

# Child India

February  
2020



Monthly e-Newsletter



of Indian Academy of Pediatrics

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DR ALOK BHANDARI (DELHI)  
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DR SAMIR R SHAH (GUJARAT)  
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DR MK SANTOSH (KERALA)  
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DR JAYANT G JOSHI (MAHARASHTRA)  
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DR MAHESH A MOHITE (MAHARASHTRA)  
DR PARAMANAD G ANDANKAR (MAHARASHTRA, MUMBAI)  
DR KH RATANKUMAR (MANIPUR)  
DR ASUTOSH MAHAPATRA (ODISHA)  
DR BISHWAJIT MISHRA (ODISHA)  
DR JAI SINGH (RAJASTHAN)

DR RAJ KUMAR GUPTA (RAJASTHAN)  
DR K MUTHUKUMAR (TAMILNADU)  
DR P VELUSAMY (TAMILNADU)  
DR A SOMASUNDARAM (TAMILNADU)  
DR NARMADA S (TAMILNADU)  
DR DARURU RANGANATH (TELANGANA)  
DR S SRIKRISHNA (TELANGANA)  
DR NEELI RAMCHANDER (TELANGANA)  
DR SANJAY NIRANJAN (UTTAR PRADESH)  
DR AJAY SRIVASTAVA (UTTAR PRADESH)  
DR VIVEK SAXENA (UTTAR PRADESH)  
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DR ATANU BHADRA (WEST BENGAL)  
DR SWAPAN KUMAR RAY (WEST BENGAL)  
DR PALLAB CHATTOPADHYAY (WEST BENGAL)

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**CHIEF ORG. SECRETARY** : DR RUCHIRA GUPTA

**PRESIDENT'S PAGE** - The Technology Empowered Academy – At Your Service - Dr Bakul Parekh - <https://www.indianpediatrics.net/jan2020/jan-15-16.htm> .. where he writes about the key features of dIAP.

## Editor's Note

Dear colleagues,

Stay safe.

We are continuing to have the monthly Child India - e newsletter of IAP - which highlights the engagements of IAP President and thus informs the grassroots pediatrician what IAP is doing for the country's children.



This lockdown caused by the COVID-19 Pandemic must be considered as a warning that we humans have overindulged and need to drastically change our lifestyle. Staying at home, restraining our urge to socialise excessively, may be a mantra for better family life which in turn would improve bonding with children and improving child rearing practices.

We doctors and health care workers are at maximum risk and I am sure we pediatricians are taking an active role in working out protocols in their respective institutions to render essential services and in the process keep all stakeholders safe. This is the opportunity to develop and utilise Telemedicine facilities that exist in our country to full potential.

All conferences and CMEs have been postponed and this may herald the use of tele-conferencing in delivering CMEs at our homes and in our institutions.

Please contribute pictures with captions of the work each of you are doing.

Warm regards and wishes for all efforts to keep COVID 19 at bay.

Jai IAP,

**Dr Jeason C Unni**

**Editor-in-Chief**

## President's Message

Respected Chief Guest, Guest of honor, teachers, seniors, colleagues from SAPA countries, Egypt, AAP President, friends, Ladies and Gentlemen,

A very Happy New Year to all of you, and a warm welcome on this pleasant evening at Pedicon 2020, Indore. I am honored and delighted to be here at Indore, and humbled by the faith you all have reposed in me. In this year, I plan on doing a number of new things for our Academy. Keeping the words of Gail Sheehy in mind that “If we don’t change, we don’t grow,” and that of Nelson Mandela stating “education is the most important tool, which we can use to change the world”; I have a vision for 2020, and I hope that you all will help me in achieving it for the benefit of our parent body, the Indian Academy of Pediatrics (IAP).



Routinely, we have most of the IAP Action Plans going ahead with Training of Trainers (TOT) workshops and Continuing Medical Education (CME) activities. These will continue, with an added focus on quality and usefulness of the modules in day-to-day practice. A Posttest will ensure that the trainers have understood the essence of the workshop and are ready to disseminate the knowledge to all our colleagues.

I intend to start a new concept – Monsoon Pedicon (based on sub-specialty chapters) – wherein faculty will gather at a place and deliberate on scientific content for a couple of hours. The highlight of this will be that the delegates of this Pedicon will be at their own clinic or home, listening to the deliberations and these talks will also be archived so that they can be revisited as required. I am also working on science conclaves where 50 people will be meeting at a place in 5 groups of 10 each on a Saturday to discuss about one topic of a sub-specialty each, and on Sunday, all these 50 people will sit together, deliberate on all the topics, and come out with the guidelines. I call these as Protocons – five such Protocons will be held in the first half of the year and then we can have a national Protocon, which shall culminate in the form of national AWESOME in the month of September-October. This will show that we can also conduct a successful National-level conference without pressures on ourselves or pharmaceutical companies. Clinical Research is very much lacking in India as compared to the developed nations.

I wish to initiate some incentive-driven programs with the help of Head of the Departments (HOD) cell and ensure that the postgraduates are incentivized to take this forward. At the same time, we need to have capacity building workshops for practicing pediatricians. This will help to recognize their talents and propel our academy to reach



## President's Message

greater heights. I am also in talks with UpToDate, wherein the annual subscription price for the service will be greatly reduced for IAP members. I am certain that this will help in strengthening point-of-care rational therapy and clinical research across all fields in IAP.

The Academy being a charitable institution, I intend to have a number of social and charitable activities wherein a district branch adopts a village and looks after the health parameters of its child community. We will also like to have Palliative Care Centers (an initiative by one of my teachers and a very astute academician Dr. Armida Fernandez), school health programs, ALS and BLS courses, programs for AYA (adolescents and young adults), and YUVA CME (to help the newly graduated pediatricians to set up their practices). I am also trying to have affiliations with international universities for the recognition of IAP subspecialty courses.

Friends, in the last five years, I have travelled almost all over the country and have met many of our colleagues at the local chapters. I do not know how much they have benefitted by meeting me, but I have learned immensely from them. I found that their dedication to their work is far greater while their access to latest advancements in medicine, education, diagnostics, etc is comparatively much lower as compared to those in the big cities. The key challenges, I noticed, can be categorized into one or all of the following three buckets:

- Access to latest information;
- Ability to educate their patients on right practices related to health and hygiene; and
- Lack of quality support at point of care.

For many years, I have been thinking about digitizing education, and in the last few years the cost to access digital content has become practically zero. Now, I would like to introduce again and share highlights about dIAP – a vision that will allow us to have our very own technology-enabled Academy to 'Reach the Unreached' and address the challenges we have just outlined. dIAP is not only a window to IAP's services, but it is also IAP's institutional digital backbone. In addition to IAP's existing digital assets, dIAP brings to us several new national services. The first is a professional education service for pediatricians. This service combines courses, scientific reference material and a reservoir of content - all created and published by IAP experts. The second is video-conferencing and webinar centers across IAP offices in India, which will allow for thousands of online lectures, clinics, webinars etc. that can be accessed by all IAP members using their mobile phones and also available as a searchable online archive.

## President's Message

The third is patient education services, which can be used in a clinic. The fourth is diagnostic support, prescription guidelines, and diagnostic algorithms at the point of care. It gives me great pleasure to say that a part of the Plan has already been implemented and some of the diAP services are available immediately to our members via the IAP courses. I am also very happy to say that the first webinar center has been successfully tested in Mumbai and we have started it off with the webcasting of popular Thursday PG clinics and lectures. In the coming months, several more centers will be setup. The point of care system is also already being built and tested. As I already mentioned to our esteemed Executive Board members yesterday, we have created individual websites for all state chapters. As soon as their content is received and published, their website will be launched with complete control over content and management by the state chapter - totally free of charge.

I remember the words of Thomas Fuller – “All things are difficult before they become easy,” and those of John Wooden – “Good things take time.” I look forward to your support so that the rest of the Action Plan is implemented and made available to our members in the coming months. And lastly, a little surprise for all of you – the first version of the diAP app is ready and available on Google Play Store for Android users. Please search for ‘diapindia’, download and register. In coming months, the technical team will be updating the app and will also make this available on other leading mobile platforms.

Last, but not the least, I feel truly honored and blessed to be working with such a dynamic team which is focused on taking IAP to even greater heights than what it currently is. I would like to end this with a maxim that I follow in my life:

“Do not walk in front of me; I may not follow you.

Do not walk behind me; I may not lead you.

Do not walk away from me; I need you.”

Let us walk together for the glorious future of our mother IAP.

Jai Hind!

Jai IAP!

In the service of IAP,

**Dr. Bakul Jayant Parekh**

President

## Secretary's Message

Dear Colleagues,

Greetings from your secretary with warm wishes for a very happy, joyous and “happening” year ahead. The year 2020 has indeed been a milestone year for our Indian Academy of Pediatrics.



I am lost of words to express my sincere gratitude to each one amongst you for sharing the love and affection through the family of IAP.

It is most fortunate to be in the ‘Dream Team’ lead by Dr Bakul Jayant Parekh entrusted to take this mega organisation of 30,000 plus members forward this academy year. As such, it demands extra commitment and effort from my end to do justice to the responsibility beautifully shouldered by my predecessors in the yesteryears.

All the team members are like the factors of the complement pathway. One team member activates the next. All of us will thus complement each other in the IAP work and result in its betterment. President DrBakul Jayant Parekh is taking maximum care to have the modules spread out equitably across all the zones with special attention “to reach the unreached” branches through IAP project.

PEDICON 2020 at Indore lead by Dr V P Goswami has set a new benchmark by showcasing a wonderful unparalleled mix of academics & opportunities for socialisation blended by the most heartwarming hospitality. Our Team of Executive Board Members 2020 got into full steam in the backdrop of this lovely ambience.

Along with Jt Secretary Admin Dr Samir HasanDalwai& Treasurer DrPurna Kurkure, we at CIAP Office have set the focus straight to have the systems in place. Utmost priority has been placed for keeping the communication lines open and prompt with each member across the country. Online updation of member data will not remain a dream hereafter. We are almost through with total revamp of our website

## Secretary's Message

lead by Dr Samir R Shah, Dr Uday Pai and TEAM to replace the conventional physical server with the virtual cloud server which can give us much more room to host and network. To implement these, we look forward for our members' enthusiastic contributions, support and suggestions on how we can better this effort. Your suggestions form a valuable part in this process.

I realise the utmost faith and confidence you have placed in me when you selected me to take up the mantle and responsibility of Honorary Secretary General in Central IAP.

Now it is my turn to live up to your expectations and deliver the goods. I always believe IAP is primarily for MEMBERS even while reaffirming our commitment towards the cause of children of our country. I promise to continue working with you as a grassroots IAPian, but at the same time privileged to represent your cause at the national level Together let us build up an IAP where every member is reached and heard. Let us pledge to nurture this as a platform where we foster academics with camaraderie and dedicate ourselves for the welfare of the children of our country.

Jai IAP!!

Jai Hind!!

Sincere Regards,

**Dr G V Basavaraja**

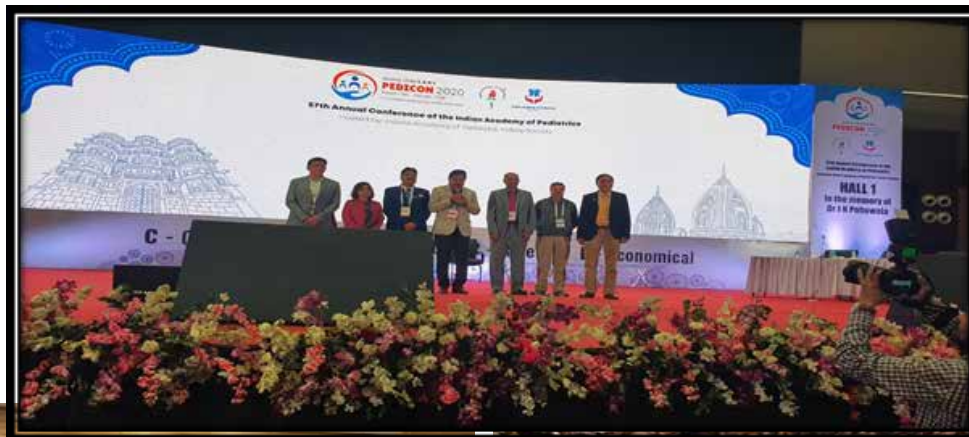
Honorary Secretary General-2020-21



## Presidential Engagements

Glimpse of the PEDICON 2020

8<sup>th</sup> January to 12<sup>th</sup> January 2020





## Presidential Engagements

### National ToTs January –February 2020

*AWESOME AYA TOT HELD AT INDORE ON 7<sup>TH</sup> JANUARY 2020 DURING PEDICON 2020.*

*This Module deals with issues related to adolescent and young adult – psychological, social and medical.*



**Dr Bakul Jayant Parekh, National President IAP 2020, and Team 2020 during the felicitation.**



**Dr Bakul Jayant Parekh, National President IAP 2020, guiding the National trainers during the session.**

## Presidential Engagements

### ALL ABOUT AUTISM TOT HELD AT INDORE ON 7<sup>TH</sup> JANUARY 2020 DURING PEDICON 2020

This Module deals with what a general pediatrician should know about autism, behavioural disorders and poor scholastic performance.



Dr Bakul Jayant Parekh, National President IAP 2020 & Dr G V Basavaraja, Hon. Secretary General IAP 2020, During the AAA and PSPP Session.

## WAR ToT

*(Write Antibiotics Responsibly) held at Indore on 7<sup>th</sup> January 2020 during Pedicon 2020.  
It is a mix of rational antibiotic practices and antimicrobial stewardship.*



Dr Vijay Yewale guiding the team of National Trainers during WAR ToT.

# Presidential Engagements

## SMART CLINIC TOT

ToT for Smart Clinic 2.0 was organized on 7th January 2020



### About Smart Clinic 2.0 :

To standardize the clinic set up and the therapy. It will take us through the equipment required, design/ layout of the clinic, front desk management inclusive of triaging, communication skills – staff as well as doctor and prescription audit (rational therapy).

## The following ToTs were organized on 7th January 2020

- **Smart Clinic 2.0 :**

To standardize the clinic set up and the therapy. It will take us through the equipments required, design/ layout of the clinic, front desk management inclusive of triaging, communication skills – staff as well as doctor and prescription audit (rational therapy).

- **NEP-U:**

Based on Nutrition in first 1000 days. Nutrition in special and different conditions and growth and development charts

- **98.7 FM (Fever Management):**

It deals with fever in general and fever associated with different diseases in a single module.



## Presidential Engagements

- **All About Autism with PSPP:**

Deals with what a general pediatrician should know about autism, behavioural disorders and poor scholastic performance.

- **RTI-GEM 2.0:**

Deals with all respiratory tract infections management. A very popular module which has been revised.

- **Awesome AYA (Adolescent and Young Adults):**

Deals with issues related to adolescent and young adult – psychological, social and medical.

- **Clinical Clues:**

This module starts with a video or picture of a patient or a report and then the discussion goes on to conclude with management

- **WAR (Writing Antibiotics Responsibly):**

It is a mix of rational antibiotic practices and antimicrobial stewardship.

- **GEM 2.0 (Golden Hour Emergency Medicine):**

A patient never comes with a label of diagnosis in an emergency ward. This module is based on, how the patients present with S&S (signs and symptoms) and approach to his/her management.

- **24x7:**

For 20 problems in 2020. This module deals with all OPD patients who come with common complaints for which you have in your mind questions all the time.

### ADMINISTRATIVE MEETINGS

### EXECUTIVE BOARD MEETING



Meeting of the Executive Board of CIAP was held on 7th & 8th January 2020 at Indore



## Presidential Engagements

### NATIONAL EXECUTIVE BOARD MEMBERS, IAP 2020



Respected Office Bearers, at the Executive Board Meeting, IAP 2020 during discussion in EB meeting.



## Presidential Engagements

Meeting of the Office Bearers of CIAP was held on 7<sup>th</sup> January 2020 at Indore



### EDITORIAL BOARD INDIAN PEDIATRICS AND INDIAN JOURNAL OF PRACTICAL PEDIATRICS

Meeting of the CIAP Office Bearers with Editorial Team of Indian Pediatrics and the Indian Journal of Practical Pediatrics was held on 11<sup>th</sup> January 2020





## Presidential Engagements

### MAHARASHTRA BAL SWASTHYA ABHIYAN

Government of Maharashtra: IAP will assist the Government of Maharashtra for identifying the crucial action areas to focus on (1) Health Check-up Camp (Second Opinion Clinic) (2) Capacity Building Workshop (3) Open Session for Parents: Dr. Andekar's Paalak Program (Parenting with Love and Care). It is proposed to conduct 50 one day camp-cum-workshops covering all districts in Maharashtra in the next 3 months.



National President, IAP Dr Bakul Jayant Parekh & Jt. Secretary (Admin) IAP Dr. Samir Hasan Dalwai, during the meeting with Hon'ble Health Minister Shri Rajeshji Tope of Maharashtra to launch Healthy Child Healthy Nation initiative.

### The following Meetings were organized on 7<sup>th</sup> to 11<sup>th</sup> January 2020:

#### Administrative meetings:

- IAP Office Bearers Meeting was held on 7<sup>th</sup> January 2020 at Indore
- IAP Executive Board Meeting was held on 7<sup>th</sup> & 8<sup>th</sup> January 2020 at Indore
- IAP Office Bearers Meeting with HOD Cell was held on 9<sup>th</sup> January 2020
- IAP Central Scientific Committee of PEDICON 2021 Meeting was held on 10<sup>th</sup> January 2020
- Annual General Body Meeting of CIAP was held on 10<sup>th</sup> January 2020

## Presidential Engagements

### IAP Office Bearers Meeting

- Office Bearers of IAP Sub-specialty Chapters / Groups was held on 10<sup>th</sup> January 2020
- Editorial Team of Indian Pediatrics and the Indian Journal of Practical Pediatrics was held on 11<sup>th</sup> January 2020
- Office Bearers of IAP State Branches was held on 11<sup>th</sup> January 2020
- Office Bearers of IAP City / District Branches was held on 11<sup>th</sup> January 2020

### Meetings via Video Conferencing on 25<sup>th</sup> January 2020:

- IAP Finance Committee
- IAP Website Committee
- IAP E-voting Committee
- Meeting of the IAP – Advisory Committee on Vaccines & Immunization Practices (ACVIP) 2020-2021 was held on 3<sup>rd</sup> February 2020

For the first time, the innovative technology for video conferencing was fully utilized in the history of the IAP. These Innovative ways will take IAP to greater heights with more efficiency and effectively, thus saving on precious time and money of the participant in the meeting.

### Video Conferencing Meetings of the following committees were held on 25<sup>th</sup> January 2020

- IAP Finance Committee
- IAP Website Committee
- IAP E-voting Committee
- Meeting of the IAP – Advisory Committee on Vaccines & Immunization Practices (ACVIP) 2020-2021 was held on 3<sup>rd</sup> February 2020

### The following scientific webcasts were successfully organized:

Two Live Webcast of Post Graduate Clinic was held on 30<sup>th</sup> January 2020 and 20<sup>th</sup> February from LTMMC, Mumbai under IAP Action Plan 2020 – dIAP.



## Presidential Engagements

### “NATIONAL TUBERCULOSIS ELIMINATION PROGRAM” (NTEP)

#### Zonal ToTs were successfully held as follows:

The Central TB Division (CTD), MOH&FW, GOI and Central IAP has signed an MoU for conduction of 300 District Level Workshops to train 18000 Pediatricians plus 2000 Medical Officers under “National Tuberculosis Elimination Program” (NTEP) and also to train them on the newer Pediatric TB Guidelines within a very little time period.

#### West Zone Regional TOT in 19<sup>th</sup> January 2020 at Mumbai



#### Central Zone Regional TOT in 2<sup>nd</sup> February 2020 at Hyderabad



## Presidential Engagements

North Zone Regional TOT on 9th February 2020 at Delhi





## Presidential Engagements

South Zone Regional TOT on 16th February 2020 at Chennai





## Presidential Engagements

East Zone Regional TOT on 22<sup>nd</sup> February 2020 at Kolkata





## Presidential Engagements

### NTEP district level workshops

National Tuberculosis Elimination Programme (NTEP) in collaboration with Govt of India in Krishna Institute of Medical Sciences, at Karad, Maharashtra

On 16th February 2020



NTEP district level workshop at Kolhapur on 23rd February 2020



## Presidential Engagements

**NTEP district level workshop at Anand and Kheda Central Gujarat,  
On 23<sup>rd</sup> February 2020**



**NTEP district level workshop at Dhule on 23<sup>rd</sup> February 2020**



## Presidential Engagements

The following NTEP ToTs & district level workshops were conducted during January- February 2020

Regional ToTs		
Zone	City	Date
West	Mumbai	19-01-2020
Central	Hyderabad	02-02-2020
North	Delhi	09-02-2020
South	Chennai	16-02-2020
East	Kolkata	22-02-2020

NTEP Workshop Details		
State	Branch	Date
Maharashtra	Hingoli	26-01-2020
Maharashtra	Amravati	02-02-2020
Maharashtra	Sangli	09-02-2020
Maharashtra	Akola	16-02-2020
Maharashtra	Satara	16-02-2020
Maharashtra	Karad	16-02-2020
Maharashtra	Parbhani	23-02-2020
Maharashtra	Kolhapur	23-02-2020
Maharashtra	Dhule	23-02-2020
Gujarat	Valsad	09-02-2020
Gujarat	Anand	23-02-2020
Andhra Pradesh	Visakhapatnam	23-02-2020



## Presidential Engagements

### WAR MODULE LAUNCHED



National President, IAP Dr Bakul Jayant Parekh, & Dr Sanjay Ghorpade guiding the team during launch function of WAR (Write Antibiotics Responsibly) ToT held at Mumbai on 23rd February 2020

### IAP BLS COURSE FOR HCP at INDIAN ACADEMY OF PEDIATRICS CPR CENTRE,



## Presidential Engagements

### NRP FGM PROGRAM SUMMARY REPORT - JAN & FEB, 2020

The Indian Academy of Pediatrics was established in 1963, at Mumbai with a little more than 150 paediatricians as its members. Currently, there are over **30,000 members** across the country. It has 27 State, and 311 District, and City level branches. The Academy has promoted different specialities in the field of Pediatrics through its various Chapters. Now a day, Government of India and Indian Academy of Pediatrics are supportive to each other and IAP having a role as a technical partner in various programs like NSSK, TB, NCDs, Polio and MMR campaign etc.

#### Mission and Objectives:

The mission of this program is to deal with “**Birth Asphyxia**” and reduce Neonatal Mortality rate all over the country. The ultimate objective of this Project help in reducing the neonatal mortality rate in India and to have one HCP at every delivery points, trained in neonatal resuscitation. With India’s birth cohort of 27 million per year and with most of the deliveries being conducted at home, this goal will require a large number of trainers in every 611 districts of India.

#### Activities conducted in the month of Jan & Feb 2020

- A. National ToT conducted from 6th Jan to 8th Jan 2020 at Indore during pedicon 2020. A total of 67 participants were there along with 8 observer faculty and 17 faculty. With the view to reaching all peripheral areas from all states especially from unreached areas, representation of almost all states was there in terms of participants. Dr Naveen Thacker, Executive Director – International Pediatric Association was the chief guest of this workshop. Feedback from participants as well as faculty and observer faculty revealed that this workshop was really fruitful in terms of capacity building of the participants and in a way, building a chain of Master Trainers ahead to conduct and percolate program to the community level.
- B. As a part of National ToT, a faculty meeting was conducted on 5<sup>th</sup> Jan 2020 evening and was chaired by President IAP – 2020 Dr Bakul Parikh sir and HSG IAP 2020-21 Dr G V Basavaraja sir.
- C. IAP NNF NRP Program SAC / ZC meeting conducted on 10th Jan 2020 to understand the current status and potential ways to strengthen program and proposal for next duration further. This meeting was chaired by Dr Nigam Prakash Narain, Vice President IAP - East Zone and other dignitaries were HSG IAP 2020-21 Dr G V Basavaraj, Dr S S Kamath – Chairperson IAP NRP FGM, Dr Yogesh Parikh, Dr. Somashekar Nimbalkar, Dr Vineet Saxena, Dr Santosh Soans – IAP President 2018, Dr Ajoy Kumar and Dr Kheya Ghosh Uttam from East zone.

## Presidential Engagements

- D. New NRP Core committee was appointed and email was sent to all newly appointed officials along with SAC & ZC for their consent to serve for the next two years
- E. Skype meeting conducted by National Coordinator on 23<sup>rd</sup> Jan 2020 with NRP staff mainly for the planning of zoom meeting in coordination with Dr Rhikesh Thakre, National Convenor and other discussion was on details of trainers from each state along with SAC & ZCs
- F. Zoom meeting conducted on 19<sup>th</sup> Feb 2020, chaired by President IAP 2020 Dr Bakul Parekh sir and other participants were Dr Ashok Deorari, President NNF 2020 & Advisor, Dr Piyush Gupta, President IAP 2021, Dr S S Kamath, Chairperson, IAP NRP FGM Program, Dr Rhishikesh Thakre – National Convenor, Dr Kotturesha H V – Joint National Convenor, Dr Somashekhar Nimbalkar – National Coordinator, Dr Vikas Goyal – Technical Expert, Dr Yogesh Parikh – Advisor and Mr. Chandrashekhar Joshi – Asst NPO, IAP NRP FGM Program. This meeting was conducted with the main to discuss IAP & NNF collaboration for conducting NRP course throughout the country.
- G. **Course conducted -**

Month	Type	Chandashekhar Joshi	Surjeet Kaur	Sarika Atpadkar
Jan-20	BNCRP Part1	4	0	3
	Advanced provider	0	0	0
	Dist ToT	0	0	0
	Regional ToT Indore	1		
Feb-20	BNCRP Part1	9	1	8
	Advanced provider	0	5	0
	Dist ToT	2	0	0
<b>Total</b>		<b>16</b>	<b>7</b>	<b>12</b>

### H. Courses Pipeline

Month	Type	Chandashekhar Joshi	Surjeet Kaur	Sarika Atpadkar
Mar-20	BNCRP Part1	17	2	7
	Advanced provider	0	6	0
	Dist ToT	4	0	0
Apr-20	BNCRP Part1	8	0	2
	Advanced provider	0	6	0
	Dist ToT	0	0	0
<b>Total</b>		<b>29</b>	<b>14</b>	<b>9</b>



## Presidential Engagements

### ACADEMIC EVENTS COMING SOON

- VACCICON 2020 being organized on 7<sup>th</sup> & 8<sup>th</sup> March 2020 at Kolkata by IAP Coalfield Branch under IAP Action Plan 2020
- 10 Workshops on AWESOME AYA are allotted to IAP Branches at East Zone: Gauhati, Patna / West Zone: Nagpur, Surat / North Zone: Shimla, Bikaner / South Zone: Vellore, Bijapur / Central Zone: Jabalpur, Agra
- 98.7 FM Workshop is allotted to IAP Ahmedabad Branch
- Clinical Clues Workshop is allotted to IAP Bangalore Branch
- WAR (Write Antibiotics Responsibly) workshops allotted to IAP Mumbai Branch and M. P. State Branch for organizing it at Khajuraho
- Smart Clinic 2.0 – suggested workshops at East Zone: Gauhati, Kolkata, Bhubaneswar / West Zone: Mumbai, Vadodara, Diu / North Zone: Ludhiana, Jaipur, Delhi / South Zone: Palakkad, Chennai, Bengaluru / Central Zone: Hyderabad, Lucknow, Ranchi
- New Courses on Vitamin D Deficiency in India, Human Influenza Virus Infection, and Typhoid and Paratyphoid Fever are now available on the IAP Courses platform ([www.iapcourses.org](http://www.iapcourses.org))

## IAP Bihar



150 blankets were distributed to old handicapped poorest of poor people at two villages on 5.1.2020 at Muzafarpur.

Visited LOMA, a village in Gayaghat 35 km from town, distributed blankets among poorest of poor, examined dozens of children with free distribution of medicines along with deworming agents.



## IAP Bihar



26-Jan-20



26-Jan-20



02-Feb-20



02-Feb-20





## IAP Bihar



16-Feb-20



16-Feb-20



## IAP West Bengal



Clinical meeting



CIAP Action Plan : Vit. D Deficiency at Apollo Gleneagles Hospital



'Cardiac Problem' at RN Tagore Hospital



## IAP Kerala



Honouring state president Dr M Narayanan by IAP Kozhikode



NEP ToT at Indore - Prof KE Elizabeth, Dr Riaz, Dr Upendra



IAP NNF FGM inauguration



NTEP SZ ToT inauguration by Dr Anandakesavan, Vice President CIAP



Malanad Nephrokid organising committee meeting



Adolescent health class IAP Thalassery



## IAP Kerala



Adolescent health class -  
AHA Kerala & IAP Kozhikode



South Neocon by IAP NNF pathanamthitta



World hearing Day walkathon by IAP Kozhikode



Presenting Life time achievement to  
Prof K C Rajagopalan by Dr Anandakesavan  
Vice president CIAP



Hearing Friendly Malappuram declaration



NTEP programme by IAP Cochin



## IAP Kerala



Hearing Friendly Thrissur declaration



Hearing Friendly Thrissur declaration



Class on Nutrition & parenting - IAP Trivandrum



NTEP programme IAP Kollam



Womens day programme IAP Kottayam



Rare disease & Genetics CME by IAP Valluvanad

## IAP Navi Mumbai

### 1) Clinical meeting with Dr.Y.K.Amdekar

Clinical meeting with Dr.Y.K.Amdekar which was live streamed all across India



### 2) 'TIP OF THE DAY' for Navi Mumbai IAP Whatsapp group

Started 'TIP OF THE DAY' for Navi Mumbai IAP Whatsapp group related to the infectious disease and Antimicrobial Stewardship in routine practice:

Enteric fever is caused by either *Salmonella typhi* or *Salmonella paratyphi*. Clinical features between the two are indistinguishable.

It is an important differential in fever without focus or sepsis or pyrexia of unknown origin.

Classically the fever gradually increases in intensity and frequency in the first week (stepwise fashion) until it becomes unremitting. The child usually appears ill in afebrile period. Fever is associated with malaise, myalgia, headache, abdominal pain, loose motions (constipation may be seen in older children), child may cough due to associated bronchitis.



## IAP Navi Mumbai

On examination, child appears ill, may have coated tongue, mild tenderness on abdomen, tumid abdomen, spleen becomes palpable at the end of the first week. rose spots described in literature is seen in only 10 % as macular spots especially over the anterior abdomen in fair skinned after 1st week.

Relative bradycardia seen in adults is not a feature in children.

Toxicity increases in 2nd and 3rd week. Delirium may set in. Complications such as intestinal perforation may occur after 10 days of illness.

Myocarditis, shock, meningitis, pneumonia are other known complications.

Cbc: Hb may be normal. Severe anemia is unusual and one should suspect alternative diagnosis of malaria. In a toxic child especially after 1 week of illness, severe anemia might suggest complication of intestinal hemorrhage.

Wbc may be normal to slightly reduced. Absence of eosinophils may be seen in more than 50% cases though normal eosinophil count does not exclude possibility of enteric fever. Leucocytosis is uncommon.

Platelets may be normal in the beginning and mild thrombocytopenia may occur by end of the week.

Liver enzymes may be mildly raised. First to rise is SGOT followed by SGPT.

Investigations to be continued.

\*Dr Dhanya Dharmapalan\*

\*Team IAP Navi Mumbai\*

Two important criteria to consider when choosing empirical antibiotics in bacterial meningitis is that

The antibiotic should be bactericidal

And it should be able to penetrate the CSF barrier to reach the site of infection. ( BLBLI antibiotics like Amoxiclav, Piperacillin-tazobactam do not penetrate and cannot be used for meningitis)

Since the most common causes of community acquired bacterial meningitis above age 1 month are streptococcus pneumonia, Hib and meningococcal, the following is the recommended regimen:

## IAP Navi Mumbai

\*Ceftriaxone 100 mg/kg/day in 2 divided doses ( maximum 4 g/ day), plus Vancomycin 60 mg/ kg/day( maximum 4g/ day) in 4 divided doses.\*

Alternatively, cefotaxime 300 mg/kg/day ( maximum 12g/day) in 4 divided doses plus Vancomycin 60mg/kg/day in 4 divided doses.

The addition of Vancomycin for empirical regimen is as per updated GOI national guideline 2019. It is based on evidence of increasing resistance to 3rd generation cephalosporins of streptococcus pneumonia ( DRSP) in the CSF isolates in a large study ( 2008 to 2016) at Vellore. Pls note that DRSP rate has not increased in non CNS streptococcal pneumonia.

If on culture organism is found to be cephalosporin sensitive, vancomycin should be stopped. Dexamethasone addition is most beneficial for Hib meningitis ( and maybe for adult pneumococcal meningitis) and is to be given 15 to 20 mins prior to first dose of antibiotics. Since it is practically difficult to get the etiological confirmation so early and since antibiotics cannot be delayed, it is acceptable to give one dose prior to antibiotic in suspected bacterial meningitis. Further doses can be continued based on CSF reports. If Hib meningitis, dexamethasone is given as 0.15 mg/kg every 6 hours for 48 to 96 hrs.

There is no need to repeat CSF except if non response at 48 hrs, in penicillin/ cephalosporin resistant who have received dexamethasone and neonates.

Causes of non response in a diagnosed case of bacterial meningitis are complications like subdural empyema , cerebral abscess, ventriculitis or drug resistance.

Addition of rifampicin is considered if MIC level of cephalosporin is equal or more than 4 microg/ml, if child worsens on vanco plus ceftriaxone after 48 hrs, if dexta has been given or repeat LP shows bacteria.

Duration of antibiotics is 10 to 14 days. (Oral switch not done).

If specific pathogen is isolated, duration is 7 days for meningococcus and Hib, 10 to 14 days for pneumococcus , 2 to 3 weeks for grp B streptococcus , 3 to 6 weeks for Listeria and 3 weeks for gram negative meningitis.

Source: GOI National guidelines for antimicrobial use,2019

\*Dr Dhanya Dharmapalan\*

\*Team IAP Navi Mumbai\*

## IAP Navi Mumbai

### FEBRUARY 2020

#### 1) Central IAP Module on VIT D:



#### 2) NRP Program in MCH, Airoli





## IAP Navi Mumbai

3) Clinical meeting with Dr. Amdekar Sir

### SOCIAL ACTIVITIES : JANUARY 2020

1) Footpath Dispensary

Footpath Dispensary held every month for the underprivileged children



### SOCIAL ACTIVITIES : FEBRUARY 2020

1) Medical Camp at Koparigaon, Koperkhairne





## IAP Navi Mumbai

### ACTIVITIES UNDER IAP ACTION PLAN 2020 SOCIAL CHARIOT

JANUARY 2020

#### 1) FOOTPATH DISPENSARY:

To continue the legacy of our branch in Social Responsibility, NMAP Team had the first Street Children's Clinic at Koperkhairne- Ghansoli Underbridge -Footpath Dispensary , A joint initiative of IAP, FEED, and HUMAN to ensure these children also have access to medical facility, food n education. Normal health check up , deworming and nutritional supplements were given to children





## IAP Navi Mumbai

**FEBRUARY 2020:**

**1) MEDICAL CAMP:**

Medical camp conducted at Koparigaon ,Koperkhairne

