



Book review: The Pendulum and The Purpose

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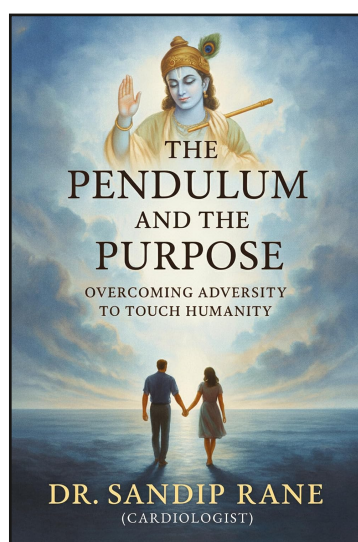
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The Pendulum and the Purpose *Overcoming Adversity To Touch Humanity*

Author: Dr Sandip Rane (Cardiologist)
Publisher: StoryMirror Infotech Pvt Ltd, Mumbai

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"The scar of tracheostomy on our necks is a grim reminder of the storm that we have undergone. We are probably the only doctor couple on the globe, who have been on a ventilator for nearly a month, fought the ordeals of near-death situations (twice each) and lived to continue touching the lives of people around and making a difference to humanity."

Dr Rane, the author, and his wife, Dr. Neelam, a Master of Physiology, are both known for their enormous efforts at bettering the environment in Mumbai. They are responsible for the closure of 50% of the Deonar garbage dumping ground that was causing pulmonary issues in lakhs of people

living in the area. They had filed a public interest litigation against the transport lobbies and corporations to reduce pollution in Mumbai, which resulted in an increase in the number of CNG stations from 5 to 125 in a matter of four years. Dr. Rane says, "We were doctors, yes - but we were also soldiers of reform. Quiet, consistent, unrelenting."

The physician couple has done a lot of voluntary work that has benefitted their neighbourhood and is not restricted to healthcare. Saving the mangroves in Mumbai and dealing with garbage in Chembur are two examples. However, their exploits seem to be tangled rather than knitted together, with chapters on family, religion, duty, and fun

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seemingly independent of the title of the book, which was what had attracted me to read it.

Dr. Neelam had medical issues during a pregnancy and had to take bromocriptine daily, but they had to be careful about pituitary apoplexy. As a lay reader, I needed to “google” to understand what “pituitary apoplexy” meant; for a doctor, that might have been easy to understand.

Dr. Rane would have done well to get the prose chiselled to make it more gripping. For example, one day in 2012, Dr. Neelam had a cardiorespiratory arrest. Since they lived in the same building as their hospital, the doctors were able to revive her. It turned out that she had had a massive subarachnoid haemorrhage, which often leads to instant death. She was treated, but she suffered a left-sided stroke. Consequently, there was a craniotomy done, but a CT scan revealed re-bleeding, and on the 36th day, a newly introduced Flow Diverter Stent was successfully deployed. The leak was sealed; she survived. On day 67, her tracheostomy was closed, and she was discharged on the 70th day. Many months and years of rehabilitation followed.

While reading this, I wondered, what were her thoughts then? What did she feel when she was helpless, and later, when her faculties returned? What did she feel during the small moments and the big successes? The text is clinical and direct, not allowing the reader a peep into either her mind or his.

In chapter-7, Dr. Rane writes about golf as therapy for the body, mind and soul. Later, he explains how Dr. Neelam's recovery, and her care, taught him mindfulness. I read with interest of his strong faith in Lord Krishna. I felt these attributes - focus, mindfulness, and faith - must have assisted in his professional life as well. To me, any doctor, and Dr. Rane, in particular, would have experienced focus, mindfulness, and faith with each procedure done on every patient.

His own medical adventures were alarming. The first time, when he had a leak in his mitral valve, a dedicated facility for mitral valve repair was not available in India. He went to Belgium, expecting to return in a few days. During the surgery, as he was to be taken off the heart-lung machine, he had an unexpected acute myocardial infarction. On checking, the team found everything in order, but a graft was done swiftly after harvesting a vein from the leg. However, there was a complication during this surgery as well. An extraordinary decision was taken: his chest was closed, and he was wheeled to the catheterization laboratory, where three separate blocks were found in the coronary arteries, likely due to fat emboli. He received three stents. The three-hour surgery had stretched to fourteen hours. Six days in the intensive care unit, three days on the ventilator, three months to return to golf. This part I enjoyed reading about. It was real, a memoir from the heart. It read like it happened, though I would have preferred more details about the hows and whats of being so close to death.

The hospital in Mumbai kept him busy as he was expanding it. And then COVID struck. In spite of precautions, the virus entered his body. He was on the ventilator once more, a tracheostomy was done, he had multi-drug resistant *Pseudomonas* and *Klebsiella* infections, and he came out of that, too. This part made me hold my breath for a bit. If I were to browse through this book at an airport shop, I would buy it for this chapter. I mean, how far can a person's luck be stretched?

Dr. Rane has described life as a patient, as a healer-turned-patient, and as one with faith in god. He has continued to devote his time and energy to treat patients as a service, a calling. And yet, the experiences seem dilute. I wish in the second edition, he fills in the pain, the thoughts, the emotions, the observations of the people and equipment around him, the smells and sounds, the excitement, the apprehensions, the moments of trust in his colleagues. Too much of godliness takes

something away from giving credit from those who displayed superlative skills. The read is light, though, and doesn't give the feeling of despondency that many patients describe.

Interestingly, he points out that the Belgium hospital did not ask him to pay the bill before discharge, whereas the hospital in Mumbai, where Dr. Neelam was admitted, took the payment before admission. Perhaps the Mumbai hospital had learnt that patients/

relatives don't pay easily at discharge, and hence the rule.

If this book is for lay persons, then the vocabulary in some places should have had explanations. Maybe it should be for healthcare students, so they get an idea of what a patient goes through, how a person changes after a bout with serious illness or prolonged caregiving, and what service to humanity is about.
