

Respire

JANUARY - APRIL 2024

Life at ICS

Official triannual communication from Indian Chest Society



World Asthma Day

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Concept and Compilation by : **Ms. Aaindrila Dutta**
Head (Operations and Administration), Indian Chest Society.



From the President's Desk

Dr. Sundeep Salvi

As we embark on another issue of our Newsletter, RESPIRE, it is my privilege to extend a warm welcome to each and every one of our members and inform them about the success of all the collaborative efforts ICS has made, in the field of Pulmonology.

In the face of unprecedented challenges, our society has demonstrated remarkable resilience and unwavering commitment to the pursuit of excellence in education, research and patient care. The collective expertise and dedication of our Governing Body members continue to drive innovation and shape the future of respiratory medicine through this organization.

In the last 4 months, ICS has orchestrated numerous workshops, webinars, academic programs, educational initiatives, and both physical and virtual outreach activities, significantly impacting a vast audience encompassing both the general public and our valued ICS Members. Additionally, fruitful collaborations with several international societies have been established, culminating in successful joint programs.

I encourage all our members to actively engage in the society's initiatives, share your insights, and seize every opportunity to contribute to the vibrant community of Pulmonologists in India. Let us embrace collaboration, foster inclusivity, and uphold the highest standards of professionalism and integrity in all our endeavours.

As we look ahead with optimism and enthusiasm, I am confident that the Indian Chest Society will continue to serve as a beacon of excellence and a catalyst for advancement in our field. Together, we have the power to effect positive change and improve the lives of countless individuals affected by respiratory diseases worldwide. I extend my deepest gratitude to each member for your unwavering dedication and tireless efforts in advancing the frontiers of respiratory medicine.

Dr. Sundeep Salvi

MD, DNB, PhD (UK), FCCP, FICS, Hon. FRCP (London)

President, Indian Chest Society



From the Secretary's Desk

Dr. Raja Dhar

Dear Members,

A warm greeting in the sweltering summer heat from the office of the Secretary, Indian Chest Society. Firstly, I would like to extend my heartfelt gratitude to each of you for your continued dedication and commitment to advancing the field of Respiratory Medicine. Our society thrives on the collective efforts and enthusiasm of its members, and I am confident that together, we will continue to achieve greater heights.

I'm delighted to inform you that the Indian Chest Society, already the largest and most extensive society of pulmonologists and allied respiratory care professionals in India, is now expanding its reach to the global stage. We are forging collaborations with numerous international societies, positioning ourselves prominently on the world map of Respiratory Medicine. We have recently joined hands with The World Association for Bronchology and Interventional Pulmonology, the Malaysian Thoracic Society, the Sri Lanka College of Pulmonologists, the Myanmar Thoracic Society and significant others.

We have been conducting an extremely successful streak of academic webinars every Wednesday, focusing on critical topics such as ILD, OAD, ICU and various other areas. Alongside of online activities, we are conducting and endorsing several workshops, CMEs and academic sessions throughout the country. Dr. Amita Nene and the Indian Chest Society governing body have created a platform for the young Pulmonologists to exhibit their academic skills. They have been guided in this endeavor by the very best senior faculty in the country. We look forward to the active participation of each of our members in our Society's initiatives. Please write to me with your ideas and if you wish to be a part of our events. Whether through contributing to research projects, sharing clinical insights, or mentoring the next generation of pulmonologists, your involvement is crucial to the ongoing success of our organization.

I encourage you all to actively participate in our upcoming events, meetings, and initiatives. Your ideas, efforts and involvement are invaluable in shaping the direction of our society and ensuring its success. As always, your feedback and suggestions are greatly appreciated as we strive to continually improve and adapt to the evolving needs of our members.

Thank you once again for your unwavering support and dedication. Together, we will continue to make meaningful advancements in the field of Pulmonology and positively impact the lives of our patients.

Best Wishes,

Dr. Raja Dhar

FCCP (USA), CCT (UK), M.Sc. (UK),FRCP (London)

MD (Respiratory Medicine), MBBS (Cal.)

National Secretary, Indian Chest Society

Call to Action Addressing Asthma Diagnosis and Treatment gaps in India

This is the summary of a Review article written by Dr. Rajesh Swarnakar and Dr. Raja Dhar and published in the April 2024 issue of Lung India. The RESPIRE team feel that this article carefully addresses local issues and provides rational solutions which would be useful for the Chest Physicians in the country.

Addressing Asthma Management Gaps in India : Insights for Pulmonologists

India, with a rural majority and constrained healthcare spending, faces unique challenges in asthma diagnosis and treatment. Despite advancements in medical research and drug availability, gaps in asthma management lead to disproportionately high morbidity and mortality rates. According to the Global Burden of Disease Report, the country accounts for 13% of the world's asthma cases. However, the mortality rate is three times higher than the global average, highlighting the need for a multifaceted response involving healthcare professionals, government agencies, and the pharmaceutical industry.

Asthma remains a global health issue, affecting around 34.3 million people in India alone. Rural areas experience a higher prevalence due to underdiagnosis, late reporting, and limited access to care. Urban regions, while relatively better served, show increasing prevalence due to environmental factors like air pollution and changing lifestyles.

Asthma diagnosis remains a challenge in India due to various factors :

- 1. Nomenclature Issues** : Only 23% of patients refer to their condition as “asthma,” using local terms like “shwas” or “dama,” leading to confusion and unnecessary investigations. Physicians often use terms that vary from standard nomenclature, creating a disconnect.
- 2. Underdiagnosis and Reporting** : The stigma surrounding asthma discourages timely diagnosis and treatment. Concealment of symptoms and delay in seeking medical attention is common, contributing to the 70-82% underdiagnosis rates across the severity spectrum.
- 3. Underutilization of Spirometry** : Despite being the gold standard for diagnosis, spirometry remains underused due to high costs, time constraints, and a lack of expertise. Less than 18% of primary care providers regularly use spirometers, often resorting to oral medication prescriptions.
- 4. Management Gaps** : Cultural beliefs, stigma, taboos and healthcare practices which are variable throughout the country, hinder effective asthma management. Some of these management gaps are outlined below.
 - a. Inhaler Usage and Errors** : Despite being cost-effective and widely available, inhalers are underused due to misconceptions around steroids and “addiction.” Many patients prefer oral bronchodilators, and improper inhaler techniques among both patients and healthcare providers result in poor asthma control.

b. Non-Adherence to Medication : Studies indicate up to 75% of Indian patients don't adhere to prescribed medication due to poor training, cost issues, and stigma around inhaler use.

c. Overuse of SABAs : Short-acting beta-agonists (SABAs) are available over the counter and over-prescribed, increasing the risk of asthma exacerbations and death. Inhaled corticosteroids (ICS), despite being recommended as first-line treatment, are underutilized due to affordability concerns and lack of prescription.

5. Comorbidities : Asthma is frequently accompanied by comorbidities such as sinusitis, obesity, GERD, and psychiatric conditions, which exacerbate the disease and necessitate comprehensive care.

Solutions and Recommendations: Improving asthma management in India necessitates systemic changes :

1. Increase Awareness : Education initiatives tailored for both patients and physicians can dispel myths around inhaler usage and usage of inhaled steroids. This involves promoting culturally appropriate language and simplifying explanations of asthma triggers and treatments.

2. Promote Proper Prescription Practices : Encourage adopting international guidelines like GINA (Global Initiative for Asthma), which advocate using single inhalers containing inhaled corticosteroids-formoterol combinations to reduce severe exacerbations. Comprehensive training programs for primary care providers can enhance their diagnostic and prescription capabilities.

3. Expand Access to Diagnosis and Medication : Ensure spirometers, peak flow meters, and essential asthma medications are available in government facilities. Public-private partnerships should improve diagnostic testing access, while increased insurance coverage for advanced biologics can make them more accessible.

4. Strengthen Health Policies : The government's inclusion of asthma in the National Non-Communicable Disease Programme is a promising step. Further guidelines should emphasize early detection, comprehensive management, and equitable healthcare delivery.

5. Foster Cross-Sector Partnerships : Collaboration between government bodies, private hospitals, pharmaceutical companies, and NGOs can streamline asthma education and treatment programs. These partnerships can support data collection, training, and resource sharing to ensure consistent and high-quality care.

6. Address Social Determinants of Health : Recognize socioeconomic factors like poverty, indoor pollution from biomass fuel, and limited healthcare infrastructure affecting rural areas. Initiatives should focus on improving primary healthcare facilities in these regions, increasing healthcare workforce deployment, and reducing the affordability gap.

7. Overcome Myths and Stigma : Develop culturally sensitive campaigns to dispel myths around inhaler usage and corticosteroid addiction. Educating families, community leaders, and patients can help change attitudes, reduce delays in treatment, and encourage sustained adherence.

8. Enhance Comorbidity Management : Integrating mental health support, weight management programs, and respiratory physiotherapy into asthma treatment can help improve quality of life. Creating multidisciplinary teams that include dietitians, psychologists, and physiotherapists can lead to more comprehensive care.

9. Data-Driven Approaches : Encourage researchers and healthcare providers to collect and share data on local triggers, treatment adherence, and barriers to care. This evidence can guide the development of targeted interventions that consider regional variations.


Conclusion :

Asthma management in India requires a comprehensive approach involving education, policy reform and cross-sector partnerships. Pulmonologists should advocate for standardized diagnostic practices, promote international guidelines like GINA, focus on local challenges and come out with tailored National guidelines and expert statements (like the current document) and empower patients through education. Comprehensive strategies can bridge the gap between available treatments and optimal patient outcomes, ultimately reducing the burden of asthma in India.


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| Quick Response Code:  | Website: https://journals.lww.com/lungindia |
| | DOI: 10.4103/lungindia.lungindia_518_23 |




Congratulating Dr. Sundeep Salvi



INDIAN CHEST SOCIETY



We heartily
Congratulate
President of Indian Chest Society,
Dr. Sundeep Salvi for getting the
World Lung Health Award
by the American Thoracic Society.



You have made the nation proud with this achievement!

Spirometry Workshop Announcement

The Indian Chest Society (ICS) is pleased to announce a series of Spirometry Workshops to be held at various centers across the country. These workshops aim to provide comprehensive training in spirometry, enhancing the skills of healthcare professionals involved in pulmonary care.

Workshop Details :

- **Objective** : To equip healthcare professionals with the knowledge and skills necessary for performing and interpreting spirometry tests.
- **Format** : Each workshop will include lectures, hands-on training sessions, and interactive case discussions.

Workshop Highlights :

- **Introduction to Spirometry** : Fundamental principles & clinical significance.
- **Hands-on Training** : Practical sessions on using spirometry equipment and conducting tests.
- **Data Interpretation** : Methods to accurately interpret spirometry results.
- **Case Studies** : Real-life scenarios for better understanding and problem-solving.
- **Q&A Session** : Opportunity to engage with experienced pulmonologists and ask questions

Who Should Attend :

- Respiratory therapists
- Pulmonologists
- General practitioners
- Nurses
- Medical students

Location and Dates of these workshops will be announced soon.

Keep an eye on ICS e-mails to get regular updates.

Implications of NMC Regulations and ICS initiative Advocacy for Reinstatement

Dr. Radha Munje*, Dr. Gyanshankar Mishra**

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Introduction :

The evolving landscape of medical education in India, marked by the transition from the Medical Council of India (MCI) to the National Medical Commission (NMC), has introduced significant regulatory changes. These changes, especially the removal of the Respiratory Medicine department from the list of mandatory departments in undergraduate medical education, have raised concerns regarding the adequacy of training in handling prevalent respiratory diseases in India. This writing aims to review these regulatory changes, assess their impact on medical education and healthcare delivery, and advocacy as well as efforts taken by ICS for the reinstatement of Respiratory Medicine as an essential component of medical education.

Historical Background :

The Tuberculosis (TB) / Respiratory Medicine department's origins trace back to the 1946 Bhore Committee, which emphasized the importance of respiratory diseases in public health and medical education. The committee, led by Sir Joseph Bhore, identified TB as a leading cause of death, advocating for its inclusion in medical curricula and refresher courses for general practitioners.¹

Medical Education Regulations over a period of time :

We all are aware that under the Medical Council of India (MCI), MINIMUM STANDARD REQUIREMENTS FOR THE MEDICAL COLLEGE for 50 / 100 / 150 / 200 / 250 admissions annually regulations 1999 (amended upto 2018), Respiratory Medicine was classified as a mandatory department, while Physical Medicine and Rehabilitation was designated as an optional department for MBBS programs in medical colleges with admissions capacities ranging from 50 to 250 students annually.

The National Medical Commission (NMC) established on August 8, 2019, by the National Medical Commission Act of 2019, replaced MCI. Their new mandate expanded the list of essential departments for MBBS programs to include Respiratory Medicine, Physical Medicine and Rehabilitation, and Emergency Medicine, each requiring dedicated indoor beds, specialized faculty, and outpatient departments (OPDs).

Exclusion of Respiratory Medicine from undergraduate medical colleges in India :

On August 16, 2023, a gazette notification on NMC Guidelines (UG MSR-23 notably omitted Respiratory Medicine, Emergency Medicine, and Physical Medicine and Rehabilitation from the list of departments required to run undergraduate courses. As a result, the previously mandated provisions for trained specialists and facilities in Respiratory Medicine, Emergency Medicine, and Physical Medicine and Rehabilitation were eliminated, along with the requirement for 24-hour emergency services managed by specialists in Emergency Medicine.

Effect on Medical education and patient care :

We have all agreed to that the recent regulatory changes will impact medical education as well as patient care significantly affect the teaching of Respiratory Medicine in MBBS courses, stipulating that it will no longer be taught by specialists with NMC-recognized postgraduate qualifications in Respiratory Medicine but rather by General Medicine faculty. The General Medicine faculty in medical colleges are already overburdened, making it challenging for them to provide detailed insights on the respiratory medicine syllabus. Furthermore, when comparing the postgraduate syllabi of General Medicine and Respiratory Medicine, it is evident that Respiratory Medicine qualified teachers are better positioned to address the theoretical and practical aspects of the respiratory medicine syllabus at the undergraduate level.

This in turn will effect patient care of those who are referred from primary, secondary health facilities and get vital tertiary care services in medical colleges . Additionally, patients from various departments within medical colleges also necessitate specialized respiratory medicine assessment.

So all such patients will be directed to the general medicine department, posing significant challenges in ensuring appropriate specialist pathways and consistent care for those referred from diverse healthcare centers. Patients accustomed to receiving specialized respiratory care will now encounter a more generalized approach in both outpatient and inpatient settings, potentially heightening the risk of inadequate treatment and the spread of infectious diseases, including drug-resistant strains of tuberculosis.

Although current NMC regulations mandate the provision of Intensive Respiratory Care Units and MDR TB treatment services in every medical college, implementing these specialized services without respiratory medicine specialists' expertise appears impractical and likely to severely compromise respiratory healthcare quality in medical colleges across India.

A notable study reported that 50% of patients visit healthcare providers for respiratory issues,² Respiratory diseases also contribute markedly to morbidity and mortality in India, and are the second leading cause of death in India. Chronic conditions like asthma and COPD not only prevalent but often mismanaged due to insufficient training in primary care settings.^{3,4} The specialized nature of respiratory care, particularly for conditions like drug-resistant tuberculosis (TB) and the management of post-COVID-19 respiratory complications, demands a dedicated department that can impart the necessary expertise and clinical skills. During the COVID-19 pandemic, the role of Respiratory Medicine was pivotal, saving countless lives and managing long-term sequelae in patients. Furthermore, the broad scope of respiratory medicine, which now includes interventional pulmonology, sleep medicine, and respiratory oncology, offers essential exposure to MBBS students, enhancing their readiness for diverse clinical challenges. Current NMC UGMSR 2023 guidelines for UG assessment effectively render existing non-PG Respiratory Medicine departments invisible which offers above mentioned services.

Efforts by the Indian Chest Society :

Many members approached Indian Chest Society (ICS), urging immediate action to request a reversal from NMC authorities. At ICS, we are committed to advocating for the inclusion of Respiratory Medicine as a mandatory department in MBBS programs. Our stance aligns with the National Medical Commission Act of 2019, which mandates the enhancement of medical

education quality and the accessibility of high-quality medical professionals across India. The NMC is responsible for maintaining high educational standards and ensuring that medical curricula comprehensively cover essential healthcare areas, including Respiratory Medicine, which is critical for managing the significant burden of respiratory diseases in India. And by reinstating the Respiratory Medicine department, we intend to adhere to the NMC's goals of promoting equitable and universal healthcare and enhancing the capability of medical graduates to effectively tackle prevalent health challenges.

The ICS, its members has actively advocated for the reinstatement of Respiratory Medicine through various channels, including meetings with government officials and public statements. Key actions include the following :

1. The Indian Chest Society has communicated the issues to the President, UGMEB, NMC (23/8/2023); Secretary, NMC (28/8/2023); and the Ministry of Health and Family Welfare, Government of India (28/8/2023 and 5/9/2023).
2. A delegation from the Indian Chest Society met with Shri Nitin Gadkari, Minister of Road Transport and Highways, Government of India (3/9/2023). He listened attentively to the issues and forwarded the representation by the Indian Chest Society to the National Medical Commission.



Photo 1 : Dr. Rajesh Swarnakar Ex Secretary ICS & Prof. Dr. Radha Munje with Prof. Gyan Mishra & Prof. Anil Sontakke handing over memorandum to Union Minister Nitin Gadkari

3. During NAPCON 2023, held in Delhi from October 5-8, 2023, Dr. Radha Munje led a pivotal session focused on the reinstatement of Respiratory Medicine in undergraduate medical curricula across India. This special session brought together an esteemed panel, including Dr. V. K. Arora, Dr. Sachdeva, Dr. Ravindran, Dr. Mattu, and Dr. Kranti, who engaged in an in-depth discussion of the critical issues surrounding Respiratory Medicine education. The panel addressed several key concerns including the inadequate exposure of undergraduate students to increasingly prevalent respiratory diseases, the potential decline in the quality of specialized respiratory care in new medical colleges, and obstacles in developing postgraduate courses in Respiratory Medicine due to a lack of qualified teaching staff, which also results in employment challenges for new postgraduates. Additionally, the decreasing appeal of Respiratory Medicine as a postgraduate specialty, the risk of closure for existing non-postgraduate departments, and the misinterpretation of UGMSR-2023 guidelines leading to inappropriate administrative

appointments were highlighted. The session concluded with recommended actions for the Indian Chest Society and individual stakeholders, emphasizing the need for a collective effort to raise awareness and advocate for the restoration of Respiratory Medicine in undergraduate medical education through strategic legal, educational, and policy measures to ensure the specialty's growth and sustainability. In summary, the session underscored the urgent need for all stakeholders to work towards reinstating Respiratory Medicine as a critical component of medical education, thereby safeguarding the future of respiratory healthcare in India.

4. A position statement by the Indian Chest Society on reinstating the Respiratory Medicine department in undergraduate medical colleges in India was published in the October 2023 issue of Lung India. This evidence-based statement detailed the potential adverse effects of removing Respiratory Medicine departments from undergraduate medical colleges in India.⁵
5. On April 21, 2024, an Indian Chest Society delegation met with the National President of the Indian Medical Association (IMA), Dr. R. V. Asokan, at the IMA office in Nagpur to discuss the pressing issue of reinstating Respiratory Medicine as a mandatory department in undergraduate medical education. The Indian Chest Society delegation outlined the critical impact that the exclusion of Respiratory Medicine has on both medical education and public health, highlighting concerns about inadequate training for medical students in managing respiratory diseases, the potential decline in the quality of specialized respiratory care, and the broader implications for healthcare delivery in India. Dr. Asokan listened attentively to these concerns and acknowledged the importance of the issue. He assured the Indian Chest Society delegation of the IMA's full support, expressing commitment to collaborate on advocacy efforts aimed at urging the NMC to reconsider and reverse the exclusion of Respiratory Medicine from the mandatory curriculum. This assurance from the IMA's National President was a significant step forward, as it aligned the efforts of two major medical organizations in a united front to safeguard and enhance the quality of medical education and respiratory healthcare in India.



Photo 2 : Meeting of Indian Chest Society delegation with National IMA president, Dr. R. V. Asokan in presence of Nagpur IMA office bearers (21/4/2024)

6. NMC's Response to the Issue : The NMC Undergraduate Medical Education Board (UGMEB) responded to the concerns by stating that the policy decision to exclude Respiratory Medicine as a separate department was intended to reduce the academic burden on undergraduate medical students. However, the Indian Chest Society finds this reasoning perplexing. The Indian Chest

Society argues that having General Medicine faculty teach the Respiratory Medicine curriculum, instead of specialized Respiratory Medicine faculty, does not effectively reduce the academic burden.

Instead, Indian Chest Society believes that a more effective approach would be to restructure the subject curriculum itself, rather than changing the educators. This would ensure that students receive specialized knowledge and training while addressing any issues related to academic workload.

In summary, the Indian Chest Society acknowledges the various concerns raised by its members on multiple forums regarding the state of Respiratory Medicine education and practice in India. These concerns are detailed as follows :

- a. Undergraduate Education Deficit: There is a significant worry that undergraduate medical students will lack the necessary knowledge, insight, and skills required to manage the increasing burden of respiratory illnesses. This is particularly alarming given the rising prevalence of these diseases.
- b. Deprivation of Specialized Care: Patients who currently benefit from specialized Respiratory Medicine services in established medical colleges may be deprived of the same standard of care in newly opened medical colleges. The absence of well-established Respiratory Medicine departments in these new institutions is a critical issue.
- c. Postgraduate Course Limitations: The lack of existing Respiratory Medicine departments in new medical colleges will restrict the development of postgraduate courses in this field. This is primarily due to the shortage of qualified teaching faculties necessary to establish such programs.
- d. Employment Challenges : The limited opportunities for postgraduate courses in Respiratory Medicine will lead to fewer employment opportunities for newly graduated specialists in the new medical colleges. This scenario poses a significant threat to the professional growth of fresh postgraduates in Respiratory Medicine.
- e. Decreased Interest in Specialty : The restricted employment and educational opportunities will reduce the attractiveness of Respiratory Medicine as a postgraduate specialty, leading to a decrease in the number of medical students choosing this field.
- f. Closure of Non-PG Departments : Older colleges with non-postgraduate (non-PG) Respiratory Medicine departments might not retain their faculty and may close down these departments since they are no longer mandatory. This will further reduce the availability of specialized Respiratory Medicine services.
- g. Misinterpretation of UGMSR-2023 : In some colleges, the UGMSR-2023 guidelines have been misinterpreted, leading to the Head of the General Medicine department being appointed as the Head of the Respiratory Medicine department. This practice violates the National Medical Commission's Teacher Eligibility Qualifications (NMC TEQ) 2022, undermining the integrity of the specialty.

The cumulative effect of these issues is a potential decline in the growth of Respiratory Medicine due to a lack of faculty and diminished interest in the specialty from the graduate level onwards. This situation has significantly lowered the morale of respiratory physicians.

In response to these pressing concerns, the Indian Chest Society has taken serious cognizance of the situation and is proactively seeking solutions. The society is currently planning its future course of action, which includes seeking legal advice to address the strong sentiments among its members and to ensure the continued growth and development of Respiratory Medicine in India.

In conclusion, the reinstatement of Respiratory Medicine as a mandatory department is crucial for ensuring comprehensive medical education and maintaining high standards of healthcare and that regulatory bodies reconsider these changes to address the significant burden of respiratory diseases in the country. We urge the National Medical Commission and other stakeholders to prioritize the inclusion of Respiratory Medicine in medical education to equip future doctors with the necessary skills to combat respiratory diseases effectively.

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Introducing AFFILIATE MEMBERSHIP in Indian Chest Society

The Indian Chest Society is committed to fostering a larger and more inclusive community. In line with this vision, the ICS proudly announces the launch of its Affiliate Membership program. This initiative extends a warm invitation to all non-medical professionals within the fraternity who play pivotal roles in advancing Respiratory Medicine. Their contributions are valued equally, and this membership offers them the opportunity to be integral parts of the ICS family, contributing to its vibrant exchange of knowledge and expertise.

Criteria for Affiliate Membership :

1. Affiliate members can neither vote nor stand for elections to the Governing Body. However, they would have all other rights.
2. Affiliate members shall be nominated by a Life Member of the ICS.
3. Paramedics, Nurses, Technicians / Therapists, Basic Scientists with experience in Respiratory Medicine are eligible for Affiliate Membership.

**Stay tuned as we soon commence enrolment for Affiliate members,
and we eagerly anticipate welcoming them into our fold.**



ICS Endorsements (January - April 2024)

The International Workshop on Lung Health

The International Workshop on Lung Health, endorsed by the Indian Chest Society, was the 1st Asian Chapter which took place from February 23rd to February 25th, 2024, in Goa, India. The scientific programme of this Workshop had been designed to face the challenges, hot topics, and emerging Respiratory issues from across the world, with specific emphasis on real-life experiences in India and across the Asia-Pacific region.

The target audience was not only Specialists in Respiratory Medicine, but also trained nurses, physiotherapists, trainees, and students who benefited from the active learning structure of the Workshop.

During these two and a half day workshop, participants had the opportunity to interact with global experts at close proximity, discuss scientific approaches, share perspectives, improve their management of lung diseases and enrich their day-to-day clinical practice.





Best of Chest

The very popular and hugely in demand 2024 series of the Respiratory Update 'Best of Chest' was conducted by Dr. Amita Nene In Ahmedabad on 11th February 2024 and this was endorsed by our Indian Chest Society.

As in the earlier series, in 'Best of Chest - Ahmedabad' all the Practise changing publications of past 1 year published in the best National and International journals were presented by the best faculty of our country and were followed by wonderful discussions conducted by extremely accomplished subject experts. The meeting was hugely successful with 200 delegates attending this update and it received the most fabulous and overwhelming feedback



Inaugural Ceremony of ATS-MECOR 2024

American Thoracic Society and Indian Chest Society together conducted the 2nd research training program ATS-MECOR 2024 (Methods in Epidemiologic, Clinical and Operations Research). It is a multi-level research methods training course intended for clinicians, investigators, academicians, and public health professionals who primarily work with pulmonary diseases.

This program was conducted by Christian Medical College for Indian Chest Society. The program was hosted at St. John's Medical College, Bangalore from 5th to 9th Feb 2024. Dr. DJ Christopher, and Dr. Adithya Cattamanchi, MECOR India Course Co-Directors welcomed and gave the introduction to Course. They also introduced the 16 Faculty from ATS and ICS who would be mentoring the trainees in various research methodologies. Dr. Uma Maheshwari who represented the hosting institution, welcomed the trainees and the faculty and explained the logistics.

Around 26 trainees (mostly pulmonologists) participated in the training program, 19 trainees were at Level 1, 3 at Level 2 and 4 at Level 3. Mentorship had commenced for the trainees 2 months ahead and training material had been made available to them. The mentors have worked with the trainees to refine their research questions. The scene was set for a productive one week training.



Graduation and Closing Ceremony of ATS MECOR 2024

American Thoracic Society and Indian Chest Society together conducted the 2nd research training program ATS-MECOR 2024 (Methods in Epidemiologic, Clinical and Operations Research) This program was conducted by Christian Medical College for Indian Chest Society. The program was hosted at St. John's Medical College, Bangalore from 5th to 9th Feb 2024. The week-long training of young researchers, who endeavoured to acquire the skills required to do respiratory research, concluded successfully.

We were fortunate to have a group of 26 outstanding youngsters this year 19 at Level 1, 3 at Level 2, 4 at Level 3. The faculty worked with the youngsters helping to shape their projects. The interaction between faculty and trainees often extended beyond the end of the day's work into the evening hours. Overall it was a week of productive and gratifying time of learning and teaching research methods.

The graduation and closing ceremony was held on 9th Feb. Dr. Adithya Cattamanchi the ATS USA Chair spoke on behalf of ATS faculty and expressed great satisfaction with the progress of the India program. Dr. DJ Christopher the ICS Chair of the MECOR India program outlined the steps taken in ensuring the selection of high quality aspiring candidates to the program. Dr. Irina Petrache, ATS President and Dr. Raja Dhar, ICS Secretary addressed the trainees, sharing their 'research journey'. Their talks were very inspiring for the trainees. Efforts have been taken to onboard suitable Indian faculty who have fulfilled their roles extremely well. The trainees were awarded certificates for the successful completion of their training program, at different levels.

The Indian Chest Society is proud of the way MECOR has shaped up into a flagship programme of the society. The ICS looks forward to train hundreds of youngsters aspiring to do respiratory research in the next few years with a hope of changing the research landscape of the country. We eagerly look forward to MECOR 2025.





CPET WORKSHOP CMC Vellore

The second workshop on cardiopulmonary exercise testing (CPET), endorsed by the Indian Chest Society, was conducted by the Department of Pulmonary Medicine, Christian Medical College Vellore, Ranipet campus on the 1st and 2nd of March 2024. CPET has wide applications in assessing the causes of exercise limitation and fitness for major surgeries. Dr. Johnson Samuel, who is an alumnus of CMC Vellore, currently a respiratory consultant in the UK, spearheaded the course as its director and Dr Balamugesh, the Head of Pulmonary Medicine, coordinated the course. The meeting was inaugurated with prayer by Rev. Joseph and felicitations were offered by Dr. Ravish Sanghi, Associate Medical Superintendent and Dr. Ebby Simon, Associate Director. The workshop, which saw the participation of over 50 delegates from across the country, was designed to be highly interactive. The concepts of CPET were taught and instilled through interactive lectures, hands-on sessions and group-wise case discussions. The chief guest of the valedictory function, Dr. Viji Samuel, Head of Cardiology stressed the importance of CPET to the delegates and gave away the certificates.

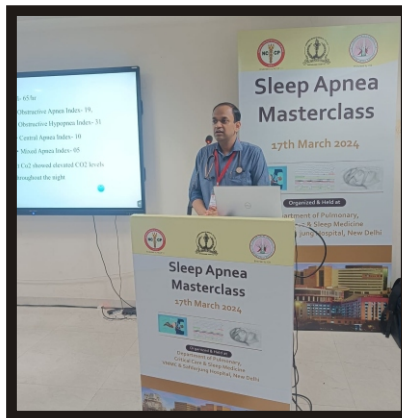


Sleep Apnea Masterclass

The Department of Pulmonary, Critical Care & Sleep Medicine, VMMC & Safdarjung Hospital, New Delhi, endorsed by Indian Chest Society conducted the "Sleep Apnea Masterclass" on 17th March 2024.

The workshop was attended by 60 delegates, including pulmonologist and neurologist from medical colleges, as well as private practitioners across Delhi-NCR, Uttar Pradesh, Uttaranchal, Haryana, Rajasthan, Karnataka, Himachal Pradesh & Punjab. The one day programme provided learning step by step guide and Hands-on demonstration of Polysomnography machine and interpretation of sleep study.

With this workshop, continued efforts were made to educate pulmonologists in the evolving diagnostic and therapeutics in Sleep Apnea Management.



ICS Karnataka State Conference 2024

ICS Karnataka State Chapter Annual Conference 2024 was conducted on 17-03-2024 in Basaveshwara medical college & Research Centre, Chithradurga. Dr Virupaksha H. M., senior professor was the organizing chairman, Dr. Basavaraja Sangolli, Professor and Head was the organizing chairman, Dr. Abhinandan, Associate professor was the scientific committee chairman. Postgraduate students from all over Karnataka participated. 24 students presented original research papers and 24 students presented poster discussion.

The conference was inaugurated by Dr. Prashanth G, Dean of Basaveshwara Medical College & Research Centre. Dr. Virupaksha H. M., senior professor, presided over the function.

Prize winners

| | | |
|----------------------|----------------------------|-----------------------------------|
| Oral paper session 1 | Dr. Dia Zechariah | KMCMangalore |
| Oral paper session 2 | Dr. Vinay C. Dharmadhikari | SSIMS Davanagere |
| Oral paper session 3 | Dr. Mrutunjaya B. V. | BMCRI, Chithradurga |
| Poster session 1 | Dr. Lekshmipriya Raj | Narayana Health Centre, Bangalore |
| Poster session 2 | Dr. Harshada Haris | Trustwell Hospital, Bangalore |



VAYU - Research Methodology Workshop

Date : 25th April 2024

Location : CMRI Hospital

Introduction : The VAYU - Research Methodology Workshop was organized with the objective of equipping participants with essential skills and knowledge in research methodology, statistical analysis, data visualization, and the publication process. The workshop aimed to foster a research-oriented mindset among aspiring scholars.

Attendance : A total of more than 120 delegates actively participated in the workshop, demonstrating a significant interest in enhancing their research capabilities. The diverse background of the attendees added depth and richness to the discussions and interactions throughout the program.

Workshop Sessions : The workshop consisted of a series of sessions covering various aspects of research methodology and related topics. Each session was designed to be interactive, engaging, and informative, providing participants with practical insights and hands-on experience.

Introduction to Research Methodology : The workshop commenced with an overview of research methodology, emphasizing its importance in academic and professional pursuits. Participants gained insights into the fundamental principles of research design, data collection, and analysis.

Statistical Analysis : A dedicated session on statistical analysis provided attendees with a deeper understanding of statistical methods commonly used in research. Through practical examples and exercises, participants learned how to apply statistical techniques to analyze and interpret research data effectively.

Data Visualization : The importance of data visualization in conveying research findings was highlighted in this session. Participants learned how to create visually appealing and informative graphs, charts, and infographics to present their data in a clear and concise manner.

Publication Process : The workshop concluded with a session on the publication process, where participants received guidance on navigating the intricacies of academic publishing. Topics covered included manuscript preparation, journal selection, peer review, and ethical considerations.

Feedback and Conclusion : Feedback from participants was overwhelmingly positive, with many expressing gratitude for the valuable insights and practical knowledge gained during the workshop. The interactive nature of the sessions, coupled with the expertise of the facilitators, contributed to the success of the program.

In conclusion, the VAYU - Research Methodology Workshop achieved its objective of igniting a research-oriented mindset among participants and equipping them with essential skills for academic and professional success. We extend our sincere thanks to all the delegates for their active participation and engagement.



ICS WEBINARS

Cipla

ICU Webinar Series

Dr. Sundeep Salvi | Dr. Amrita Nene | Dr. Raja Dhar
President, ICS | Chair TEL, ICS | Secretary, ICS

Mechanical Ventilation - Tips and Tricks

Wednesday
10TH JAN 2024 | 08:30 pm Onwards

| TIME | TOPIC | PRESENTER |
|-------------------|--------------------------------------|------------------|
| 8:30 PM - 8:35 PM | Welcome & Introduction | Dr. Amrita Nene |
| 8:35 PM - 9:05 PM | Basics of Mechanical Ventilation | Dr. Rajan Chavra |
| 9:05 PM - 9:25 PM | Disease Specific Ventilator Settings | Dr. Vivekranan B |
| 9:25 PM - 9:35 PM | Panel Discussion | All Faculty |

MODERATOR



Dr. Amrita Nene
Mumbai

SPEAKERS




Dr. Rajesh Chavra
Delhi

Dr. Vivekranan B.
Hyderabad

PANELISTS






Dr. G. D. Khilnani
Lucknow

Dr. Manoj Singh
Ahmedabad

Dr. Anshum Arora
Kolkata

Dr. Nilesh Umash
Kochi

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OAD Webinar Series **1 MMC Point**


Dr. Sundeep Salvi | Dr. Amrita Nene | Dr. Raja Dhar
President, ICS | Chair TEL, ICS | Secretary, ICS

ABPA - State of the Art

Wednesday
17th JAN 2024 | 08.30 pm Onwards


| TIMING | TOPIC | SPEAKERS |
|-------------------|--------------------------------|-----------------------|
| 8:30 pm - 8:35 pm | Introduction | Dr. Manoj Dhad |
| 8:35 pm - 8:55 pm | Radiology in ABPA | Dr. Khushboo Pillania |
| 8:55 pm - 9:15 pm | Diagnosis & Management of ABPA | Dr. Nagarjuna Maturu |
| 9:15 pm - 9:35 pm | Panel Discussion | All Faculty |

MODERATOR



Dr. Manoj Dhad
(Dadu HSD)




SPEAKERS

Dr. Khushboo Pillania
(Dadu HSD)

Dr. Nagarjuna Maturu
(Hyderabad)

PANELISTS


Dr. Parvaneh A H
(Kochi)

Dr. Barneel Dutta
(Dadu HSD)

Dr. Kamlesh Pandey
(Mumbai)

Dr. Shwani Sasmal
(Jodhpur)

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Academic Partner LUPM LUPM

INDIAN CHEST SOCIETY
and
Malaysian Thoracic Society
jointly present Webinar on

The changing paradigm of Asthma: What it means to your Clinical Practice

20th January, 2024 | 8:00 pm - 9:30 pm (IST & MYT)

Moderators



Assoc. Prof.
Dr. Ahmad Ismail
President, MTS
Assoc. Prof. of Medicine
Faculty of Medicine, Universiti Teknologi Mara



Dr. Sundeep Salvi
President, Indian Chest Society
Director, Chest Research Foundation
Pune, Maharashtra

Speakers



Dr. Azra Othman
Group Leader of MTS SIG for Asthma (Asia)
Respiratory Physician,
Mentari Hospital, Kuala Lumpur, Malaysia



Dr. Raju Dhar
Secretary, Indian Chest Society
Department of Pulmonary Medicine,
Sri Ramakrishna, Victoria Jaya, Bengaluru

Panelists





Prof. D J Christopher
Research Head, ICS
Department of Respiratory Medicine,
CMC, Vellore

Assoc. Prof. Dr. Andrea Stan Yu-Lin
Deputy Group Leader of MTS SIG
for Asthma (EMEA)
Senior Consultant,
Department of Pulmonary Medicine,
Faculty of Medicine, Universiti
MARA, Ipoh, Malaysia

Dr. Neeraj V. Mathur
Consultant & Head
Department of Pulmonary
Medicine (Hospital)
- New City - Hyderabad

ICU Webinar Series


Dr. Sundeep Salvi | Dr. Amrita Nene | Dr. Raja Dhar
President, ICS | Chair TEL, ICS | Secretary, ICS

Mechanical Ventilation - Ventilatory Graphs and Troubleshooting

Wednesday
24th JAN 2024 | 08.30 pm onwards


| TIMING | TOPIC | SPEAKER |
|-------------------|-----------------------------|--------------------|
| 8:30 pm - 8:35 pm | Introduction | Dr. Vivek Nangia |
| 8:35 pm - 9:00 pm | Decoding Ventilatory Graphs | Dr. Khushboo Rajan |
| 9:00 pm - 9:35 pm | Panel Discussion | All Faculty |

MODERATOR







Dr. Vivek Nangia
(Delhi)

SPEAKER



Dr. Khushboo Rajan
(Mumbai)

PANELISTS

Dr. P. S. Tampi
(Kerala)

Dr. Neeraj Gupta
(Ajmer)

Dr. Sryna PB
(Chennai)

Dr. Ramal Shah
(Kashmir)

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Academic Partner CIPLA Cipla

ILD Webinar Series **TMMC Point**

Dr. Sundeeep Salvi, President ICS | Dr. Amita Nene, Chair TEL ICS | Dr. Raja Dhar, Secretary ICS

Sarcoidosis

The Great Mimic !!

31st January | 08:30 PM
Wednesday

| TIME | TOPIC | PRESENTER |
|----------------------|---|-----------------------|
| 8.30 PM To 08.35 PM | Introduction | Dr. Prashant Chhajed |
| 8.35 PM To 08.55 PM | Imaging in Sarcoidosis | Dr. Bhavin Joshiharta |
| 08.55 PM To 09.15 PM | Diagnosis and Management of Sarcoidosis | Dr. S K Chhabra |
| 09.15 PM To 09.55 PM | Panel discussion | All Faculties |

Presenter

Speakers

Panelists

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Academic Partner
Cipla

INDIAN CHEST SOCIETY Presents
Webinar On

Pulmonary Embolism : The Silent Killer

07th Feb 2024
Wednesday | 8.30 pm Onwards

| TIME | TOPIC | PRESENTER |
|-------------------|--|--------------------|
| 8.30 pm - 8.35 pm | Introduction | Dr. BV Murli Mohan |
| 8.35 pm - 9.00 pm | Diagnosis & Management of Pulmonary Embolism | Dr. Harjit Dumbre |
| 9.00 pm - 9.55 pm | Panel Discussion | All Faculties |

MODERATOR

SPEAKER

PANELISTS

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<https://www.vccme.in/ics-webinar>

Dr. Sundeeep Salvi, President ICS | Dr. Amita Nene, Chair TEL ICS | Dr. Raja Dhar, Secretary ICS

OAD Webinar Series **TMMC Point**

Dr. Sundeeep Salvi, President, ICS | Dr. Amita Nene, Chair, TEL, ICS | Dr. Raja Dhar, Secretary, ICS

Masterclass on Lung Oscillometry

Wednesday
14th Feb 2024 | 08.30 pm Onwards

| TIMING | TOPIC | SPEAKERS |
|---------------------|--|----------------------|
| 8.30 pm to 8.35 pm | Introduction | Dr. Sali Bendre |
| 8.35 pm to 8.55 pm | Current & Future Applications of Lung Oscillometry | Dr. Lemnart Lundblad |
| 8.55 pm to 9.15 pm | Lung Oscillometry Interpretation - Tips and Tricks | Dr. Sundeeep Salvi |
| 9.15 pm to 9.30 pm | Lung Oscillometry Case Studies | Dr. Rajesh Swarnakar |
| 9.30 pm to 10.15 pm | Panel Discussion | All Faculty |

SPEAKERS

MODERATOR

PANELISTS

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Academic Partner: **LUPIN**

ILD Webinar Series **TMMC Point**

Dr. Sundeeep Salvi, President ICS | Dr. Amita Nene, Chair TEL, ICS | Dr. Raja Dhar, Secretary ICS

Idiopathic Pulmonary Fibrosis

The Best Approach

21st February
Wednesday | 08:30 PM

| Time | Topic | Presenter |
|----------------------|---------------------------------|-----------------------|
| 8.30 PM To 08.35 PM | Welcome & Introduction | Dr. Rakesh Chavla |
| 8.35 PM To 08.55 PM | Imaging in IPF | Dr. Bhavin Joshiharta |
| 08.55 PM To 09.15 PM | Diagnosis and Management of IPF | Dr. S Yuvrajjan |
| 09.15 PM To 09.55 PM | Panel discussion | All Faculties |

Moderator

Speakers

Panelists

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Academic Partner
Cipla

ICU Webinar Series

Dr. Sundeep Salvi, President, ICS | Dr. Amita Nene, Chair, TEL, ICS | Dr. Raja Dhar, Secretary, ICS

Ventilator Weaning

The Art Behind The Science

Wednesday, 28th FEB 2024 | 08.30 pm to 09.55 pm

| TIMING | TOPIC | SPEAKER |
|-------------------|-------------------------|--------------------|
| 8.30 pm - 8.35 pm | Introduction | Dr. Avdesh Bansal |
| 8.35 pm - 9.00 pm | Weaning - Tips & Tricks | Dr. Khushroo Bajaj |
| 9.00 pm - 9.55 pm | Panel Discussion | All Faculty |

MODERATOR
Dr. Avdesh Bansal (Shri)

SPEAKER
Dr. Khushroo Bajaj (Mumbai)

PANELISTS
Dr. Prashad Prabhudatta (Mumbai) | Dr. Samita Agrawal (Jaipur) | Dr. K. K. Sharma (Mumbai) | Dr. Richa Mittal (Varanasi)

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Cipla

OAD Webinar Series

Dr. Sundeep Salvi, President, ICS | Dr. Amita Nene, Chair, TEL, ICS | Dr. Raja Dhar, Secretary, ICS

TOPD

The Unknown Enemy

Wednesday, 13th March 2024 | 08.30 pm Onwards

| TIMING | TOPIC | SPEAKERS |
|---------------------|--|---------------------|
| 8.30 pm to 8.35 pm | Introduction | Dr. Nitin Abhyankar |
| 8.35 pm to 9.00 pm | TB Associated Obstructive Pulmonary Diseases | Dr. Vivekvaran B |
| 9.00 pm to 10.00 pm | Panel Discussion | All Faculty |

MODERATOR
Dr. Nitin Abhyankar (Pune)

SPEAKER
Dr. Vivekvaran B (Mumbai)

PANELISTS
Dr. A G Ghoshal (Jaipur) | Dr. Amita Nene (Mumbai) | Dr. Sivasrini Unnikrishnan (Kolkata) | Sonali Trivedi (Shri)

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Academic Partner **LUPIN**

INDIAN CHEST SOCIETY
Presents

EXPANDING DIAGNOSTIC HORIZONS IN TB AND VIRAL INFECTIONS

20th March 2024, Wednesday | 8:30pm - 10:15pm

| TIME (IST) | TOPIC | PRESENTER |
|------------------|---|----------------------|
| | Introduction | Dr. Manoj Goyal |
| 8:30pm - 8:50pm | TB Pathogen finds its Niche | Prof. Al. Storey |
| 8:50pm - 9:10pm | AI in TB Diagnostics: From Pixel to People | Dr. Borrali Datta |
| 9:10pm - 9:30pm | Insights into community acquired respiratory infections | Prof. Andrew Hayward |
| 9:30pm - 9:50pm | Update on molecular diagnostics in TB | Dr. Anand Jaiswal |
| 9:50pm - 10:15pm | Panel Discussion | All Faculty |

PRESENTER & CO-MODERATOR
Dr. Borrali Datta

MODERATOR
Dr. Manoj Goyal

SPEAKERS
Prof. Al. Storey | Prof. Andrew Hayward | Dr. Anand Jaiswal

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<https://blueberry.webcastlive.co.in/c205/>

Dr. Sundeep Salvi, President, ICS | Dr. Amita Nene, Chair, TEL | Dr. Raja Dhar, Secretary, ICS

Supported by **Cepheid**

TB Guardianship Certification Program

Advancements in diagnosing and managing Drug-Resistant Tuberculosis (DR-TB)

TB Diagnostics: State of the Art

Friday, 22nd March 2024 | 8:30 PM to 10:00 PM IST

Exclusive INAUGURAL SESSION with The Union, Indian Chest Society, USAID India, Central TB Division and BD India | 8:00 PM to 8:30 PM IST

| Time | Topic | Presenter |
|---------------------|--|--|
| 8:30 PM to 8:45 PM | Introduction | Dr. Roshni Manjiv, Dr. Nayal Manjiv Joseph |
| 8:45 PM to 9:00 PM | TB scenarios in India: Current challenges | Dr. A.K. Chopra |
| 9:00 PM to 9:15 PM | A handbook of TB diagnostic Algorithms | Dr. Jyoti Inwani |
| 9:15 PM to 9:30 PM | Uptake culture and DOTS: model standard in TB management | Dr. Uma Bhambhani |
| 9:30 PM to 9:45 PM | Update on TB diagnostic tools: our armor against TB | Dr. Divya Bhargava |
| 9:45 PM to 10:00 PM | Panel Discussion | All Faculty |

Moderator
Dr. Roshni Manjiv, Professor and Head, Department of Mycobacteriology, ICMR, Lucknow

Co-moderator
Dr. Nayal Manjiv Joseph, Assistant Professor, Department of Mycobacteriology, ICMR, Lucknow

Speakers
Dr. Camilla Rodrigues, Director, Mycobacteriology, ICMR, Lucknow | Dr. K.K. Chopra, Director, Mycobacteriology, ICMR, Lucknow | Dr. Jyoti Inwani, Director, Mycobacteriology, ICMR, Lucknow | Dr. Uma Bhambhani, Director, Mycobacteriology, ICMR, Lucknow

Dr. Sundeep Salvi, President, ICS | Dr. Amita Nene, Chair, TEL | Dr. Raja Dhar, Secretary, ICS

Supported by **USAID**, **TB Pledge**, **The Union**, **ICMCR**, **BD**

ICU Webinar Series

Dr. Sundeep Salvi, President, ICS | Dr. Amrita Nene, Chair TEL, ICS | Dr. Raja Dhar, Secretary, ICS

Tracheostomy

Improving the Outcomes

Wednesday 27th March 2024 | 08.30 pm to 09.55 pm

| TIMING | TOPIC | SPEAKER |
|-------------------|---------------------------------|-------------------|
| 8.30 pm - 8.35 pm | Introduction | Dr. Vivek Nangia |
| 8.35 pm - 9.00 pm | Tracheostomy - State of the Art | Dr. Rajesh Chawla |
| 9.00 pm - 9.55 pm | Panel Discussion | All Faculty |

MODERATOR

 Dr. Vivek Nangia (Delhi)

SPEAKER

 Dr. Rajesh Chawla (Delhi)

PANELISTS

| | | | |
|--|--|---|--|
|  Dr. F. S. Tamoli (Mumbai) |  Dr. Snehal Desai (Mumbai) |  Dr. Abha Mahabhar (Mumbai) |  Dr. Naveel Thakkar (Bandra) |
|--|--|---|--|

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Academic Partner
Cipla

PULMONOLOGY FORUM

Dr. Sundeep Salvi, President, ICS | Dr. Amrita Nene, Chair TEL, ICS | Dr. Raja Dhar, Secretary, ICS

Imaging in Airways

All That You Need To Know

Friday 29th March 2024 | 08.30 pm to 09.55 pm

| TIMING | TOPIC | SPEAKER |
|-------------------|--|----------------------|
| 8.30 pm - 8.35 pm | Introduction | Dr. Amrita Nene |
| 8.35 pm - 8.55 pm | HBCT in Large Airway Diseases | Dr. Bhavin Jankharia |
| 8.55 pm - 9.15 pm | HBCT in Small Airway Diseases | Dr. Khushboo Pilonis |
| 9.15 pm - 9.25 pm | Pulmonologist perspective for Imaging in Airway Diseases | Dr. Nitin Abhyankar |
| 9.25 pm - 9.55 pm | Panel Discussion | All Faculty |

MODERATOR

 Dr. Amrita Nene (Mumbai)

SPEAKERS

| | | |
|--|--|---|
|  Dr. Bhavin Jankharia (Mumbai) |  Dr. Khushboo Pilonis (Bandra) |  Dr. Nitin Abhyankar (Pune) |
|--|--|---|

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Academic Partner
GSK

ILD Webinar Series

Dr. Sundeep Salvi, President, ICS | Dr. Amrita Nene, Chair TEL, ICS | Dr. Raja Dhar, Secretary, ICS

NSIP and OP

The Best Approach

03rd April 08:30 PM
Wednesday

| TIME | TOPIC | PRESENTER |
|----------------------|---|----------------------|
| 8.30 PM To 08.35 PM | Introduction | Dr. Amrita Nene |
| 8.35 PM To 08.55 PM | Imaging in Non-specific Interstitial Pneumonia (NSIP) and Organizing Pneumonia (OP) | Dr. Bhavin Jankharia |
| 08.55 PM To 09.15 PM | Diagnosis and Management of NSIP and OP | Dr. B. P. Singh |
| 09.15 PM To 09.55 PM | Panel discussion | All Faculty |

Moderator

 Dr. Amrita Nene (Mumbai)

Speakers

| | |
|--|--|
|  Dr. Bhavin Jankharia (Mumbai) |  Dr. B. P. Singh (Lucknow) |
|--|--|

Panelists

| | | | |
|--|--|--|--|
|  Dr. K. Satish (Bangalore) |  Dr. Pradyumn Laxmi (Mumbai) |  Dr. Anvita Hubashir (Delhi) |  Dr. Sameer Bansal (Bangalore) |
|--|--|--|--|

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ICU Webinar Series


Dr. Sundeep Salvi, President, ICS | Dr. Amrita Nene, Chair TEL, ICS | Dr. Raja Dhar, Secretary, ICS


Non-invasive Ventilation

Tips and Tricks




Wednesday 10th April 2024 | 08.30 pm to 09.55 pm

| TIMING | TOPIC | SPEAKER |
|-------------------|--|-----------------------|
| 8.30 pm - 8.35 pm | Introduction | Dr. G. C. Shilbani |
| 8.35 pm - 8.50 pm | Non-invasive Ventilation - An Overview | Dr. Gyanendra Agrawal |
| 8.50 pm - 9.55 pm | Panel Discussion | All Faculty |

MODERATOR

 Dr. G. C. Shilbani (Delhi)

SPEAKER

 Dr. Gyanendra Agrawal (Delhi)

PANELISTS

| | | | |
|---|--|--|--|
|  Dr. Parvati Kaul (Gurgaon) |  Dr. Prii Meshram (Bandra) |  Dr. Mansi Gupta (Lucknow) |  Dr. Harpreet VS (Bangalore) |
|---|--|--|--|

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Academic Partner
Cipla

ICS Travel Grants Calender

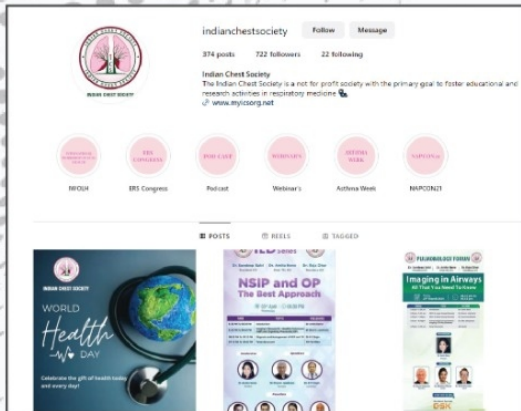
| Sr. No. | Type of Conference | No. of Grants | Amounts Sanctioned | Last date for Receiving Applications (Every Year) | Results on or Before (Every Year) | Documents Required |
|---------|---------------------------------------|---------------|--------------------|---|-----------------------------------|---|
| 1 | ATS USA | TWO | Rs. 1,00,000/- | 15th FEB | 28th FEB | Before - 1. Acceptance Certificate from ATS 2. Resume 3. Covering letter signed by the HOD 4. Age Proof |
| | | | | | | After - 1. Certificate of Attendance 2. Poster/Paper Presentation Letter from ATS 3. Receipt of travel tickets |
| 2 | ERS EUROPE | SEVEN | Rs. 75,000/- | 15th JUNE | 30th JUNE | Before - 1. ERS Application 2. Application forwarded by HOD 3. Resume 4. Selection Letter from ERS 5. Age Proof |
| | | | | | | After - 1. Certificate of Attendance 2. Poster/Paper Presentation Letter from ERS EUROPE 3. Receipt of travel tickets |
| 3 | CHEST ACCP USA | TWO | Rs. 1,00,000/- | 30th JUNE | 15th JULY | Before - 1. CHEST ACCP Application 2. Application forwarded by HOD 3. Resume 4. Selection Letter from ACCP 5. Age Proof |
| | | | | | | After - 1. Certificate of Attendance 2. Poster/Paper Presentation Letter from CHEST ACCP USA 3. Receipt of travel tickets |
| 4 | International Workshop on Lung Health | TWO | Rs. 75,000/- | 15th November | 15th December | Before - 1. IWLH Application 2. Application forwarded by HOD 3. Resume 4. Selection Letter from IWLH 5. Age Proof |
| | | | | | | After - 1. Certificate of Attendance 2. Poster/Paper Presentation Letter from IWLH 3. Receipt of travel tickets |

*Please note that dates of submitting applications may vary due to unprecedented times.

*Keep in touch with us at icsofficeexecutive@gmail.com.

ICS Social Media

ICS SOCIAL MEDIA



Instagram / indianchestsociety

Posts : 374

Followers : 722

Following : 22



Facebook / Indian Chest Society

Posts : 374

Followers : 3K

Likes : 2.6K



Twitter / ICSNagpur

Posts : 374

Followers : 604

Following : 106

Indian Chest Society Membership Benefits

1. Dual Membership of Indian Chest Society (ICS) and European Respiratory Society (ERS).
2. Access to online content on ERS website like Journals, Monographs, Breath Magazine, etc.
3. Receive lifelong printed copies of Lung India (An Indexed Publication) - six times a year.
4. Receive lifelong printed copies of Respire, the ICS Newsletter, three times a year.
5. A chance to get various ICS Travel Grants (ACCP, ERS, ATS), Short Term Fellowships and training, research Fellowships.
6. Discounted ICS Membership rates for CME / Conferences.
7. Discounted ICS Membership rates for ERS Conference.
8. Opportunity to participate in ICS research activities / Indian Registries for respiratory diseases and contribute to building robust data for the nation.
9. Participate in the ICS Kothari Young Researcher (PG) Award Session at NAPCON every year.
10. Can apply for the FIC - Fellowship of Indian Chest Society Awarded at Annual Conference.
11. Take part in the ICS Leadership Election conducted via e-voting.
12. Apply for various Awards, Fellowships, Orations given by the ICS at NAPCON.
13. Avail reduced registration fee for members at Annual ICS Conference.
14. Participate in the Annual General body and be a part of the decision making process of ICS.
15. Become a part of the electoral process of ICS e-voting rights to all life members.
16. Opportunity to become an office bearer of this prestigious society.
17. Enhancing knowledge by attending workshops and events under the ICS Banner

18. Association / Networking with Top Notch Doctors and Academicians in the field of Respiratory Industry.
19. Avail exclusive deals for ICS Members for International Conferences & other Medical Events.
20. ICS has exclusive tie up with Lung Health Organisation for travel grants, Rising Star programme and discount for their Lung Health Workshops.
21. Avail ICS-ERS Clinical and Research Fellowship ranging from 1-6 months.
22. Benefit of Short Term Fellowship in various Centre of Excellence within India in Interventional Pulmonology, Critical Care, Sleep Medicine, etc.
23. Ever increasing tie up with international societies with ACCP BTS on the anvil.

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ICS Goals and Objectives

1. Promoting research and academic activities.
2. Organising periodic academic meetings and conferences at international, national, zonal and local level and to bring together periodically, the medical fraternity interested in Respiratory Medicine, at a common meeting point.
3. Organising periodic patient awareness and educational programmes to promote understanding about the important respiratory diseases.
4. To assist in creating technical manpower required to handle various diagnostic and therapeutic equipments related to Respiratory Medicine.
5. To assist in creating trained medical manpower required to handle various patient related activities.

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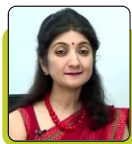
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RESPIRE QUIZ

(January - April 2024)

A group of 12 people in the Southern New England costal area had shellfish in their lunch along with Alcohol. They were in the costal area to witness Red Tide.

Within 30 minutes, few of them started tingling of lips, tongue, face and neck. Three of them further developed muscular paralysis and respiratory difficulty after 10-12 hours.

The most probable causative agent is -

1. Brevetoxin
2. Paraquat
3. Methyl isocyanate
4. Organophosphate



Please send correct answers to Dr. Neeraj Gupta
at E-mail : drneerajajmer@yahoo.com and cc to icsofficeexecutive@gmail.com
First three correct winners stand a chance to feature in the next issue of Respire Quiz Section

Correct response for RESPIRE (September - Decembre 2023)

Match the following parameters with interpretation for various conditions on forced Oscillometry -

| | |
|---|------------------------------------|
| a) \uparrow R5, \uparrow R20, Normal R5 - R20 | (i) Total airway obstruction |
| b) \uparrow R5, Normal R20, \uparrow R5 - 20 | (ii) Peripheral airway obstruction |
| c) $\uparrow\uparrow$ R5, \uparrow R20, \uparrow R5 - R20 | (iii) Central airway obstruction |

Options -

| | a. | b. | c. |
|---|-------|------|-------|
| 1 | (iii) | (i) | (ii) |
| 2 | (i) | (ii) | (iii) |
| 3 | (iii) | (ii) | (i) |

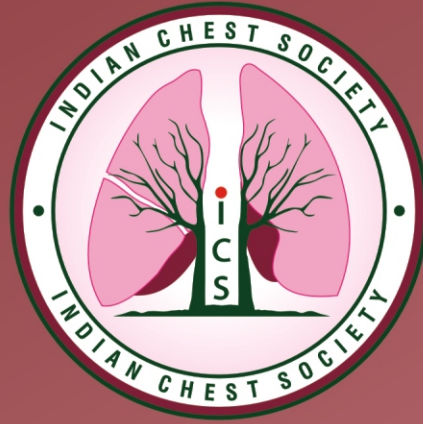
Correct Answer : Option 3 a.(iii), B.(ii), c.(i)

***Congratulations to RESPIRE Quiz Winner
for the issue (September - December 2023)***

Dr. Shraddha Patel

Senior Resident, Terna Medical College and Hospital, Navi Mumbai





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*EPHEMRA Dec'23

1. Yanez A, Dimitro A, Bremner P, Rhee CS, Luscombe G, Prillaman BA, Johnson N. A patient preference study that evaluated fluticasone furoate and mometasone furoate nasal sprays for allergic rhinitis. Allergy Rhinol (Providence). 2016 Jan 1;7(4):183-192. 2. Chennakeshavaraju N, Narayana S, Mohiyuddin ASM. Comparative study of the efficacy and safety of intranasal azelastine hydrochloride and fluticasone furoate in the treatment of allergic rhinitis. J Family Community Med. 2020 Sep-Dec;27(3):186-191. 3. Debbaneh PM, Bareiss AK, Wise SK, McCoul ED. Intranasal Azelastine and Fluticasone as Combination Therapy for Allergic Rhinitis: Systematic Review and Meta-analysis. Otolaryngol Head Neck Surg. 2019 Sep;161(3):412-418. 4. Naik Manoj, Nayak Ashwini, Khandeparkar Prashant, Mukaddam Qayum. E-cacy and Safety of Montelukast Plus Fexofenadine Fixed Dose Combination in Allergic Rhinitis : Results of Post-Marketing Study In India. Indian Medical Gazette. 2013 Aug ; 147 (8): 314-318.

Allegra Nasal Spray API : <https://www.sanofi.in/dam/jcr:d0151535-e26e-4011-8bc4-c044d5fd197d/Allegra%20Nasal%20API.pdf>

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Allegra- M : https://www.sanofi.in/dam/jcr:927c3836-686f-4cc0-9a1e-df6366327510/Allegra%20M_API_Sep%202021.pdf

MAT-IN-2400609 v1.0 03/24
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