IIHMR DELHI

INTERNATIONAL INSTITUTE OF HEALTH MANAGEMENT RESEARCH DELHI

SYNAPSE

SEPTEMBER-OCTOBER 2025

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LIFE AT CAMPUS

Teacher's Day

Teacher's Day, which is celebrated to honour teachers' contribution towards the education and society building, was held on 5th September 2025, in the Institute. It was a warm celebration of learning, gratitude, and imparting our respect to the ones who teach us. The celebration began with students expressing their appreciation through songs, heartfelt speeches, and handwritten notes. The venue was sparkling with colourful posters and drawings honouring the teachers' dedication. Students presented flowers and cards as a token of thanks and appreciation, while teachers shared memories of moments that sparked curiosity and confidence in their classrooms. A lively talent show and a brief video montage highlighted the lasting impact of mentors on young minds. The seniors organized refreshments, turning the corridors of the Institution into a festive space for families to connect. The Director underscored that teachers light the path of discovery and that daily acts of gratitude keep the learning spirit alive. The celebration closed with a group photo and a renewed commitment to learn with care, respect, and curiosity.

Sports Day and Health Run

One of the most awaited events for the students, faculty and staff members, the Sports Day was kicked off on 6th September 2025 and went on for 10 days. Indoor events like chess, carrom and table tennis, as well as outdoor events like cricket, badminton, volleyball, tug of war and kho- kho, were organized. The much-loved cricket match between faculty and students added another level of excitement in the Sports Day. The sports day was culminated with a Health Run, the track of which was spread across the vicinity of Dwarka creating an awareness of physical fitness in overall health among the participants and onlookers.

Sat Paul Mittal Memorial Lecture

A group of 30 students from the first year, along with Dr Sandipta Chakraborty and Mr Tarun Nagpal, attended this memorial lecture which was organized on 10th September 2025 at Sri Ramakrishnan Hall, Institute of Economic Growth, Delhi University. The lecture was on "Public Health in a Changing World: Improvement in Child Survival through a Risk-Stratified Approach". Students were benefitted immensely with gaining knowledge about etiological factors on increasing child mortality in various areas. It was a knowledgeable and a new experience for our students involved.

Fresher's Day for Batch 2025-2027

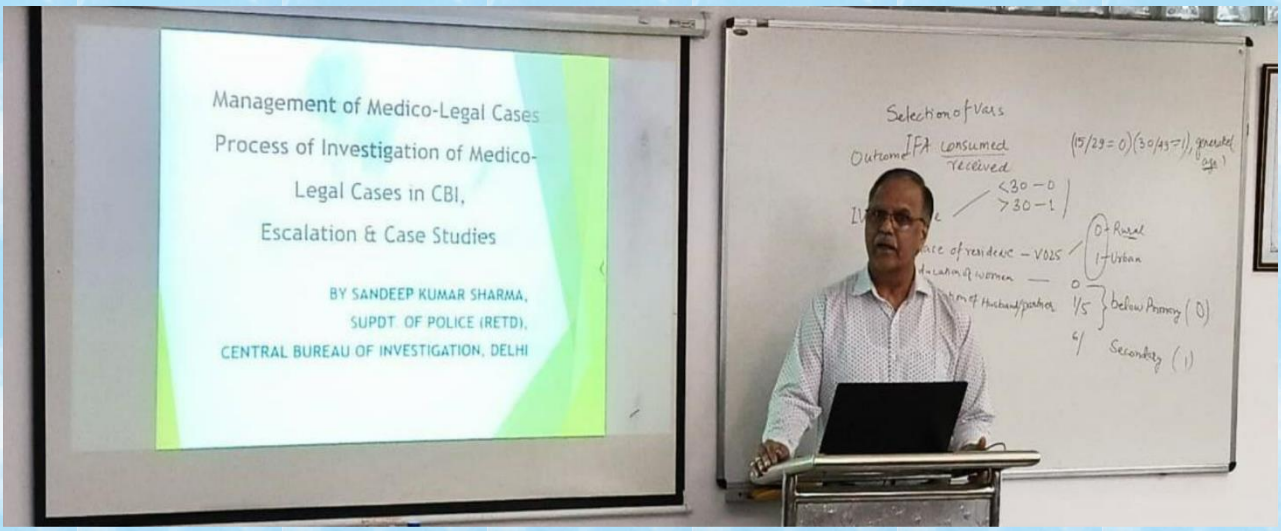
Freshers' Day for PGDM (Post Graduate Diploma in Management) was held on 20th September 2025, and it marked a pivotal transition into their MBA journey. The Freshers Day not only welcomed new students but also provided an opportunity to them for immersing in the vibrant culture of their new institution and forging bonds with their seniors beyond the confines of the classroom. From a formal orientation to a fun filled evening organized by the seniors, this event showcased the diverse cultural and extracurricular talents of our new batch. This was an evening which surely was unforgettable!

Dandiya and Garba Night

The Dandiya Night, a vibrant celebration of joy and togetherness, was organized in the Institute on 26th September 2025. The celebration began with seeking blessings from Goddess Durga, praying for peace and prosperity for everyone. Students arrived dressed in colourful ethnic attire, adding to the festive atmosphere, and tons of pictures were clicked in the Dandiya themed Photo Booth, which was a hit, without a doubt! The beats of Gujarati music filled the air as everyone played garba and danced with great enthusiasm. The event ended with smiling faces and tired feet, marking a night full of energy and cherished memories.

Expert Lecture on Medico-Legal Cases

As a part of the Academic Enhancement Programme, the Institute had organized an expert lecture on 1st October 2025. The lecture was on Management of Medico- Legal Cases and delivered by Shri Sandeep Kumar Sharma, SP (retd.) CBI. His vast experience with working in the CBI helped the students to gain an insight into the process of investigation of medico-legal cases in CBI. He also elaborated on the procedure adopted to escalate such cases and the uniqueness of each case. It was an extremely knowledgeable and experiential sharing session that immensely benefited the students and faculty members.



Community Engagement and Research Ethics Seminar

IIHMR Delhi, in collaboration with the ICMR Bioethics Unit, organized a three-day workshop on "Community Engagement and Research Ethics" from 14th – 16th October 2025. The workshop was led by Dr. Roli Mathur, Head, ICMR Bioethics Unit, and Dr. Sutapa B. Neogi, Director, IIHMR Delhi and was coordinated by Dr. Ratika Samtani. The workshop was attended by distinguished faculty and researchers from all over the country. The participants were engaged in discussion and brainstorming sessions focusing on community engagement, informed consent, data privacy, and related issues. The team members from ICMR Bioethics Unit provided needful insights and facilitated the brainstorming sessions.

Ek Bharat Shreshth Bharat

The initiative 'Ek Bharat Shreshth Bhara' was announced by Hon'ble Prime Minister on 140th birth anniversary of Sardar Vallabhbhai Patel with the aim of fostering the spirit and sense of common identity and national integration. IIHMR Delhi conducted an activity under this initiative on 15th October 2025 with the first-year students and faculty members celebrated the spirit of our diverse India. As part of this activity, the first-year students showcased the vibrant and rich culture, heritage and tradition of Uttar Pradesh. The session was moderated by Dr. Sumesh Kumar, Dean, Academics, IIHMR Delhi.

Innovation and Intrapreneurship Basecamp

In today's environment, educational institutions are focusing on the importance of fostering innovation and spirit of driving change among the students. IIHMR Delhi's Institute Innovation Cell in collaboration with IIHMR Foundation had organized an Innovation and intrapreneurship Basecamp from 27th – 29th October 2025. The three-day Basecamp provided an idea about innovation, intrapreneurship, and how the Institute is supporting the innovative ideas of the students. The students were also mentored on their idea and given insights on transforming those ideas into a successful and sustainable enterprise. The experience culminated into a session where students presented their innovation plan.

ACADEMIA

Hospital Sanitation and the Hidden Epidemic of Healthcare-Associated Infections

Hospitals are meant to be places of healing and recovery, yet, ironically, they can sometimes become sources of disease transmission. Poor sanitation and hygiene practices within healthcare facilities remain a silent but persistent challenge, giving rise to hospital-borne or healthcare-associated infections (HAIs). In an era where medical science is advancing rapidly, the continued prevalence of preventable infections due to sanitation lapses is a matter of grave concern. Cleanliness in hospitals is not merely an aesthetic requirement; it is a fundamental element of patient safety and quality healthcare (WHO, 2023).

Hospital sanitation encompasses a wide range of practices—waste management, surface disinfection, sterilization of instruments, water quality maintenance, and proper ventilation. Each of these components plays a critical role in infection prevention. When neglected, even momentarily, they can lead to contamination and the spread of pathogens within hospital wards. The World Health Organization (WHO, 2023) defines healthcare-associated infections as those acquired during the process of care that were not present or incubating at the time of admission. Globally, HAIs affect hundreds of millions of patients each year, resulting in prolonged hospital stays, long-term disability, and substantial financial burden on both families and healthcare systems.

In the Indian context, the problem is particularly acute. The Ministry of Health and Family Welfare (2022) estimates that one in every ten hospital patients in India is at risk of contracting a healthcare-associated infection. Overcrowding, inadequate staff-to-patient ratios, and lapses in infection control protocols amplify the challenge. Many hospitals, especially in the public sector, struggle with outdated infrastructure, improper waste segregation, and insufficient cleaning staff. Biomedical waste, when not handled according to national guidelines, becomes a potent source of infection for both patients and healthcare workers. Furthermore, irregular water supply, unclean toilets, and contaminated surfaces contribute to the persistence of microbial colonies in the hospital environment.

Sanitation is not solely the responsibility of housekeeping staff. It is a collective institutional function involving hospital administrators, infection control committees, nurses, and physicians. The absence of clearly defined sanitation protocols or the failure to enforce them leads to inconsistent hygiene standards. For instance, non-compliance with hand hygiene, improper sterilization of surgical tools, or unclean intensive care units (ICUs) can rapidly spread infections to multiple patients. The WHO recommends a multi-modal strategy, combining staff training, continuous monitoring, and environmental cleaning audits to ensure accountability (WHO, 2023).

Several initiatives have been introduced in India to address sanitation in healthcare facilities. The Kayakalp Programme (Ministry of Health, 2022) under the Swachh Bharat Abhiyan incentivizes hospitals that maintain high standards of hygiene and infection control. Similarly, the National Guidelines for Infection Prevention and Control in Healthcare Facilities (NCDC, 2023) provide detailed protocols for hand hygiene, waste management, and sterilization. Despite these efforts, implementation gaps remain due to lack of continuous supervision, insufficient training, and financial constraints in smaller hospitals. A sustained commitment to hygiene culture—rather than short-term inspections—is essential for meaningful change.

The economic implications of poor sanitation are substantial. HAIs increase hospital stays, consume additional antibiotics, and strain limited healthcare budgets. A study by the Indian Council of Medical Research (ICMR, 2022) revealed that hospital-acquired infections can increase the cost of care by up to 40 percent per patient. Moreover, they damage public trust in healthcare institutions and erode the morale of healthcare workers. From a managerial perspective, maintaining sanitation is both a quality indicator and a reputational safeguard.

Hospital administrators, therefore, play a pivotal role. Regular hygiene audits, appointment of infection control officers, and adequate staffing for cleaning services should be prioritized. Technology can aid this process—digital checklists, automated cleaning alerts, and surveillance systems can track infection patterns and sanitation compliance in real time. Training and motivation of frontline staff remain equally important. Every member of the healthcare team, from the doctor to the janitor, must recognize their role in maintaining a safe and clean healing environment. Patients and attendants too must be sensitized to basic hygiene norms, such as limiting unnecessary movement in wards and adhering to visitor protocols. Public awareness campaigns within hospital premises can reinforce this collective responsibility. The culture of cleanliness must be institutionalized, not episodic.

Ultimately, sanitation in hospitals is not just about cleanliness—it is about preventing suffering. A well-maintained hospital environment can drastically reduce infection rates, antibiotic usage, and patient morbidity. The fight against hospital-borne infections requires a blend of science, management, and ethics. Clean hospitals save lives, protect staff, and enhance the credibility of healthcare systems. As Florence Nightingale once said, “The very first requirement in a hospital is that it should do the sick no harm.” Ensuring proper sanitation is the most fundamental way to uphold that promise.

References:

1. World Health Organization. (2023). Infection prevention and control: Clean care for all—It’s in your hands. Geneva: WHO.
2. National Centre for Disease Control. (2023). National guidelines for infection prevention and control in healthcare facilities (Updated edition). New Delhi: Ministry of Health and Family Welfare, Government of India.
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4. Watts, N., Amann, M., Arnell, N., et al. (2023). The Lancet Countdown on health and climate change: Policy pathways to healthier futures. The Lancet, 402(10415), 1833–1894.
5. Indian Council of Medical Research. (2022). Economic burden of healthcare-associated infections in Indian hospitals. New Delhi: ICMR.

RESEARCH INSIGHT

Global Cancer Burden: Progress, Projection and Challenges

Estimating cancer burden and examining its trends, risk factors, and future projections plays an important facilitating role in preparing the countries to develop effective policy and planning to deal with the challenges which may arise due to cancer burden in coming years. The recent data estimates that there were 18.5 million new cancer cases and 10.4 million cancer deaths worldwide, contributing ~271 million disability-adjusted life years. Breast cancer was the most diagnosed cancer in 2023, followed by tracheal, bronchus, and lung, colorectal, prostate, and stomach cancers. Cancer of the trachea, bronchus, and lung was the leading cause of cancer death, followed by colorectal, stomach, breast, and oesophageal cancers. Around 58% of new cancer cases and 66% of cancer deaths occurred in low-income to upper-middle-income countries. Approximately 42% of cancer deaths in 2023 were attributable to known modifiable risk factors (e.g., tobacco, diet, metabolic risks). It is forecasted that new cases could reach 30.5 million and deaths could climb to 18.6 million globally, with the largest rises in low- and middle-income countries by 2050.

The doubling (and more) of cancer cases, along with a large predicted increase by 2050, puts enormous pressure on global health systems — especially in resource-limited settings. The fact that a substantial portion of cancer deaths are due to modifiable risks signals clear opportunities for prevention and early intervention. The uneven burden (with more cases—and especially more deaths—occurring in low- and middle-income countries) highlights global inequities in cancer control capacity and access to care. Achieving global targets such as the Sustainable Development Goal 3.4 (reduce premature mortality from non-communicable diseases by one-third by 2030) will be challenging.

Countries — especially those at lower income levels — need to invest in the full continuum of cancer control: from primary prevention (reducing exposures to tobacco, unhealthy diet, etc.), to early detection, timely diagnosis, quality treatment and survivorship care. Strengthening cancer surveillance systems (registry data, vital records) is crucial because many countries currently lack high-quality data, which weakens planning and tracking. Multisectoral approaches are needed, and equity must be central ensuring that lower-resource settings are not left behind as the burden shifts. Given that population ageing and growth are major drivers, planning for greater demand in oncology care (infrastructure, workforce, technology) is essential.

For readers in health policy, public health, and oncology-related fields, this commentary provides important insights about future cancer burden, which is rising steeply. Since many of the risks are modifiable there is a window of opportunity to address it. But time is short and therefore action must be both scaled and equitable.

Source: https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(25)01570-3/abstract

QUIZ TIME

WORD SCRAMBLE

(Unscramble the key terms related to health systems, policies, and management.)

1. LACILOP YLHTEAH – (_____)

2. MTMNAGEEMA – (_____)

3. GNNIKATREM – (_____)

4. PHUPCIL LEHTHA – (_____)

5. HGRAPODEMY – (_____)

6. GYLPOEDEMIOI – (_____)

7. CTASOBATITSI – (_____)

8. POELMENDTIVE – (_____)

9. ASCEEARH – (_____)

10. TLEAHH EASERCIV – (_____)

11. CIFNEICNEYEF – (_____)

12. NANIFCIGE – (_____)

13. YETGATRS – (_____)

14. LVAEITUOALN – (_____)

15. DMSNIAARATTOIIN – (_____)

16. RSORUCEE ANAHGMNETE – (_____)

17. QAYILUT CAER – (_____)

18. THLAEACRE NOCNOMYCE – (_____)

19. ECAHTLHE CERUOS – (_____)

20. YILOPC IMPELMEETTNAOI – (_____)

HOSPITAL BUZZ

1. Major hospital project proposed in Pune.

The public health department has submitted a proposal to the state government for approving a 400-bed super-specialty and women's hospital in Pune (200 beds for super-specialty, 200 beds for women's hospital) on the campus of the existing Aundh District Hospital. The estimated cost is ~₹1,527 crore and ~593 new posts will be created. The new building will occupy approximately 8,140 square meters of government land, which includes space cleared after demolishing old, unsafe residential buildings on the campus. The proposal includes creating 693 new posts (596 for the Super Speciality Hospital and 97 for the Women's Hospital), with an estimated annual salary expenditure of ₹32.31 crore. The project is deemed urgent to relieve the strain on existing major public facilities like Sassoon General Hospital (SGH) and Yashwantrao Chavan Memorial (YCM) Hospital, which are currently overstretched due to Pune's rapidly growing population.

Sources: https://www.hindustantimes.com/cities/pune-news/400bed-super-speciality-and-women-s-hospital-to-come-up-in-pune-101759174859351.html**.**

2. Major hospital fire tragedy in Jaipur.

At Sawai Man Singh Hospital (SMS Hospital) in Jaipur, a fire broke out in the neurosurgery trauma ICU/ward in October 2025 reportedly. It is suspected to have been caused by a short circuit in the ICU's storage area. Reports confirmed the deaths of at least six critical patients—two women and four men—who were admitted to the Neuro ICU. Some reports initially cited a higher death toll. The patients died from burns and suffocation as thick, toxic smoke rapidly spread through the unit. The Rajasthan state government formed a high-level committee to probe the causes of the fire, examine the hospital's safety arrangements, and determine accountability. The National Human Rights Commission (NHRC) took suo motu (on its own motion) cognizance of the tragedy and issued notices to the State Chief Secretary and the Director General of Police (DGP) for a detailed report on the matter, including the status of compensation provided to victims' families.

Sources: https://www.thehindu.com/news/national/rajasthan/rajasthan-hospital-fire-patients-killed-kin-allege-staff-ignored-warnings/article70129985.ece

3. Hospital network / insurance system update – cashless claims reinstated.

The Association of Healthcare Providers India (AHPI) announced that cashless claim settlement services for policy-holders of Star Health & Allied Insurance Co Ltd would be reinstated by 10 October 2025 across AHPI's network of 15,000+ hospitals in India. The dispute arose because AHPI member hospitals complained that the insurer had not revised treatment tariffs for many years, despite rising medical inflation, and was allegedly forcing arbitrary deductions and rate cuts, making it financially unsustainable for hospitals to offer cashless services. Both parties committed to working towards resolving the long-standing issue of tariff revisions and designing industry-level agreements by a final deadline of October 31, 2025. This resolution provided immediate and major relief to thousands of Star Health policyholders who were facing the prospect of having to pay for their hospital treatments

upfront (out-of-pocket) and then seeking reimbursement later, which can cause significant financial distress, especially in an emergency. The reinstatement ensures continuity of patient services on a cashless basis.
Sources: https://m.economictimes.com/wealth/insure/big-relief-expected-cashless-claim-for-star-health-insurance-in-these-hospitals-to-be-restored-by-october-10th/articleshow/124049582.cms

4. In Sresan Pharmaceuticals' batch of the syrup Coldrif.

Children in Chhindwara district (Madhya Pradesh) died of acute kidney failure after taking it. Tests found extremely high levels of the industrial chemical Diethylene glycol (DEG) — about 48.6% vs permissible ~0.1%. At least 17 children under 5 died in that incident. The Tamil Nadu government (where Sresan Pharma is based) and other state governments (like Madhya Pradesh) immediately banned the sale of the syrup and ordered an urgent recall of Batch No. SR-13. The drug manufacturing licenses of Sresan Pharmaceuticals were cancelled, and the company was permanently shut down. The World Health Organization (WHO) issued a Medical Product Alert confirming the contamination of Coldrif (Batch SR-13) and advising authorities worldwide to check for and remove it.
Sources: https://www.indiatoday.in/india/story/cough-syrup-deaths-coldrif-tamil-nadu-report-ima-sresan-pharmaceutical-doctor-arrested-2798890-2025-10-07

5. Rise in patient demand due to pollution in Noida / NCR.

Hospitals in Noida and Ghaziabad report an increase of 30% to 40% in the number of patients visiting OPDs. Some specialist departments see up to a 50% increase in patient footfall and admissions during peak smog periods. Most new cases are linked directly to respiratory and systemic irritation from fine particulate matter and other pollutants. Persistent cough, wheezing, throat irritation, acute bronchitis, and severe exacerbations of pre-existing conditions like Asthma and Chronic Obstructive Pulmonary Disease (COPD), burning eyes, eyes allergies, nasal congestion, and skin irritation. While the impact is widespread, the most affected groups are children (due to developing lungs), the elderly (with pre-existing comorbidities), and outdoor workers.
Source: https://timesofindia.indiatimes.com/city/noida/opds-see-40-more-patients-most-with-wheezing-cough/articleshow/125172427.cms

6. Hospital expansion / new facility announced in a tribal region.

Chief minister Devendra Fadnavis on Saturday performed the bhoomipujan for a 350-bed Multispecialty Hospital with an attached Medical College campus in Sironcha, in the Gadchiroli district of Maharashtra. The project is being developed by a private venture, the Ruby Hall Clinic Group (a renowned hospital chain based in Pune). This marks a significant Public-Private effort to bring tertiary care to the region. In addition to the hospital, the campus will include a Nursing College and a CBSE school (Classes 1 to 12), ensuring holistic social infrastructure development. The propose project will eliminate the need for residents of Gadchiroli and surrounding remote areas (including parts of Telangana and Chhattisgarh) to travel hundreds of kilometers to cities like Nagpur or Hyderabad for advanced medical treatment. The hospital will implement major government schemes to ensure affordability. It will be covered under the Mahatma Phule Janarogya Yojana, providing free medical services up to ₹5 lakh to every citizen of Maharashtra. The private group confirmed they would extend their charitable model—which includes free treatment for all cancer patients below 18—to this new Sironcha facility.
Source:https://timesofindia.indiatimes.com/city/nagpur/sironcha-to-get-multispecialty-hospital-cm-fadnavis/articleshow/125193010.cms

HEALTH BUZZ

1. Swasth Nari Sashakt Parivar Abhiyaan- empowering women and families for a healthier India

The Swasth Nari Sashakt Parivar Abhiyaan (SNSPA) is a landmark initiative by the Ministry of Health and Family Welfare (MoHFW) and the Ministry of Women and Child Development (MoWCD), aimed at strengthening healthcare services for women and children across India, with a focus on improving access, quality care, and awareness. Described as a Jan Bhagidaari Abhiyaan, it encourages active participation from private hospitals and healthcare professionals to foster inclusive healthcare delivery. The campaign will be inaugurated on September 17, 2025, by Prime Minister Narendra Modi, on his 75th birthday, aligning with his vision for empowered communities.
Source: https://www.pib.gov.in/PressNoteDetails.aspx?id=155215&NoteId=155215&ModuleId=3

2. WHO issues global medical product alert on contaminated oral liquid medicines

The World Health Organization (WHO) issued Medical Product Alert No. 5/2025 on October 13, 2025, warning against the circulation of substandard and contaminated oral liquid medicines in several regions. Laboratory analyses confirmed the presence of diethylene glycol (DEG) and ethylene glycol (EG)—highly toxic substances that can cause severe kidney injury, neurological complications, and even death, particularly in children. The affected products, commonly used as pain relievers and cough syrups, were reported across multiple countries in Africa and Southeast Asia. WHO urged all national regulatory authorities and healthcare providers to immediately remove these products from circulation, strengthen post-market surveillance, and verify product authenticity before distribution. The alert reinforces the urgent global need for stricter pharmaceutical quality control and cross-border regulatory cooperation to safeguard patient safety.
Source: https://www.who.int/news/item/13-10-2025-medical-product-alert-n-5-2025--substandard-(contaminated)-oral-liquid-medicines

3. Autism is not a single condition and has no single cause, scientists conclude

New research from the University of Cambridge suggests that autism should not be understood as a homogeneous condition with a single cause. Scientists found that people diagnosed in early childhood often have a different genetic profile than those diagnosed later in life, broadening the understanding of how the condition develops.
Source: https://www.sciencedaily.com/releases/2025/08/250803233113.htm

4. Focus on emerging pathogens and health resilience in India's evolving health landscape

A recent edition of The Hindu's Health Matters Newsletter highlighted India's growing focus on health system resilience and preparedness against emerging pathogens. The report emphasizes the increasing frequency of zoonotic and climate-linked infectious diseases and the need for integrated disease surveillance, genomic monitoring, and rapid response infrastructure. Experts cited lessons from COVID-19 and recent Nipah outbreaks, underscoring the importance of sustained investment in laboratory capacity, workforce training, and data-driven health intelligence systems. The article also notes India's efforts to enhance early detection through the Integrated Health Information Platform (IHIP) and collaboration with the World Health Organization to strengthen global

epidemic preparedness. Together, these initiatives reflect a proactive shift toward resilient, adaptive, and technology-enabled public health systems.
Source:https://www.thehindu.com/sci-tech/health/health-matters-newsletter-emerging-pathogens-and-health-resilience/article70084032.ece

5. Field epidemiologists boost data analytics skills

Nineteen faculty members of India's field epidemiologists training programme (FETP) sharpened their data analysis skills at an immersive workshop in New Delhi from 18–22 August 2025, jointly organized by WHO India and the National Centre for Disease Control (NCDC), with support from the Pandemic Fund.
Source: https://www.who.int/news/item/08-08-2025-kenya-achieves-elimination-of-human-african-trypanosomiasis-or-sleeping-sickness

6. U.S. Health policy updates: CDC adopts new vaccine recommendations amid government shutdown

The review highlights a turbulent period in U.S. healthcare governance as the federal government shutdown entered its second week, stalling new regulations and agency guidance. Despite the disruption, the Centre for Disease Control and Prevention (CDC) adopted updated Advisory Committee on Immunization Practices (ACIP) recommendations for COVID-19 and chickenpox vaccines. The revisions emphasize individualized, risk-based decision-making for COVID-19 vaccination and separate administration of the chickenpox vaccine for toddlers, enhancing coverage flexibility across public and private insurance programs. Concurrently, the National Institutes of Health (NIH) and Food and Drug Administration (FDA) announced multiple public advisory and research meetings addressing topics from pediatric therapeutics to digital health. A new HHS Office of Inspector General report also revealed that Medicare could have saved $301.5 million through improved bundled payment methodologies for opioid-use-disorder treatment. Collectively, these developments underscore the ongoing balance between public health policy continuity and operational resilience during fiscal and administrative challenges.
Source: https://www.alston.com/en/insights/publications/2025/10/health-care-week-in-review-october-10-2025

HEALTH IT BUZZ

1. Optum deploys AI for real-time health claims processing

Healthtech giant Optum has introduced an advanced AI-powered real-time claims processing platform that revolutionizes how hospitals and insurers manage reimbursements. The system leverages machine learning to instantly review and verify millions of medical claims daily, identifying coding errors, policy mismatches, and potential fraud before payments are approved. Traditionally, claims processing could take several days, but this innovation enables near-instant adjudication, significantly improving financial efficiency and reducing administrative costs across the U.S. healthcare system. The platform's adaptive AI continuously learns from historical data, enhancing accuracy and compliance with evolving federal and payer regulations. Experts highlight that this technology not only accelerates payment cycles but also strengthens transparency, minimizes denials, and supports a more sustainable, data-driven approach to healthcare financing.
Source: https://www.healthcarefinancenews.com/news/optum-deploys-ai-real-time-claims-processing

2. AI stethoscope can detect three deadly heart conditions in 15 Seconds

A groundbreaking AI-powered stethoscope developed by researchers at Mayo Clinic can identify three life-threatening heart conditions - aortic stenosis, pulmonary hypertension, and reduced ejection fraction — in just 15 seconds, according to findings reported by Digital Health News. The device combines traditional auscultation with real-time AI signal processing to analyze subtle variations in heart sounds that are often undetectable by human hearing. In clinical trials, the tool demonstrated exceptional accuracy, offering a low-cost, point-of-care diagnostic solution for early cardiac disease detection. Doctors note that this innovation could transform cardiac screening, particularly in primary care and low-resource settings, by enabling faster referrals and reducing diagnostic delays. The AI stethoscope represents a major leap forward in smart medical devices and preventive digital cardiology, bridging artificial intelligence with everyday clinical practice
Source:https://www.digitalhealthnews.com/ai-stethoscope-can-spot-three-deadly-heart-conditions-in-15-secs-say-doctors

3. Ambient scribe technology faces challenges in mental health settings

As AI-driven clinical documentation tools gain traction across healthcare, experts have raised concerns about the implementation of ambient scribe technology in mental health environments. The technology—designed to automatically transcribe and summarize patient–clinician conversations—has shown promise in reducing administrative burden and improving record accuracy in general medicine. However, mental health professionals highlight significant challenges, including privacy concerns, subtle nuances in emotional expression that AI may fail to capture, and the risk of undermining therapeutic trust. According to Digital Health News, these tools often struggle with non-verbal cues, cultural context, and complex linguistic patterns unique to psychiatric consultations. While developers are working to refine algorithms for empathetic recognition and confidentiality compliance, experts caution that human oversight remains critical.
Source: https://www.digitalhealth.net/2025/09/the-challenges-of-ambient-scribe-technology-for-mental-health/

4. Psicon's digital integration drives operational excellence in mental healthcare

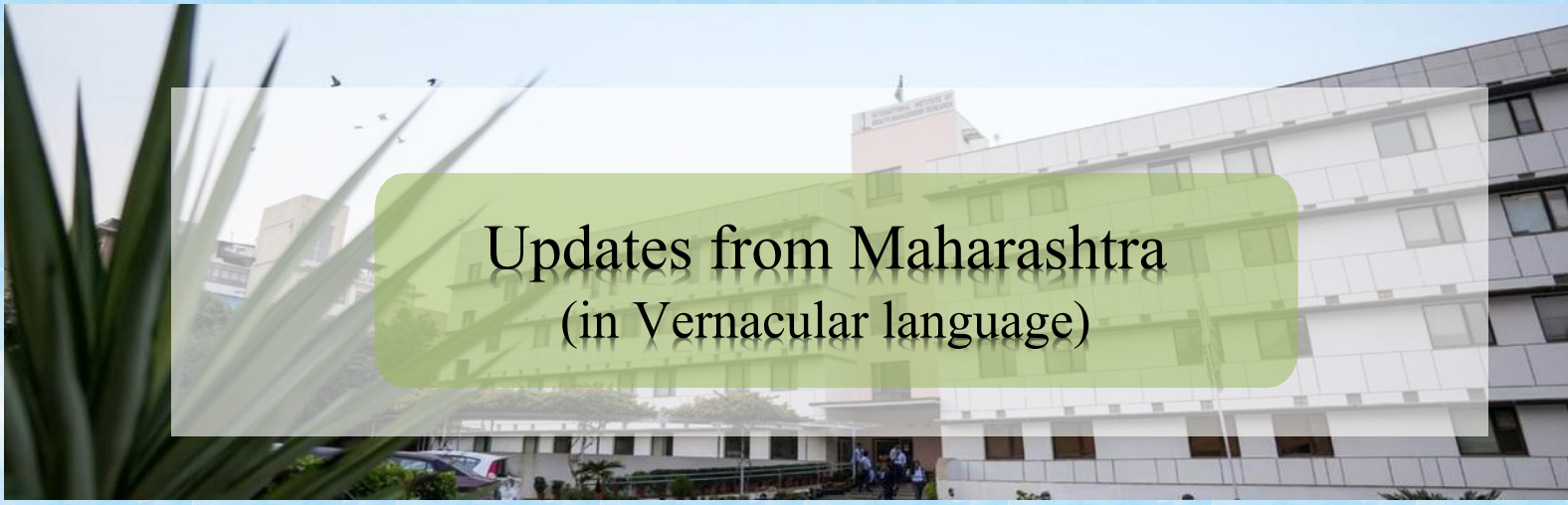
A recent industry report titled 'Operational Excellence in Healthcare: Psicon's Integration of MHS Solutions' showcases how the UK-based healthcare provider Psicon achieved significant efficiency gains through the integration of Mental Health Solutions (MHS) digital platforms. The integration unified patient assessment, care coordination, and clinical documentation within a single interoperable system, enhancing workflow automation and patient engagement. According to the report, the adoption of MHS tools led to a 40% reduction in administrative workload, faster clinician response times, and measurable improvements in care continuity across mental health services. By embedding data analytics and performance dashboards, Psicon has demonstrated how digital transformation can advance both operational excellence and patient-centered outcomes in behavioral health.
Source:https://86fb6716.delivery.rocketcdn.me/wp-content/uploads/2025/04/Operational-Excellence-in-Healthcare-Psicons-Integration-of-MHS-Solutions.pdf

5. NHS white paper highlights the central role of data in healthcare transformation

The NHS Transformation Directorate has released a new white paper titled 'Putting the Power of Data Front and Centre,' emphasizing how data intelligence and analytics are driving the next phase of healthcare transformation in the United Kingdom. The report outlines the NHS's vision to integrate real-time data flows across hospitals, primary care, and community services through advanced business intelligence (BI) systems. These tools aim to improve decision-making, optimize resource allocation, and predict healthcare demands before crises occur. The initiative also focuses on developing local data science capabilities, encouraging collaboration between clinicians, data engineers, and policymakers to translate insights into tangible health outcomes. By embedding analytics into routine operations, the NHS hopes to achieve a more proactive, predictive, and equitable healthcare system, with data transparency as a core principle of trust and efficiency.
Source:https://www.this.nhs.uk/our-services/information-management/business-intelligence/putting-the-power-of-data-front-and-centr

6. India's 'One-Rupee AI Chatbot' expands affordable cardiac guidance access

In a pioneering move to democratize healthcare access, Indian cardiologists have launched a "One-Rupee AI Chatbot" that delivers instant cardiac guidance and lifestyle advice to patients for just ₹1 per query. As reported by Digital Health News, the chatbot leverages generative AI and evidence-based medical algorithms to answer patient questions on symptoms, medication adherence, diet, and preventive heart care in multiple Indian languages. Designed to assist people in semi-urban and rural areas where cardiologists are scarce, the tool aims to bridge the digital health divide by providing credible, low-cost health support through smartphones. The initiative also integrates with teleconsultation networks, enabling direct referrals to human specialists when necessary. Experts see this as a model for scalable, AI-assisted preventive healthcare, combining affordability, accessibility, and innovation to tackle India's rising burden of cardiovascular disease.
Source: AI Heart Care Chatbot Offers Consultations for INR 1 Per Day



Updates from Maharashtra
(in Vernacular language)

महाराष्ट्रात आता कुष्ठरोगाची नोंद देणे बंधनकारक,
रोगाचा प्रसार रोखण्यासाठी सरकारचा निर्णय

पुणे : महाराष्ट्र सरकारने कुष्ठरोगाचा प्रसार रोखण्यासाठी आणि रुग्णांना वेळेवर उपचार मिळावेत यासाठी हा आजार आता "अधिसूचित रोग" (Notifiable Disease) म्हणून घोषित केला आहे. हा आदेश राज्य आरोग्य विभागाने ३० ऑक्टोबर रोजी जारी केलेल्या अधिसूचनेद्वारे जाहीर केला. या निर्देशानुसार, सर्व डॉक्टर आणि आरोग्य संस्था यांनी निदान झालेल्या प्रत्येक कुष्ठरोगाच्या प्रकरणाची माहिती दोन आठवड्यांच्या आत संबंधित जिल्हा आरोग्य कार्यालय किंवा स्थानिक महानगरपालिका आरोग्य प्राधिकरणांना देणे बंधनकारक आहे. ही अधिसूचना केंद्रीय आरोग्य मंत्रालयाने मे महिन्यात सर्व राज्यांना पाठवलेल्या पत्रानंतर आली आहे, ज्यात कुष्ठरोगाच्या निदान झालेल्या सर्व प्रकरणांचे अनिवार्य अहवाल देण्याचे निर्देश होते.

कुष्ठरोग (Leprosy) हा Mycobacterium leprae या जीवाणूमुळे होणारा संसर्गजन्य आजार आहे. हा प्रामुख्याने त्वचा, परिघीय मज्जातंतू (Peripheral Nerves) आणि डोळ्यांवर परिणाम करतो. वैद्यकीय क्षेत्रात प्रगती होऊनही समाजात या आजाराविषयी भीती, कलंक आणि गैरसमज कायम आहेत. निदान किंवा उपचारात विलंब झाल्यास गंभीर विकृती (Grade 2 Disability) होऊ शकतात, त्यामुळे लवकर निदान आणि हस्तक्षेप अत्यंत महत्त्वाचे आहेत.
महत्त्वाचे म्हणजे, कुष्ठरोग पूर्णपणे बरा होऊ शकतो — मल्टी-ड्रग थेरपी (MDT) च्या संपूर्ण कोर्सने. लवकर निदान आणि संपूर्ण उपचार ही कुष्ठरोग प्रतिबंध व नियंत्रणाच्या धोरणाची मुख्य तत्त्वे आहेत. राज्य सरकारचे उद्दिष्ट "कुष्ठमुक्त महाराष्ट्र" साध्य करणे आहे — ज्यात सलग पाच वर्षे स्थानिक बालकांमध्ये कुष्ठरोगाचे प्रकरणे नसणे, आणि त्यानंतर तीन वर्षे शून्य नवीन प्रकरणे असणे असा निकष आहे.

महाराष्ट्राने २०२७ पर्यंत "कुष्ठमुक्त महाराष्ट्र" साध्य करण्याचे लक्ष्य ठेवले आहे. या उद्दिष्टांमध्ये संसर्गाची साखळी पूर्णपणे तोडणे, रोगाचा प्रसार शून्यावर आणणे, मुलांमधील विकृती नष्ट करणे आणि रुग्णांवरील सामाजिक भेदभाव निर्मूलन करणे यांचा समावेश आहे. ही अधिसूचना शासकीय, खाजगी, स्वयंसेवी संस्था (NGOs), कॉर्पोरेट आरोग्य सेवा पुरवठादार, आणि खाजगी वैद्यकीय महाविद्यालये अशा सर्व क्षेत्रांना लागू आहे.

या उद्दिष्टांच्या पूर्ततेसाठी, सार्वजनिक आणि खासगी क्षेत्रातील सर्व डॉक्टर, तसेच पॅथॉलॉजिस्ट, मायक्रोबायॉलॉजिस्ट, आरोग्य कर्मचारी आणि फील्ड ऑफिसर यांना सर्व निदान झालेल्या प्रकरणांचा योग्य उपचार, सातत्याने फॉलोअप, आणि रुग्णांच्या जवळच्या संपर्कातील व्यक्तींना पोस्ट-एक्स्पोजर प्रोफिलॅक्सिस (PEP) देणे आवश्यक आहे.सप्टेंबर २०२३ पर्यंत महाराष्ट्रात ७,८६३ नवीन कुष्ठरोगाची प्रकरणे नोंदली गेली असून सध्या १३,०१० रुग्ण उपचार घेत आहेत. या पार्श्वभूमीवर आरोग्य विभागाने सर्व वैद्यकीय व्यावसायिकांना नवीन अधिसूचनेचे आणि अहवाल देण्याच्या नियमांचे काटेकोर पालन करण्याचे निर्देश दिले आहेत. विभागाने नागरिकांसाठी सार्वजनिक आवाहनही केले आहे — कुष्ठरोगाबद्दल घाबरू नका. कोणतीही लक्षणे दिसल्यास तात्काळ जवळच्या आरोग्य केंद्रात जाऊन तपासणी आणि उपचार घ्यावेत.

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

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ANSWER KEY: -

1. Health Policy	11. Efficiency
2. Management	12. Financing
3. Marketing	13. Strategy
4. Public Health	14. Evaluation
5. Demography	15. Administration
6. Epidemiology	16. Resource Management
7. Biostatistics	17. Quality Care
8. Development	18. Healthcare Economy
9. Research	19. Health Resource
10. Health Services	20. Policy Implementation