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LIFE AT CAMPUS

Navigating healthcare through revenue cycle model

IIHMR Delhi hosted a guest lecture on 4th August 2025 on Revenue Cycle Management. The lecture was delivered by Mr Mandeep Singh. He highlighted the scope of RCM which is not just limited to billing but also includes strategic process that integrates clinical, operational, and financial functions to ensure the sustained health of a healthcare organization. The lecture also addressed modern challenges in RCM, such as navigating a constantly changing regulatory landscape and the rise of high-deductible health plans that shift more financial responsibility to patients. Mr. Singh also stressed on the need for future healthcare managers to possess a blend of financial acumen, regulatory knowledge, and excellent patient communication skills.



Orientation Day

On the 18th Orientation Day, which was organized on 4th August 2025, the Institute welcomed PGDM 2025-2027 batch. Dr. Sutapa B Neogi, Director IIHMR Delhi, in her address shared the legacy, core activities and achievements of the Institute. Our guests Mr. Harjeet Singh, Strategic HR leader, Akhil System, and Dr. Swanpreet Singh, Niva Bupa Health Insurance, addressed the new batch of students. The insights shared by the Director, and guests provided an overall glimpse of the Institute, opportunities available, skills required and sought in the health sector. Faculty members also joined in welcoming the students on this Orientation Day. Dr. Sumesh Kumar, Associate Dean, Academics, gave an overview of the academic program followed which students moved towards the academic section for completing other administrative and academic requirements scheduled on the day. Excitement and curiosity among the new batch of students prevailed as they began their journey to their dreams.



Independence Day celebration

IIHMR Delhi marked India's 79th Independence Day on 15th August 2025 with hoisting of the national flag, playing the national anthem and organizing a cultural program. Dr. Sutapa B. Neogi, Director IIHMR Delhi, addressed the gathering of students and faculty members. The celebration continued with a vibrant cultural program, wherein students performed on patriotic songs showcasing India's rich heritage and past.



AADHAR 2025

IIHMR Delhi, celebrated its Foundation Day on 18th August 2025, marking a milestone in its journey since the inception. The Foundation Day honours the Institution's legacy, recognize the contributions of those who have shaped its success, and reaffirm its commitment to advancing healthcare education and research. In this Foundation Day, the Institute also launched two new executive programs, i.e., Online Executive Program on Pharmaceutical Supply Chain Management and Online Executive Program on Comprehensive Vaccine Management. A cultural event was planned and organized in the evening. Students, faculty members and staff participated in the event. The campus was filled with pride, reflection and an incredible energy for the path ahead.



Awareness program on NABH

IIHMR Delhi hosted an interactive session on the critical role of quality and patient safety in India's healthcare sector on 20th August 2025. The contributions of the Quality Council of India (QCI) and the National Accreditation Board for Hospitals & Healthcare (NABH) in establishing and promoting benchmarks for patient care were discussed. Innovative quality promotion programs and certifications like Gunvatta Gurukul, QCI's flagship initiative designed to cultivate a culture of quality across diverse sectors, including healthcare were highlighted. Students benefitted from this awareness program and were encouraged to engage with the quality-driven movement.



Visit to National Institute of Malaria Research

IIHMR Delhi organized a visit to the ICMR- National Institute of Malaria Research on 21st August 2025 for its students. The students were introduced to the research and operational activities aimed at eliminating malaria in India. They visited the laboratories, including those for mosquito breeding, parasite diagnosis, and advanced genetic research, and held interaction with NIMR's leading scientist/researchers who offered valuable insights into the challenges and strategies of vector control, disease surveillance, and the development of new diagnostic tools and insecticides. This academic visit provided insights about the program functioning and how research translates into tangible public health outcomes.



Convocation 2025

The convocation of the PGDM 2023 batch was held on 23rd August 2025. It was a moment of immense pride and celebration that was filled with a palpable sense of accomplishment as graduates, dressed in their ceremonial attire, received their degrees, marking the culmination of two years of academic and professional training. The event was a testament to the student's hard work, the dedication of the faculty, the unwavering support of their families and friends. Dr Sutapa B Neogi, Director, IIHMR Delhi presented the Institute report and our guests Dr. Ashok Agarwal, Trustee, Bhorukha Charitable Trust, and Dr. S.D Gupta, President, Management Board, IIHMR shared inspiring messages, urging the new alumni to apply their knowledge and skills to make a meaningful impact on the healthcare sector. Conferring of degrees was done by Dr. Sumesh Kumar, Associate Dean, IIHMR Delhi. The joyous atmosphere, captured in a flush of smiles, proud glances, and celebratory photographs, symbolized not just the end of a chapter but the promising beginning of their careers as future healthcare leaders.





ACADEMIA

Rise of Self-Diagnosis and Medical Misinformation on Social Media

In today's digital-first age, social media platforms have transformed into much more than spaces for networking and entertainment. They are now widely used as sources of health information, where reels, posts, and videos promise quick solutions to complex medical conditions. From diet hacks to mental health "self-care" checklists, millions of young people in India increasingly rely on influencers and online communities rather than qualified healthcare professionals. This easy access to information can be empowering, but it has also given rise to a concerning trend: self-diagnosis and the rapid spread of medical misinformation.

The attraction of self-diagnosis lies in its convenience and immediacy. With just a few taps, anyone can search symptoms and receive hundreds of results within seconds. For young people, particularly, this is appealing because it feels accessible, free, and anonymous. Many prefer typing queries about sensitive issues like anxiety, depression, or reproductive health into search bars rather than opening up to a doctor. Online forums and peer groups also provide a sense of validation and belonging, reinforcing the belief that digital advice is sufficient. However, beneath this convenience lies a serious risk, oversimplified explanations, misleading claims, and unverified remedies that may cause more harm than good.

Medical misinformation spreads rapidly on platforms because it is designed to attract attention. Sensational claims such as "one fruit that cures all diseases" or "three easy steps to beat depression" are easier to consume and share than nuanced, evidence-based explanations. Influencers, who often enjoy significant trust among their followers, can unintentionally amplify misinformation, making it trend faster than verified content. The consequences are far-reaching. Many young people delay professional consultations because they believe online advice is adequate, leading to worsening conditions. Others experience unnecessary anxiety after misinterpreting everyday symptoms as signs of serious illness. Some even adopt unsafe practices, ranging from fad diets to self-medicating with unapproved drugs, all of which may endanger physical and mental health.

The Indian context makes this trend even more pressing. With over 450 million social media users, most under the age of 35, youth form the largest consumer base of digital health content. During the COVID-19 pandemic, this dependency on social media for health updates became even more visible. From home remedies claiming to boost immunity to misinformation about vaccines, unverified content often travelled faster than scientific facts. While urban youth were more likely to engage with online health trends, rural populations are catching up too, thanks to affordable smartphones and expanding internet networks. This creates a wide demographic of young Indians exposed daily to half-truths and myths about their well-being.

Addressing this issue requires a collective effort. Young people must learn to approach health-related content with a critical mindset, asking whether the source is credible, whether claims are backed by research, and whether advice aligns with medical science. Digital literacy should become part of educational curriculum, enabling students to differentiate between evidence-based information and misleading narratives. At the same time, healthcare

professionals have a responsibility to make their voices more visible online. By creating engaging, accessible, and trustworthy content, doctors and experts can counterbalance the flood of misinformation. Fact-checking portals such as those from WHO, ICMR, or the Ministry of Health can also play a role in guiding the public toward reliable sources.

Ultimately, social media is not inherently harmful; it is a tool whose impact depends on how it is used. While misinformation can thrive on these platforms, the same channels can also be used to spread accurate, life-saving knowledge. The challenge is to ensure that credible voices are amplified and that youth are encouraged to verify before believing. Self-diagnosis may feel empowering in the short term, but it often comes at the cost of delayed treatment and increased anxiety. What Indian youth need most is balance, the ability to use social media as a resource without letting it replace professional medical guidance. In the end, the best prescription against misinformation is awareness, and the healthiest habit we can cultivate is learning to question before we trust.

“You manage thing; you lead people”-Grace Hopper



Research Insight

World Mental Health Today: Latest Data

Mental health needs are high, but responses are insufficient and inadequate. Over one billion people live with a mental disorder, yet most remain underserved. This publication from the World Health Organization is an update to the 2022 World Mental Health Report: Transforming Mental Health for All. It brings together the most recent global data on the prevalence, burden, and cost of mental health conditions – data that are indispensable for shaping effective, evidence-informed responses. The World Health Organization’s 2025 report presents a comprehensive analysis of the global mental health landscape, underscoring the scale, complexity, and urgency of addressing mental health as a core public health priority.

As of 2021, over 1.095 billion individuals, approximately one in eight globally, were living with a mental disorder. The most prevalent conditions are anxiety disorders (4.4%) and depressive disorders (4.0%), with a disproportionately higher burden among females and young adults aged 15–29. Mental health challenges also manifest early in life, with 7.2% of children (5–9 years) and up to 15.4% of adolescents (10–19 years) affected. Suicide remains a critical concern, accounting for 727,000 deaths globally in 2021, more than half occurring before the age of 50. It is the second leading cause of death among young females aged 15–29, reflecting both the severity of unmet mental health needs and the limitations of current prevention strategies.

From a disability perspective, mental disorders contribute to 5.2% of global DALYs and 17.2% of YLDs, with depression ranking as the second leading cause of YLDs worldwide. Schizophrenia, while less prevalent, is identified as the most impairing condition, with a health state weight of 0.78, indicating profound functional limitations. The economic implications are substantial. Depression and anxiety alone are estimated to cost the global economy US\$1 trillion annually, primarily due to lost productivity. In low- and middle-income countries (LMICs), the mental health burden is projected to consume 0.5–1.0% of GDP, yet only 42% of low-income countries have integrated mental health into their national public health frameworks.

Systemic gaps persist across governance, financing, and service delivery. Mental health research receives only 4.6% of global health research funding, with suicide prevention accounting for less than 0.7% of that allocation. Community-based care remains underfunded, receiving just 11% of mental health budgets, while psychiatric hospitals continue to absorb 47%, particularly in LMICs. Workforce shortages are acute, with many LMICs reporting fewer than 1 mental health professional per 100,000 population, and access to essential psychotropic medications remains limited and often unaffordable.

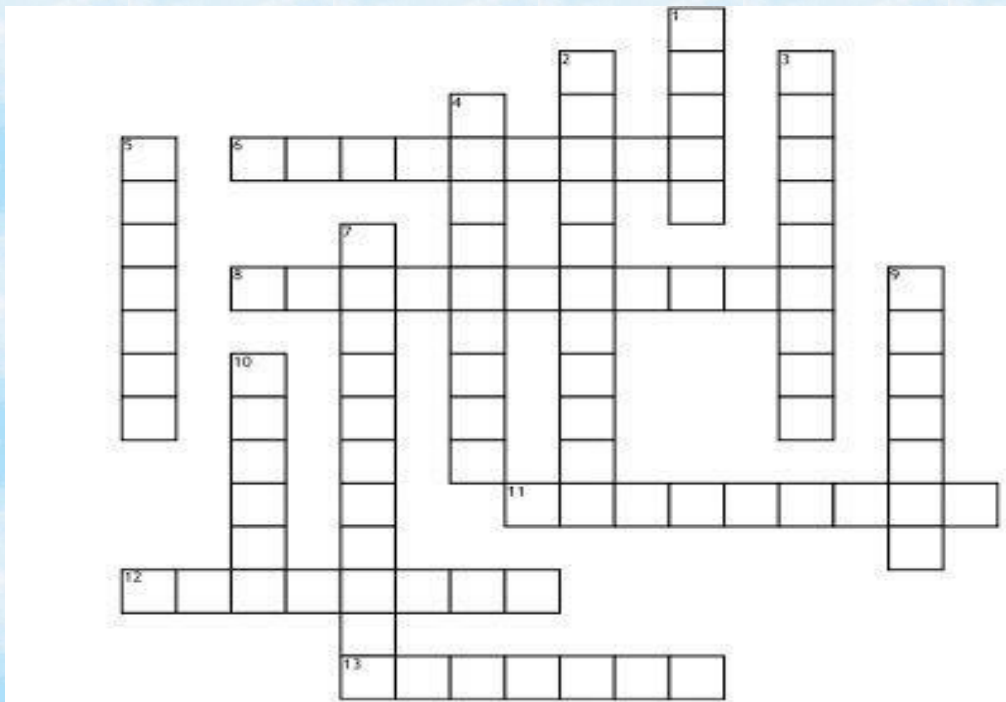
Digital health innovations offer significant potential, yet the digital divide poses a substantial barrier. Only 27% of individuals in low-income countries have internet access, thereby limiting the reach of telepsychiatry and online interventions. Service delivery remains inadequate. Globally, only 9% of individuals with depression receive care that meets minimal adequacy standards. Long-term institutionalization persists, with 16% of psychiatric patients

hospitalized for over five years. Integrated social support systems, including housing, employment assistance, and legal aid, are largely absent, particularly in resource-constrained settings.

The report concludes with a strong call to action: mental health continues to be underfunded, underserved, and undervalued. Achieving Sustainable Development Goal 3.4, which targets improved mental health and reduced premature mortality, will require coordinated, multisectoral investment, policy reform, and a shift toward rights-based, community-centred care models.

Source: <https://iris.who.int/bitstream/handle/10665/382343/9789240113817-eng.pdf?sequence=1>

QUIZ TIME



ACROSS

- 6. A period of slow and steady growth
- 8. A period of rapid growth
- 11. A way to resolve conflict
- 12. The time before birth
- 13. understanding how another person feels

Down

- 1. Feelings
- 2. Enter as a child, leave as an adult
- 3. To give your time
- 4. Period of greatest strength and stamina
- 5. The second stage of growth
- 7. To interact
- 9. Physical changes during adolescence
- 10. more responsible



HOSPITAL BUZZ

1. Government to tighten oversight of claims portal to check inflated hospital bills

India's government plans to move the National Health Claims Exchange (NHCE) from the health ministry to the finance ministry, placing it under IRDAI's regulation. The government plans to move oversight of the National Health Claims Exchange (NHCE), a digital platform for processing health insurance claims, to the finance ministry from the health ministry to curb excessive charging by hospitals from insured patients, leading to a rise in annual health insurance premiums, government sources said.

Source: <https://www.financialexpress.com/business/healthcare/government-to-tighten-oversight-of-claims-portal-to-check-inflated-hospital-bills/3910177/>

2. In Gaza, mounting evidence of famine and widespread starvation

"The worst-case scenario of famine is currently playing out in Gaza," UN-backed food security experts said on Tuesday, in a call to action amid unrelenting conflict, mass displacement and the near-total collapse of essential services in the war-battered enclave. There is mounting evidence that "widespread starvation, malnutrition and disease" are driving a rise in hunger-related deaths, which is the third famine indicator. "It's clearly a disaster unfolding in front of our eyes, in front of our television screens," said Ross Smith, UN World Food Programme (WFP) director of emergencies. "This is not a warning; this is a call to action. This is unlike anything we have seen in this century," he told journalists in Geneva.

Source: <https://news.un.org/en/story/2025/07/1165517>

3. China's 2026 humanoid robot pregnancy with artificial womb: A revolutionary leap in reproductive technology

What if robots could give birth? That future is closer than you think. In a bold announcement at the 2025 World Robot Conference in Beijing, Dr. Zhang Qifeng, founder of Kaiwa Technology, unveiled plans for a humanoid robot pregnancy system powered by an artificial womb. Set to debut a working prototype in 2026, this breakthrough could transform infertility treatment, reproductive medicine.

Source: http://timesofindia.indiatimes.com/articleshow/123357813.cms?utm_source=contentofinterest&utm_medium=text&utm_campaign=cppst

4. 5100 more hospitals to be empanelled under Ayushman Bharat in Delhi

As per the list provided by the National Health Authority (NHA)—the nodal agency responsible for implementing the scheme across the country—151 hospitals in Delhi are currently empanelled under Ayushman Bharat. The Delhi government is set to empanel 100 additional hospitals in next 10 days under the Ayushman Bharat Pradhan Mantri Jan Arogya Yojana (AB-PMJAY), expanding the healthcare facilities for beneficiaries across the city.

Source: <https://www.hindustantimes.com/cities/delhi-news/100-more-hospitals-to-be-empaneled-under-ayushman-bharat-in-delhi-101756403667748.html>

5. Delhi High Court asks private hospital to treat critically ill child in EWS category

Advocate Ashok Agarwal said in the EWS category, the criteria deserve to be increased as most private hospitals did not properly extend medical facility to the category though under a binding obligation. The Delhi High Court on Friday (August 29, 2025) directed a private hospital to provide medical treatment under EWS category to a 12-year-old boy in dire need of a ventilator bed after he fell from a building. The High Court noted the boy's father was a daily wage earner and faced enormous challenges in finding a ventilator bed at any government hospital in the capital following which the minor was taken to the private hospital.

Source: <https://www.thehindu.com/news/cities/Delhi/delhi-high-court-asks-private-hospital-to-treat-critically-ill-child-in-ews-category/article69991972.ece>

6. Apollo Hospitals to sell maternity and infant care unit

Apollo Hospitals Enterprises is planning to sell its maternity and infant care division, Apollo Cradle and Children's Hospital Ltd (ACCHL), people familiar with the development told Economic Times. Per the report, Apollo has hired Allegro Capital to find a buyer for the asset, which is likely to be valued at Rs 1,000- Rs 1,200 crore. ACCHL is a subsidiary of Apollo Specialty Hospitals and runs 13 maternity and child care centres across major cities, including Delhi, Bengaluru, Chennai, Hyderabad, Amritsar, Gurugram, Noida, and Ghaziabad, with a combined bed capacity of 363.

Source: <https://www.financialexpress.com/business/industry-apollo-hospitals-to-sell-maternity-and-infant-care-unit-report-3865306/>

7. Pune couple dies after liver transplant surgery, Sahyadri Hospital says all medical protocols followed

The liver transplant was carried out at the Deccan branch of Sahyadri Hospital on August 15. Balraj Wadekar, a resident of Hadapsar in Pune, is in a state of shock as double tragedy struck his family in a matter of just four days. On August 17, he lost his brother-in-law Babu Komkar (49) after a liver transplant operation. Even before the family could recover from the shock, Wadekar's sister and Babu's wife Kamini breathed her last at the same hospital on August 21. Wadekar and his family want the hospital to clarify what exactly went wrong in case of the two deaths.

Source: <https://indianexpress.com/article/cities/pune/pune-couple-dies-after-liver-transplant-surgery-sahyadri-hospital-says-all-medical-protocols-followed-10207476/>



HEALTH BUZZ

1. OECD issues 2025 update of health statistics

The available datasets cover: Health expenditure and financing, Health status, Risk factors for health, Healthcare human resources, Healthcare provider resources, Healthcare utilization, Datasets are also available for healthcare quality and outcomes, the pharmaceutical market, long-term care; healthcare coverage; and subnational health indicators. New indicators include sickness absences of full-time dependent employees and nurses by age group and by sex. OECD Health Statistics 2025, last updated on 8 July 2025, is available on OECD Data Explorer. The new edition came out in advance of the 2025 session of the UN High-level Political Forum on Sustainable Development (HLPF), convening in New York, US, from 14-23 July. SDG 3 (good health and well-being) is among the five Goals undergoing in-depth review at HLPF 2025. The other four SDGs under review are SDG 5 (gender equality), SDG 8 (decent work and economic growth), SDG 14 (life below water), and SDG 17 (partnerships for the Goals).

Source:<https://sdg.iisd.org/news/oecd-issues-2025-update-of-health-statistics/>

2. WHO urges action on hepatitis, announcing hepatitis D as carcinogenic

As we mark World Hepatitis Day, WHO calls on governments and partners to urgently accelerate efforts to eliminate viral hepatitis as a public health threat and reduce liver cancer deaths. "Every 30 seconds, someone dies from a hepatitis-related severe liver disease or liver cancer. Yet we have the tools to stop hepatitis," said Dr Tedros Adhanom Ghebreyesus, WHO Director-General. Viral hepatitis – types A, B, C, D, and E – are major causes of acute liver infection. Among these only hepatitis B, C, and D can lead to chronic infections that significantly increase the risk of cirrhosis, liver failure, or liver cancer. Yet most people with hepatitis don't know they're infected. Types B, C, and D affect over 300 million people globally and cause more than 1.3 million deaths each year, mainly from liver cirrhosis and cancer.

Source:<https://www.who.int/news/item/28-07-2025-who-urges-action-on-hepatitis-announcing-hepatitis-d-as-carcinogenic>

3. Johns Hopkins scientists grow a mini human brain that lights up and connects like the real thing

Scientists at Johns Hopkins have grown a first-of-its-kind organoid mimicking an entire human brain, complete with rudimentary blood vessels and neural activity. This new "multi-region brain organoid" connects different brain parts, producing electrical signals and simulating early brain development. By watching these mini-brains evolve, researchers hope to uncover how conditions like autism or schizophrenia arise, and even test treatments in ways never before possible with animal models.

Source:<https://www.sciencedaily.com/releases/2025/08/250803233113.htm>

4.Nipah Virus Outbreak in Kerala

In July and August 2025, Kerala faced an outbreak of the Nipah virus, a rare but dangerous disease that spreads from animals (especially fruit bats) to humans. The virus can cause serious brain inflammation and is often deadly. During this period, there were four confirmed cases, resulting in two deaths, including that of an 18-year-old girl from Malappuram district. Around 425 people who had contact with the infected individuals were closely monitored by health authorities to prevent further spread. To contain the outbreak, measures such as closing schools, quarantining affected areas, and increasing health surveillance were implemented. The outbreak occurred mainly in the districts of Malappuram, Palakkad, and Kozhikode. The World Health Organization (WHO) and local health officials actively monitored the situation, as human-to-human transmission is possible but limited so far. This close monitoring remains crucial to preventing a larger outbreak.

Source:<https://www.who.int/emergencies/disease-outbreak-news/item/2025-DON577>

5. Kenya achieves elimination of human African trypanosomiasis or sleeping sickness as a public health problem

The World Health Organization (WHO) has validated Kenya as having eliminated human African trypanosomiasis (HAT) or sleeping sickness as a public health problem, making it the tenth country to reach this important milestone. HAT is the second neglected tropical disease (NTD) to be eliminated in Kenya: the country was certified free of Guinea worm disease in 2018. HAT is a vector-borne disease caused by the blood parasite *Trypanosoma brucei*. It is transmitted to humans through the bites of tsetse flies that have acquired the parasites from infected humans or animals. Rural populations dependent on agriculture, fishing, animal husbandry or hunting are most at risk of exposure.

Source:<https://www.who.int/news/item/08-08-2025-kenya-achieves-elimination-of-human-african-trypanosomiasis-or-sleeping-sickness>

6. Pfizer and BioNTech's COMIRNATY® receives U.S. FDA approval

Pfizer Inc. (NYSE: PFE, "Pfizer") and BioNTech SE (Nasdaq: BNTX, "BioNTech") today announced the U.S. Food and Drug Administration (FDA) has approved the supplemental Biologics License Application (sBLA) for the companies' LP.8.1-adapted monovalent COVID-19 vaccine (COMIRNATY® LP.8.1; COVID-19 Vaccine, mRNA) for use in adults ages 65 years and older, as well as in individuals ages 5 through 64 years with at least one underlying condition that puts them at high risk for severe outcomes from COVID-19. The FDA approval is based on the cumulative body of evidence supporting the safety and efficacy of the Pfizer-BioNTech COVID-19 vaccine, including clinical trial data supporting the approval for children 5 through 11 years of age. The application also included data from pre-clinical models showing that the LP.8.1-adapted monovalent COVID-19 vaccine generates improved immune responses against multiple circulating SARS-CoV-2 sub lineages, including XFG, NB.1.8.1, and other contemporary sub lineages, compared to the companies' JN.1- and KP.2-adapted monovalent COVID-19 vaccines.

Source:<https://www.pfizer.com/news/press-release/press-release-detail/pfizer-and-biontechs-comirnatyr-receives-us-fda-approval#:~:text=The%202025%2D2026%20COVID%2D19%20vaccine%20formulation%20targets%20the,access%20of%20this%20season's%20vaccine%20in%20pharmacies%2C>



HEALTH IT BUZZ

1. WHO hosts UN summit on AI in healthcare

Global leaders discussed the most pressing questions around AI in healthcare and traditional medicine at a UN summit. The session included keynotes from the World Health Organization (WHO), the International Telecommunication Union (ITU), and the World Intellectual Property Organization (WIPO), focusing on the integration of AI in healthcare systems and its implications for traditional medicine practices.

Source: <https://www.who.int/news/item/17-07-2025-global-leaders-discuss-most-pressing-questions-around-ai-in-health-care-and-traditional-medicine-at-un-summit>

2. FDA panel to evaluate AI mental health devices

The U.S. Food and Drug Administration (FDA) has scheduled a meeting of its Digital Health Advisory Committee (DHAC) for November 6, 2025, to evaluate AI-enabled digital mental health devices. These technologies, such as chatbots and virtual therapists, have rapidly expanded and offer potential solutions to the growing mental health service gap in the U.S. The committee will assess both the benefits—like scalability and timely intervention—and the inherent risks of these tools.

Source: <https://www.reuters.com/business/healthcare-pharmaceuticals/fda-panel-weigh-ai-mental-health-devices-2025-09-11/>

3. Elion reports 84 health IT announcements in July

In July 2025, Elion tracked 84 healthcare IT announcements across new product releases, system implementations, partnerships, and funding rounds. While AI continues to dominate the conversation, the month's biggest storylines reflected deepening investment in productivity-enhancing platforms, shifting strategies in care delivery, and the quiet but steady build-out of operational AI in areas that directly impact health system margins.

Source: <https://elion.health/resources/healthcare-tech-news-july-2025>

4. CMS proposes expanded remote patient monitoring coverage

The Centers for Medicare & Medicaid Services (CMS) proposed expanded coverage for remote patient monitoring (RPM) services. This move aims to enhance access to healthcare, particularly for patients in rural areas, by leveraging technology to monitor patients' health remotely. The proposal has sparked discussions about the potential for abuse and the need for safeguards to ensure patient privacy and data security.

Source: <https://openloophealth.com/blog/recent-digital-health-trends-insight-and-news-august-2025>

5. Trump administration announces private health tracking system

The Trump administration announced a controversial new private health tracking system in partnership with major tech companies such as Apple, Google, and Amazon. This system aims to modernize healthcare by improving access to medical records and assisting with wellness management, but it has raised significant concerns from privacy advocates due to ethical and legal implications of sharing personal health data with private firms.

Source: <https://apnews.com/article/512d62ee9d2e67fd4335e16ec5fa0592>

6. AI prepares doctors for virtual urgent care visits

AI is being used to prepare doctors ahead of virtual urgent care consultations by streamlining case information and predicting needs. This includes summarizing patient histories and symptoms before the visit, suggesting possible diagnoses and next steps, speeding up triage and clinical decision-making, and enhancing virtual care efficiency for busy providers.

Source: <https://www.crescendo.ai/news/ai-in-healthcare-news>

7. ET health conclave 2025 celebrates healthcare excellence

The ET Health Conclave 2025, held on July 27 at the Grand Hyatt in Gurugram, was a significant gathering aimed at celebrating excellence in healthcare. Sponsored by Havendaxa Pvt Ltd and co-powered by IONIC Wealth and Lexus, the event brought together professionals from healthcare, wellness, and business sectors. The conclave featured discussions on innovative technologies, mental health, natural healing therapies, and financial literacy.

Source:<https://economictimes.indiatimes.com/news/company/corporate-trends/et-health-conclave-2025-celebrates-excellence-in-healthcare-with-thought-leadership-and-a-felicitation-ceremony/articleshow/123021020.cms>

“Don’t find fault, find remedy”- Henry Ford



Updates from Kerala (in Vernacular language)

കേരളത്തിന്റെ ശിശുമരണ നിരക്ക് ചരിത്രത്തിലെ ഏറ്റവും താഴ്ന്ന നിലയിൽ, 5 ആയി കുറഞ്ഞു

സാമ്പിൾ രജിസ്ട്രേഷൻ സിസ്റ്റം (SRS) സ്റ്റാറ്റിസ്റ്റിക്കൽ റിപ്പോർട്ട് 2023 പ്രകാരം കേരളത്തിന്റെ ശിശുമരണനിരക്ക് (IMR) 1,000 ജനനങ്ങളിൽ 5 ആയി കുറഞ്ഞു. ഇത് യുഎസിലെ (5.6) നിരക്കിനെക്കാൾ താഴെയാണെന്നും രാജ്യശരാശരിയായ 25-ന്റെ അഞ്ചിരട്ടി കുറവാണെന്നും റിപ്പോർട്ടിൽ പറയുന്നു.

സംസ്ഥാനത്തെ **നവജാത ശിശുമരണനിരക്ക്** ദേശീയ ശരാശരിയായ 18-നോടു താരതമ്യപ്പെടുത്തുമ്പോൾ 4-ൽ താഴെയായി കുറഞ്ഞിട്ടുണ്ട്. വികസിത രാജ്യങ്ങൾക്ക് സമാനമായ നേട്ടമാണിതെന്ന് രജിസ്ട്രാർ ജനറൽ ഓഫ് ഇന്ത്യ പ്രസിദ്ധീകരിച്ച റിപ്പോർട്ട് ചൂണ്ടിക്കാട്ടി.

ഇന്ത്യയുടെ ശിശുമരണനിരക്ക് 2013-ലെ 40-ൽ നിന്ന് 25 ആയി കുറഞ്ഞതായി റിപ്പോർട്ട് പറയുന്നു. 1,000 ജനനങ്ങളിൽ ഒരു വയസ്സിനു താഴെയുള്ള കുട്ടികളുടെ മരണസംഖ്യയാണ് ശിശുമരണനിരക്ക്.

2021-ൽ 6 ആയിരുന്ന കേരളത്തിന്റെ IMR ഇപ്പോൾ 5 ആയി കുറഞ്ഞതായി **ആരോഗ്യ മന്ത്രി വീണാ ജോർജ്ജ്** പറഞ്ഞു. ആരോഗ്യപ്രവർത്തകരുടെയും മറ്റ് ഉദ്യോഗസ്ഥരുടെയും സേവനത്തിന് അവർ നന്ദി രേഖപ്പെടുത്തി. “മാതൃ-ശിശു പരിപാലനത്തിന് സർക്കാർ വലിയ പ്രാധാന്യം നൽകുന്നു. പ്രസവം നടക്കുന്ന എല്ലാ ആശുപത്രികളിലും നിലവാരം മെച്ചപ്പെടുത്താനുള്ള നടപടികൾ സ്വീകരിച്ചിട്ടുണ്ട്. സംസ്ഥാനത്തെ 16 ആശുപത്രികൾക്ക് ദേശീയ ഗുണനിലവാര സർട്ടിഫിക്കേഷൻ ലഭിച്ചു. ആറു ആശുപത്രികൾക്ക് ദേശീയ മൂസ്സാൻ അംഗീകാരം ലഭിച്ചു. രാജ്യത്ത് ആദ്യമായി മാതൃ-ശിശു സൗഹൃദ ആശുപത്രി പദ്ധതി കേരളം നടപ്പിലാക്കി,” അവർ പറഞ്ഞു.

സംസ്ഥാന കൗമാരാരോഗ്യ നോഡൽ ഓഫീസർ **ഡോ. അമർ ഫെറ്റിൽ** അഭിപ്രായപ്പെട്ടു: “സ്ത്രീ വിദ്യാഭ്യാസമാണ് പ്രധാന ഘടകം. പ്രതിരോധ കുത്തിവയ്പ്, മൂലയൂട്ടൽ, ഗർഭസ്ഥ ശിശു സംരക്ഷണം, ഗർഭകാല പരിചരണം തുടങ്ങിയവ ഇതിൽ ഉൾപ്പെടുന്നു. ആശാ പ്രവർത്തകരും ഫീൽഡ് സ്റ്റാഫും സ്ത്രീ സാക്ഷരത ഉയർത്തുന്നതിൽ നിർണായക പങ്കുവഹിച്ചു. അതിന് ശേഷം ശിശു സംരക്ഷണമാണ്.”

ശിശു സംരക്ഷണം മൂന്നു ഘട്ടങ്ങളായി തിരിച്ചിരിക്കുന്നതായി അദ്ദേഹം വിശദീകരിച്ചു: ജനനത്തിന് ശേഷമുള്ള ആദ്യ 28 ദിവസം (ക്രിട്ടിക്കൽ കെയർ), ഒരു വയസ്സ് വരെ, പിന്നെ അഞ്ചു വയസ്സ് വരെ. ആദ്യ 28 ദിവസങ്ങളിൽ നടത്തിയ ഇടപെടലുകളാണ് പ്രധാന നേട്ടം. ഹൃദയരോഗങ്ങൾ പോലുള്ള

ഗുരുതര പ്രശ്നങ്ങൾ സമയോചിതമായ ശസ്ത്രക്രിയകളിലൂടെ പരിഹരിക്കാൻ കഴിഞ്ഞുവെന്നും അദ്ദേഹം പറഞ്ഞു.

എല്ലാ പ്രസവാശുപത്രികളിലും സമഗ്ര നവജാത ശിശു പരിശോധനാ പദ്ധതി നടപ്പാക്കി. 2017 ഓഗസ്റ്റിൽ ആരംഭിച്ച **ഹൃദയം പദ്ധതി** വിജയകരമായി തുടരുന്നു. ഇതുവരെ 8,450 കുട്ടികൾക്ക് സൗജന്യ ഹൃദയ ശസ്ത്രക്രിയകൾ നടത്തി. കുട്ടികളുടെ ആദ്യത്തെ 1,000 ദിവസങ്ങളിൽ ശാരീരികവും മാനസികവുമായ വളർച്ച ഉറപ്പാക്കാൻ പ്രത്യേക ശ്രദ്ധ നൽകുന്നതായും മന്ത്രി പറഞ്ഞു.

മാതൃത്വാനം പദ്ധതി, പ്രസവത്തിന് ശേഷം അമ്മയ്ക്കും നവജാത ശിശുക്കൾക്കും സൗജന്യ യാത്രാ സൗകര്യം നൽകുന്ന പദ്ധതി, എല്ലാ സർക്കാർ ആശുപത്രികളിലും നടപ്പാക്കി. അപൂർവ്വ ജനിതക രോഗങ്ങൾക്ക് സൗജന്യ ചികിത്സയും മരണനിരക്ക് കുറയ്ക്കാൻ സഹായിച്ചു. നഗര-ഗ്രാമ മേഖലകളിലെ വ്യത്യാസം ഇല്ലാതാക്കി മരണനിരക്ക് ഏകീകൃതമായി കുറയ്ക്കാനുള്ള നടപടികളും നടപ്പിലാക്കി. ആദിവാസി, തീരദേശ മേഖലകളിലും നവജാത ശിശു തീവ്രപരിചരണ വിഭാഗങ്ങൾ സ്ഥാപിച്ചിട്ടുണ്ടെന്നും വീണാ ജോർജ്ജ് കുട്ടിച്ചേർത്തു.

Source:<https://timesofindia.indiatimes.com/city/thiruvananthapuram/keralas-infant-mortality-rate-hits-historic-low-of-5/articleshow/123738091.cms>

SYNAPSE TEAM MEMBERS

1. Supriya
2. Riddhi Pandey
3. Ruchi Verma
4. Riya Pathak
5. Rabia Tabassum
6. Sudeepta Bhushan
7. Bhavna
8. Harshita Kapil
9. Kokil Aggarwal
10. Lopita Swain
11. Isha Sharma
12. Vaishnavi Rawat
13. Suman Dhankar
14. Tarashi Singh

Solution

ANSWER: -

Across	Down
6. Infancy	1.Emotions
8.. Adolescence	2.Graduate
11.Meditation	3.Volunteer
12.Prenatal	4. Adulthood
13Empathy	5.Childhood
	7.Socilize
	9.Puberty
	10.Mature