

SYNAPSE

E-NEWSLETTER (OCTOBER 2021)



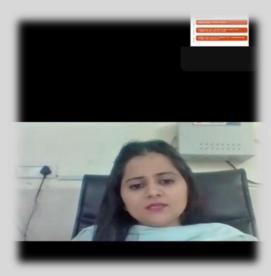




CAMPUS NEWS

Alumni Talk- Rashtriya Bal Swasthya Karyakaram

Date: 25 September, 2021



A series of Alumni Talks have been organized by the institute to benefit students by giving them a platform learn from the experiences shared the Alumni so that they can better understand the scope of each segment of healthcare. The Alumni Talk Series began with its first session on 25 September 2021. Dr Geetanjali Joshi Jasrotia (DEIC/RBSK Manager, Jammu) of batch 2010-12 was invited to deliver a lecture on the topic "RBSK program- Progress and Challenges". She discussed the objectives and salient features of the RBSK Program, how the programme aids the beneficiaries, highlighted some crucial statistics, described the changes seen over the years and challenges faced in the implementation of the program especially during

and post Covid-19 pandemic and lastly also shared some insights into the new developments under the programme. The session was attended by both 1st and 2nd-year PGDHM students. Nearing the end of the session, Dr Geetajali also addressed students' queries and concerns and guided them for their future endeavours. We thank her for enriching the students by sharing her knowledge and experiences.

Qualitative Research Workshop

Date: 27 September, 2021 - 1 October, 2021

Sharing of knowledge through academics and training has always been a vision of IIHMR Delhi. Given the same an online international introductory workshop on "Qualitative research methodology and qualitative data analysis" was organized jointly by IIHMR Delhi with Imperial College of London and Liverpool School of Tropical Medicine. The workshop was funded by NIHR RIGHT (Research and Innovation for Global Health) Grant via PREVENT (Prevention of Epilepsy by Reducing Neonatal Encephalopathy) study. The 5-day workshop from 27th



September — 1st October 2021 was inaugurated by Prof. Sutapa B Neogi, Director, along with Prof Preetha GS and Ms Nikita Sabherwal from IIHMR Delhi and Prof Sudhin Thayyil from Imperial College London. Qualitative research designs were elaborated on day 1 followed by a discussion on various methods of data collection and research ethics on days 2 & 3. On day 4 there was a discussion on data analysis along with a practical session on the same. Day 5 saw an elaboration on reporting and paper writing with sharing of some experiences in the field

of qualitative research. These sessions were taken by various national and international speakers from the organizing institutes. The closing remarks were given by Dr Rupsa Banerjee, Assistant Prof, IIHMR Delhi. A total of over 50 participants from India, Sri Lanka and the United Kingdom attended the sessions on all days. The Q&A sessions at the end of every day made the workshop very interactive, lively, knowledge imparting and productive for everyone.

MDP ON "Urban Health Management Programme" for NHM Odisha

Date: 27 September, 2021 - 1 October, 2021



A 5-day workshop on the "Urban **Health Management Programme" for** the officials of NHM Odisha was successfully conducted, chiefly coordinated by Ms Divya Agrawal (Associate Dean -Academics and student affairs. A total of 16 ardent officials were trained in the workshop which aimed to groom leadership, planning, execution, and analytical skills required in an Urban Healthcare system. It covered areas such as -Logical Framework Planning

Matrix for Healthcare programs, Improvement of Leadership, Conflict management, and Teambuilding skills, Data analysis and interpretation, Intersectoral Coordination, NQAS guidelines, HMIS implications, etc. The workshop also included a visit to Urban PHC and Aam Aadmi Mohalla clinic to give them insights into the government healthcare systems being followed in NCR. The workshop started with a pre-test on Day 1 and concluded with Group Presentations on Day 5 . All the NHM officials were highly delighted and appreciative of the MDP Workshop and we wish them the best for their future pursuits.

Resumption of Offline classes

After a long wait, finally, the offline classes were resumed on campus for the completely



vaccinated students, strictly adhering to the guidelines and SOPs issued by the Delhi Disaster Management Authority. The excitement and zeal were seen among the students as well as the staff of the institute. The second-year students started coming to campus from the 27th of September, and the first-year students joined them from the 4th of October. The students are seen to be enjoying their campus life, along with active utilization of the library, sports room, canteen, etc. The offline classes will enhance the interaction and learning experience from fellow peers and faculty. It is great to have the campus lively again, breaking the monotony of online classes.





HEALTHCARE
IN HEADLINES

MSD Pharmaceuticals launches gender-neutral HPV vaccine in India

Date: 30 September, 2021

News Platform: ZEE

MSD Pharmaceuticals on September 29 announced the launch of India's first gender-neutral Human Papillomavirus (HPV) vaccine to help reduce HPV-related disease burden in the country. GARDASIL 9, which is a 9-valent HPV vaccine, will also help reduce cancers caused by the HPV types contained in the vaccine, among girls and women aged 9-26 years and boys aged between 9-15 years.

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The world failed to achieve 2020 mental health target: WHO

Date: 09 October, 2021

News Platform: Economic Times

The world missed most of the 2020 mental health targets, at a time when the Covid-19 pandemic is highlighting a growing need for mental health support, according to a World Health Organization (WHO) report released. In 2020, just 51 % of WHO's 194 member states reported that their mental health policy or plan was in line with international and regional human rights instruments, way short of the 80 % target.

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Govt. hikes rates of procedures under Ayushman Bharat, black fungus management added under scheme

Date: 05 October, 2021

News Platform: The Hindu

The government has revised the rates of around 400 procedures under the Ayushman Bharat Pradhan Mantri Jan Arogya Yojana (AB PM-JAY) and added a new medical package related to black fungus management, moves that "will strengthen the empanelled hospitals to provide better healthcare services". In the revised Health Benefits Package (HBP 2.2), the National Health Authority (NHA) which implements the AB PM-JAY scheme has raised the rates of packages by 20 % to 400 %.

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Russia's Sputnik V Orders Cancelled by Indian Hospitals

Date: 29 September,2021

News Platform: NDTV

Some of India's private hospitals have cancelled orders for Russia's Sputnik V vaccine as they struggle to sell COVID-19 shots amid surging supplies of free doses of other vaccines offered by the government.

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Mumbai hospitals witness a 50% rise in emergency footfall of patients with heart attacks

Date: 28 September, 2021

News Platform: Hindustan Times

Hospitals across the city are witnessing an almost 50% rise in emergency footfall of patients with heart attacks compared to the peak pandemic period in the second wave. This is attributed to a sedentary lifestyle during the pandemic and disruption of treatment for patients with cardiac ailments in the lockdown.

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Dengue stings Delhiites, hospital beds filling up

Date: 02 October, 2021

News Platform: The Times of India

Covid-19 cases have gone down significantly in Delhi but hospitals in the city say their beds are running full once again due to a sudden increase in dengue cases.

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An Omnichannel network vital for better healthcare

Date: 01 October , 2021

News Platform: Healthworld.com

An Omnichannel network that takes care of consumers concerns on Affordability, Availability, Awareness and Adherence to quality medicines vital for better healthcare among Indians.

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The Rise of Robotic-Assisted Surgery: Now, Next and Beyond

Date: 30 September, 2021

News Platform: Healthworld.com

Robotic-Assisted Surgery (RAS) is catalyzing a paradigm shift in surgical procedures and the clinical benefits, therefore it is becoming one of the most sophisticated tools with the added benefits of a minimally invasive approach and precision. (Brand connect initiative).

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How technology is redefining retail pharmacy to improve community health

Date: 09 October , 2021

News Platform: HealthWorld.com

The rapid technological adoption in the industry is the result of the pandemic-induced lockdown. This also created the space for pharmacies to undergo digital transformation and position themselves as an attractive model in the healthcare industry.

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Quinary prevention in diabetes care: Need for a multidisciplinary approach

"BEWARE OF FALSE KNOWLEDGE - IT IS MORE DANGEROUS THAN IGNORANCE"

Diabetes mellitus (DM) is a complex heterogeneous metabolic condition that results from the interaction between the genetic predisposition of an individual and environmental triggers. The global incidence of DM has been quadrupled over the last two decades. The number of affected individuals has been increasing at an alarmingly rapid pace.

Misinformation regarding various diseases is a major challenge in the context of global health. In the age of digital and electronic media, the spread of misinformation that is related to the prevention and management of DM has increased the burden of health care professionals in tackling the disease, especially when several myths associated with diabetes care are prevalent among populations.

The number of social network users in India stood at 36.1 million in 2018 and is projected to reach 448 million by 2023. Deception and hearsay disseminated through these platforms may adversely affect the health and wellbeing of people. Diabetes e-hearsay refers to diabetes-related misleading information disseminated via messages on cellphones or misinformation uploaded on social media sites.

How to avert the spread of misinformation?

Quinary prevention is a new term coined by Kalra et al. to describe the prevention of hearsay in health care and describe the fifth level of prevention. "It is a means of preventing health-related hearsay or misinformation or its ill effects on the health of the individuals". Quinary prevention encompasses all levels of prevention, and effective quinary prevention is mandatory for effective primary, secondary and tertiary prevention of disease.

What is the role of Quinary Prevention in diabetes?

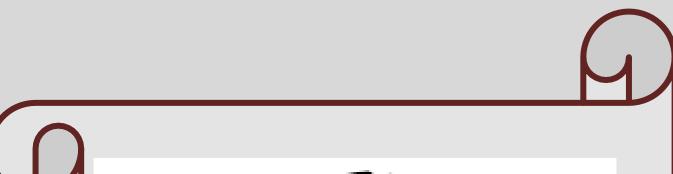
Quinary prevention in diabetes plays a significant role in controlling the burden of diabetes by avoiding the spread of misinformation and hearsay related to diabetes prevention and care.

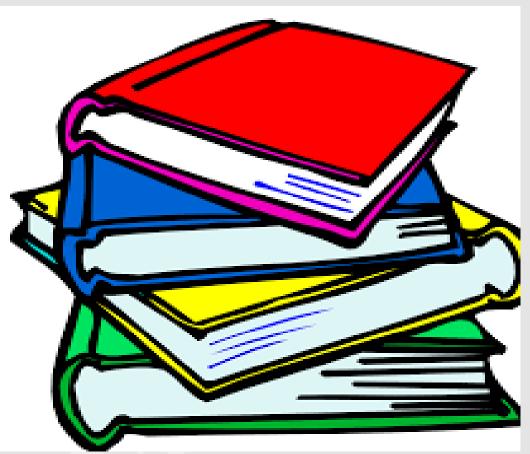
The need of the hour is for governments, policymakers and health care professionals to ensure that accurate information reaches the patient as well as for patients to use reliable electronic health information or holistic management approach websites. Quinary prevention has been demonstrated by several researchers to improve efforts in controlling diabetes.

The responsibility for quinary prevention lies at various levels from policymakers to the public, and include legislative, administrative, clinical and campaign approach. It is the multilayered responsibility of health care professionals, professional bodies and governments to constantly updating themselves and facilitating the dissemination of accurate information and health literacy. Healthcare professionals can include quinary prevention in their clinical and public health practice. Diabetic e hearsay can be tackled through outreach programs by generating awareness and providing scientific information to populations.

What do you think? To know more about this concept, read the article.

Click here to read full article





ACADEMICS
AT A GLANCE

Importance of Sample Size in Research

In research, we intend to find the answer to a problem using statistics. We draw a sample which we study and then extrapolate the findings on the whole population. Selecting an adequate sample size, that signifies the whole population, is an important aspect of any study and is also important for economic and ethical reasons. The sample size is determined by various factors like study design, sampling method and outcome measure. Quality of the sample is determined by the number and selection of subjects of the study.

Adequate sample size is necessary to get results among the variables, that are different, and it also increases the range of possible information and gives a lucid analysis. A large sample size has its limitations like wastage of time and resources. Very large samples turn small differences in data into statistically significant differences – even when there aren't any.

Small sample size could be a wastage of resources too as it cannot produce useful results. As Barun K has rightly described, a small sample size "will give a result which may not be sufficiently powered to detect a difference between the groups and there are chances it may turn out to be falsely negative", it is a waste of resources as the result will be invariably inconclusive. Moher et al highlighted the significance of small sample studies resulting in null trials in the literature. In a study, they found that out of 102 null trials, only 36% had 80% power to detect a relative difference of 50% between groups.

Faber et al has shown that "When two studies are conducted with the same methodology and are showing similar results, but have different sample sizes, it might sway the researcher with different results in the clinical decision-making process." Therefore, for an optimal result the sample size should neither be too small nor too large.

It can be safely concluded that sample size and the effect size affect the impact of the study results. Thus, for an effective and impactful study design, an appropriate sample size is of paramount importance.

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