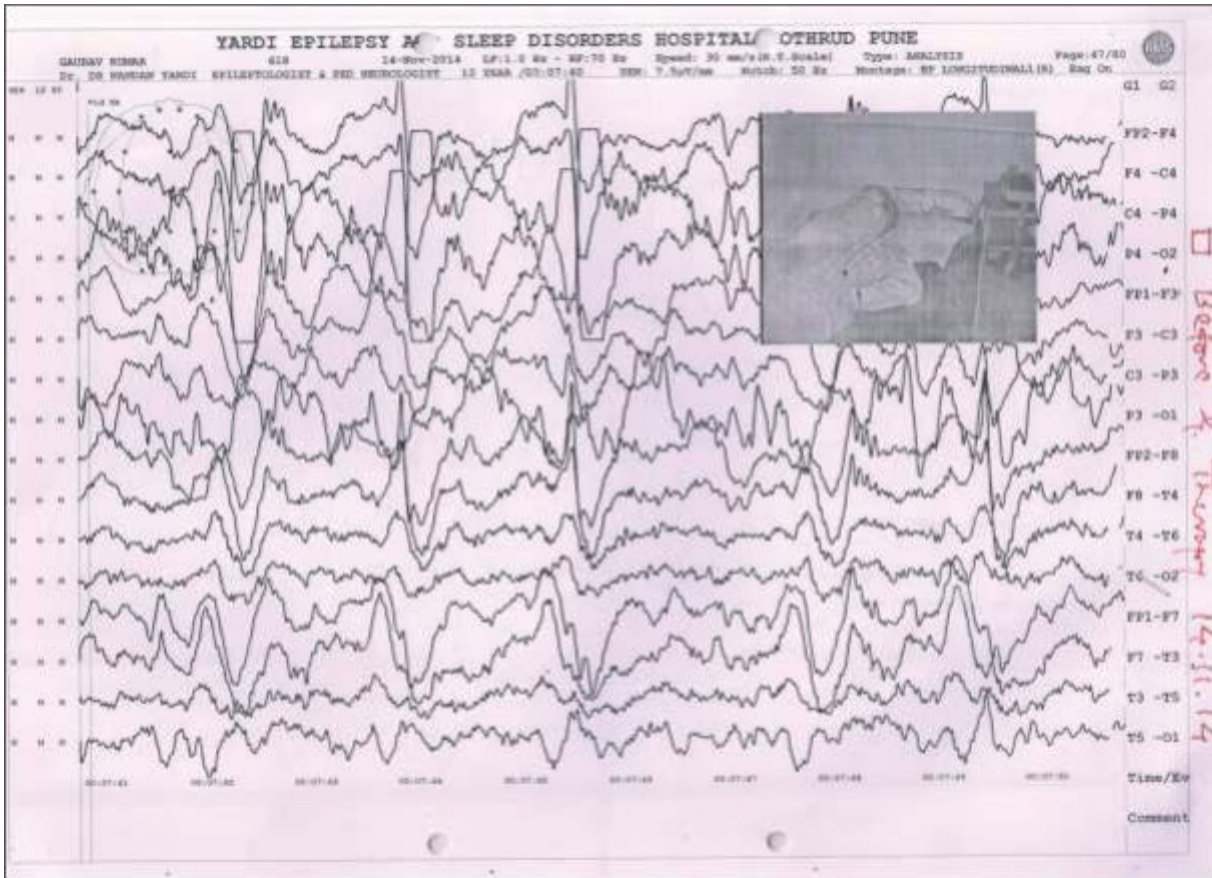


After  
G Therapy



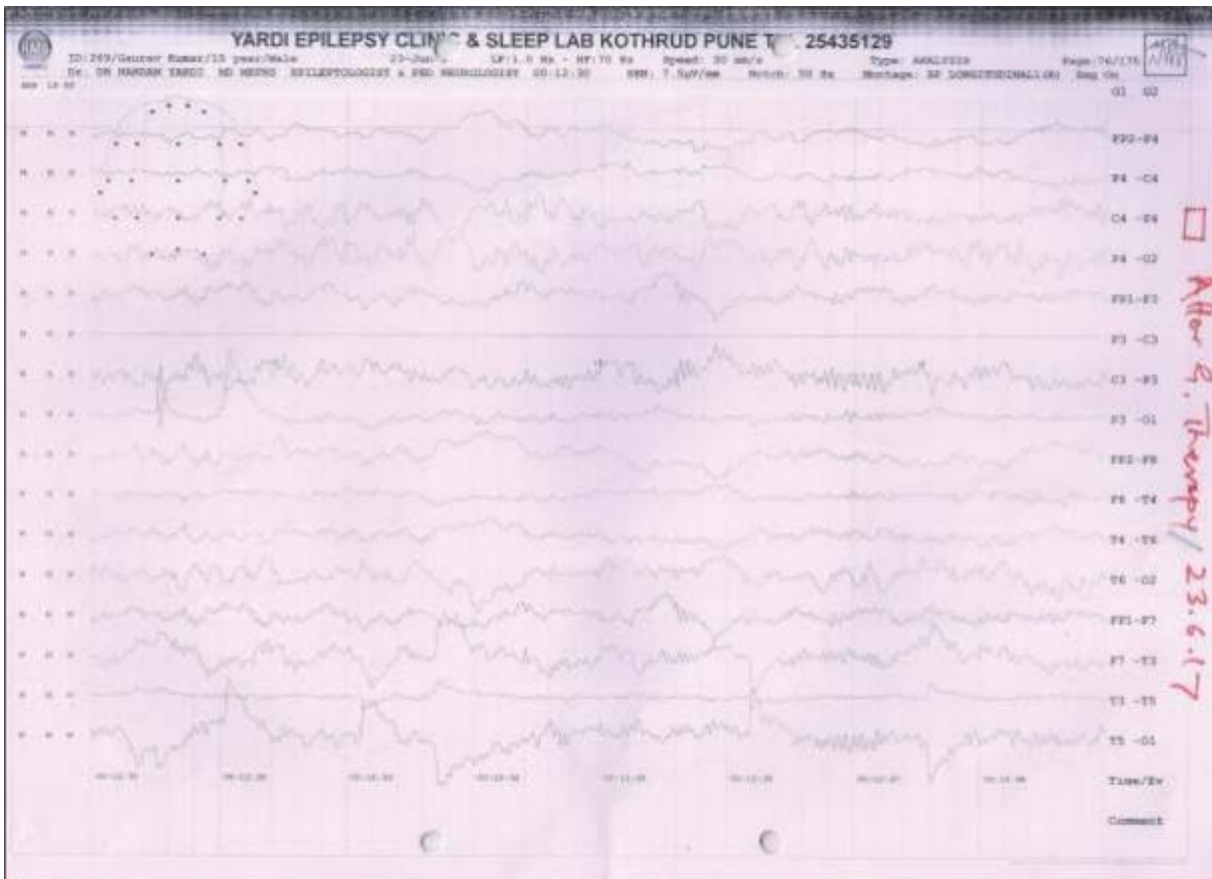


## Case 40



Before  
G Therapy

Before G Therapy 14.11.14



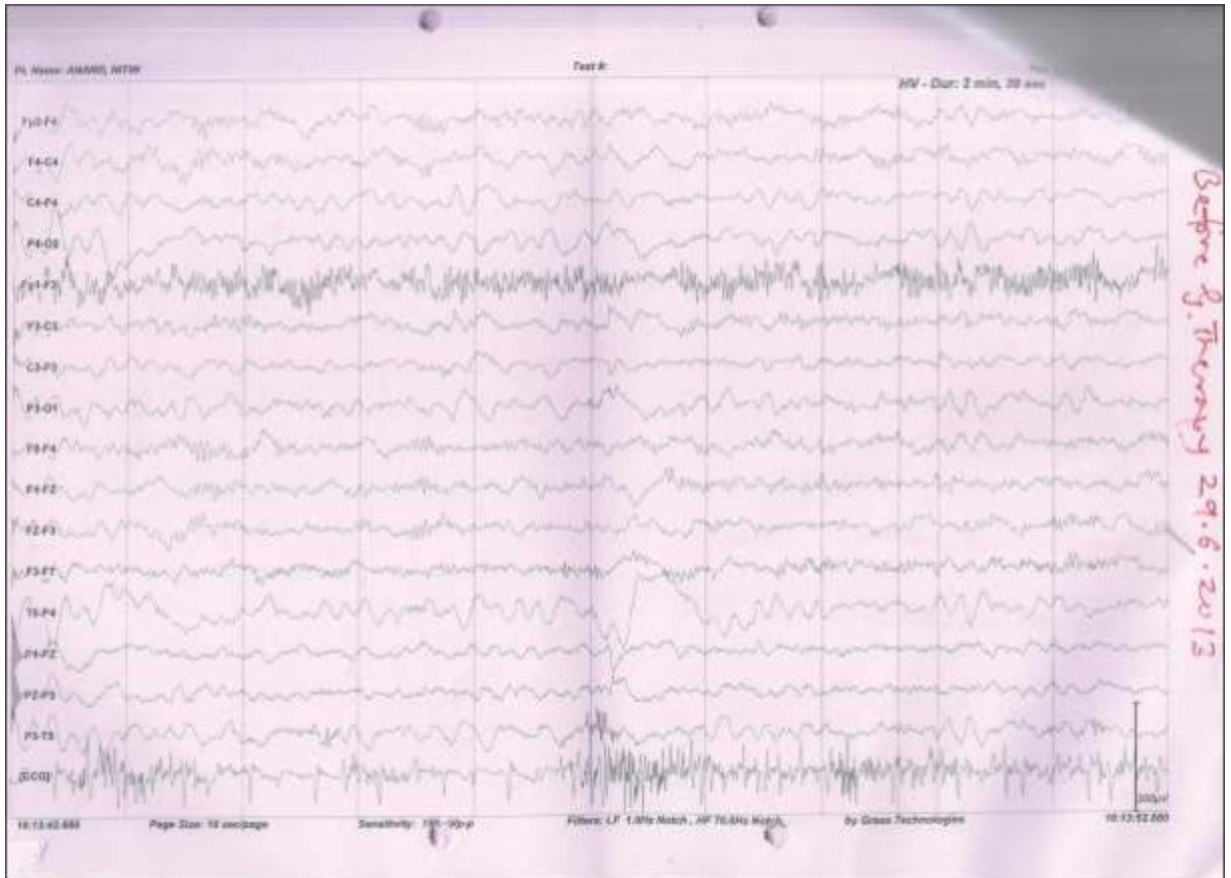
After  
G Therapy

After G Therapy 23.6.17

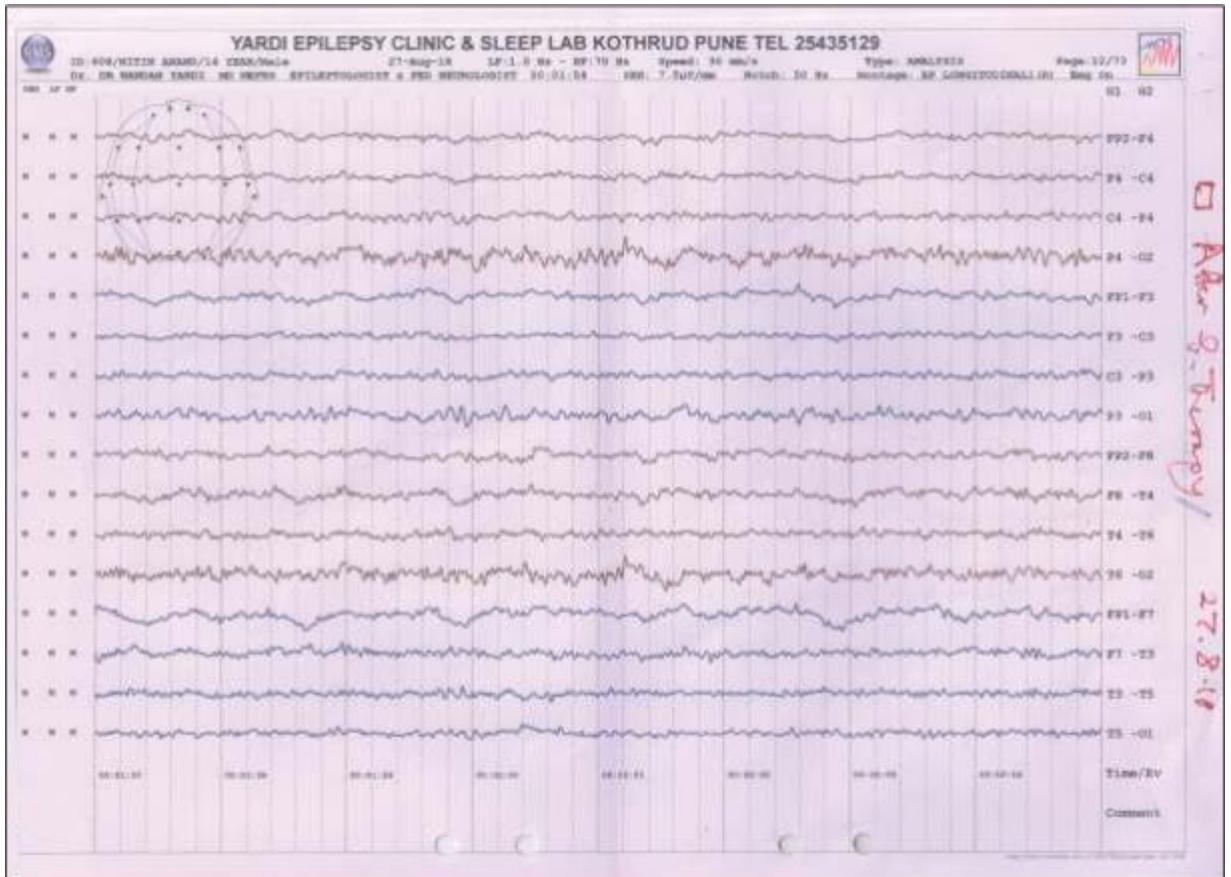


# Case 41

Before  
G Therapy



After  
G Therapy

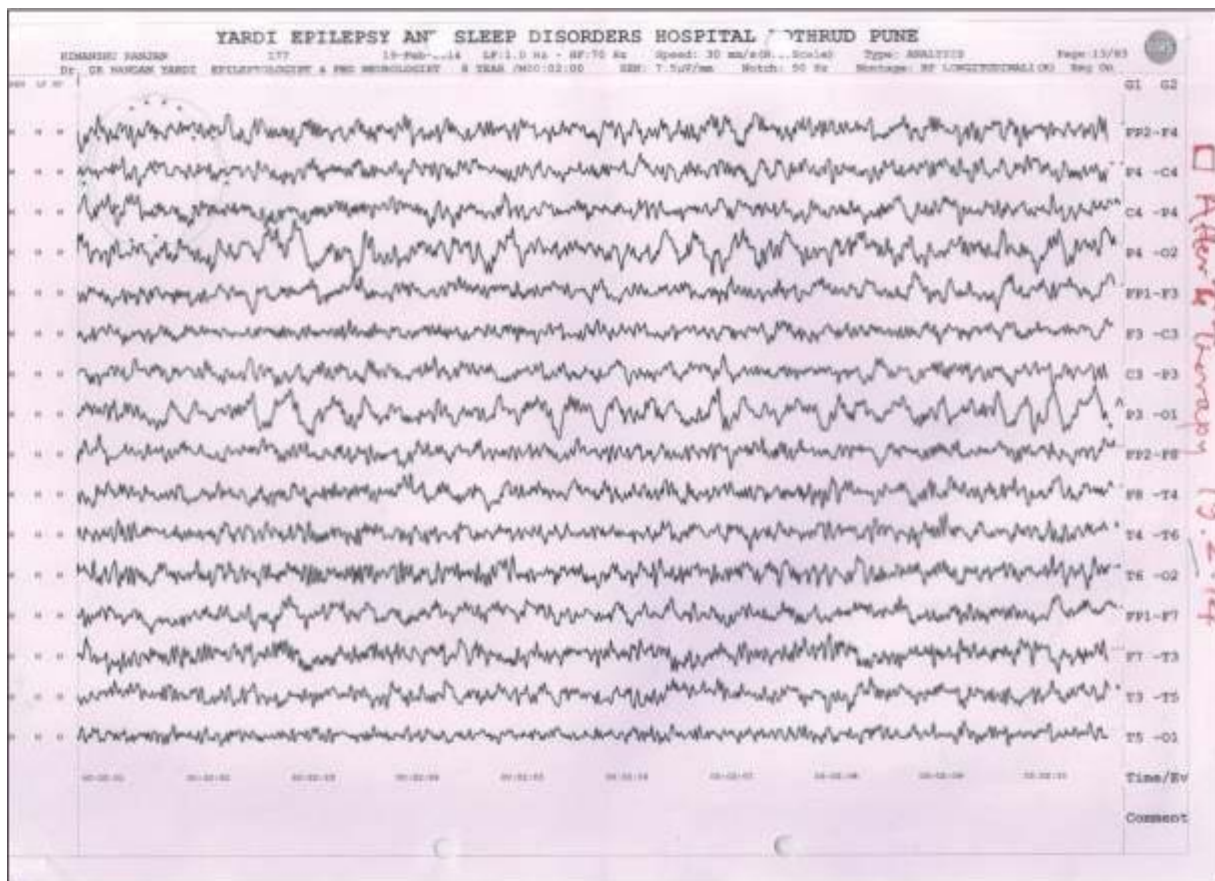




# Case 42



Before G Therapy

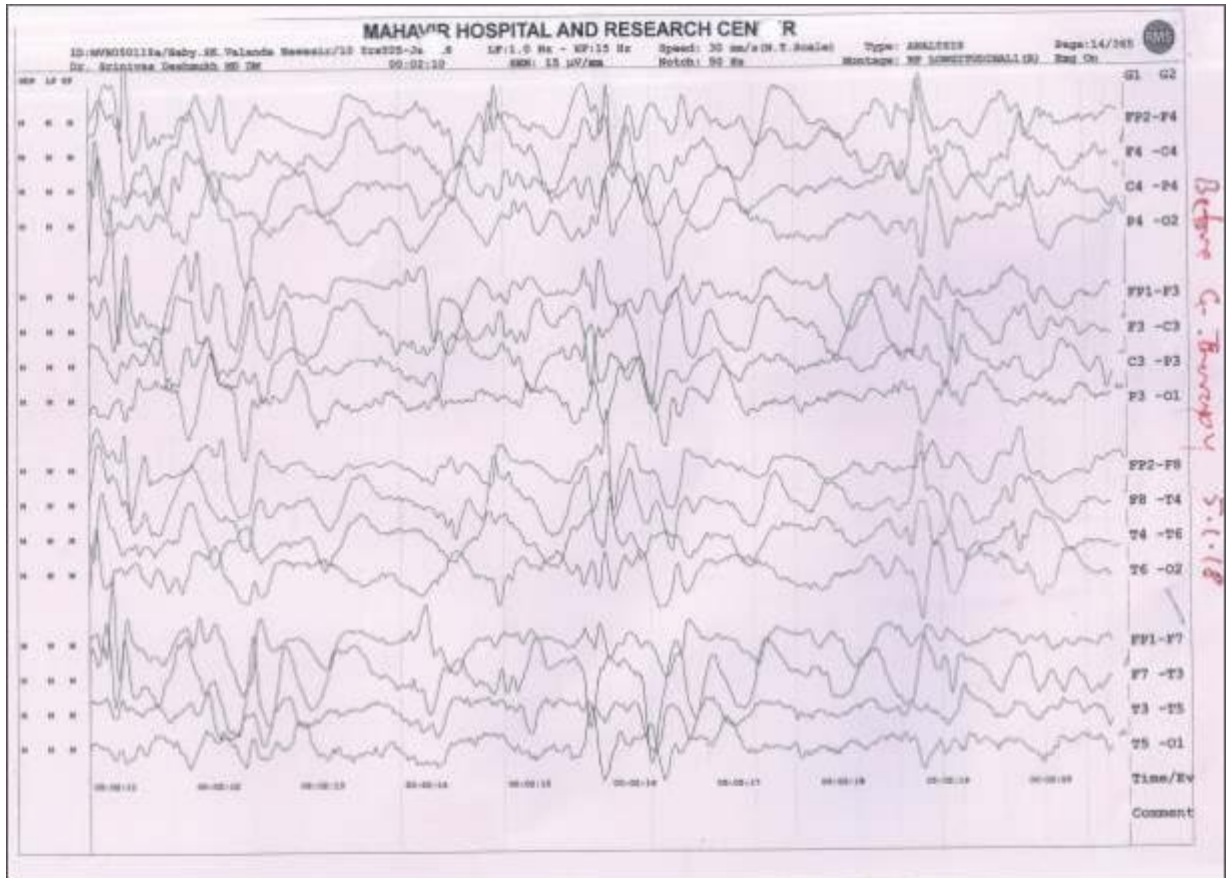


After G Therapy

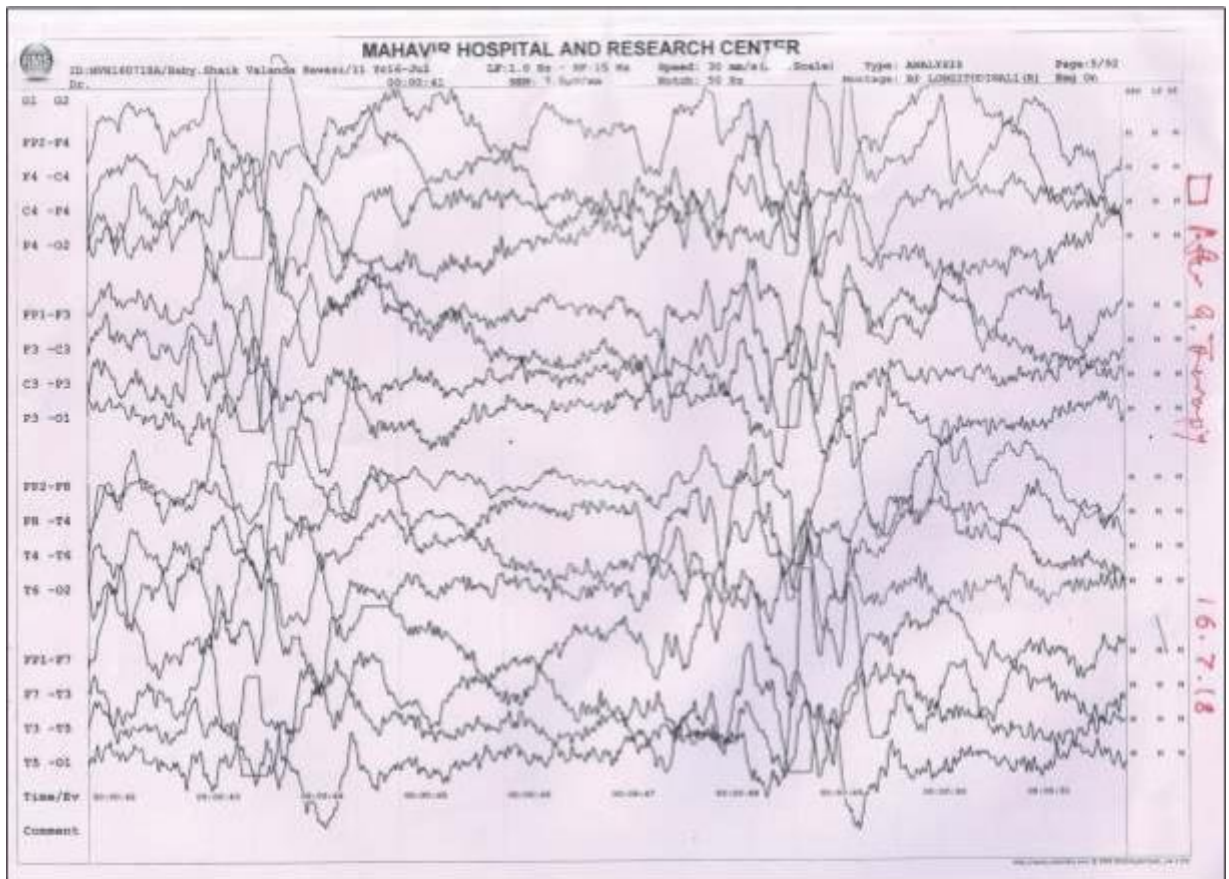


# Case 43

Before  
G Therapy

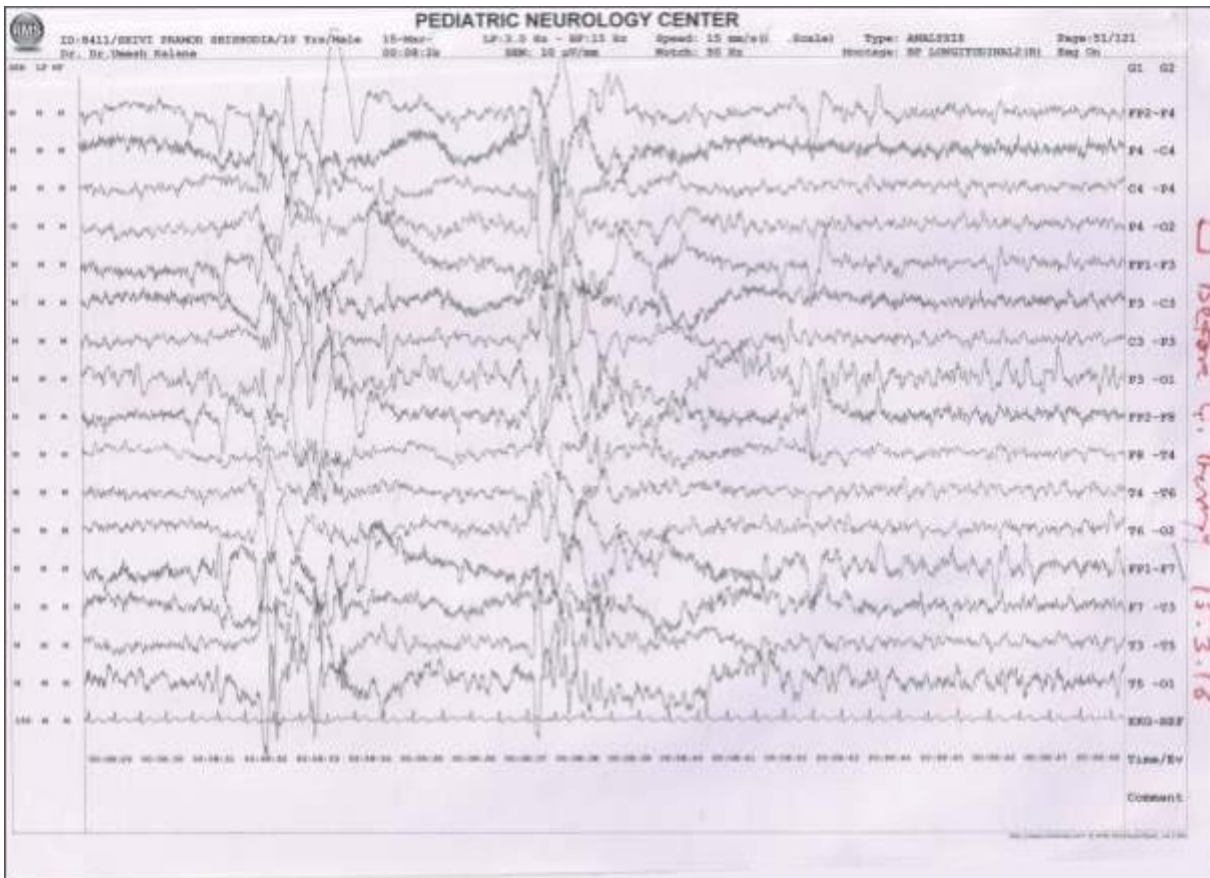


After  
G Therapy



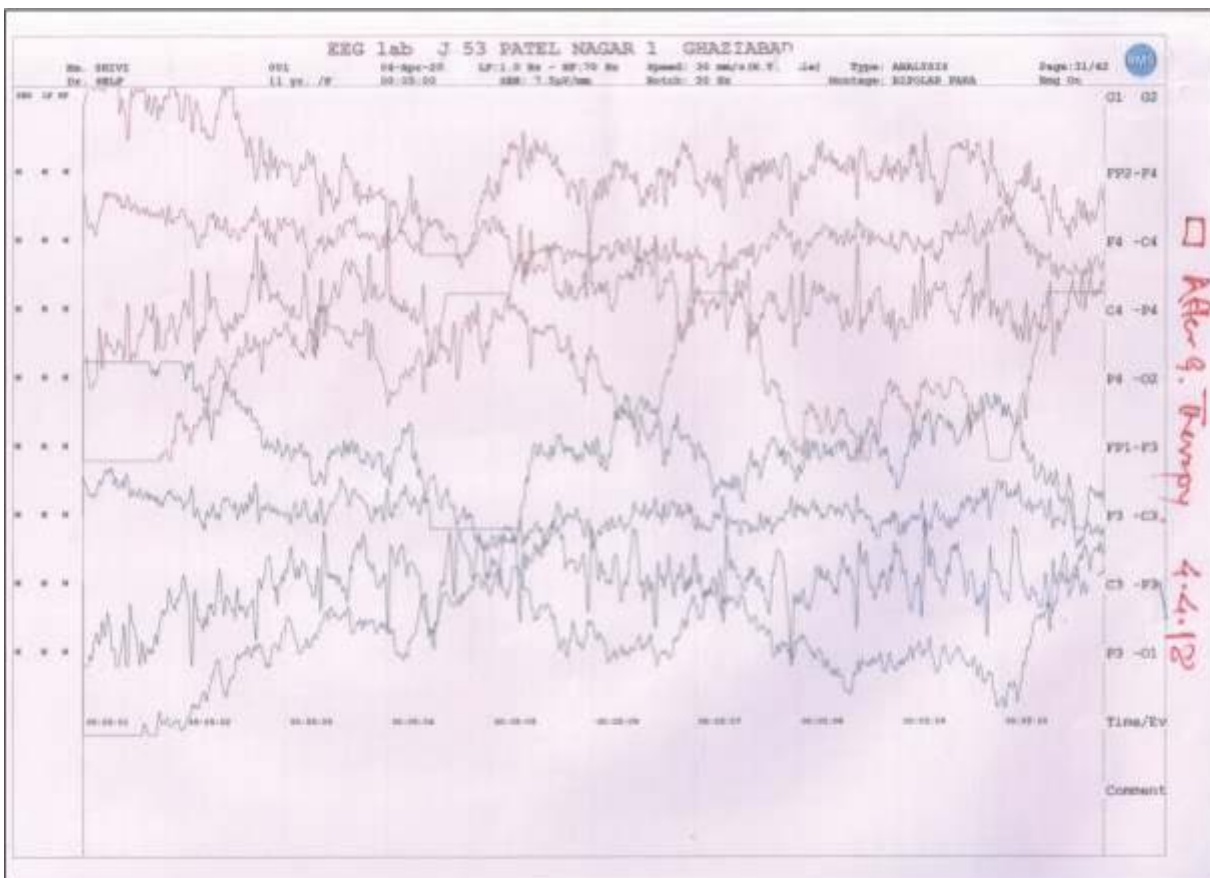


## Case 44



Before  
G Therapy

Before G. Therapy 15.3.16



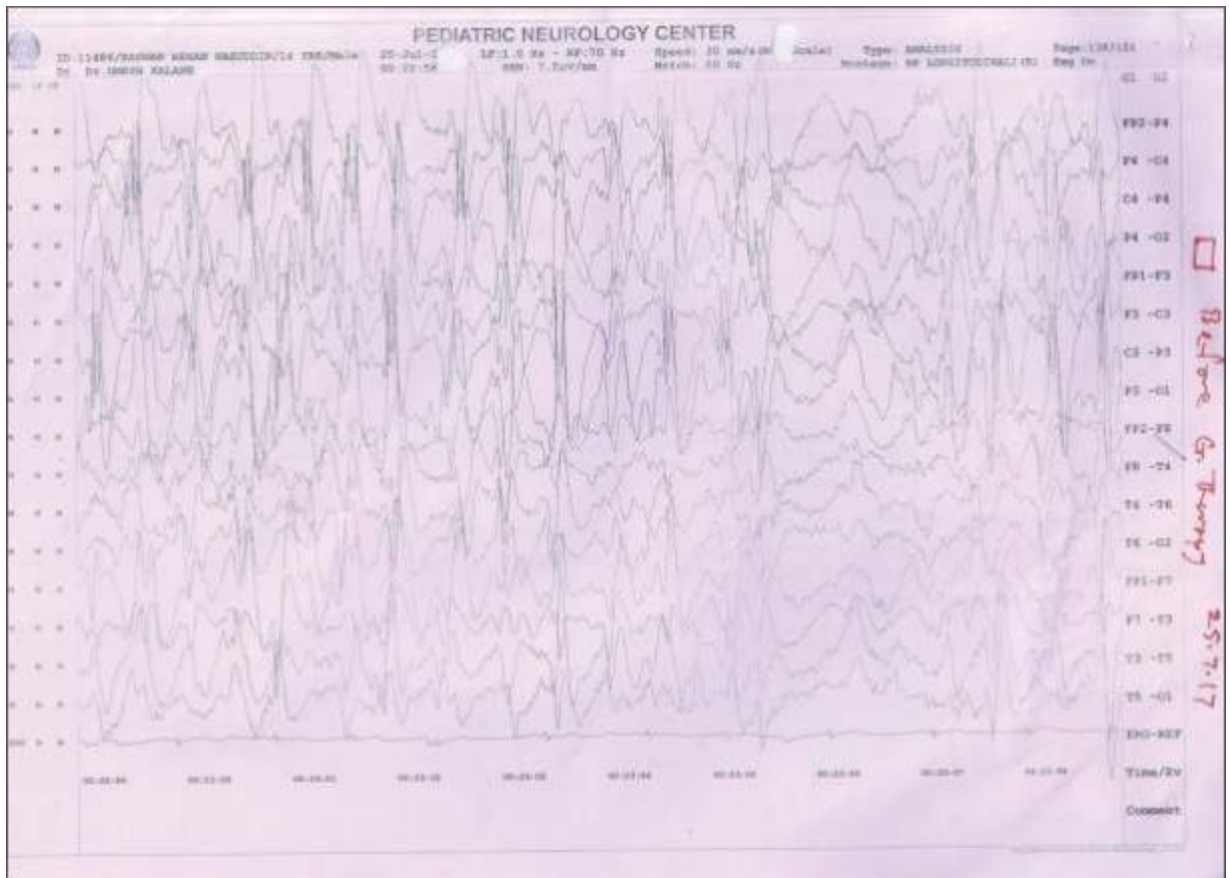
After  
G Therapy

After G. Therapy 4.4.16

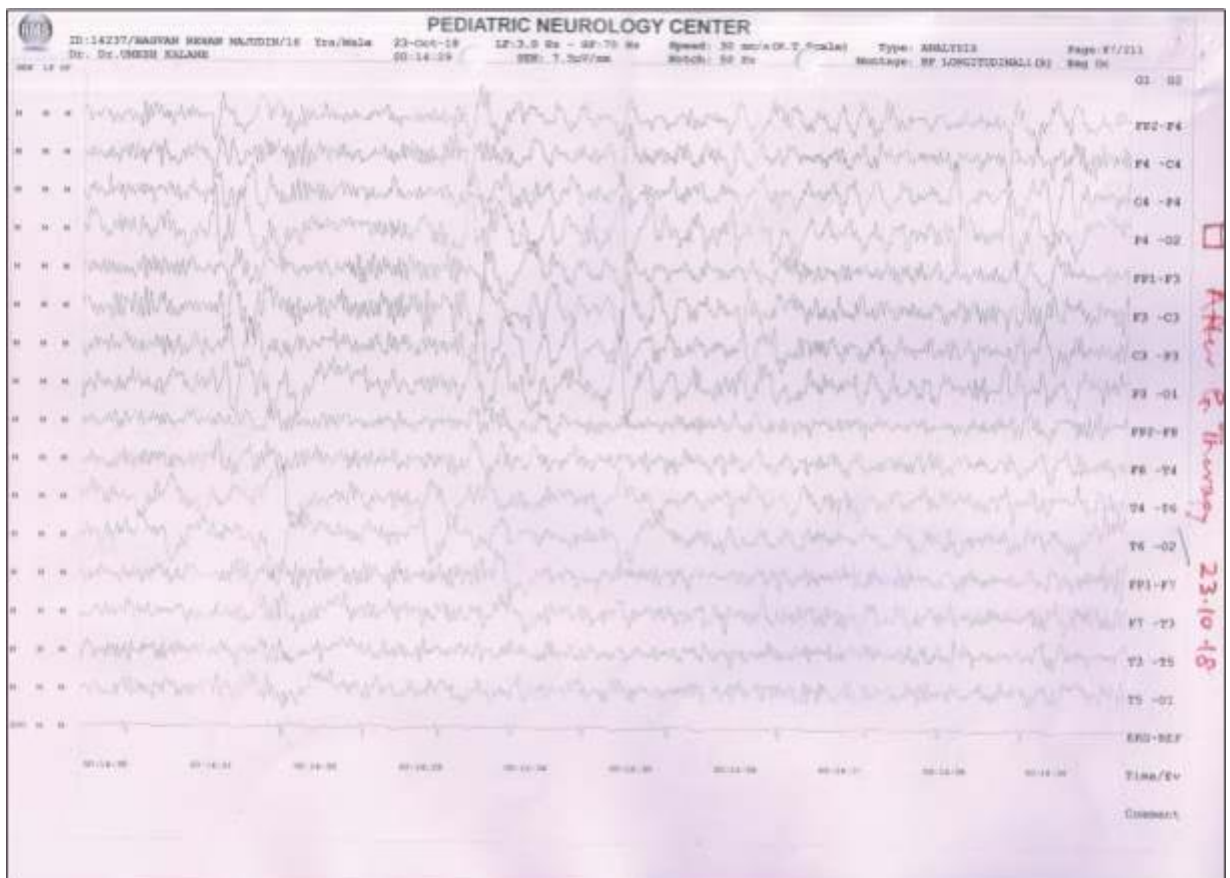


## Case 45

Before  
G Therapy



After  
G Therapy

















## OUR SERVICE TO HUMANITY

Dr. Oswal and his daughter Dr. Pooja Upasani  
are committed to provide G-Therapy  
free of cost  
to all SSPE patients lifelong and worldwide.

Disclaimer: This booklet is intended to provide basic information regarding G Therapy (NeuroG) Medicine. It does not have advice or prescriptions for your medical problems. The information in this brochure is Dr. D'swal's observation from research in the field of neurological conditions with G Therapy (NeuroG) Medicine. Parents and care takers are strongly advised to consult their pediatrician or doctor before starting this therapy. We have presented case studies, photographs, news clippings and testimonials of parents and professionals in this booklet with due consent to the best of our knowledge. In addition: We have complied with the relevant laws in India and specify that the jurisdiction lies within India. We make no warranty of any kind, implied or express, as to its accuracy, completeness or appropriateness for any purpose of information contained in this booklet. We will make an effort to correct errors brought to our attention. The content in this booklet is presented in a summary form, is general in nature, and is provided for informational purposes only. The content is not intended in any way to be a substitute for professional medical advice. The information in this booklet is for peer review for further medical research for Humanity.

[7 November 2018]

We would be happy to hear from you and be of help to children with special needs  
&SSPE individuals from around the world.



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