

DR. NEHA MISHRA

Consultant - Surgical Oncology

Qualification

MCh Surgical Oncology

Overview

I have received my training of Surgical Oncology from premier institutes in India, including AIIMS Delhi, AIIMS Rishikesh and TMC Varanasi. After completing MCh in Surgical Oncology, I have served as an Assistant Professor at Tata Memorial Centre, Varanasi. I have received mentorship from renowned experts during my training and work at both AIIMS and TMC. My training encompasses the entire spectrum of Surgical Oncology with expertise in Breast, GI and HPB cancers and Gynae- Oncology, including minimally invasive surgeries, cytoreductive surgeries with HIPEC, and complex cancer surgeries necessitating multivisceral resections. I have a patient-centric, multidisciplinary approach taking into account the unique biology of each and every disease and patient as a whole. I believe in comprehensive cancer counselling, assisting patients in confidently exploring and selecting appropriate treatment options, empowering them to comprehend the advantages and safety of contemporary cancer surgeries and other treatment modalities.

Fellowship & Membership

- Lifelong member of IASO since 2021 (M0148) and ASI (FL-37716) since 2014.

Field of Expertise

- Breast
- GI
- Gynae Oncology

Languages Spoken

- English
- Hindi

Talks & Publications

- The Banaras Convention: A Safe & Reliable Technique for Axillary Dissection by Lateral exposure of Latissimus Dorsi Pedicle. Chirurgia. 2024 Aug;119:440-4.
- Routine sterile glove and instrument change at the time of abdominal wound closure to prevent surgical site infection (ChEETAh): a model-based cost-effectiveness analysis of a pragmatic, cluster-randomised trial in seven low-income and middle-income countries. Lancet Glob Health. 2024 Feb 1;12(2):e235-42.
- The impact of surgical delay on resectability of colorectal cancer: An international prospective cohort study. Colorectal Disease. 2022 Jun;24(6):708-26.
- Routine sterile glove and instrument change at the time of abdominal wound closure to prevent surgical site infection

(ChEETAh): a pragmatic, cluster-randomised trial in seven low-income and middle-income countries. The Lancet. 2022 Nov 19;400(10365):1767-76.

- Effect of COVID-19 pandemic lockdowns on planned cancer surgery for 15 tumour types in 61 countries: an international, prospective, cohort study. The Lancet Oncology. 2021 Nov 1;22(11):1507-17.
- Global wealth disparities drive adherence to COVID-safe pathways in head and neck cancer surgery. BJS open 5, no. 6 (2021).
- Preservation of Intercostobrachial nerve during mastectomy in patients of breast cancer- International Journal of Health Sciences and Research 2017;7(4):61-67.
- Late presentation of sub-carinal oesophageal perforation due to blunt trauma to chest: case report and review of literature – International Surgery Journal 2016;3(2).
- Transvisceral migration of Gossypiboma presenting as gastric outlet obstruction managed endoscopically- International Surgery Journal 2016;3(3).
- Pseudotumour presentation of renal tuberculosis mimicking renal cell carcinoma: A rare entity – Turkish Journal of Urology 2016;42(3).
- Role of nasojejunal tube feeding in upper gastrointestinal surgery and review of efficacy, complication and cost-effectiveness in comparison to feeding jejunostomy and parenteral nutrition - Haryana Medical Journal 2014; 41(4,5&6).
- No surgery doesn't mean no treatment in cancer: Expert. Click Here