

Newsletter

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FAMS for Dr. Desarda

One of our scientists, Dr. K. K. Desarda, was honoured with an Honorary Fellowship of the American College of Surgeons in Otolaryngology on 03rd October 2010; Dr. Desarda is the Professor & Head of Otolaryngology at KEM Hospital. We would like to offer our felicitations to him.



Another of our colleagues Mr. V. G. Pingale, In Charge, Pabal Centre was given "Jayati Deshmukh Award" on 04th October 2010, KEM Hospital Foundation Day. Congratulations Mr. Pingale.



KEMHRC organized a one-day programme on 03rd Oct 2010, in collaboration with the Indian Society for Clinical Research, Mumbai. The theme was "Ethics Committees in India- The Road Ahead". Members of Ethics Committees from various Research Centers in Pune participated in the programme.

Consultants from RCH project conducted a workshop on "Navajat Shishu Suraksha Karayakram" (NSSK) on 8th and 9th October 2010 along with their routine field activities. Earlier another workshop on "Routine Immunization" was conducted from 28th to 30th September 2010, which was attended by 18 Medical Officers from 4 districts.

Dr. V. S. Padbidri
Director Research

"Ethics Committees in India – The Road Ahead"

In collaboration with KEMHRC, the Indian Society for Clinical Research organized a one-day programme on "Ethics Committees in India – The Road Ahead". The programme was held on 03rd October 2010 in the KEMHRC Auditorium and attended by 24 participants who were all members of their respective Ethics Committees. The Faculty included Dr. Arun Bhatt, Clininvent Research; Dr. Madhuri Jadhav, Vanthys Pharma. Dev (P) Ltd; Dr. Viraj Rajadhyaksha, Sanofi Aventis; Dr. Arun Nanivadekar, Medical Research Consultant; Dr. N. Yardi, KEMHRC; Dr. Sanjay Lalwani, Bharati Deemed University; Dr. Sanjay Mehendale, NARI; Dr. Prasad Kulkarni, Serum Institute of India and Dr. Shona Nag, Jehangir Hospital

Several important topics pertaining to ethics like EC requirements, Approval letters, review of SAEs/ SUSARs, and compensation, were covered. Investigators and sponsors expectations from the EC were also presented.

A panel discussion on important ethics issues addressed some of the commonly asked questions.

Activities at Vadu

GIS Surveillance

Till date we have collected and successfully mapped GPS locations for 16,999 households out of 27,165. The data has been linked to our HDSS database and the software for representation of this data has been finalized. The software for viewing of this data is an open source User friendly Desktop Internet GIS (uDig).

Health and Demographic Surveillance System Vadu (HDSS, Vadu) - Round 14

Duration:

The HDSS surveillance round 14 was initiated on 11 February 2010 and ended on 25 June 2010.

Information collected:

The population count for the 22 villages for the HDSS- round 14 is exactly 1,07,489. There are about 27,165 households within the HDSS, Vadu area. The total birth count recorded for this round is 1,494 and the death count is about 268. About 10,250 new migrants have been recorded for the 22 villages and there are about 1,808 out migrants. In order to track women who are pregnant as well as record the number of still births, live births, miscarriages and abortions we are administering the pregnancy questionnaires. We have collected about 2000 verbal autopsies to determine the cause of death.

Data Quality:

The quality of data collection is maintained through cross checking and spot checks. Initially we were able to achieve only 5% data quality through cross checking and spot checks. However, in round 14 we were able to achieve complete 10% data quality through the efforts of our field supervisors and guidance of the field head supervisor. The field head supervisor conducts a spot check wherein he pays surprise visits to the field to check field visits made by the Field Research Assistants (FRAs) as well as the quality of data collected.

Data Collection:

33 FRAs were recruited for the data collection. 6 supervisors were allotted for the data quality check i.e. cross checking of the forms and 6 FRAs for maintaining 10% data quality checks. 6 Data Entry Operators were allotted for data entry as well as data quality check.

Veena Murlidharan,
GIS Fellow

HIV-Cervical Cancer Prevention

Funding Agency: Indian Council for Medical Research (ICMR), India and National Institutes of Health (NIH), USA.

Month and year of Commencement: DEC 2009

Primary Objective: To determine the prevalence and predictors of cervical intraepithelial neoplastic lesion (CIN) among HIV infected women in Vadu, India.

Secondary Objective: To estimate the accuracy of VIA in comparison with conventional cytology to detect CIN.

Other Objectives:

1. To examine the feasibility and acceptability of using self administered vaginal samples for HPV testing/typing and to estimate their accuracy compared to clinician collected samples.
2. To determine the prevalence and predictors of high and low risk genital HPV genotypes

Study Design: We aim to undertake a one year longitudinal follow up of the 100 HIV infected women enrolled.

Milestones during the quarter:-

Total Subject Enrollment	Dummy Subject enrolled	Colposcopy done	STD	PAP Positive	PAP Negative	Biopsy	LEEP
44	05	36	33	01	35	01	00

Dr. Sunil Mamulwar

Committee for Women at VRHP for the prevention of sexual, physical & mental harassment at workplace

A committee was formed at Vadu Rural Health Program (VRHP), in October, under the guidelines given in the order of Supreme Court, 1997 VII ADSC 53 & Vishakha guidelines. This committee is mainly formed to provide protection to women against sexual, mental & physical harassment at work place. According to the Supreme Court's Guidelines a committee must be formed in an organization having more than 20 employees.

According to these guidelines-

"No woman employee at a work place shall be subjected to sexual harassment including unwelcome sexually determined behavior, physical contact, advances, sexually coloured remarks, sexual demand, request for sexual favors or any other unwelcome conduct of sexual nature whether verbal, textual, physical, graphic or electronic or by any other actions."

Complaint from the aggrieved woman must come in writing. Only then further action would be taken. Confidentiality should be maintained during handling the case.

As per the guidelines the committee must have more than fifty percent of women as members. The President must be a woman and should be involved in some social activities. She could be a senior worker or outside of the work place.

The committee has started its function with effect from 12th Oct.2010. The first meeting was held on 25th Oct 2010.

Dr. Ankita Shrivastava (BAMS)

Workshop and Meetings attended by staff

"Workshop on GIS and Public Health: Practice of Good Mapping" organized by National Institute of Epidemiology, ICMR, Chennai from 6th to 9th September 2010; attended by Mr. Vijendra Ingole and Miss Veena Murlidharan.

INDEPTH Network "Annual General and Scientific Meeting 2010" (AGM 2010) held in Accra, Ghana from September 26-30, 2010; attended by Dr. Sanjay Juvekar, Mr. Neeraj Kashyap and Mr. Somnath Sambhudas.

Workshop at Schloss Dagstuhl, Germany **"DDI Workshop: Managing Metadata for Longitudinal Data - Best Practices"** from 18-22 October 2010; attended by Mr. Neeraj Kashyap and sponsored and organized by INDEPTH Network, Ghana.

Influenza Disease Burden in India (IDBI) study Annual General Meeting (AGM) 2010 at Lucknow, India on 22nd October 2010 sponsored and organized by King George's Medical College, Lucknow; attended by Mrs. Pallavi Lele.

Meetings attended by Dr. C. S. Yajnik

- NNI Satellite Symposia, Johannesburg, 7th August 10, Intrauterine programming of adiposity and type 2 diabetes
- Unilever Symposium, Singapore, 20-22 September, followed by smaller Spark workshop, 22-23 Sep 10
- CUSP, Chennai, 24-26 September 10
- Twelfth South Asian Regional Conference on Clinical Ultrasonography in Practice
- CME, KIMS Karad, 3rd October 10, Foetal origin of adult diseases
- CAD, Mumbai, 22-24 October 10, Coronary artery disease and diabetes
- ICMR, New Delhi, 28th October 10, Gestation diabetes protocol, 6 issues related to research project and annual reports of ongoing projects

Publications:

- Ponnusamy Saravaran, Chittaranjan S Yajnik, Role of maternal vitamin B 12 on the metabolic health of the offspring: a contributor to the diabetes, British Journal of Diabetes and Vascular Disease 2010 10:109
- Gkrania-Klotsas E, Ye Z, Cooper AJ, Sharp SJ, Luben R, Biggs ML, Chen LK, Gokulkrishnan K, Hanefeld M, Ingelsson E, Lai WA, Lin SY, Lind L, Lohsoonthorn V, Mohan V, Muscari A, Nilsson G, Ohrvik J, Chao Quing J, Jenny NS, Tamakoshi K, Temelkova-Kurktschiev T, Wang TT, Yajnik CS, Zoli M, Khaw KT, Forouhi NG, Wareham NJ, Langenberg C. Differential white blood cell count and type 2 diabetes: systematic review and meta analysis of cross sectional and prospective studies PLoS One. 2010 Oct 18; 5(10): e13405

RCH-II project activities

A] Trainings conducted at CTI:

- Training on "Routine Immunization" for Medical Officers was conducted from 28th to 30th September 2010



- Training on Navajati Shishu Suraksha Karayakram (NSSK) was conducted on 08 and 09 October 2010.



Inauguration of NSSK training of Medical Officers by Prof.U.Datta, Asst. Nodal Officer, RCH, NRHM, NIHFV, New Delhi, Dr.G.A.Panse, Rtd. Addl. Director of Health Services, Govt. of Maharashtra, Dr.S.S.Dodwad, (UNICEF) Consultant, SFWB Pune and Dr.V.S.Padbidri, Director KEMHRC, Pune are also seen.

Meetings :

Review meeting of Principals – HFWTC, on 27th Aug 2010 and 20th October 2010 at State Family Welfare Bureau Pune attended by Dr. (Mrs) Patwardhan and Mr.Sandeep Raut.

Trainings Attended by Dr. Vaijayanti Patwardhan

Sr. No.	Training	Dates	Venue
1	HIV (NACO)	2/09/10	HFWTC, Pune
	NSSK	3-4/09/10	
		10-11/09/10	
	RI	23-25/09/10	KEMHRC, Pune
28-30/09/10			
2	RI	27/10/10 to	HFWTC, Pune
		28/10/10	
	IUD	27/10/10	
	NSSK	01/10/10 to	
02/10/10			
		08/10/10 to	
		09/10/10	

B] Monitoring :

The Consultants Dr.Vaijayanti Patwardhan, (Medical), Mr.Sandeep Raut (Management) and Dr.Sandeep Dhende, Consultant (RO) visited the following places to monitor RCH-II training programmes

S.N.	Dates	Place	Training programme monitored
1	15/09/2010	District Women Hospital (Lady Harding), Akola	SAB IUD
2	15/09/2010	District Training Centre, Satara Krantisinha Nana Patil Civil Hospital Campus, Satara	SAB IUD Induction
3	16/09/2010	Saibai Mote Sub Dist. Hospital Shegaon, Buldhana District Training Centre TB Sanitorium Campus, Buldhana	Minilap BEmOC IMNCI
4	12/10/10	District Training Team Sir DMP Leprosy Hospital Udyamnagar, Ratnagiri Hospital Training Team Civil Hospital, Ratnagiri Hospital Training Centre, Civil Hospital Campus, Ratnagiri	BeMOC SAB
5	13/10/10	District Training Centre, Kolhapur Hospital Training Team Chatrapati Pramila Raje Hospital, Kolhapur	IYCN SAB
6	15/10/10	District Training Centre Civil Hospital, Alibag	IMNCI (H/N), NSSK
7	16/10/10	Block Training Centre Mangaon, Raigad	IMNCI (H/N)
8	26/10/10	District Training Centre Old Civil Hospital,	IUD RI
9	27/10/10	Hospital Training Centre Women Hospital Parbhani	MTP/MVA
10	28/10/10	Women's Hospital Jalna	Minilap MTP/MVA

Visits to identify new sites for conducting training under NRHM

Sr. No.	Institute	Date	Visiting Consultant
1	Sub Dist.Hospital, Kamathe Tal.Chiplun Dist.Ratnagiri	11/10/10	Dr (Mrs) Vaijayanti Patwardhan Consultant (Medical)
2	BKL Walavalkar Hospital, At Post Savarda, Tal.Chiplun		
3	Shradha Hospital Chiplun At Post Kamathe, Tal.Chiplun, Dist.Ratnagiri		
4	Sub District Hospital Mangaon At Post Mangaon, Dist.Raigad	29/10/10	Dr (Mrs) Vaijayanti Patwardhan Consultant (Medical) Mrs.Rajalakshmi Rangan Consultant (Finance)
5	Nagothane PHC Tal. Roha, Dist. Raigad		



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