

## Dr Kamini D Lakhiani

### *'Sugar Rush' of Good Health*

*"I'm dedicated to simplifying what is often a very complicated and confusing area of health care", says Dr. Kamini D. Lakhiani, a caring and skilled professional in Diabetes and Metabolic Disorder Specialist*  
*And these are a few pages out of her book.*

#### **DR. OF DIABETES**

Dr. Lakhiani has been practising medicine at Ramakrishna Mission Hospital at Khar West for the last 10 years and has her own clinic named **Sadhana Proactive Clinic** at Khar.

She is trained in treating Diabetes, a modern epidemic which indicates combined adverse health effects of diabetes mellitus and obesity. Besides winning many prestigious laurels to her name like the **Golden Aim Awards' Most Preferred Diabetologist in Mumbai 2021, Golden Aim Conference Awards' Most Trusted Diabetologist in Mumbai 2022**, she has also won the **ThreeBestRated Award for One of the Top Rated Diabetologist in Mumbai** consecutively for the last five years since 2018.

Dr. Lakhiani credits a lot of her success to her team including a nurse, a dietician, a receptionist and an assistant doctor who play a massive role in tackling tough and tricky situations without any hesitation. Encircled by her ever-encouraging family, Dr. Kamini's life purpose involves spreading detailed awareness for a healthy lifestyle in order to avoid health risks. As a result of her objective to raise awareness, she has held Many Diabetic Camps at Khar Gymkhana, Rotary services in the past and given series of lectures on Diabetic Awareness & Enlightenment in the course of Diabetes, Obesity and its lifestyle management.

Fuelled by a professional and holistic approach towards her career, Dr. Lakhiani aims at devising alternatives to treat her patients rather than prescribing medications that could last all their lives. This enables her to conduct in-depth organized check-ups which help to determine the root causes of metabolism irregularities, hormonal issues, PCOS, etc. A further access to the patient's medical records aids her in laying down a suitable plan of treatment as well as a fitting diet that is feasible for them and all other aspects of their lives.



M.B.B.S. (BOM)  
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#### **DOCTOR'S IMPACT ON PATIENTS WITH DIABETES**

There are many cases that have shaped Dr. Lakhiani to be the doctor she has become. One such instance was that of a young girl who was morbidly obese, bordering at an early stage of diabetes. Unfortunately, she was on incorrect medication which resulted in an increase of weight and irregularity in her monthly-cycles, further proving all her other efforts to work on herself as ineffective.

Under Dr. Lakhiani's care, she was articulately diagnosed, and her medications were corrected. This further helped her to reduce the unhealthy weight, rekindling the lost hope. Today, that same girl is free of diabetes; her obesity is under control and her self-confidence is through the roof.

Dr. Lakhiani, then commented that the '**Proactive**' in her clinic's name implies **preventive** and **reversible**.

**"I don't want a patient to be dependent on me or my medicines for their entire life,"** she said. She wants to support her patients when they need her along with teaching them the art of managing their health by themselves. When the reports are positive and the patient is doing well, she couldn't be happier. She said, **"It is the best job satisfaction I can have in my career."**

Dr. Lakhiani believes that a patient must be treated with, as ironic as it may seem, sweetness as well as strictness. The amiable and genuine relationship between herself and her patients has not gone unnoticed. All of Dr. Lakhiani's patients swear by her expertise towards a sustainable and healthy lifestyle.

## REVIEWS

**"Dr. Kamini is just superb at her work; an excellent diagnostician and an amazing doctor as well as a much needed counsel who really helped me with my blood levels , PCOS and gave me a good result! She is just the person most women of our time need! She's a 10 !!!!!"**

Ishra Banatwala, a patient of Sadhana Proactive Clinic, reviewed Dr. Lakhiani and the clinic online.

While Akhilesh Bhargava wrote, **"Dr. Kamini has been consulting my parents for over 4 years now ; her diagnostics and ability to pick up the problem from the symptoms is unmatched.**

**Further, because of their age my parents are stubborn; they have never followed any doctor in discipline except Dr. Lakhiani and that is because she treats them like family ."**

These are only a small reflection of the impact she has created on her patients' lives out of abundant optimistic ones online.



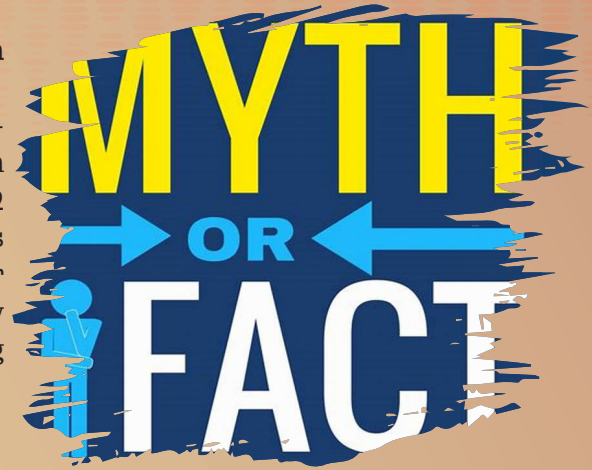


# DEBUNKED

## MYTHS OF DIABETES:

1. **"It is mainly prevalent in Western countries, and only rich people get it."**

**FALSE** - It exists universally and has no geographic, religious, socio-economic, or any other limitations. Obesity, which is more common in financially well-off people, is one of the predisposing factors for Type 2 diabetes (Diabesity, which develops in middle age). Hence, diabetes is more common in obese people. However, in our country, a large number of diabetics have an average or below-average weight. Moreover, many underprivileged diabetics in our country remain undetected for a long time due to a lack of medical facilities.



2. **"Those who do not eat sweets will not develop diabetes."**

**FALSE** - Diabetics have a deficiency of insulin, and anybody who develops moderate to severe deficiency of insulin will have diabetes, even if they do not eat any sweets!

3. **"Presence of urine sugar alone confirms diabetes."**

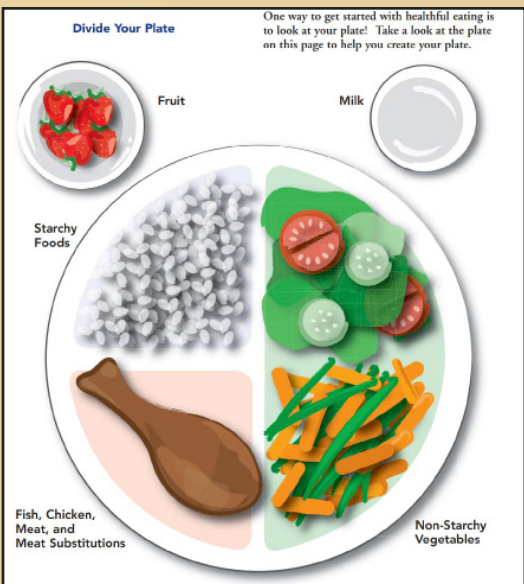
**FALSE** - Not so. Blood glucose testing is mandatory for diagnosis; urine glucose alone is not sufficient. A more accurate test is the HbA1c, which is an average percentage of blood sugars over the last 90 days, used to monitor and even diagnose early diabetes. There is no fasting required for it.

4. **"Hyperglycaemia (high blood sugars) is invariably symptomatic."**

**FALSE** - Patients with very high blood glucose values may be totally asymptomatic. This is why it is called the "silent killer." Diagnosed diabetics represent only the tip of an iceberg. The majority are undiagnosed. Therefore, one has to do regular health checkups at frequent intervals, irrespective of whether one has any complaints or not.

5. **"All carbohydrates are to be avoided in diabetes."**

**FALSE** - This is not only incorrect but also dangerous. Glucose is required for energy production by all, including diabetics. If carbohydrates are completely curtailed, energy production will be carried out from fats, which will result in the production of ketones (ketosis) that are toxic to the body. No foods are forbidden. Carbohydrate foods, including bread, rice, and corn, are part of a balanced meal plan. It's the amount that counts.



6. **"Honey cures diabetes."**

**FALSE** - Honey, jaggery (gur), are natural form of sugars only, so are restricted (not totally prohibited) in diabetes. Portion control is the key to a healthy balanced diet.

7. **"All fruits are harmful in diabetes."**

**FALSE** - Some fresh fruits are always recommended for diabetics, and if possible, fruits should be taken whole (with peel), which will increase the fiber content and thereby keep diabetes in check. The rule is one fruit a day on an exchangeable basis (no fruit juices). At a single time, any ONE fruit can be taken as a mid-meal snack. Never combine a fruit with your major meals.

**8. "Walking barefoot is good for diabetes."**

**FALSE** - Walking is the best exercise for a diabetic, but never walk barefoot. Diabetics are prone to loss of sensation in their feet and ulceration, which takes a long time to heal. Gangrene may result in amputation.

**9. "Oral hypoglycaemic agents (drugs used to treat diabetes) are habit-forming."**

**FALSE** - They are given in addition and not as a replacement for diet and exercise. Only in certain diabetics, it is mandatory, while others may need them intermittently.

**10. "All the oral hypoglycaemic tablets are the same and may be interchanged."**

**FALSE** - Many patients change their tablet if a particular tablet is not available for any reason. This is not only incorrect but may be dangerous, as most medicines have different onset and duration of action and are prescribed under different sets of conditions.

**11. "Additional tablets/insulin may work after a dietary indiscretion."**

**FALSE** - Many patients take an extra half to one tablet with a feast, hoping that the irregularities committed during the party may be covered. However, this only leads to erratic sugar control with swings of hypoglycaemia (low blood sugar drops) and hyperglycaemia (high blood sugar spikes).

**12. "Drugs should be stopped during illness."**

**FALSE** - Drugs and diet should be continued during an ailment. As a matter of fact, the requirement of drugs during any other disease may increase.

**13. "Once on insulin, always on insulin."**

**FALSE** - Insulin is mandatory in type 1 diabetes and has to be taken for life. Type 2 diabetics, however, do well on oral hypoglycaemic agents but may require insulin temporarily during surgery, trauma, pregnancy, or any major illness.

**14. "Insulin is available in the form of tablets."**

**NOT YET** - Insulin delivery has improved, but it still must be taken by injection. (The future is inhaled insulin in the pipeline).

**15. Can diabetes be "healed/reversed/cured"?**

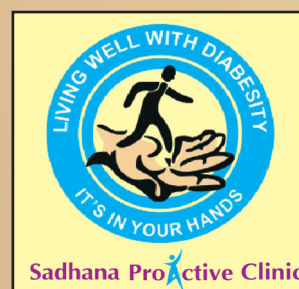
Both diabetes and pre-diabetes can enter a state of remission rather than have a complete reversal. It encompasses factors such as food choices, exercise, and sufficient sleep of 8 to 9 hours. By focusing on these aspects, individuals can effectively reverse their condition.

*In the short period of time that I spent with her, this is all I could extract from the extremely busy and over-booked Dr. Kamini D Lakhiani.*

*For more detailed information, you can consult Dr. Kamini Lakhiani at:*



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