

Curriculum Vitae

Name: GANGIREDDY SIVA SANKAR REDDY MD,DM
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ACADEMIC APPOINTMENTS

Senior Consultant and Chief of the Division

Department of Digestive Diseases
Tata Medical Center, Kolkata, India

February 2017- Current

Senior Resident, Department of Digestive Diseases

Deenanath Mangeshkar Hospital, Pune, India

July- December 2016

Specialist Senior Resident, Department of Digestive Diseases

Tata Memorial Hospital, Mumbai, India

July 2015 –June 2016

Assistant Professor, Department of Internal Medicine

Navodaya Medical College, Raichur, India

June 2011-May 2012

Senior Resident, Department of Internal Medicine

St. John's Medical College, Bangalore, India

June 2010- May 2011

Junior Resident, Department of Critical Care

St. John's Medical College, Bangalore, India

Nov 2006 - May 2007

Resident Medical Officer

Emmaus Swiss Leprosy Hospital, Palamaner, India

June 2003 –May 2005

Medical education and training

Graduate

MBBS: St John's Medical College, Bangalore (1997-2003)

Postgraduate

MD (General Medicine): St John's Medical College, Bangalore (2007-2010)

Superspeciality

DM (Gastroenterology): Tata Memorial Hospital, Mumbai (2012 -2015)

Advanced Endoscopy Training

ERCP and EUS training at Department of Digestive Disease at Deenanath Mangeshkar Hospital, Pune (July-Dec 2016)

Gastroenterology training and one year service in Gastroenterology department

Senior Resident: Department of Digestive Diseases and Clinical Nutrition, Tata Memorial Hospital, Mumbai 2012 to 2015

Specialist Sr. Resident: Department of Digestive Diseases and Clinical Nutrition, Tata Memorial Hospital August 2015 to January 2016

Specialist Sr. Resident: Dept. Gastroenterology, TN Medical college and BYL Nair Hospital, Mumbai from February 2016 to July 2016

Clinical experience in Digestive Diseases

Digestive diseases: Management of benign and premalignant disease of gastrointestinal tract , hepatobiliary system and pancreas.

GI Motility and

Functional Disorders: Well versed with-High Resolution Esophageal Manometry,Anorectal Manometry, Esophageal pH studies, Hydrogen Breath Test, Urease breath Test

Endoscopy: Diagnostic and therapeutic upper and lower GI Endoscopy, Endoscopic Mucosal Resection (EMR) routine ERCP and EUS procedures.

Advanced Endoscopy Procedures : Endoscopy Submucosal Dissection(ESD), therapeutic EUS procedures like Celiac plexus neurolysis, EUS guided Gastroenterostomy, EUS guided biliary drainage procedures like hepaticogastrostomy, CDS, an

Digestive Oncology: Work up and management of all types of cancers of the gastrointestinal tract including hepatobiliary and pancreatic tumors. Worked in the GI Oncology MDT at TMH Mumbai for 3.5 years and at TMC Kolkata.

Clinical Nutrition: Nutrition screening and assessment and provision of oral, enteral and parenteral nutrition support.

Clinical procedures that I regularly perform and their uses

1. Advanced curative endoscopic procedures for early gastrointestinal (GI) cancers are regularly performed, including third space endoscopy techniques such as Endoscopic Submucosal Dissection (ESD) and device-assisted full-thickness resection (FTRD) for early esophageal cancers, gastric cancers, duodenal neuroendocrine tumors (NETs), rectal polyps, and cancers. These minimally invasive procedures aim to cure patients with early-stage GI malignancies, thereby eliminating the need for surgical intervention that carries significant risks of morbidity and mortality.
2. Advanced EUS-guided interventions—such as EUS-guided gastroenterostomy for patients with Gastric Outlet obstruction and EUS-guided biliary drainage procedures like choledochoduodenostomy and hepaticogastrostomy—are utilized to palliate symptoms including vomiting, pruritus, and jaundice in patients in whom ERCP fails or not suitable for ERCP. These approaches offer effective

symptom management without subjecting patients to the considerable risks associated with major surgery.

3. ENDOSCOPY GUIDED FEEDING TUBE PLACEMENTS- like PEG (Percutaneous endoscopic Gastrostomy) tube placement, Nasojejunal Tube Placement (NJT) in patients with Gastric outlet obstruction, Endoscopy guided Nasogastric tube placement in patients with obstructing esophageal cancers are very crucial in maintaining the good nutritional status of the patients which ultimately plays a key role in deciding further oncologic treatment in patients.
4. ENDOSCOPY GUIDED PAIN MANAGEMENT: Pain is very debilitating symptom for patients. Chronic abdominal pain can be reduced with EUS guided celiac plexus neurolysis, pancreatic pseudocyst drainage etc
5. ERCP : Endoscopic Retrograde Cholangiopancreatography assists in dealing with various pancreatic and bile duct conditions like reducing jaundice in extrahepatic biliary obstruction, CBD stone clearance, pancreatic duct stone clearance and stenting , treating emergency conditions like cholangitis etc.
6. GI Blood loss: GI intestinal source of bleeding is an emergency procedure and procedures like Endoscopy guided variceal banding, ulcer treatment, EUS guided glue and coiling , Argon Plasma coagulation, Hemostatic clip application are life saving procedures.
7. FISTULA and CAVITY CLOSURE: Surgical complications or spontaneous fistulas in GI track are effectively closed with use of Endoscopy Vacuum Therapy, Ovesco clip application, stent placement
8. LUMINAL STENTS: Esophageal ,gastroduodenal, colonic , enteral metal stents are commonly done to relieve obstruction.
9. ENDOSCOPIC MANAGEMENT OF PRECANCEROUS CONDITIONS: Endoscopy removal of polyps (polypectomy/EMR) helps in preventing cancer development
10. STRICTURE DILATATION: Peptic strictures, corrosive strictures, post radiation or surgical anastomosis strictures are dilated using Dilators or balloons which help in maintaining the lumen of GI track.
11. Endoscopy and Colonoscopy: Basic endoscopy and colonoscopy helps in diagnosing multiple issues related to GI track and also helps in identifying precancerous conditions like polyps.

12. SpyGlas Cholangioscopy: Expert use of the Boston Scientific SpyGlass™ DS System for direct visualization of the bile and pancreatic ducts. Utilizing this technology for targeted biopsies of indeterminate strictures and Electrohydraulic Lithotripsy (EHL) for complex stone fragmentation.

Administrative Responsibilities:

- Head of Department, Digestive Diseases | Tata Medical Center (TMC), Kolkata
January 2024 – Present
Directing clinical operations and strategic planning for one of India's premier tertiary cancer centers. Leading a multidisciplinary team focused on advanced interventional endoscopy and GI oncology.
- Member, Governing Council | Society of Gastrointestinal Endoscopy of India (SGEI)
March 2025 – Present
Providing leadership for the West Bengal chapter and national council to advance endoscopic standards, training, and research across India.

Organizational Abilities

Clinical Training & Workshops: Regularly organizes and leads specialized Endoscopy Workshops, focusing on advancing technical proficiency in diagnostic and therapeutic procedures for medical professionals.

Preventive Oncology Advocacy: Spearheads Patient Education Programmes dedicated to preventive oncology, focusing on early detection strategies and lifestyle interventions for gastrointestinal cancers.

Capacity Building: Conducts structured Training Programmes for Nursing and Technical Staff to enhance perioperative care standards and ensure high-level operational efficiency within endoscopy units. Regularly conducts Endoscopy workshops, patients education programmes on preventive oncology and nursing staff and technical staff training programmes

Professional Memberships

Member of Indian Society of Gastroenterology (ISG)

Member of Indian National Association for Study of the Liver (INASL)

Member of Indian Motility and Functional Disease Association (IMFDA)
Member of Society of Gastrointestinal Endoscopy of India (SGEI)

Publications/Research/ Abstracts

1. Das A, Joseph TS, Reddy GS, Pipara A, Mukhopadhyay S. Migrated Foreign Body Perforating the Colon: Scope for Colonoscopy. *Cureus*. 2025 Jan 28;17(1).
2. Gangireddy SS, Das N, Goel G, Bhattacharya S, Mallath MK. Hidden burden of Hepatitis B infection in cancer patients in India. *Journal of Gastroenterology and Hepatology* 2019 Dec 1 (Vol. 34, pp. 332-332).
3. Gangireddy SS, Mallath MK. Yield of Endoscopic Ultrasound-Guided Fine Needle Aspiration Cytology in solid pancreatic lesions. *Journal of Gastroenterology and Hepatology* 2019 Dec 1 (Vol. 34, pp. 384-384).
4. Bapaye A, Gangireddy SS, Mahadik M, Pujari R, Date S, Dubale N, Bapaye JA. 999 Anti-reflux mucosectomy (ARMS) for refractory GERD and initial clinical experience. *Gastrointestinal Endoscopy*. 2017 May 1;85(5):AB120.
5. Dubale N, Bapaye A, Mahadik M, Bharadwaj T, Gangireddy SS, Pujari R, Date S, Bapaye JA. Su1222 Endoscopic Resection of Duodenal Lesions and a Single Center Experience. *Gastrointestinal Endoscopy*. 2017 May 1;85(5):AB320.
6. Dharmadhkari K, Dubale N, Kshirsagar J, Mahadik M, Gadhikar HP, Pujari R, Gangireddy SS, Bharadwaj T, Bapaye JA, Date S, Bapaye A. Evaluation of Safety of Per-Oral Endoscopic Myotomy (POEM) for Achalasia Cardia Performed in an Endoscopy Unit: an Anaesthetist's Perspective. *Gastrointestinal Endoscopy*. 2017 May 1;85(5):AB603.
7. Bapaye A, Mahadik M, Dubale N, Gangireddy SS. 1111 Modified EUS-Guided Rendezvous Drainage of an Obstructed Non-Dilated Main Pancreatic Duct (MPD) Due to Chronic Pancreatitis. *Gastrointestinal Endoscopy*. 2017 May 1;85(5):AB144.
8. Renal Manifestations in Patients with Systemic Lupus Erythematosus. Oral presentation and abstract at APICON 2008, Kochi.

9. Cardiac manifestations in HIV infected adult patients. (Thesis during MD General Medicine)
10. Small bowel adenocarcinomas - a single center experience. Siva Sankar Reddy Gangireddy, Shaesta Mehta, Prachi S Patil. Abstract submitted at ISG conference, Ahmedabad, 2013.
11. Patterns of care for biliary tract cancers: a single center experience (Thesis during DM Gastroenterology).
12. Bile cultures and sensitivity patterns in malignant obstructive jaundice- retrospective study- abstract at ISGCON 2022, Jaipur.

Speaking Engagements at International and National Conferences

1. EUS station Lecture and demonstration at EUS workshop on 21st and 22nd May 2022 at Apollo Hospitals, Kolkata
2. Polypectomy procedures at Gastrointestinal Endoscopy Technician Training(GETT) program, Module II held on 3rd September 2022.
3. Luminal dilatation procedures at Gastrointestinal Endoscopy Technician Training(GETT) program, Module II held on 3rd September 2022.
4. Diagnostic procedure assistance at Gastrointestinal Endoscopy Technician Training(GETT) program, Module III held on 15th June 2024.
5. Endoscopic Vacuum Therapy for post operative esophageal leak at SGIE WB Chapter meet in November 2024.
6. Evaluation of Indeterminate Bile Duct Stricture. How far we reached? At Hepatobiliary Conference held at Kolkata in February 2025.
7. ESD for early esophageal cancers at SGIE WB Chapter meet held in March 2025.
8. EUS guided Gastroenterostomy during GI Mentors workshop

held on 10 th May 2025 at Tata Medical Center.

9. EUS guided tissue sampling at YES (Young Endoscopist Upskilling Program held at Apollo Hospitals, Kolkata in May 25.
10. Panel discussion on Nutrition critical care and small bowel transplantation in chronic intestinal pseudo-obstruction held during 8th Annual Congress of Indian Neurogastroenterology and Motility Association at Kolkata in August 2025.
11. Video Presentation on Troubleshooting during EUS CDS at 7th India EUS Summit- September 2025.
12. Debate based Conference GI HUNGAMA – Debated Against -All Average Risk Individuals should begin colonoscopy screening at age 45- held on 8th November, 2025 at Bhubaneswar.
13. Distinguished Oral Abstract Presentation on Endoscopic management of early esophageal and GE junction cancers- a single center experience at International workshop on Endoscopic management of early GI cancers held on 25th January 2026 at AIG, Hyderabad, India.