# Vellore News

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## **Vellore Presentations Evening**

**7:00pm, Fri 23rd June, 2023**Rosefield Uniting Church
2 Carlton St, Highgate

Speakers: Dr Kingsly Robert Gnanadurai & Dr Chandy VJ

Dr Kingsly Robert Gnanadurai joined Medical School at CMC, Vellore in 1996 and subsequently did his Post Graduate training in General Medicine at CMC as well. He then worked in Bangalore Baptist Hospital for 11 years before moving to Adelaide where he now works at Flinders Medical Centre, Department of General Medicine. He is married to Dr Rebecca Kingsly UG batch of 2001 from SDUMC Kolar and PG in Family Medicine from Bangalore Baptist Hospital. They are blessed with 2 kids - Gabriella (14yrs) and Immanuel (12yrs).

Dr Chandy VJ joined Medical School at CMC Vellore in the year 2004 (Batch of 2004 in CMC lingo). He went on to complete his Orthopaedic training at CMC as well and is currently in Adelaide doing a Fellowship at Flinders Medical Centre. He is married to Tina George who is also from the Batch of 2004. Tina went on to train in General Medicine and is currently pursuing a PhD from the University of Melbourne. They have a 5-year-old son, John who goes by the name J.

## All welcome!

Come along to see what will surely be a couple of very fascinating talks. Stay for a chat over supper afterwards.



### **SA Friends of Vellore on Facebook!**

https://www.facebook.com/people/SA-Friends-of-Vellore/100086705256294/

Or search for "SA Friends of Vellore" on Facebook.

Early days yet but we hope to develop this further with regular updates.

A reminder that if you wish to receive this newsletter by email and no longer require the paper form, please email: safriendsofvellore@gmail.com

Remember to let us know if you change your email address.

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Vellore Presentations Evening

May 2023

India's Tropical Diseases

Upcoming Events
At A Glance

7pm, Fri 23rd June, 2023

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Rosefield Uniting Church

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## CMC Vellore Ranipet Campus Go-Live with Surface Guidance Technology

CMC Vellore Ranipet Campus begins Surface Guidance Technology by Vision RT for improving accuracy during patient setup and delivery of radiotherapy. Seven staff were send for advanced training to Dubai where they were trained for Surface Guidance Technology and on site training and initiation of treatment with the new technology was done in the CMC Ranipet campus in the TrueBeam on 11th January, 2023. This technology help to improve accurate treatment setup and radiation delivery with high precision. This technology will be offered to all the patients who are treated with this machine and it will be a value addition to the high volume workflow of delivering high precision radiotherapy.



## How India can put the spotlight back on neglected tropical diseases

A boost in research and development will be the first step towards elimination of these diseases.

Full transcript here: <a href="https://www.nature.com/articles/d44151-022-00137-y?s=08">https://www.nature.com/articles/d44151-022-00137-y?s=08</a>

Dengue, kala-azar, rabies or filariasis — these are just a few debilitating ailments in the long list of neglected tropical diseases (NTDs). NTDs affect more than a billion people globally, according to estimates by the World Health Organisation. In this episode of the Nature India podcast, we look at NTDs, especially in the context of India, and what it will take for countries to eliminate them from the face of earth.

### **Transcript**

#### Why are these tropical diseases still neglected? What's coming in the way of their elimination?

Speakers: Priscilla Rupali, Winsley Rose, Satyabrata Routray, Kavita Singh, Aroma Warsi

00:20 **Aroma Warsi**: In tropical countries, we have a number of unique diseases not found elsewhere in the world. And these diseases are often quite debilitating. Imagine thousands of worms in your intestines sucking away your nutrition, or trachoma, one of the most painful types of blindness in millions of people elephantiasis, you've surely seen pictures of those swollen limbs, and know how stigmatising and painful it can be. And there are many more. These conditions are not just bizarre and life threatening, but have a deeper story to tell. Neglected tropical diseases (NTDs) can often be debilitating, stigmatising and can cause lifelong disabilities. And they affect more than a billion people globally. However, some are also preventable and treatable. Many organisations around the world are trying to look for solutions.

Priscilla Rupali, an infectious diseases expert at the Christian Medical College Vellore, specialising in dengue tells us why these diseases are still neglected.

- 01:41 **Priscilla Rupali**: Neglected tropical diseases are diseases which occur in the tropics, usually in the low middle income countries settings. And this is basically because of either uncontrolled vector proliferation, and the other one is basically lack of access to safe and clean drinking water. There are about 13 neglected tropical diseases, as they have been designated by the WHO, which cause a fair degree of morbidity and mortality globally.
- 02:10 **Aroma Warsi**: The WHO says NTDs affect more than a billion people globally, they are preventable and treatable. However, these diseases and their intricate interrelationships with poverty and ecological systems continue to cause devastating health, social and economic consequences. If you look at India, what are the key reasons for morbidity and mortality here?
- 02:36 **Priscilla Rupali**: I think it's dengue and rabies, which actually cause the greatest amount of mortality. Dengue has such a high incidence in the country. And periodically we have outbreaks. And if you look at the National vector borne disease control website, there are about 100,000 cases that have been recorded. But probably the incidence is much larger because of under reporting, as well as the disease itself, which in many cases, people may not really access health care facilities. So the disease is grossly underreported and there's a huge burden in the country. The second one is rabies. And rabies, as you know, actually has 100% mortality at the moment. You get the disease, you actually die from it pretty much, whether it is, you know, within a couple of days or whether it takes two weeks.
- 03:26 **Aroma Warsi**: Several conditions disproportionately affect children compared to adults, and children are often simultaneously infected with multiple parasitic NTDs. Despite this, there is limited information on current efforts to increase paediatric therapeutic options.

Winsley Rose, a professor and paediatrician at the Christian Medical College Vellore, tells us about NTDs in children and the availability of treatment and vaccines for them.

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03:58 **Winsley Rose**: The most commonly prevalent neglected disease, which also has probably the highest mortality, is dengue. This is more so among children and there are vaccines in development. The earlier vaccine called Dengvaxia, used in many countries did not work very well. And there is a recent vaccine by Takeda, which is actually undergoing trials and we hope they will be available for use in the market in probably a few years time.

04:28 **Aroma Warsi**: For children under five the most ubiquitous tropical infection is reportedly malaria, followed by the three major soil transmitted helment infections, and dengue.

04:41 Winsley Rose: The main reason why worms have been included in the neglected tropical diseases is that there are a set of like, you know, seven worms, which are all called geohelminths. So these soil transmitted helminths, if you take care of them, are potentially eradicable. I mean, using certain measures such as masked deworming or building toilets. the other neglected disease, about 20,000 to 30,000 people die in India every year because of this, is rabies. And more than half of these deaths happen among children less than 15. It's got a very effective vaccine, we have a very good strategy to actually prevent somebody from developing rabies. But the gap is in the knowledge that somebody who's been bitten by an animal needs to go to the doctor and get vaccinated against rabies. I think, the key is awareness that if you get bitten by an animal, you need a rabies shot. Vaccinating dogs is another important feature, which is probably the most cost effective strategy in preventing rabies. But we are not there yet.



Ruby Devi lives in a Bihar village with post kala-azar dermal leishmaniasis, a stigmatizing skin condition. Credit: Kishore Pandit/DNDi

05:48 **Aroma Warsi**: Until recently, the Indian subcontinent accounted for 60% of the global burden of kala-azar. Over 40% of the global population requiring mass Drug Administration for Lymphatic Filariasis elimination is in Bangladesh, India and Nepal. Satyabrata Routray, Director for neglected tropical diseases at the global health nonprofit PATH, helps us understand NTDs in India.

06:16 **Satyabrata Routray**: We have the National Vector Borne Diseases Control Program, based out of the capital here, which is renamed recently as National Center for Vector Borne Disease Control. It includes visceral leishmaniasis, lymphatic filariasis, malaria, Japanese encephalitis, AES, chikungunya, zika. There's an elimination strategy for kala-azar or visceral leishmaniasis, which is prevalent is three or four states primarily U.p., Bihar, Jharkhand and West Bengal. Again for lymphatic filariasis we also have an elimination goal.

Read the complete transcript at the link at the top of this article.

## Drug-resistant tuberculosis treatment centre opened at Christian Medical College, Ranipet

The centre is at CMC's new Ranipet campus; it is equipped to treat patients in Ranipet district who have drug-resistant TB.

Ranipet Collector S. Valarmathi inaugurated a Drug-Resistant Tuberculosis (DRTB) treatment centre at the newly-opened Christian Medical College (CMC) campus in Ranipet on the Chennai - Bengaluru Highway.



The new centre at CMC's Ranipet campus has been equipped with drugs to treat patients who have TB. This is the first and only service for patients in Ranipet district with drug-resistant TB. These patients require intensive monitoring and close follow-up care, which the centre will provide.

A major roadblock to TB control is multi-drug resistant TB. The TB germs in these patients are resistant to the regular TB medicines. This has to be detected early and treated with special anti-TB drugs. At present, CMC has drugs that are very effective in treating drug resistant TB.

India has had a TB Control Programme since 1962. Since then, it has re-organised itself two times. The first was the Revised National Tuberculosis Control Program (RNTCP) in 1997, when the country adopted the internationally-recommended Directly Observed Treatment Short- course (DOTS)

strategy, which involves observed administration of effective anti-TB drugs for six months, as the most systematic and cost-effective approach to effect TB control. This treatment will be provided at the new centre at CMC, Ranipet. The second initiative was the National Tuberculosis Elimination program in 2020, when the Prime Minister declared the goal to eliminate TB by 2025, ahead of the global deadline of 2030

The Hindu, Apr 26th 2023

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Simply and easily make a donation to the work of the Christian Medical College and Hospital, Vellore.

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