

Medgate today

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WORLD #DIABETESAWARENESS DIABETES NOVEMBER 14, 2021 DAY

INTERVIEW

SUBODH GUPTA - CMD, Microtek

JUVENILE DIABETES -
CAUSES, SYMPTOMS
AND TREATMENT

KETOSIS - PRONE DIABETES
[FLATBUSH DIABETES]
- DR ADARSH K S

DIABETES MELLITUS:
SCREENING AND DIAGNOSIS

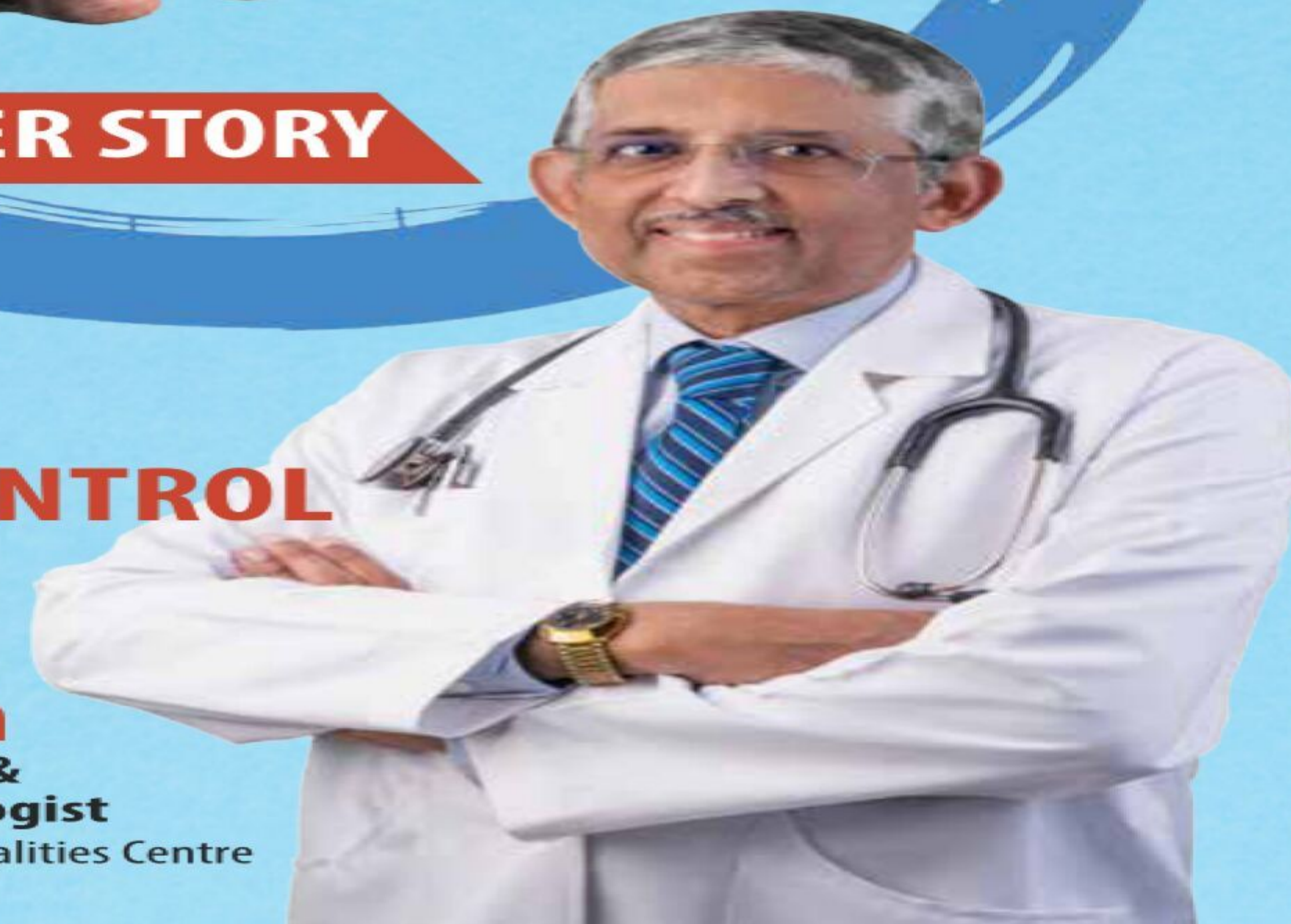
COVER STORY

FACE OF DIABETES CONTROL IN INDIA

Dr. V Mohan

Founder - Chairman &
Consultant Diabetologist

Dr. Mohan's Diabetes Specialities Centre



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HEALTH IMPACT OF DIABETES

Over time, diabetes can damage the heart, blood vessels, eyes, kidneys, and nerves.

Diabetes is a chronic disease that occurs either when the pancreas does not produce enough insulin or when the body cannot effectively use the insulin it produces. Insulin is a hormone that regulates blood sugar. Hyperglycaemia, or raised blood sugar, is a common effect of uncontrolled diabetes and over time leads to serious damage to many of the body's systems, especially the nerves and blood vessels.

In 2014, 8.5% of adults aged 18 years and older had diabetes. In 2019, diabetes was the direct cause of 1.5 million deaths. To present a more accurate picture of the deaths caused by diabetes, however, deaths due to higher-than-optimal blood glucose through cardiovascular disease, chronic kidney disease and tuberculosis should be added. In 2012 (year of the latest available data), there were another 2.2 million deaths due to high blood glucose.

Between 2000 and 2016, there was a 5% increase in premature mortality from diabetes. In high-income countries the premature mortality rate due to diabetes decreased from 2000 to 2010 but then increased in 2010-2016. In lower-middle-income countries, the premature mortality rate due to diabetes increased across both periods.

By contrast, the probability of dying from any one of the four main noncommunicable diseases (cardiovascular diseases, cancer, chronic respiratory diseases or diabetes) between the ages of 30 and 70 decreased by 18% globally between 2000 and 2016.

Have an insightful reading.
Your suggestions are most welcome!
E-mail: editor@medgatetoday.com
Website: www.medgatetoday.com

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Editor-in-Chief | Md. Afzal Kamal
Feature Editor | Razi Ahsan
Editorial Advisor | GP Capt. (Dr.) Sanjeev Sood
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Sales and Marketing | Reena Rath, Nisha F Wilson,
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Subscription & Circulation | Rita Sharma, Suhaib, JD

Creative Head | Hitesh Dingankar

Creative Designer | Heema K

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New Delhi - 110025
Tel: +91 - 11 - 2694 6348, 8448432883

Email: info@medgatetoday.com
medgatetoday@gmail.com
Visit us: www.medgatetoday.com

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For Enquiries: sales.medical@bpl.in
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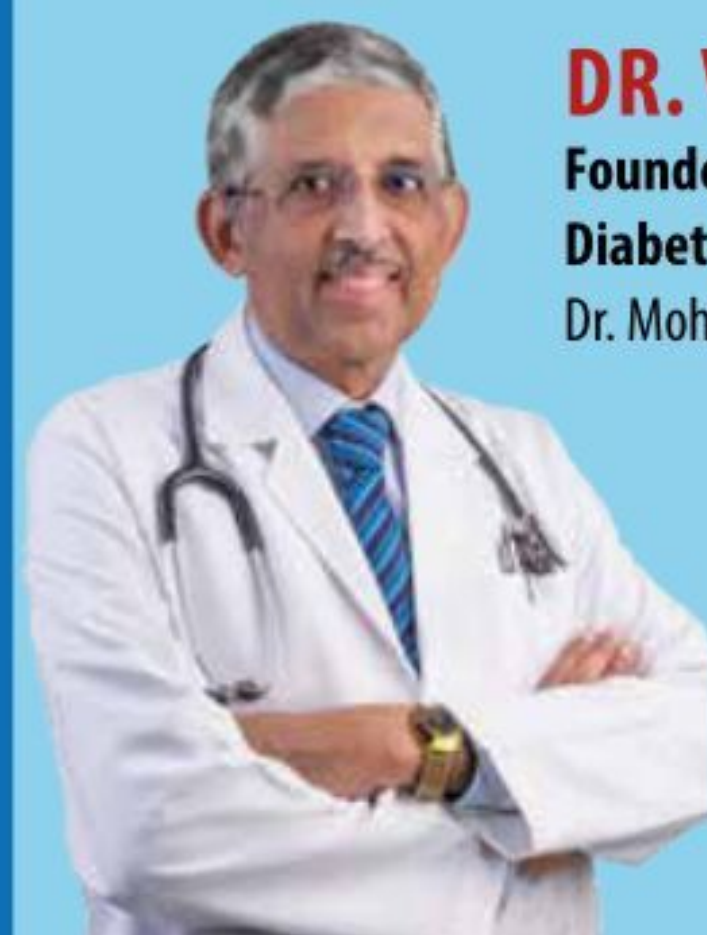
Verdi Tower, 72, Digital-ro 26-gil, Guro-gu, Seoul, 152-848, Korea
Homepage www.alpinion.com
E-mail international@alpinion.com
TEL +82-2-3282-0900
FAX +82-2-851-5591
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Diabetes LIVING

COVER STORY 24-31



DR. V MOHAN

Founder Chairman & Consultant
Diabetologist

Dr. Mohan's Diabetes Specialities Centre

**FACE OF
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CONTROL
OF INDIA**

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CONSULTANT - DIABETES &
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SUBODH GUPTA

FOUNDER & CHAIRMAN
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MR. MARK MATTHEWS



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BREAST CANCER AWARENESS MONTH: NEXT-GENERATION TREATMENT OPTIONS FOR ADVANCED BREAST CANCER PATIENTS



DR. SHYAM AGGARWAL
SENIOR CONSULTANT MEDICAL ONCOLOGIST
SIR GANGA RAM HOSPITAL

Breast cancer is the most common form of cancer affecting females in India. 1 in 29 females are projected to develop breast cancer during their lifetime, with a total of 1.78 lakhs women suffering from breast cancer in India in 2020. Of these, more than 40% of Indian women are diagnosed with advanced (stage 3 or 4) breast cancer in the country. The ongoing pandemic posed various obstacles contributing to late diagnosis and poor treatment adherence, exacerbating challenges of limited screenings across rural and urban areas and poor health-seeking behaviors. Other challenges include social stigma, fear of cancer diagnosis or discussing the same with family members, shame over having a breast examination, and alternative priorities, which result in women neglecting their health and delaying screenings and care, resulting in lowered patient survival rates at advanced disease stages.

Dr. Shyam Aggarwal, Senior Consultant Medical Oncologist, Sir Ganga Ram Hospital Delhi said, "Today, breast cancer has emerged as the most common form of cancer in women, in Delhi and across the country, surpassing cervical cancer. Breast cancer accounts for nearly 30% of all women cancer cases today. In India, 40 women of every 100,000 are diagnosed with breast cancer, with over 50% of patients coming in advanced stages of the disease. This trend of

delayed diagnosis is particularly pronounced in more remote, rural areas of the country, owing to illiteracy, limited facilities, and social stigma. To facilitate early disease detection, after 40 years of age, monthly self-breast examination, particularly during menstruation, and clinical check-ups, along with mammograms aid diagnosis. Biopsy is mandatory to confirm diagnosis. Once diagnosed, a number of tests, including X-rays, bone scan, ultrasound and various receptor tests can be performed to understand how far the disease has spread."

Dr. Aggarwal added, even with locally advanced cases, particularly where metastasis has not occurred, eradication of the disease can be possible. Treatment include chemotherapy, surgery, radiation procedures or hormonal/targeted therapies. In early stages cure rates exceed 90%. Treatment modalities differ based on individual cases, such as if the disease has spread to different parts of the body and is deemed inoperable. Particularly to patients who are estrogen receptor positive, newer targeted hormonal therapies are offered. As high as 80 to 90% of patients respond positively to such treatments, enabling them to lead normal lives with an enhanced quality, for many years. Similarly for her2 neu positive advanced cases, targeted drugs with chemotherapy yield similar results these days in most cases. With such innovations, cancer can be viewed as a chronic disease that can be cured and controlled."

Awareness of risk factors can prompt more self-breast examinations as well as screening, which can enable timely disease detection. There are a variety of treatment options available for breast cancer based on the individual's specific case, including surgery, or chemotherapy, or advanced targeted therapies and hormonal therapies, which can be adopted for advanced breast cancer cases as well, particularly to shrink the cancer or attack abnormal breast cancer cells without causing harm to normally functioning cells. Newer targeted therapy advancements have also limited adverse side effects compared to more traditional forms of treatment, such as chemotherapy, which can result in significant daily life compromises.

This October, which marks Breast Cancer Awareness Month, there is a dire need to raise awareness amongst patients and caregivers about the availability of treatment options even at advanced stages of the disease.

If you're an advanced-stage breast cancer patient – discuss your treatment options with your oncologist to manage your disease, alleviate troubling symptoms and live with an enhanced quality of life and care.

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SPIKE IN BREAST CANCER CASES AMONG WOMEN BETWEEN THE AGES OF 35-50 YEARS, SAY EXPERTS AT INDRAPRASTHA APOLLO HOSPITALS, NEW DELHI

- Approximately 50% women reporting cases of breast cancer are between the age of 35-50 years.
- Pandemic induced hesitancy to visit hospitals, have increased the percentage of women reporting advanced stages of breast cancer.

Breast cancer is the most common form of cancer in women, it accounts for almost 30% of the entire cancer burden reported among women. With limited awareness and hesitancy towards preventive diagnosis, 1 in every 20 women is diagnosed with this cancer. With various misconceptions and lack of awareness regarding early diagnosis of breast cancer and related treatment, there has been a spike in the number of cases of breast cancer, among women between the ages of 35 to 50 years.

It is perhaps due to this lack of awareness that most women in India get diagnosed with the breast cancer at its advanced stages and thus have to undergo all the related treatment modalities that are both physically and mentally challenging. Due to pandemic induced hesitancy to visit hospitals a lot of women have delayed treatment or ignored early sign and symptoms, hence adding to the evident spike in cases.

Dr Ramesh Sarin, Senior Consultant, Surgical Oncologist, Indraprastha Apollo Hospitals, New Delhi said, "Basis our records from past three years, we have observed that 50 % women reporting breast cancer and related manifestations have been between the age of 35 to 50 years. With our hospital based consultation data for breast cancer, it is found that though 53% of the reported cases are in the initial stages of cancer and 47% are in the advanced stages of cancer by a total of 20% in stage 4 and 27% in stage 3 cancer. The survival or cure rate falls drastically from early stage to advanced stages. In our own series, 90 % of women in stage 1 and 2 survive for more than 10 years



DR RAMESH SARIN
SENIOR CONSULTANT, SURGICAL ONCOLOGIST,
INDRAPRASTHA APOLLO HOSPITALS

while only 30% survive in stage 3 and 5% in stage 4. We need to increase the detection up to 70-80% in early stages of cancer by making women aware of the early signs and symptoms of breast cancer for achieving a better cure rate with proper management of the disease.

The reasons for early age occurrence are varied and imprecise. It could be faulty genes inherited from parents, or history of breast or ovarian cancers in the close family. Certain lifestyle choices also contribute towards the risk of developing breast cancer in young women such as limited or lower amount of physical activity and increasing obesity and smoking. Excessive consumption of alcohol and oral contraceptives also have debatable association with increased risk of breast cancer in younger women. As a reason, women are highly advised to be watchful towards their sedentary lifestyle patterns and any newly observant signs of a breast cancer like a lump, discharge or



discoloration of breasts."

About Indraprastha Apollo Hospitals:

Indraprastha Apollo Hospitals, India's first JCI accredited hospital, is a joint venture between the Government of Delhi and Apollo Hospitals Enterprise Limited. Commissioned in July 1996, it is the third super-specialty tertiary care hospital set up by the Apollo Hospitals Group. Spread over 15 acres, it houses 57 specialties with more than 300 specialists and more than 700 operational beds, 19 operation theatres, 138 ICU beds, round-the-clock pharmacy, NABL accredited laboratories, 24-hour emergency services and an active air ambulance service. Apollo Hospitals Delhi has the leading programme in kidney and liver transplant in the country. The first successful paediatrics and adult liver transplants in India were performed at Indraprastha Apollo Hospitals. The hospital is at the forefront of medical technology and expertise. It provides a complete range of latest diagnostic, medical and surgical facilities for the care of its patients. The Hospital has introduced the most sophisticated imaging technology to India with the introduction of 64 slice CT and 3 Tesla MRI, Novalis Tx and the integrated PET Suite. Indraprastha Apollo has also pioneered the concept of preventive health check programmes and has created a satisfied customer base over decades. The Hospital has been consistently ranked amongst the best 10 hospitals in India by The Week survey for the past few years.

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APPROVAL OF MIXING AND MATCHING OF COVID BOOSTER SHOTS BY FDA IS YET ANOTHER CONFIRMATION OF EFFICACY OF VACCINE COCKTAIL APPROACH PIONEERED BY THE RUSSIAN SPUTNIK V VACCINE

- Sputnik V pioneered the heterologous boosting approach through combination of human adenovirus serotype 26 as the first component and human adenovirus serotype 5 as the second component.
- RDIF took the lead in initiating partnerships with global vaccine producers for combination trials of the first component of Sputnik V (the Sputnik Light vaccine) and other vaccines.
- Combination trials between Sputnik Light and vaccines by AstraZeneca, Sinopharm, Moderna and Cansino confirm Sputnik Light as a universal booster shot with high safety and immunogenicity profile.
- One-shot Sputnik Light is a highly effective vaccine when used both on standalone basis and applied as a booster. Sputnik Light is authorized in more than 15 countries, with ongoing registration processes in another 30 countries.

Following the decision by the U.S. Food and Drug Administration allowing individuals to receive booster shots that are different from their first COVID-19 vaccine doses, the Russian Direct Investment Fund (RDIF, Russia's sovereign wealth fund) reiterates that the heterologous boosting approach pioneered by the Russian Sputnik V vaccine is one of the best solutions against the pandemic. The mix&match approach pioneered by Sputnik V strengthens and lengthens immune response, increases vaccine efficacy against new mutations and provides flexibility to vaccination efforts worldwide.

FDA's decision to approve mixing and matching COVID booster shots in the U.S. is yet another confirmation of efficacy of vaccine cocktail approach at the core of Sputnik V – the world's first registered coronavirus vaccine.

I. Sputnik V as the global pioneer

in heterologous boosting

Sputnik V combines human adenovirus serotype 26 as the first component and human adenovirus serotype 5 as the second component. Heterologous boosting approach has proven to be successful against coronavirus: Sputnik V has confirmed overall efficacy 91.4% providing for creation of a strong and durable immunity. Sputnik V's efficacy against infection with the Delta variant is 83% and 94% against hospitalization. To date Sputnik V has been registered in 70 countries in various parts of the world with total population of over 4 billion people.

II. RDIF's leading role in initiating partnerships with other COVID vaccine producers

As part of the global effort to join forces in the fight against the pandemic, RDIF took the lead in initiating partnerships with other vaccine producers to conduct joint mix&match studies. The world's

first partnership of this kind was concluded in December 2020 with AstraZeneca aimed at conducting joint clinical trial of a combination of AstraZeneca vaccine and the first component of Sputnik V (the one-shot Sputnik Light vaccine). To date joint clinical studies between Sputnik Light and AstraZeneca are successfully ongoing in a number of countries (Argentina, Azerbaijan, Russia, UAE), demonstrating high safety and immunogenicity profile of the combination.

III. The first component of Sputnik V (Sputnik Light) as a universal booster for other COVID vaccines

One-shot Sputnik Light is a highly effective vaccine when used both on standalone basis and applied as a booster. Sputnik Light has been authorized in more than 15 countries with the registration process ongoing in a further 30 countries.

The latest findings by the



Gamaleya Center based on data from 28,000 subjects in Moscow have demonstrated the Sputnik Light vaccine administered standalone has 70% efficacy against infection from the Delta variant of coronavirus during the first three months after vaccination. The vaccine is 75% effective among subjects under the age of 60.

Efficacy of one-shot Sputnik Light as a booster against Delta variant for other vaccines will be close to the efficacy against the Delta variant of the Sputnik V vaccine: over 83% against infection and over 94% against hospitalization.

Sputnik Light has demonstrated a superior efficacy compared with some two-shot vaccines, which have shown a major decline in efficacy against the Delta variant to less than 50% five months after injection. Standalone use of Sputnik Light also provides much higher efficacy against severe disease and hospitalizations.

Clinical trials of a combination of AstraZeneca/Sputnik Light show higher immunogenicity levels than the original AstraZeneca vaccine.

RDIF and the Ministry of Health of Argentina are co-sponsoring

the first multivaccine combination trial targeting 2,800 subjects (560 in each of the 5 provinces: City and Province of Buenos Aires, as well as Córdoba, La Rioja and San Luis).

Interim results of the study in Argentina on heterologous regimens combining Sputnik Light and vaccines produced by AstraZeneca, Sinopharm, Moderna and Cansino from over 1,000 volunteers show Sputnik Light is an effective universal booster for these vaccines. Each "vaccine cocktail" combination with Sputnik Light provided higher antibody titer on 14th day after administering the second dose as compared to original homogenous (same vaccine as first and second dose) regimens of each of the vaccines.

Kirill Dmitriev, CEO of the Russian Direct Investment Fund (RDIF), said:

"Russia took the lead in utilizing the vaccine cocktail approach (with heterologous boosting at the core of the Sputnik V vaccine) and was also the first to offer vaccine partnerships to other producers. Clinical trials of combinations of the first component of Sputnik

V (the one-shot Sputnik Light vaccine) with other vaccines are successfully ongoing around the world. Sputnik Light demonstrates strong safety and immunogenicity results in joint studies making it a universal booster and one of the best solutions for revaccinating individuals, who had been previously administered other vaccine."

Russian Direct Investment Fund (RDIF) is Russia's sovereign wealth fund established in 2011 to make equity co-investments, primarily in Russia, alongside reputable international financial and strategic investors. RDIF acts as a catalyst for direct investment in the Russian economy. RDIF's management company is based in Moscow. Currently, RDIF has experience of the successful joint implementation of more than 80 projects with foreign partners totaling RUB 2.1tn and covering 95% of the regions of the Russian Federation. RDIF portfolio companies employ more than 1 mn people and generate revenues which equate to more than 6% of Russia's GDP. RDIF has established joint strategic partnerships with leading international co-investors from more than 18 countries that total more than \$40 bn.

U.S. SURGEONS SUCCESSFULLY TEST PIG KIDNEY TRANSPLANT IN HUMAN PATIENT

For the first time, a pig kidney has been transplanted into a human without triggering immediate rejection by the recipient's immune system, a potentially major advance that could eventually help alleviate a dire shortage of human organs for transplant.

The procedure done at NYU Langone Health in New York City involved use of a pig whose genes had been altered so that its tissues no longer contained a molecule known to trigger almost immediate rejection.



The subject was a brain-dead patient with signs of kidney dysfunction whose family consented to the experiment before she was due to be taken off of life support.

For three days, the new kidney was attached to her blood vessels and maintained outside her body, giving researchers access to it.

Test results of the transplanted kidney's function "looked pretty normal," said transplant surgeon Dr. Robert Montgomery, who led the study.

The kidney made "the amount of urine that you would expect" from a transplanted human kidney, he said, and there was no evidence of the vigorous, early rejection seen when unmodified pig kidneys are transplanted into non-human primates.

The recipient's abnormal creatinine level – an indicator of poor kidney function – returned to normal after the transplant, Montgomery said.

In the United States, nearly 107,000 people are presently waiting for organ transplants, including more than 90,000 awaiting a kidney, according to the United Network for Organ Sharing. Wait

the agency said.

Other researchers are considering whether GalSafe pigs can be sources of everything from heart valves to skin grafts for human patients.

The NYU kidney transplant experiment should pave the way for trials in patients with end-stage kidney failure, possibly in the next year or two, said Montgomery, himself a heart transplant recipient. Those trials might test the approach as

a short-term solution for critically ill patients until a human kidney becomes available, or as a permanent graft.

times for a kidney average three-to-five years.

Researchers have been working for decades on the possibility of using animal organs for transplants, but have been stymied over how to prevent immediate rejection by the human body.

Montgomery's team theorized that knocking out the pig gene for a carbohydrate that triggers rejection – a sugar molecule, or glycan, called alpha-gal – would prevent the problem.

The genetically altered pig, dubbed GalSafe, was developed by United Therapeutics Corp's (UTHR.O) Revivicor unit. It was approved by the U.S. Food and Drug Administration in December 2020, for use as food for people with a meat allergy and as a potential source of human therapeutics.

Medical products developed from the pigs would still require specific FDA approval before being used in humans,

The current experiment involved a single transplant, and the kidney was left in place for only three days, so any future trials are likely to uncover new barriers that will need to be overcome, Montgomery said. Participants would probably be patients with low odds of receiving a human kidney and a poor prognosis on dialysis.

"For a lot of those people, the mortality rate is as high as it is for some cancers, and we don't think twice about using new drugs and doing new trials (in cancer patients) when it might give them a couple of months more of life," Montgomery said.

The researchers worked with medical ethicists, legal and religious experts to vet the concept before asking a family for temporary access to a brain-dead patient, Montgomery said.



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EKA CARE BECOMES 1ST PRIVATE HEALTHCARE PLATFORM TO ALLOW CREATION OF HEALTH ID UNDER AYUSHMAN BHARAT DIGITAL HEALTH MISSION (ABDM)



MR. VIKALP SAHNI
CEO and Co-founder
Eka Care

- NDHM opening for private players will change the game in Healthcare; Eka Care is leading the wave
- Eka Care was also the 1st platform to allow CoWin Appointment & Certificate Downloads in June 2021
- Eka Care facilitated over 2mn Indians in downloading the certificate and vaccination appointment.

Eka Care becomes the first private healthcare platform to facilitate the creation of Health ID under Ayushman Bharat Digital Health Mission (ABDM). After PM Modi's Announcement on 27th September 2021, there were several companies lined up to facilitate creation of health IDs.

ABDM's initiative has opened up a completely new chapter in the healthcare industry. Under this scheme, a unique Digital Health ID will be provided to the people, which will link with all the health records of the individual.

"This is the beginning of a new healthcare infrastructure in India. After revolutionizing the finance sector with UPI, the government has taken up a massive step in the healthcare industry. We are super delighted to facilitate the creation of health ID and storing of health records on our platform. To support this initiative, we are also offering free storage up to 10GB to each individual, to store their health records," said **Mr. Vikalp Sahni, CEO and Co-founder, Eka Care.**

The creation of Health IDs will standardize the process of identifying an individual across healthcare providers. The aim is to ensure that the medical

records which get created are issued to the right individual or get accessed by health information users through the individual's appropriate consent.

In order to issue a Health ID to an individual, we will require basic demography and contact details and pass it on to the ABDM system. The ID will be used for uniquely identifying persons, authenticating them and maintaining their own and family's health records (only with the informed consent of the individual) across multiple systems and stakeholders.

Storing health records as a habit is missing in our country. Availability of health records at tertiary-care can reduce the overall cost of the treatment and improve health outcomes. This is the only way to monitor the cases of chronic patients. With over 270 mn chronic patients in the country, Eka Care's storage of health records can be a game-changer. Teleconsultations will also take a big lead with this initiative as doctors would be able to access records remotely while consulting with patients.

Eka.Care, became the first company to integrate with the CoWIN portal in June this year, allowing booking of vaccination slots. The Eka.Care platform

integration with CoWIN offers a bouquet of services: seamless slot booking, pre and post-vaccination tele-consultation, vaccination certificate downloading within minutes.

The Eka Care app is available in 12 different languages and is being used by more than 1.5 million consumers across 1500 districts in India. Through the app, patients can store their health records, book their doctor appointments, book CoWIN vaccination appointments and download vaccination certificates. The app also facilitates users to talk to a doctor 24X7.

The Eka Care team is working on building a PHR app as well as per the ABDM guidelines to facilitate consent-based sharing of records with healthcare providers.

Eka Care commenced its operations in December 2020 with a vision to build a connected healthcare ecosystem for India. The company was founded by Vikalp Sahni, Deepak Tuli, and Abhishek Baggerhotta. Professionals from leading tech companies such as Flipkart, Masimo, Philips, Goibibo have joined the duo in this mission, to bring better health outcomes.

INDIA'S MILESTONE IN COVID VACCINATION

India has achieved a major milestone in its war against Covid-19 as increasing vaccinations in the country crossed the 100 crore mark on Thursday.

After China, administering more than 200 crore doses, India is only the second country to have reach the landmark of 100 Crore jabs. While the vaccination stats of countries with significant populations like the US, Brazil and Indonesia have been largely flat, India's has been rising steeply. According to the Government data, almost 75% of the population has taken at least first dose, with eight states and UTs achieving 100% coverage of the first dose.

After a slow start taking 85 days to administer the first 10 crore doses, India almost halved the time taken to reach the next 10 crore in 46 days. The vaccination drive picked up pace thereafter, taking 28 days for the next 10 crore. While, India took a total of 202 days to reach the 50 crore mark after it began giving shots, it took just 76 days more to hit the 100 crore landmark.

India ranks second to China in fully vaccinating



over 28 crore of its population in terms of cumulative number. Approx. 10 crore more than the US and equal to the fully immunized population of Japan, Germany, Russia, France and the UK put together.

Prime Minister Narendra Modi hailed doctors, nurses and all those who had worked tirelessly to make the achievement historic. "India scripts history. We're witnessing the triumph of Indian Science, enterprise and collective spirit of 130 crore Indians. Congrats India on crossing 100 crore vaccinations. Gratitude to our Doctors, Nurses and all those who worked to achieve this feat. #VaccineCentury", PM tweeted.

INDIA'S MILESTONE IN COVID VACCINATION

Two studies in major medical journals add to evidence that COVID-19 vaccines are safe before and during pregnancy. One study, published in The New England Journal of Medicine on Wednesday, tracked nearly 18,500 pregnant women in Norway, including about 4,500 who had miscarriages. Researchers found no link between COVID-19 vaccines and risk of first-trimester miscarriage, regardless of whether the vaccines were from Moderna (MRNA.O), Pfizer (PFE.N) and BioNTech, or AstraZeneca (AZN.L). Overall, the women with miscarriages were 9% less likely to have been vaccinated, according to the researchers' calculations. In a separate study published on Thursday in The Lancet, researchers tracked 107 women who became pregnant while participating in trials of AstraZeneca's vaccine in the UK, Brazil and South



Africa. Seventy-two of the women had received the vaccine while the others got a placebo. AstraZeneca's vaccine had no effect on the odds of safely carrying the pregnancy to term, the researchers reported. "It is important that pregnant women are vaccinated since they have a higher risk of hospitalizations and COVID-19-complications, and their infants are at higher risk of being born too early," the authors of the Norwegian

study wrote. "Also, vaccination during pregnancy is likely to provide protection to the newborn infant against COVID-19 infection in the first months after birth."

Healthcare workers in France who got a first shot of AstraZeneca's COVID-19 vaccine and then the Pfizer/BioNTech vaccine for their second shot showed stronger immune responses than those who had received two shots of the Pfizer vaccine, in a recent study. Combining different technologies is known to boost immune responses to other viruses, and the current study suggests it may be true for the coronavirus as well. Both vaccines in the study deliver instructions that teach cells in the body to make a piece of protein that resembles the spike on the coronavirus and that triggers an immune response.

BD LAUNCHES ITS SECOND CENTER OF EXCELLENCE IN FLOW CYTOMETRY FOR CLINICAL RESEARCH AT CMC, VELLORE



BD Life Sciences-Biosciences, a segment of BD (Becton, Dickinson and Company), in collaboration with Christian Medical College – Vellore has launched its second Center of Excellence (CoE) in flow cytometry for clinical research in India. This CoE will serve as the National Reference Center for clinical diagnostics applications, wherein hematologists, physicians, lab specialists from across India can come together to deliberate and discuss standardization and best practices in clinical flow cytometry.

The CoE at CMC Vellore will help to push the bounds of clinical research, provide opportunities for knowledge exchange and conduct diagnosis with higher accuracy to achieve faster turnaround of reports and better patient outcomes.

Pavan Mocherla, Managing Director, BD India/South Asia at the inaugural ceremony said, "Over the years, flow cytometry has been an invaluable tool in several clinical applications. Christian Medical College, Vellore has been leading healthcare and research for more than 120 years and we are honoured that this Centre of Excellence in flow cytometry at CMC Vellore is a testament of our purpose of advancing the world of health™. The depth of experience of CMC's faculty of Haematology

department and BD's technological advancements will together provide a world-class experience for anyone coming in for training or treatment. Our aim is to encourage best practices, stay ahead in science to create a strong foundation for better patient outcomes."

Dr Vikram Mathews, Associate Director & Professor of Haematology, Christian Medical College, Vellore said, "The proposed Centre of Excellence in flow cytometry at the department of Haematology in Christian Medical College, Vellore is another milestone in the academic collaboration between the institute and BD-India. As a state-of-the-art diagnostic facility, the Center of Excellence will help educate and train the pathologists and haematologists in multicolour flow cytometry analysis. The lab is one of the largest diagnostic flow cytometry facilities in the country and the services offered include leukemia and lymphoma diagnostics, minimal residual disease for leukemia and myeloma, Stem cell enumeration, primary immunodeficiency disorders and lymphocyte subset analysis, paroxysmal nocturnal haemoglobinuria and cellular therapy assays. The proposed collaboration with BD-India strengthens our relationship, positioning us to perform high quality diagnostic services and academic activities further.

It will not only help students' and early career pathologists' understanding of this field but will also nurture the institute's mandate of integrating diagnostic service with active academic and research activities."

This CoE is equipped with a comprehensive range of flow cytometer instruments like BD FACSLyric™, BD FACS Canto™ II, BD FACS Canto™ 10C and BD Accuri™ C6 Plus that will help in increasing awareness about the role of flow cytometry in clinical diagnostics among healthcare professionals.

Puneet Talwar, Business Director-India/ South Asia, BD Lifesciences-Biosciences added, "Our association with CMC Vellore goes back to three decades when we supplied them our first BD FACS flow cytometry instrument. Over the years, we have strengthened our partnership by regular up-gradation of technology as well as other tools/resources required by CMC in serving its patients. With the establishment of this Centre of Excellence in flow cytometry, we will be writing a new chapter for our academic collaboration. This will give us a platform to train and educate many more pathologists and haematologists in the country in multicolour flow cytometry analysis."

In addition to this CoE, BD also has CoEs as mentioned below:

1. BD-Calcutta University CoE in Nanobiosciences - Kolkata
2. BD-NCBS CoE in Advanced flow cytometry - Bengaluru
3. BD-PD Hinduja CoE in Clinical flow cytometry – Mumbai
4. IISER- BD Centre of Excellence (CoE) in flow Cytometry – Pune

ERIS LIFESCIENCES SUPPORTS INNOVATION IN CONTINUING MEDICAL EDUCATION (CME) - LAUNCHES THE FIRST-EVER 'METABOLIC ROADINAR'



Continuing Medical Education (CME) is an integral part of medical communication targeted to help clinicians improve medical outcomes in patients. Due to restrictions that followed as a result of the Covid19 outbreak, seminars witnessed a shift in their formats, with healthcare professionals adopting webinars as the new platform in the post-pandemic era. Now webinars are all set to see a renewed approach towards delivering medical education, and a new term coined to present the format is "Roadinar". In order to find an innovative solution to maintain high engagement levels in CMEs, **Eris Lifesciences supports this innovative, first-of-its-kind initiative presented by the Metabolic Health Digest, the first edition of the Metabolic Roadinar** - an educational travelogue featuring 18 well-known doctors from across the country spread across 9 episodes.

Having covered 45,000+ medical practitioners since the start of the pandemic through digital interactions, Eris has been at the forefront in delivering knowledge sessions for doctors in the fields of diabetes, heart failure, Covid impact on cardio-metabolic health and general immunity. Eris has carved out a niche for itself in the cardio-metabolic space through its unique Patient Care Initiatives platform and ongoing investment in India-centric studies to generate cutting-edge scientific evidence based on the local population. An example of this is the India Heart Study (IHS), which is the only study of its kind on hypertension based on the Indian population. In addition to having become a benchmark in its field, the study was accepted and published in the Journal of Hypertension, the official journal of the International Society of Hypertension and the European Society of Hypertension.

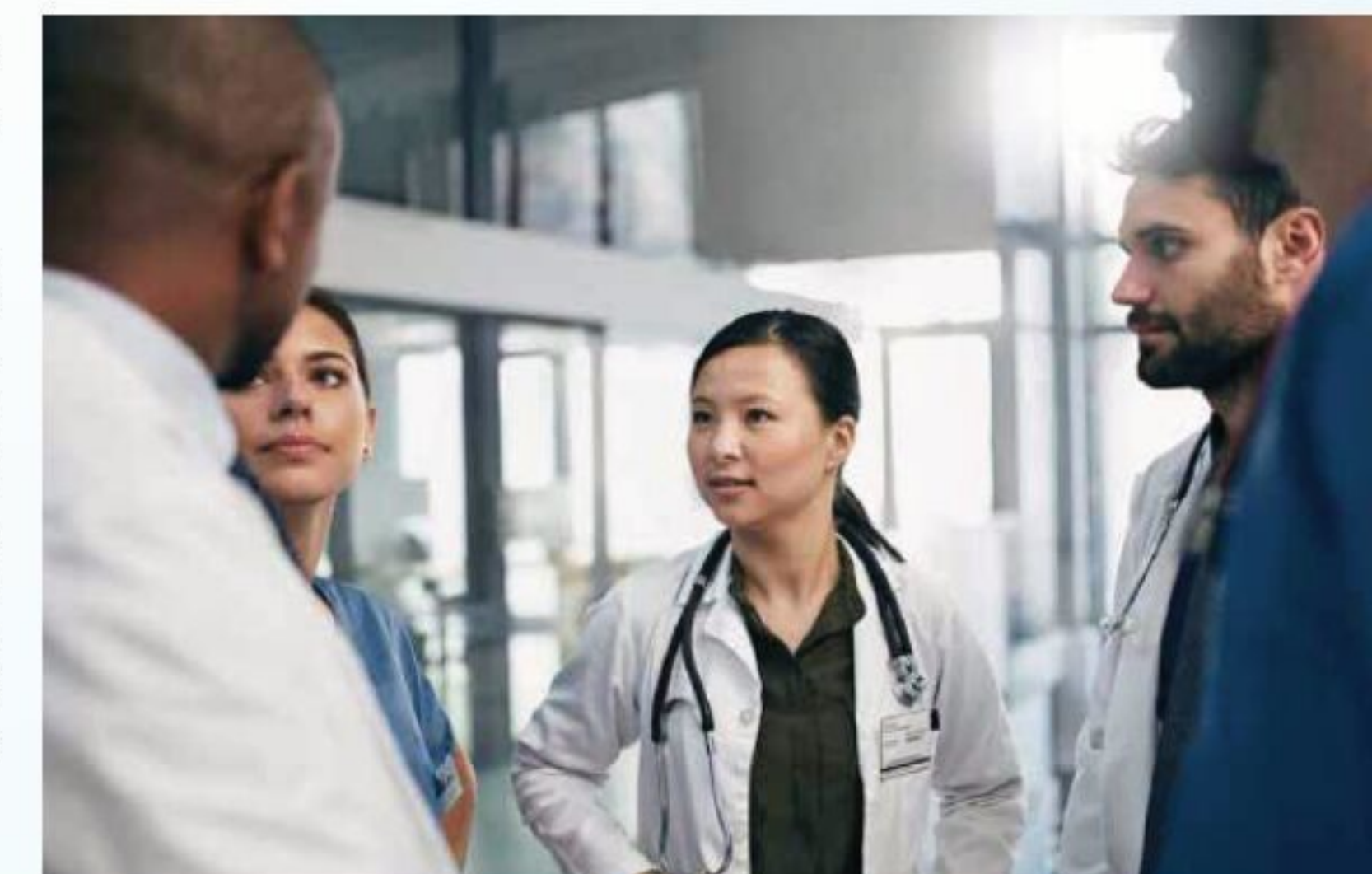
The Metabolic Roadinar is in line with Eris' commitment to support innovative thinking and deliver future-forward, critical information to the medical fraternity.

The Roadinar has been conceptualised by Dr. Rajiv Kohli, Diabetologist in Mumbai. The list of 18 doctors who will be a part of this Roadinar includes prominent names such as **Dr. Ambrish Mithal, Dr. Shashank Joshi and Dr. Tejas Shah**; the Roadinar features doctors from across cities such as Delhi, Mumbai, Ahmedabad, Bangalore, Pune, Aurangabad, and Kolkata. They will be seen discussing varied topics ranging from rediscovering liver as the harbinger of diabetes, COVID- Diabetes- Mucor Mycosis- The boomerang effect of the pandemic, and DPP4 inhibitors + Metformin- VERIFYing an extraordinary durability among others.

Speaking about this initiative, Mr Amit Bakshi, Chairman and Managing Director, Eris Lifesciences said, "CME is an integral part of ensuring continuous knowledge building and an effective way to stay abreast with the current and forward looking developments in the medical industry. We want to bring together a fresh perspective and encourage newer ideas. Metabolic Roadinar, is an innovative way of delivering CMEs which retains its essence and at the same time opens avenues for disruption in the approach towards CMEs in future. We are happy to support innovation in this field and this becomes a trend setter for years to come."

Speaking about conceptualizing this initiative, Dr Rajiv Kovil, Diabetologist said, "From personal and industry experiences, we have witnessed decreasing engagement of the medical fraternity towards CMEs. While each of us understands its relevance and importance, the lack of innovation has made the platform dull and uninspiring. Hence, we were sparked by the thought of introducing CMEs in a more fun, lively and human format, which will build excitement. We thank Eris Lifesciences for helping drive this initiative, and hope this becomes the stepping stone for the disruption and evolution of the Indian and global CME landscape in the post-pandemic world."

The first edition of the Metabolic Roadinar will be hosted on a YouTube channel, with one episode being launched every weekend.



GLENMARK BECOMES THE FIRST COMPANY TO LAUNCH REMOGLIFLOZIN + VILDAGLIPTIN + METFORMIN FIXED DOSE COMBINATION, AT AN AFFORDABLE PRICE FOR ADULTS WITH TYPE 2 DIABETES IN INDIA



- *Glenmark is the first company in the world to launch Remogliflozin (100 mg) + Vildagliptin (50 mg) + Metformin (500/1000 mg) Fixed Dose Combination (FDC)*
- *Remogliflozin is an innovative, patent-protected sodium glucose co-transporter-2 (SGLT2) inhibitor indicated for the treatment of Type 2 diabetes in adults*
- *With this launch, the company aims to improve patient access to SGLT2 inhibitors & DPP4 inhibitors which have proven benefits in the effective management of diabetes with added advantage of patient compliance*
- *Glenmark's Remo MV and Remozen MV are priced at Rs. 16.5 per tab, Rs. 33 per day cost of therapy which is 53% lower than the other available SGLT2 & DPP4 combination brands administered along with Metformin, in India*

Glenmark Pharmaceuticals Limited (Glenmark), a research-led global pharmaceutical company has launched a fixed dose combination (FDC) of its novel, patent protected, globally researched Sodium Glucose Co-Transporter Inhibitor (SGLT2i) - Remogliflozin Etabonate and another widely used DPP4 inhibitor (Dipeptidyl Peptidase 4 inhibitor) – Vildagliptin, with Metformin (first-line medication for the treatment of type 2 diabetes). This fixed drug combination is indicated for the management of Type 2 diabetes. The combination contains Remogliflozin (100 mg) + Vildagliptin (50 mg) + Metformin (500/1000 mg) in a fixed dose and must be taken twice daily to improve glycemic control in patients. Glenmark has launched the same under two brand names Remo MV and Remozen MV.

Glenmark is the first company in the world to launch Remogliflozin + Vildagliptin + Metformin fixed dose combination (FDC) and India is the first country to get access to this FDC drug. Glenmark received approval from the DCGI (the drug approval authority in India) for manufacturing and marketing this fixed dose combination in late September 2021.

Globally, SGLT2 inhibitors & DPP4 inhibitors are emerging as the preferred treatment option for the management of Type 2 diabetes. Glenmark has been at the forefront in providing access to the latest treatments at a low cost for patients with diabetes in India.

Glenmark's FDC of Remogliflozin + Vildagliptin + Metformin tackles most of the pathophysiology in Type 2 Diabetes that makes it an appealing fixed dose combination in managing uncontrolled Type 2 Diabetes. Mono components of the FDC are recommended by AACE guideline for early

use in the hierarchy of Anti diabetic medications for management of Type 2 diabetes. Further, FDC of SGLT2i + DPP4i + Metformin is currently first & only triple drug FDC considered rational for approval by US FDA. In chronic diseases like Type 2 diabetes, patients are required to consume multiple anti-diabetic drugs for prolonged periods of time. Moreover, in India, patients have to bear the drug cost on their own and so the price of the drug becomes a major factor that impacts treatment adherence. While the average daily cost of therapy of existing brands in the same drug category (when clubbed together for price comparison) is around Rs. 75, Glenmark's Remogliflozin + Vildagliptin + Metformin combination has been launched at a breakthrough price of Rs. 16.50 per tablet, to be taken twice daily; which amounts to Rs.33.00 as the per day cost of therapy.

This cost is atleast 53% lower than the other available SGLT2 & DPP4 combination drugs administered along with Metformin, in India. Glenmark's Remogliflozin + Vildagliptin + Metformin combination will significantly improve access and bring a world class and well researched combination product at an affordable price to patients in India. This combination has been approved by the DCGI, the drug regulator in India for adults aged 18 years and older with Type 2 diabetes to improve glycemic control when metformin and one of the mono-components of fixed dose combination do not provide adequate glycemic control, or when already being treated with separate doses of Remogliflozin, Vildagliptin and Metformin.



NARAYANA HEALTH FURTHER INVESTS IN THE ROBOTIC ASSISTED SURGERY PROGRAMME; DR. DEVI SHETTY INAUGURATES THE DA VINCI X SYSTEM AT NARAYANA HEALTH CITY BENGALURU



Narayana Health, one of India's leading hospital chains in the country, announced the installation of the latest robotic-assisted surgery (RAS) technology, the da Vinci X, by US-based Intuitive, at their Bengaluru centre- Narayana Health City. Dr. Devi Shetty, Chairman and Executive Director of Narayana Health inaugurated the new system in an event held at Mazumdar Shaw Medical Centre, Narayana Health City, Bengaluru, today. This is a significant step in making this advanced medical technology accessible to patients from across South India.

Commenting on this occasion, Dr Devi Shetty, Chairman and Executive Director – Narayana Health, said, "Narayana Health has always been at the forefront of the digital revolution in healthcare, focussed on finding newer ways to offer advanced and affordable healthcare to our patients. As part of this mission, we have introduced robotic surgery at multiple Narayana Hospitals across the country, and we have trained

one of the largest number of robotic surgeons in India. We are committed to making this mission come true every day and are proud to now install the latest da Vinci X technology making treatment more effective and less stressful for patients, care teams, and surgeons. The da Vinci X offers Higher Precision, Flexibility and Control."

Robotic surgeons of Narayana health have one of the largest experience in India in performing complex surgeries on pancreas, kidneys and pelvis especially for cancer patients. Today, with advanced surgical technologies like robotic-assisted surgeries with the da Vinci X system, surgeons are able to perform these procedures more efficiently with minimal post-operative care and faster recovery. Furthermore, this installation will help get better clinical outcomes across multiple surgeries that are performed from head & neck to pelvic procedures including thoracic, gastro-intestinal

and heart surgeries. This include partial nephrectomy, prostatectomy, radical cystectomy, hysterectomy, myomectomy, thymectomy, lobectomy, esophagectomy, colectomy and more.

The da Vinci X technology, known for its better patient outcomes, is also associated with lesser pain, less blood loss, shorter hospital stay, and even minimal post-operative complications in certain cases. In addition to that, da Vinci X brings across some innovative features including voice and laser guidance systems, a lightweight endoscope, and the same control console and 3D optics system that lets surgeons see into the patients as they operate the device. These benefits go a long way in enabling the surgeon and care teams in providing life-enhancing care for their patients.

Commenting on the association with Narayana Health, Mr. Mandeep Singh Kumar, VP & GM - Intuitive India, said, "We have a long standing association with NH, and it brings us great pleasure to have strengthened our relationship with them. We are encouraged to see an increasing number of healthcare providers ready to invest in the latest technology for robotic-assisted surgery, particularly the da Vinci, for its improved patient and clinical outcomes. The installation of the da Vinci X system at the NH Bengaluru facility demonstrates the healthcare community's faith in our technology and its ability to assist physicians treat without limitations. Our quadruple aim continues to focus on improved clinical items, better patient and care team experience, and reducing overall treatment costs."



MICROTEK IS READY TO PLAY A CRITICAL ROLE IN THE GROWTH OF THE HEALTHCARE MARKET



Our vision is to manufacture world-class healthcare products and to emerge as a dominant player in the healthcare products domain.



Mr. Subodh Gupta

Mr. Gupta is the Chairman & Managing Director of the company. Having earned his engineering degree (Mechanical) from BITS Pilani, he had started as a teacher with a meager salary of ₹1500 thereby growing step by step to lead a ₹1500 crores net worth of an empire called Microtek. Quickly realizing his inclination towards technology, he ventured out as an entrepreneur in computers and electronics peripheral products and has come a



SUBODH GUPTA
Founder & Chairman
Microtek International Ltd

long way since then. Mr. Gupta is regarded as a beacon of the technological times we live in. He has a special interest in singing apart from his proven mettle in management, communications, psychology, ontology, and minimalistic approach in lifestyle. He is whole-heartedly into a lot of philanthropic activities too. His inventive mind has led him to introduce many successful power electronic products. And he has been unstoppable since. His zest and cognizance towards social responsibilities drove him to create

Brief introduction About Microtek –Healthcare division

Microtek is a renowned player in the power product market of India and now the company is planning to further consolidate its position in the healthcare market, a segment it forayed into last year. The company entered the burgeoning healthcare market of India with the manufacturing of products including blood pressure monitors, oximeters, and thermometers, both digital and infrared. To meet the growing demand for oxygen concentrators, it has also begun manufacturing 'Made in India' oxygen concentrators last year. To further strengthen its position in the healthcare market, the company has recently launched Nebulizer as well. The company is looking to set up an offshore R&D center in Ireland, adding to the similar facilities it has presently, in Baddi (Himachal Pradesh), Vishakhapatnam (Andhra Pradesh), and Taiwan. Microtek is expecting to cross a turnover of Rs 200 crore in the healthcare segment by the end of the current financial year.

Microtek is a renowned name in the Inverter industry, how did you initiate the establishment of the company. How the journey so far?

The company was established in 1986 and since the company has never looked back. The company which started from one room office today works in 5 continents and has a presence across India and internationally. That showcases the achievement of Microtek which has

a revolutionary and ethical business setup. It was his belief and hard work that laid a strong foundation for what we see as the MICROTEK Empire. He has materialized his vision and has built a multi-billion-dollar enterprise with his charismatic and dynamic personality. Microtek is delivering a range of cost-efficient products to many countries (including India) like Dubai, South Africa, Kenya, Tanzania, Sudan, Nigeria,

become a household name in years. The journey has been challenging and enticing. We learned so much and have faced various challenges. We learned from our failures and have brought innovations to our product line. So far we have been producing Inverters, Online UPS, Line Interactive UPS, Stabilizers, Solar Products, E-Rickshaw Chargers, and all types of Wires and Cables, MCBs, Isolators, RCCB, Distribution



Boards, Multi-plug Adaptor & Spike Guard. Now the company has ventured into the healthcare segment as well.

Microtek is in many domains, what inspired you to dive into healthcare business especially in pandemic time?

Microtek has excelled in whichever domain it has ventured into, and the company is aiming the same for the Healthcare segment. It all started in pandemic only when we started producing oxygen concentrators in August 2021. We wanted to cater to the growing demands of the market and serve the country which was fighting against Covid-19. We were concerned about the growing cost of concentrators so thought to bring a product made by an Indian company for its country. The response from the market has been

Ghana, Philippines, Indonesia, Burma, Bangladesh, Pakistan, Afghanistan, Sri Lanka, Iraq Yemen, Saudi Arabia, Uzbekistan, Libya, Egypt, Angola, and Zimbabwe.

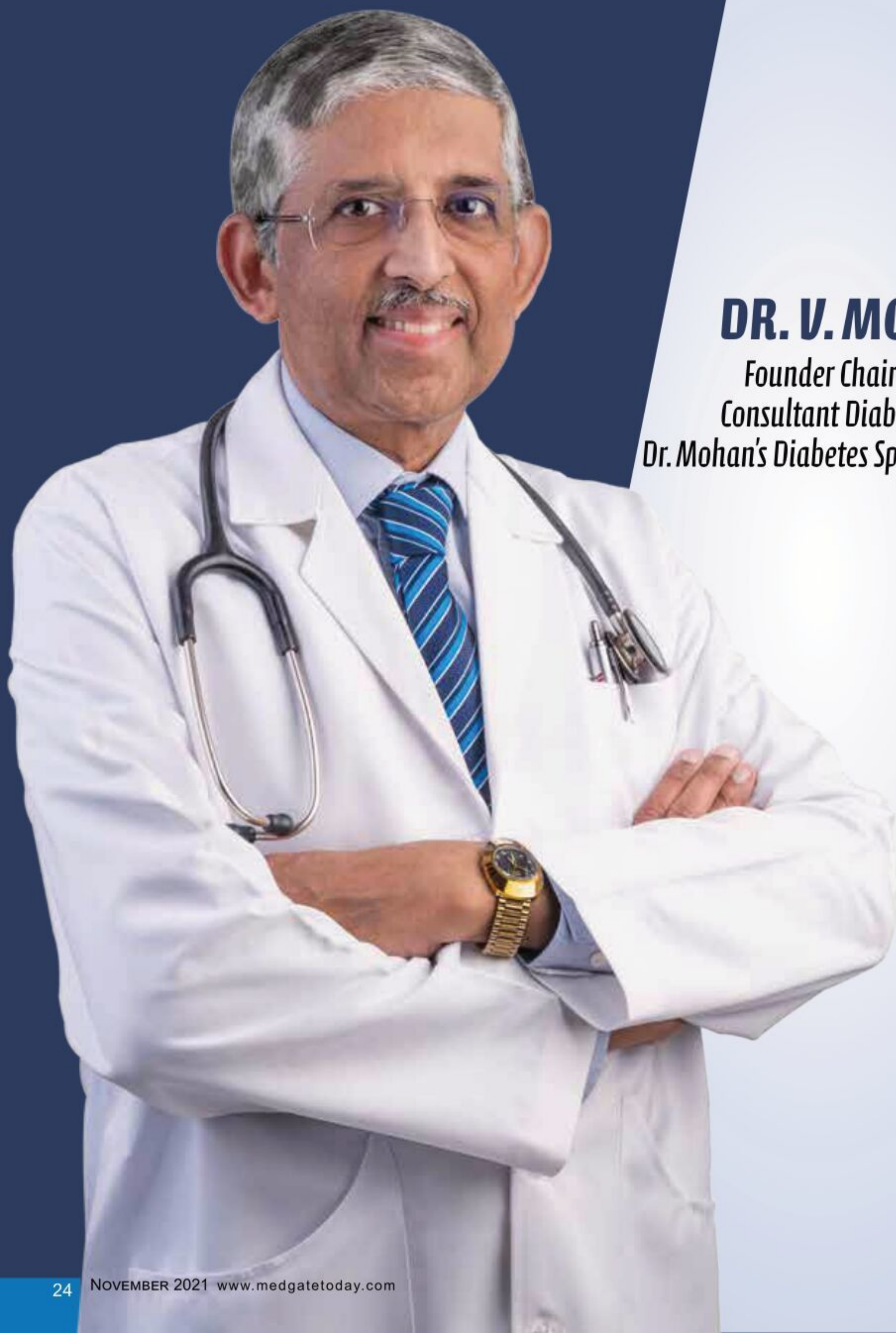
Under the masterly guidance of Mr. Subodh Gupta, Microtek has been recently awarded India's Most Trusted Brand Award, 2019. Microtek has also received the Best UPS Brand (Consumer)

overwhelming. The Oil and Natural Gas Corporation Limited (ONGC) alone ordered 10,000 oxygen concentrators that we delivered by the end of September 2021. That was a turning moment and we realize the challenges faced by the Healthcare sector and we decided to bring products that people will trust and rely on, which are value for money products. The significance of the sector has grown manifolds post the outbreak of the pandemic. At present we are holding talks with the government and private entities across the world for technology transfer that will allow us to manufacture healthcare products in their respective markets. The company is looking to set up an offshore R&D center in Ireland, adding to the similar facilities it has presently, in Baddi (Himachal Pradesh), Vishakhapatnam (Andhra Pradesh), and Taiwan. We plan to expand our portfolio of healthcare products with the manufacturing of blood glucose monitors, nebulizers, dialysis machines, and ultrasound monitors besides other products.

Your Vision, Mission of the company in the healthcare sector.

We are ready to play a critical role in the growth of the healthcare market. Our vision is to manufacture world-class healthcare products and to emerge as a dominant player in the healthcare products domain. Microtek is expecting to cross a turnover of Rs 200 Crore in the healthcare segment by the end of the current financial year.

Award in Digital Terminal Awards. Microtek Service is spread across India with more than 500 service points. The Microtek product line includes Inverters, Online UPS, Line Interactive UPS, Stabilizers, Solar Products, Healthcare Products, E-Rickshaw Chargers, and all types of Wires and Cables, MCBs, Isolators, RCCB, Distribution Boards, Multi-plug Adaptor & Spike Guard.



DR. V. MOHAN

Founder Chairman &
Consultant Diabetologist
Dr. Mohan's Diabetes Specialities Centre

DIABETES IN INDIA CHALLENGES AND SOLUTIONS

Dr. V. Mohan is an eminent Indian Diabetologist who has been working in the field of diabetes for over 40 years. He is the Founder Chairman and Consultant Diabetologist at Dr. Mohan's Diabetes Specialities Centre, which is an International Diabetes Federation IDF Centre of Education. He is also President and Director of the Madras Diabetes Research Foundation (MDRF), Asia's largest standalone diabetes research centre.

Dr. Mohan completed his undergraduate (MBBS) and postgraduate medical education (MD, General Medicine) from Madras Medical College, Chennai. He then worked for a year as a Wellcome Trust Research Fellow at the Royal Postgraduate Medical School and Hammersmith Hospital, London, U.K and later for a year as an Alexander Von Humboldt Fellow at the University of Ulm, West Germany. He was awarded a Ph. D. and later a Doctor of Science (D. Sc.) for his research on diabetes.

Deeply interested in research from his undergraduate medical student days, Dr. Mohan has published over 1,470 papers in peer reviewed journals. This includes 900 original articles, 370 review articles and invited editorials and 200 chapters in textbooks on Diabetes. He has received over 200 awards including the prestigious Dr. B. C. Roy National Award by the Medical Council of India and the Dr. B. R. Ambedkar Centenary Award (the highest award for Biomedical research in India) from the Indian Council of Medical Research (ICMR).

He was conferred with the Dr. Harold Rifkin Distinguished International Service in the Cause of Diabetes Award by the American Diabetes Association. Dr. V. Mohan is the first Indian to receive this award. Recently the Fellowship of the Royal Society of Edinburgh (FRSE) was conferred on Dr. Mohan.

For his extensive contribution in the field of diabetes care in 2012, Dr. V. Mohan was awarded the Padma Shri, the fourth highest civilian award by the Government of India.

The prevalence of diabetes in India is rising rapidly. In 2019 it was estimated that there are 77 million people with diabetes in India and in the next few years this will increase to 134 million. There are an equal number of people with pre-diabetes, which is the stage before diabetes. Three things are worrying about the rising prevalence of diabetes in India.

- Its no longer a rich man's disease. It has rapidly moved to the middle-income group and even to the poor. Indeed, the ICMR-INDIAB study showed that in the more affluent states and regions of India, including Tamil Nadu, Kerala and Chandigarh, poor people have more diabetes today than the rich people.
- The epidemic has now moved to rural areas where facilities for specialised diabetes treatment are not so readily available
- From being a disease of adults, especially, older age groups, it is now affecting the youth and even children. This means that if left uncontrolled, we will have a huge burden due to diabetes complications setting in at a very young age. It is unimaginable what the health of the nation would be,

if our youth and young adults develop blindness, kidney failure, heart attack or amputation of the feet. Luckily, all this is preventable by good diabetes control.

We have shown from research done at our centre that a long and healthy life is possible despite diabetes. In fact, many of my patients have lived for 60, 70 or more years with diabetes and are doing well. Many of my patients have celebrated their 90th birthday and some even their 100th birthday and are living without any complications of diabetes. This gives hope that a complications free diabetes life is possible.

How can this be achieved?

I would like to call this as the ABCD mantra.

A - stands for A1c or glycosylated hemoglobin, which should be below 7% ;

B - stands for blood pressure, which should be atleast below 140/90 Hg

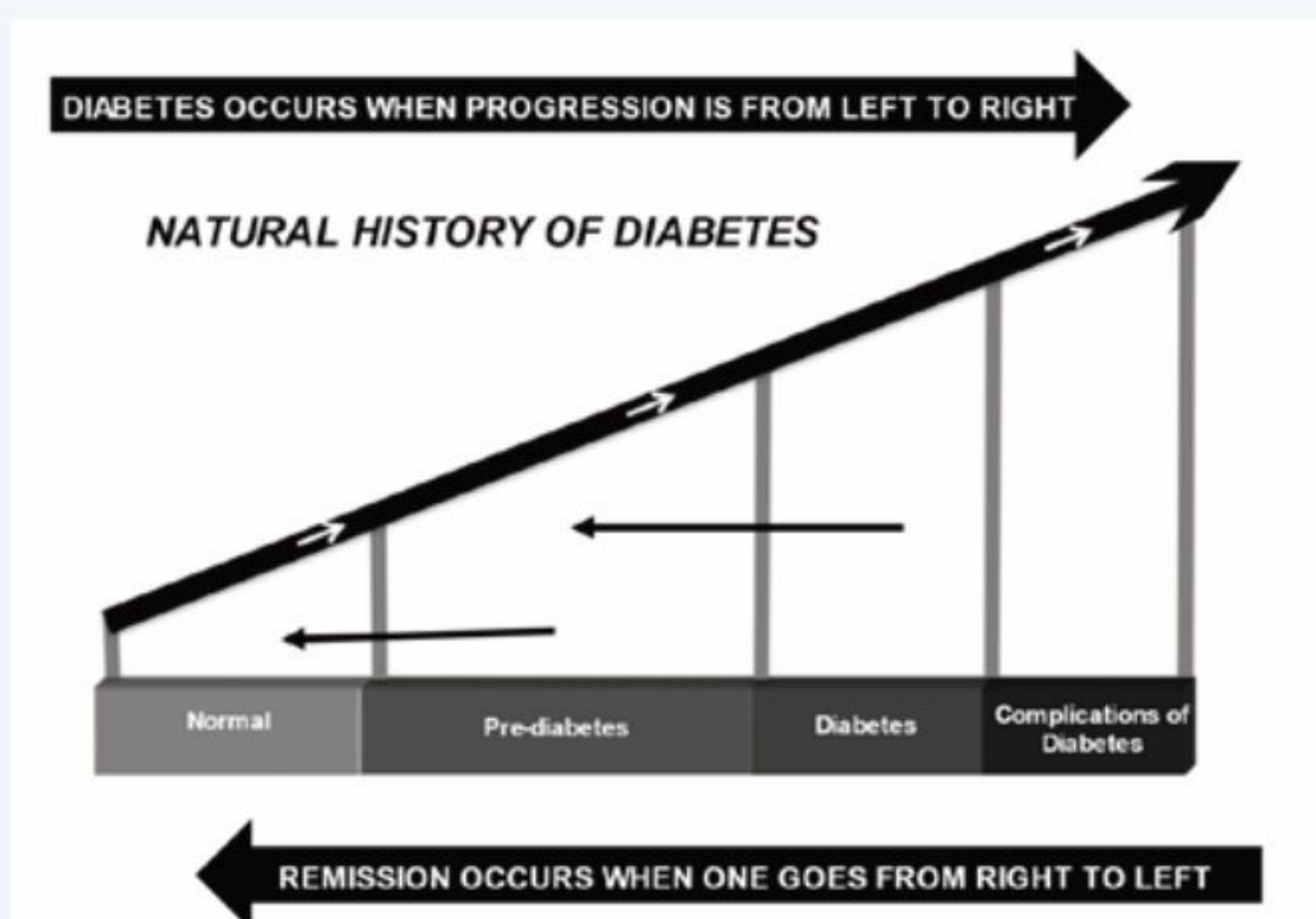
C-stands for cholesterol, i.e LDL (bad) cholesterol which should be atleast less than 100mg/dl

D- stands for discipline, is includes eating a healthy diet, having adequate physical exercise, reducing stress, no smoking or tobacco in any form and moderation or no alcohol intake.

I am confident that if this ABCD mantra is followed, people with diabetes can follow a long and healthy life despite diabetes.

What about 'Reversal of Diabetes'?

The figure below shows the natural history of diabetes.



As seen in the figure, in the natural history of type 2 diabetes, there is the stage of normal glucose tolerance (normal) which is followed by the stage of pre-diabetes and finally, diabetes. This progression to diabetes is well known. Less known is the fact that some people can also move in the opposite direction i.e., from 'Diabetes' to 'Pre-diabetes' and to 'Normal'. This is what is called as 'Reversal of Diabetes'.

Today, there is a lot of hype in the media, especially in the social media, that reversal of diabetes is possible for everyone and that one can go off all medications. While it is partly true, that some people with type 2 diabetes can achieve reversal of diabetes, the following is the truth about reversal of diabetes.

- Reversal of type 1 diabetes, fibrocalcific pancreatic diabetes and certain other types of diabetes is not possible.
- It is not possible for everyone with type 2 diabetes to achieve reversal. Reversal of diabetes is most likely to occur in some individuals and another ABCDE formula will help us to remember who are the people to likely achieve remission or reversal of diabetes.

Who is likely to achieve Diabetes Remission?

The **ABCDE mantra** summarises those with T2DM who are likely to achieve remission.

- A stands for A1c or HbA1c. - those who do not have markedly elevated A1c are more likely to achieve remission
- B - Body weight; Greater the body weight, greater the chances of achieving remission, as around 15 kg weight loss is needed to achieve remission
- C - C-peptide (a test to measure the amount of insulin produced in the body). The better the C-peptide

levels, the greater the chances for remission

- D - Duration of diabetes - Shorter the duration, greater the chance of remission
- E stands for Enthusiasm - High motivation is needed for remission

Where do we stand today regarding Reversal of Diabetes?

It is important for us to recognise those people who are likely to achieve remission of diabetes and encourage them to try to achieve it. Even if they achieve it, whether the reversal can be maintained for prolonged periods of time, is not very clear. People have to continue to be on very low-calorie diets for years together. Whether taking a 800 calorie diet lifelong is sustainable and whether even if this is done, the diabetes will remain in the reversal or remission stage is something which needs more research.

The other myth which has to be removed from the public mind is that the allopathic medicines are dangerous and will produce side effects in the long run. After 50 years of experience in this field, I would like to categorically state that antidiabetic drugs are safe and can be continued for decades without any side effects. Needless to say, proper and judicious use of these drugs by experienced doctors is important.

'Once on insulin, always on insulin'- is this true or not ?

In people with type 1 diabetes or those with long term type 2 diabetes or those with complications, is probably true that insulin would have to be continued. However, there are also several instances where insulin is used only for a short period and it can be withdrawn later. Examples of these are insulins used before and during surgery, insulin given when steroids are used, e.g., for treatment of severe Covid 19, in acute situations like acute myocardial infarction in severe infections etc. In all these situations, once the need is over, the insulin can definitely be stopped.

What are my final take home messages?

- I would like to tell you that many people with diabetes whom I treat, are healthier than those without diabetes.
- If you have a strong family history of diabetes, it is possible to prevent diabetes by identifying the stage of prediabetes. It is at this stage that reversal of diabetes is eminently possible and all attempts must be made to reverse diabetes at this stage.
- Regularity of follow up with at least 3 – 4 visits per year to the diabetes centre is necessary to ensure that people with diabetes have long and healthy life. This aspect must be emphasised to people as they tend to dropout saying 'I feel absolutely fine. Why should I go for a check-up?'. This can be a great mistake and can prove costly in the long run.
- I would like to say that treating diabetes is not costly, but, not treating diabetes can be very costly, because it can result in diabetic complications which are very expensive to treat. For eg., if one develops end stage kidney disease, the cost of dialysis or transplantation is so high, that less than 5% of Indians can afford these treatments. On the other hand, by controlling diabetes well, almost all the complications of diabetes can be avoided. 'A stitch in time saves nine', goes the proverb and this is very true in the case of diabetes 'where an ounce of prevention is better than a pound of cure'.

(Dr. Mohan is Chairman of Dr.Mohan's Diabetes Specialities Centre, a chain of 50 diabetes centres in 32 cities of India. Over 540,000 persons with diabetes are registered across these centres, which is an International Diabetes Federation Centre of Excellence in Diabetes. The Madras Diabetes Research Foundation headed by Dr.Mohan is Asia's largest standalone diabetes research foundation. Dr.Mohan has published over 1400 research papers and has over 158,000 citations and an h-index of 139. Appointments can be booked by calling 8939110000 or visiting www.drmoahans.com)

DR. MOHAN'S DIABETES SPECIALITIES CENTRE

Dr. Mohan's Diabetes Specialities Centre (Dr. Mohan's) is a diabetes speciality chain founded in the year 1991 and headquartered in Chennai, Tamil Nadu. Dr. Mohan's is today's India's largest and the most trusted diabetes specialities centre, with 30 successful years of experience in the diabetic care service and research. Over the years, Dr. Mohan's has expanded its service to several locations across the country.

Today Dr. Mohan's has completed 25 years of excellence in diabetes healthcare and research. Over 8 lakh patients with diabetes have been registered at its centres across the country. Every Dr. Mohan's centre specialises in Total Diabetes Care, Diabetes Eye Care, Diabetes Foot Care, Diabetes Cardiac



Care, Preventive Care, Diet counselling, Home Care, Genetic profiling of type of monogenic diabetes and Precision Diabetes. equipped with state-of-the-art operation theatres, ICU & in patient wards, each centre offers holistic diabetes care in terms of management of severe diabetes cases, diabetes emergencies, foot and other surgeries, treatment of cataract, retinopathy and other eye problems related to diabetes, non-invasive laparoscopic surgeries, bariatric surgery, physiotherapy etc.

Specialising in evidence-based treatment based on Dr. V. Mohan's (Founder Chairman) 40+ years of research experience, Dr. Mohan's individualises every patient's treatment based on their genetic make-up, their sugar control abilities and food habits.

400 patients crossing the age of 90 without succumbing to the complications of diabetes is testimony to Dr. Mohan's dedication to the patients' long and healthy life. Now with more than 8 lakh patients under their care, Dr. Mohan's mission is to prevent the complications of diabetes with the help of the best diabetologists in every centre.

Dr. Mohan's has quite a few firsts to its credit when it comes to diabetes care...

- First in India to use Bio-Rad Variant II apparatus for accurately measuring glycated haemoglobin (HbA1c)
- First centre in Asia with facilities to do grading of retinal photography according to the Wisconsin (ETDRS) classification system
- World's First ISO 9001-2000 Certified Diabetes Centre



KETOSIS - PRONE DIABETES [FLATBUSH DIABETES]

**DR ADARSH K S, CONSULTANT - DIABETES
& ENDOCRINOLOGY, MANIPAL HOSPITALS
OLD AIRPORT ROAD**

Background

In 1987, an unusual type of diabetes was detected which had initial presentation similar to type 1 diabetes with high blood glucose levels and ketosis or diabetic ketoacidosis [DKA] but followed by long-term remission and insulin-free near-normal glucose levels which is now being recognised as an important clinical entity in sub-Saharan African, Asians and Hispanics as ketosis-prone diabetes or Flatbush diabetes.

Aetiology

The cause of this form of diabetes is relatively in the dark. classic markers of autoimmune diabetes are negative, and therefore it has been classified under idiopathic DM-1 or DM-1B by the World Health Organization and the American Diabetes Association as opposed to classic autoimmune DM-1 or DM-1A. However, there is growing evidence to consider this syndrome as ketosis-prone DM-2, including older age at onset and genetic predisposition.

Clinical Features and Symptoms

- At the onset of the disease, insulin secretion in response to glucose is low
- Next, recovery is associated with a restoration of insulin secretion in most patients
- This indicates that a sudden and changeable phenomenon precipitates the disease in patients otherwise predisposed to DM-2.
- Affected patients with ketosis-prone diabetes are overweight, have family members with diabetes, absence of autoantibodies.
- Their initial symptoms develop suddenly, within only a few days to weeks of symptom onset like increased urination, excessive thirst, and drop in body weight, and there seems there is no reason for this metabolic disorder.
- Several reports have indicated that this clinical presentation affects 20% to 50% of newly diagnosed Black and Hispanic patients with diabetic ketoacidosis (DKA).

Definition

Ketosis prone Diabetes is defined by a spectrum of uncommon diabetes syndromes characterized by presentation with diabetic ketoacidosis (DKA), due to severe β -cell dysfunction and negligible islet cell autoimmunity, This can result in a period of insulin-independent glycaemic control following the index episode of DKA.

Metabolomics

Studies on metabolomics and stable isotope kinetic



Dr Adarsh K S
Consultant – Diabetes & Endocrinology,
Manipal Hospitals

examinations of patients with this form of KPD have suggested an increased rate of metabolic activity of branched-chain amino acids (BCAAs), resulting in increased levels of ketones and a slowing down of tricarboxylic acid cycling.

It has been shown that altered BCAA metabolism plays an important role in the development of type 2 diabetes and that accelerated leucine catabolism, fuelling ketone production, distinguishes KPD patients.

Management of Ketosis-prone Diabetes

Patients presenting with diabetic ketoacidosis must be treated according to established standards of DKA protocol, Evaluation for beta-cell secretory reserve and islet cell autoimmunity must be done after 1-3 weeks to minimise the effects of glucotoxicity. In patients with negative antibody and preserved beta-cell function gradual transition to insulin sensitizers such as metformin can be done thereafter with regular monitoring of glycemic control.

Conclusion

Ketosis-prone diabetes (KPD) is a heterogeneous syndrome characterized by the presence of diabetic ketoacidosis (DKA) in patients without the typical clinical phenotype of autoimmune type 1 diabetes. Early beta-cell dysfunction is likely to be a primary defect in the pathophysiology of diabetes, regardless of "type." Syndromes of KPD are increasingly recognized worldwide. They present challenges to both clinicians and researchers but also offer the prospect of revealing novel mechanisms of beta-cell dysfunction relevant to common forms of diabetes.

JUVENILE DIABETES - CAUSES, SYMPTOMS AND TREATMENT

World Diabetes Day is celebrated on 14th November. Theme for 2021 is “access to diabetes care”, on the occasion of the centenary of the discovery of insulin, the centre stone in the treatment of Juvenile Diabetes (JD).

Diabetes Mellitus is a condition in which the body cannot make enough insulin or cannot use insulin normally which leads to abnormally high blood sugar or glucose (BG).

Type 1 Diabetes Mellitus (T1DM) seen in children and young adults, was previously called as Juvenile Diabetes. T1DM, a less common form, is seen in about 5-10% people with diabetes.

CAUSE:

The hormone “Insulin” produced by beta cells of the pancreas helps to move glucose into body’s cell and tissues for use as fuel or energy. JD is an autoimmune condition in which beta cells lose their ability to produce Insulin for maintenance and functioning of BG. This occurs as the body’s immune system produces antibody which destroys beta cells after a trigger

received from some environmental factors (like virus). Without insulin, blood glucose builds up in the bloodstream as it cannot enter the cells. This high BG can damage the body and cause symptoms and complications of diabetes. It is not inherited, as 90% people do not have any family member or relative with this condition. But certain genetic factors can predispose a person to develop JD. It is not caused by any diet or lifestyle habits.

SYMPTOMS:

This process can go on for months or years. Symptoms can develop in few weeks/months or appear suddenly. Some symptoms are subtle and similar to those of other health conditions. They include:

- Increased thirst.
- Frequent urination (Bed-wetting in a toilet-trained child).
- Extreme hunger associated with weight loss.
- Later loss of appetite.
- Blurred vision.



Dr Ruchi Parikh
(Consultant Paediatric Endocrinology)
SRCC Children’s Hospital managed by
Narayana Health (Mumbai)

- Nausea, vomiting.
- Abdominal pain.
- Fatigue.
- Irritability, mood changes.
- Frequent infections of skin, urinary tract or vagina.
- Dry mouth and dehydration.
- Fruity odor of breath.
- Fast breathing.

Signs of an emergency include:

- Confusion.
- Rapid breathing.
- Fruity smell to breath.
- Abdominal pain, vomiting.
- Unconscious.

TREATMENT:

There is no prevention or cure for JD. Management includes multidisciplinary teamwork between the child, parents, health care team (Pediatrician, Pediatric Endocrinologist, trained Nutritionist, Diabetes Educator or Counselor), other family members, teachers and friends.

1) Insulin from pancreas must be replaced with daily insulin injections or an insulin pump to keep the BG level within normal range.

2) Meal planning (timing, carbohydrate counting) to maintain target BG levels. As JD is not caused by diet, children should continue healthy, balanced meals which will promote their growth and development. A well-trained nutritionist can provide correct guidance.

3) Regular home monitoring of BG.

4) Right amount of sleep and daily exercise. Monitor BG levels before, during and after the activity and plan meals/insulin accordingly.

5) Identify signs of high or low BG and manage appropriately.

6) Tailored treatment plan for sickness or severe low BG.

Key points:

- Regular follow up with the healthcare teams to manage daily BG within a safe range, screen for other autoimmune conditions and monitor/prevent complications (JD may affect eyes, kidneys, nerves, heart and blood vessel).

- JD is a long-term condition. With the administration of insulin along with other management activities, these children can lead active and healthy lives.

- Parents should treat their child as a normal child with diabetes management as one aspect of their daily life.

- Child should always carry an identifying card or bracelet with the condition and emergency numbers mentioned.

- Families should be encouraged to participate in diabetes camps and support group.

MEDIKABAZAAR IS BOLSTERING INDIA'S DIAGNOSTIC ECOSYSTEM WITH BODITECH MED'S IN VITRO DIAGNOSTICS SOLUTIONS

VIVEK TIWARI
CEO
Medikabazaar



In addition to therapeutics and vaccines, diagnostics is also an essential tool for reducing and alleviating the burden of diseases. However, in many parts of the world, some of the most treatable diseases and conditions remain health burdens due to a lack of appropriate or available diagnostics.

In Vitro Diagnostics (IVD) has for long remained an underutilized and undervalued segment, where the focus has largely remained on treatment over diagnostics, especially in India and other low and middle-income countries. There has also been an acute lack of awareness of the role of early and accurate diagnosis in disease management.

However, the onset of the COVID-19 pandemic generated massive awareness on the importance of timely and reliable diagnosis. But even with the rapid advancements, a recent report by The Lancet Commission on Diagnostics noted that nearly half (47%) of the global population lack access to basic

diagnostics for many common diseases such as diabetes, hypertension, HIV and tuberculosis.

AFIAS: A Path-Breaking Solution

Accessibility to diagnostic solutions and facilities remains a major challenge as a vast portion of these are highly centralised and often limited to expansive metropolises, depriving people living in tier-II, III and IV cities along with rural areas. With Medikabazaar's exclusive collaboration with Korea's leading Point of Care testing and In-Vitro Diagnostic company, Boditech Med Inc, we are looking to solve this widely prevalent problem.

The partnership would see Medikabazaar distributing Boditech's automated desktop analyzers such as the AFIAS 1 and AFIAS 6 immunoassay analyzers with a range of reagents and diagnostic kits. These will provide diagnosis of COVID-19 as well as diagnostic solutions for cardiac, cancer, diabetes,



hormonal and other infections such as dengue, rota and adenovirus.

The AFIAS-1 is a compact immunoassay analyzer with an all-in-one cartridge system. It has a single channel lateral flow immunoassay platform and uses disposable cartridges that include all the reagents necessary for the test. Small, compact and light, it offers ease of use with proprietary C-tips for fingertip blood and quick test results with reliability. The AFIAS-6 is an automated Immunoassay analyzer with the all-in-one cartridge system that is uniquely integrated sample-to-answer system. It allows 6 parallel tests of differing parameters with fast turn-around and high sensitivity rivalling those of the full-featured systems in commercial labs. It is US FDA 510(K) cleared.

Medikabazaar will distribute these diagnostic solutions across India, reaching the remotest corners of the country by utilising our robust, comprehensive and extensive supply chain, thus contributing to significantly improving the nation's testing and diagnostic ecosystem. Point of care testing will help in making rapid clinical decisions for monitoring, treatment and making operational decisions as to allocation of resources, and also save time and lead to long term societal and economic benefits.

AFIAS's Point-of-care testing is a one-of-its-kind diagnostic solution that maximizes user convenience by offering a wide range of immunological test parameters, just with a finger-prick based sample. Our partnership with Boditech will be another step in achieving decentralisation of testing facilities. With Medikabazaar's extensive reach in tier-II, III and IV cities, more than 1.5 Lakh medical practitioners and over 50,000 medical establishments will benefit from AFIAS's high-speed results.

MEDIKABAZAAR

partners with Korea's

BIO • TECHNOLOGY

boditech

for range of diagnostic solutions

Powering Accurate & Actionable Results with Point of Care Immunoassay Analyzers



AFIAS - 6

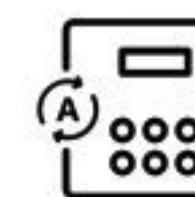
Versatile Desktop Immuno-Analyzer



AFIAS - 1

Doctor's Reliable Associate

Key Features:



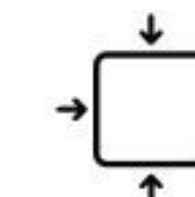
Automated POCT system with All-in-One cartridges



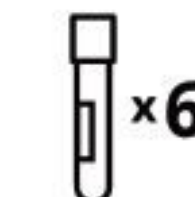
Easy to use with proprietary C-tips (for fingertip blood)



Quick test results with reliability



Quick test results with reliability



Up to 6 different parallel tests

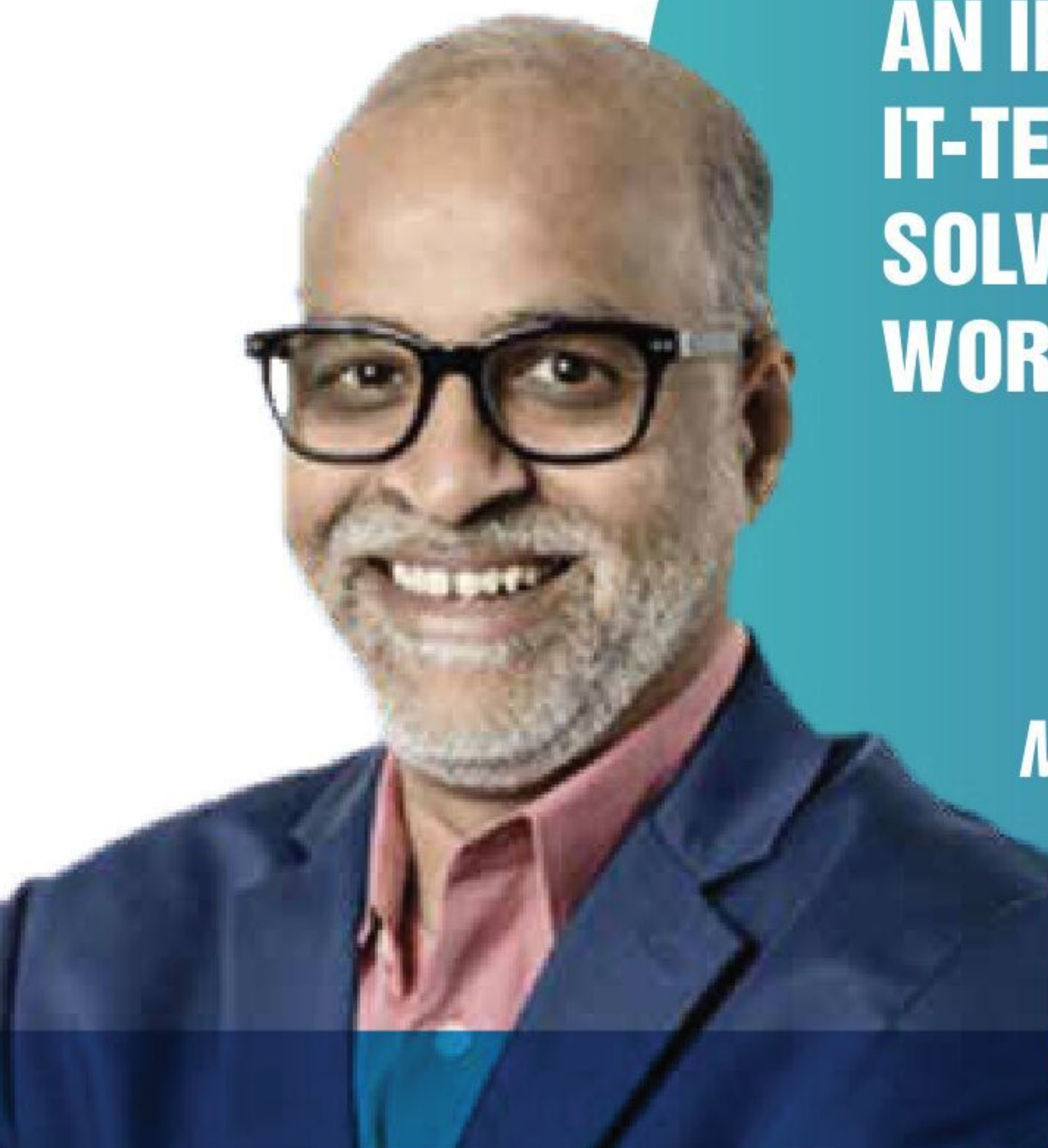


Up to 6 different parallel tests

SHOP NOW

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QURHEALTH: AN INNOVATIVE IT-TECH SOLUTION SOLVING REAL- WORLD CHALLENGES



Mr. Ravi Kunduru
Founder and CEO
QurHealth

India, which is already known as the world's diabetes capital, is expected to become the next capital of osteoarthritis by 2025. With a population of 1.38 billion people, India faces tremendous healthcare challenges. These have been exacerbated by the pandemic that swept the globe and had a profound impact on how businesses operate and how people live and manage their health. On the other hand, we also saw the pandemic throwing the healthcare sector into a state of shock, emphasizing the need to move to digital health and develop more sustainable, scalable solutions that

can bring all players in the ecosystem together.

Against this backdrop, here are some real-world challenges that demand our attention. According to the Asia-Pacific Personalized Health Index, in India, personalized healthcare services are concentrated largely in urban areas. The lack of adequate infrastructure as well as manpower make providing personalized healthcare services a major challenge.

75% of the patients worldwide have at least 2 comorbidities during their lifetime like Cardiovascular disease,

Chronic Kidney Disease, Hyper Tension, Peripher Neuropathy and Retinopathy. All these conditions only worsen as time goes. So it's essential to keep track of a patient's vitals, know their symptoms ahead of time for early intervention and comorbidity detection, and monitor and manage a customer's chronic illness or medical condition that requires ongoing care. However, due to lack of resources, the healthcare industry faces a tremendous challenge in decreasing the harmful impacts of chronic diseases and addressing the issues of patients.

To address these issues, our hospitals

require scalable, cutting-edge healthcare IT solutions rooted in knowledge and analytics, big data, and artificial intelligence. This will enable the providers to address proactive disease situations and give precise, efficient, and effective interventions at the correct time in a patient's care. In addition, it will save billions of dollars and millions of lives around the world.

Recognizing this, we launched QurHealth as a provider 1st health tech company on a mission to redefine personalized healthcare.

Our goal is to empower caregivers, doctors, and hospitals, improving patient quality of care, patient engagement and patient education for a super proactive care coordination at scale. As part of QurOne- India's 1st patient care concierge program, we have developed a provider-centric patient engagement solution based on emerging technologies such as conversational AI and predictive analytics, in order to provide proactive and personalized healthcare services. Our QurBook mobile app provides patients with an easy-to-use interface for scheduling appointments, sharing reports, making online payments, and

receiving teleconsultations from their trusted doctor.

We are working on a wide range of applications across the healthcare spectrum with an aim to revolutionize the way diagnosis and treatments are

Recognizing this, we launched QurHealth as a provider 1st health tech company on a mission to redefine personalized healthcare.



specialities using their smartphones and Alexa, and "QurOne," a super flexible care concierge program with 1000 unique care plans and therapeutic diet plans for the patients. This allows medical experts to deliver high-quality care and guidance to patients.

QurOne program enables each patient to have a personalized healthcare provider offering real-time care management and remotely monitors their health status, proactively saving lives.

Also, access to timely data and diagnosis has proven to help combat issues associated with chronic health conditions, as it enables healthcare providers with actual data to identify the problems before they become critical and allows early intervention.

When it comes to tackling rising healthcare issues and expenses associated with it, prevention plays a critical part, as it is preferable to handle issues at an early stage before they become critical. Through QurOne care concierge program, we are invariably making this possible across India.



“

Lack of adequate pure medical oxygen lead to fatalities, many of which could have been avoided by effectively managing the supply of medical oxygen.”

”

MR. MARK MATTHEWS

COO,
NF Healthcare India

Mr. Mark Matthew comes with an overall work experience of 20+ years having worked in IT industry and was associated with various Hardware and Software companies and promoted product and services of IBM, Microsoft and Epson in varying roles of Sales and Marketing.

He has rendered his services as a software presales, sales and training at CRIS, BEL and DRDO labs. He is a certified Cloud and SDLC specialist. He has also been instrumental in driving cloud business with various state Govt organizations.

Mr. Matthew has been with NF healthcare since last 2.5 years and has been instrumental for creating and driving the overall business operations for the company in India, right from setting up of the office, team building, creating an effective channel network and creating a brand recall to establish in this competitive market.

WHY EFFECTIVE MANAGEMENT OF MEDICAL IN INDIA IS A CHALLENGE AND HOW CAN THIS BE FIXED



Medical oxygen or rather the lack of adequate supply of it, led to major fatalities in April-May 2021, when India was hit by a brutal 2nd wave of the pandemic. Not very long ago, social media handles, NGO's, religious organisations and even local communities came together to co-ordinate and facilitate availability of medical oxygen for patients, across the country. Typically, in cases of lung infections and inflammation, human lungs fail to absorb atmospheric oxygen and hence require pure, liquified medical oxygen for supported breathing, so as to keep all vital organs and functions, intact. Unfortunately, the second COVID wave impacted the lungs severely, raising the demand for medical oxygen doubled, within a period of days!

Lack of adequate pure medical oxygen lead to fatalities, many of which could have been avoided by effectively managing the supply of medical oxygen. As per the current method, medical oxygen is sourced by both private and government hospitals through the market, which otherwise suffices the non-pandemic demand. However, during the pandemic, India required about 8000 metric tonnes of medical oxygen per day, compared to the 4000 metric tonnes that it was already producing - almost double of the supply. Although a significant percentage of industrial oxygen was diverted towards medical oxygen, and exports were banned, it was still not enough to manage the scale and rapid progression of fatalities resulting from lack of medical oxygen -that could have been prevented with better preparedness and infrastructure.

Decoding these further, listed here are a few points, which needs to be understood in order to make amends and avoid a repetition of the tragic past:

Lack of Investment in Infrastructure: While healthcare infrastructure in India has been steadily improving over the years, most of it is limited to select private and government aided hospitals in key metropolises of the country. The state of critical care infrastructure is further limited to 10-20% of overall hospital infrastructure investments and again, restricted to select state-of-the art medical facilities. Lack of investment in ICU beds with oxygen supply, and ventilators, was a major factor that determined the a patient's accesses to medical oxygen - a factor that needs to be immediately addressed.

Ineffective Medical Supply chains: This is another key aspect that needs to be understood. Given that most medical oxygen is supplied through external manufacturers and dealers, ensuring effective logistics and overall medical supply chain infrastructure becomes crucial for timely delivery of pure medical oxygen. However, transportation brings challenges like delays, chances of leakage and contamination, higher costs and risks of mis-handling the cylinders by untrained staff.

Scalability: The high dependency on external manufacturers and effective medical supply chains for transportation, there

are higher chances of a delay and deficit in the demand and supply. Under such circumstances, a rapid rise in demand can be extremely difficult to meet, especially in urgent and critical cases, resulting in a failure to deliver. Scalable and effective solutions for providing medical oxygen to patients not only in times of urgency but also to build a preparedness, is important. And the responsibility for this lies as much on the public sector facilitators as it does with private and public hospitals.

Technology enabled solutions: Even as tech adoption across sectors continues to disrupt the way we live and work, healthcare technology adoption has so far been limited to patient engagement, virtual consultations, data analytics, diagnostic infrastructure and robotic surgeries. It is high time that tech adoption should also extend to designing smarter medical devices and tech enabled solutions that can help build stronger and smarter devices that can enhance the medical infrastructure, making it reliable, scalable, effective.

While the above factors point to the systemic challenges of medical oxygen supply in India, they can be easily navigated through a strategic plan on making hospitals and medical care centres self sufficient with a smart, affordable, scalable and reliable source of generating pure medical oxygen on the premise. Although aspirational, this approach could help in not only addressing the volatile supply needs but will also help reduce the overall cost of medical oxygen, avoid contamination, eliminate delays and thus reduce the rate of avoidable fatalities, and lastly, strengthen the overall critical care infrastructure across the country.



HEART DISEASES AND STROKE ARE A LEADING CAUSE OF MORTALITY IN INDIA

There is a need to raise awareness on the importance of lifestyle modifications as a preventive measure

DR. ASHWANI MEHTA

Senior Consultant
Sir Ganga Ram Hospital

According to estimates, cardiovascular diseases (CVDs) are likely to cause 2.1 million deaths and 10.9 million hospitalizations respectively, in India, in 2021. CVDs like heart disease and stroke are the outcome of an unhealthy and sedentary lifestyle. There is a need to raise awareness on the importance of leading a preventive lifestyle and timely diagnosis of the condition especially in people who may be susceptible.

Deaths from heart disease and stroke are due to the progressive blocking of blood vessels with a build-up of fatty substances and cellular waste (plaques). When plaque builds up in the arteries over time, it can trigger angina or a heart attack.

Speaking about this, **Dr Ashwani Mehta, Senior Consultant, Sir Ganga Ram Hospital, Delhi**, said, "Age and lifestyle choices often lead to the thickening of blood vessels and make them stiff. This further restricts the flow of blood in the body causing a condition called atherosclerosis. The build-up of fatty substances and plaque can block blood vessels or trigger a blood clot triggering angina or a heart attack. When this occurs in the arteries that supply blood to the brain, the former become narrow and block it, leading to a stroke."

Adding further, Dr Ashwani Mehta, said, "The condition of our cardiovascular system is dependent on the kind of lifestyle a person leads. Although family history of heart diseases and age do have a part to play, many of these conditions can be prevented by eating healthy, regular physical activity, maintaining a healthy weight, keeping a check on vitals such as blood pressure, and avoiding habits such as smoking and drinking."

In case a person suffers from



complications such as a heart attack, one of the popular treatment option is angioplasty. This treatment minimizes or avoids damage to the heart muscles and also helps restore and improve blood flow in case of blocked arteries. In this process, a long, thin tube (catheter) is inserted into the narrowed part of the artery. Later, a thin wire mesh (Stent) mounted on a deflated balloon is passed through the catheter to the narrowed area. The balloon is inflated, compressing the deposits against the artery walls, and leaving expanded stent embedded in the artery. Nowadays, there are drug-

eluting stents which release medication to help heal the stressed arteries post procedure. There are USFDA-approved, drug-eluting stents today, which are well-studied for safe use in patients with complications or those who might have to interrupt medication a month after angioplasty.

Some tips to prevent heart diseases and stroke

- Avoid smoke or smoking – smoking is a major risk factor, with nicotine directly narrowing your blood vessels.
- Eat healthy foods – especially avoid processed foods.
- Exercise and move more – speak to your doctor about exercise suitable for your needs.
- Maintain a healthy weight – exercising and eating healthy food will make this easier.
- Manage stress – try muscle relaxation, breathing techniques or visualisations.

"Any and all the Information provided in the article are independent views expressed by **Dr Ashwani Mehta, Senior Consultant, Sir Ganga Ram Hospital, Delhi** for general overview and educational purposes only."



SEDENTARY LIFESTYLE LEADS TO A SURGE IN ORTHOPAEDIC PROBLEMS IN INDIA

DR. VIRAL GONDALIA

Consultant Orthopedic &
Joint Replacement Surgeon
Shalby Orthopedics Centre of Excellence
Ahmedabad

“People who maintain healthy body weight and are physically active, with flexible joints and strong bones, have the best chance of preventing joint discomfort.”



Everyone aspires to live a healthy and well-balanced lifestyle. For many, enjoying a fast-paced lifestyle and balancing between health and work can be challenging and may result in living a sedentary lifestyle. A sedentary lifestyle (sometimes known as "sitting illness") is one in which a person does not engage in regular physical exercise. A typical sedentary individual of working age may have a sedentary employment that keeps at the desk all day. To live a healthy life, one must get out of sedentary habits and expose themselves to morning sunlight and engage in exercise, running, cycling, and other physical activities. Due to lack of this coupled with a lack of calcium and vitamin "D" deficiency, countless individuals are falling prey to joint problems and difficulty in mobility. Even the rise in cases of arthritis can be attributed to the increase in sedentary lifestyle. Coupled with sedentary lifestyle, drinking, smoking and being overweight make people prone to develop arthritis of knees, hips and shoulders.

At Shalby Orthopedics Centre of Excellence we have developed the concept of 3 F Screening for arthritis of the knees, especially in those with inactive lifestyle. This is : Females, Fatty and Forties. Overweight women in their forties are recommended orthopedic consultation, digital x-ray of knees, serum uric acid, sugar and Vitamin B12 & D3 tests.

Sedentary lifestyle can lead to many orthopaedic problems. People most commonly report knee pain, followed by shoulder and hip discomfort. Joint pain, on the other hand, can strike anywhere on your body, from your ankles and feet to your shoulders and wrists. Age-related osteoarthritis, auto-immune rheumatoid arthritis, or damage to the ligaments, bursae (lining between the bone and soft tissue), or tendons around the joint can all be causes of joint pain. Bone and joint health can be maintained by eating nutritious foods and exercising regularly. If one is experiencing joint discomfort, it is critical to consult an orthopaedic doctor to get it assessed and treated as soon as possible, in order to avoid future complications.

People who maintain healthy body weight and are physically active, with flexible joints and strong bones, have the best chance of preventing joint discomfort. Although the ageing process cannot be reversed, it can be delayed. And the key is to keep your muscular strength up to par with your exercise level. Orthopaedic patients face two consequences: Joint Discomfort/Stiffness and limited mobility and movement. This makes it difficult for individuals to carry out their everyday activities such as walking, cooking, and other home duties. Fever, lymph node swelling, weight loss, weariness, inability to perform day to day activities, difficulty in walking, and poor sleep are all symptoms of arthritis, regardless of the type.

Here's how to tell the difference between regular pain and early signs of arthritis:

- Joint pain, stiffness, and swelling, as well as a reduction in range of motion.
- The skin around the joint is red.
- Fever is commonly accompanied by unexplained joint pain.
- Difficulty performing daily tasks owing to joint pain
- Joint pain not responding to pain relievers.

It's critical to make lifestyle changes such as eating properly, maintaining a healthy weight and exercising regularly as these are ways of avoiding knee problems. Aside from that, it is equally critical to maintain healthy body weight. One can do so by adopting the below lifestyle changes.

- Attempt to keep injuries to a minimum.
- Maintain good posture and avoid wearing high heels.
- Monitor your vitamin B 12 and vitamin D 3 levels on a regular basis, with the latter being slightly more crucial in the case of arthritis.
- Eat a Healthy Diet that includes nuts and seeds such as walnuts, cashew nuts, and pistachios. Include extra vegetables in your diet, such as garlic and onions.
- Curcumin is a good source of antioxidants and helps to relieve arthritis related stiffness
- Eat jowar, nachani, raagi, and bajra-based rotis. These are excellent for arthritis-affected joints since they contain nutrients that reduce discomfort.
- High Calcium diet like Eggs, Dates, Soybean, Pulses & Milk and Milk Products

It is high time that people recognize the need for physical activity. With many unknowingly adopting a sedentary lifestyle in the aftermath of the pandemic, its impact on the health challenges is increasingly surfacing among the population at an alarming rate. Lack of mobility can negatively hamper physical agility and may give rise to impaired bone health. Healthy bones are necessary for effective mobility and physical fitness has a clear effect on bone health and enjoying a healthy lifestyle.



NOT ALL SUGAR-FREE DRINKS ARE HEALTHY - HERE'S HOW TO SELECT THE RIGHT SUGAR-FREE DRINK FOR YOU! - Dr. G S Bhandari

In the last decade, we witnessed a rise in conversations around fitness across age brackets and geographies. As more & more people took to social media to share accounts of their daily lives and milestones, an increasing number of people also began to journal their 'flab to fab' stories, workout plans, meal plans, fitness hacks and lots more. Riding this growing fitness wave, brands took to the market with new health products including alternatives to ingredients that induce health problems when consumed in excess amounts, such as sugar.

Seeking the alternative

The natural sweeteners market is estimated to reach USD 27,940 million by 2026, as per a recent report. This surge in demand for boycotting sugar or consuming alternatives like jaggery sugar, maple syrup, honey, coconut sugar and others, is viewed to accelerate weight loss and maintain a healthy body. However, before you decide that sugar is detrimental to your health – it is important to educate yourself first about its nutritional facts versus what is important for your body.

Sugar on its own is not harmful for our bodies – yes, that's right! It is the way we consume sugar in its processed form that harms us, whereas naturally formed sugar found in fruits & vegetables is extremely beneficial. These are packed with fibre, protein, minerals and vitamins, and hence, hard to overdo. Sweet potatoes, oranges, bananas, pineapples, apples, etc that are recommended to maintain a healthy diet are all packed with nutritional values and natural sugar.

Sugar-free, no added sugar or unsweetened?



So, if one shouldn't consume processed sugar, what are the options available when we want to sip of a nice glass of cold drink or a warm cuppa at the end of the day or a boost of energy drink after a strenuous workout? This is the question that bolstered the healthy drinks market over the past decade.

Saccharin, acesulfame, aspartame, neotame and sucralose are five artificial sweeteners that are FDA approved and thus, are used in most sugar free products. And while it is wise to opt for drinks that are low on sugar, it is also important to ensure that sugar is not the only ingredient that has been dropped while making the product.

Make a smart choice, do a full nutrition check.

The key to a healthy body can be summarised in one word – 'balance'. A balanced sugar-free drink has low or no sugar content. It also has (and this is often missed) minerals such as calcium, magnesium, potassium, sodium etc. These electrolyte-packed drinks provide

you with the necessary nutrition that is required by you to maintain a healthy body. While the lack of sugar enables you to drop those extra calories, the electrolytes surging through your body gives you enough fuel to burn additional calories in the form of energy.

Like the natural forms of sugar such as fruits & veggies, an electrolyte-rich drink is a healthy choice that is rich in essential ingredients that only add to your health. These keep you hydrated and help reduce muscle cramps and fatigue. It enables you to workout effectively and stay physically active for a better effect without altering your taste buds or risking your metabolism. If in case you choose to skip sugar-free drinks and opt for natural sugars, try and eat fruits and vegetables instead of consume its juice.

All in all, if you are planning to denounce processed sugar, you have already taken a smart choice. Now, let's make it smarter by choosing the right alternatives with the necessary nutrients. Remember that you want to reduce sugar in your diet not the sweet goodness of health!



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TRANSASIA LAUNCHES INDIA'S FIRST AND ONLY HIGH SENSITIVITY HEPATITIS C TESTING KIT



Dr. Anusha Rohit
Sr. Consultant & Head of
Department - Microbiology, and
Chair - Infection Control
Madras Medical Mission,
Chennai

- Simultaneously detects HCV core antigen and anti-HCV antibodies for more accurate screening
- Reduces window period to less than 28 days, resulting in earlier diagnosis
- Next-gen testing solution suitable for blood banks

Transasia Bio-Medicals Ltd., India's Leading In-vitro Diagnostic Company, committed to a Healthier India, is at the forefront for providing quality and affordable diagnostic equipment and test kits to pathology laboratories and hospitals in the remotest areas of the country.

It recently announced the launch of India's first, high sensitivity testing kit for hepatitis C virus. Based on the latest method, the **ErbaLisa HCV Gen 4 Ag+Ab kit**, is India's first and only indigenously developed 4th gen ELISA kit and has been evaluated by the National Institute of Biologicals (NIB).

Hepatitis is a term used to describe inflammation (swelling) of the liver. It can be caused due to a viral infection, often shows no symptoms, and leads to jaundice and other conditions. Hepatitis C is caused by the Hepatitis C virus and is transmitted through blood-to-blood contact. As a result, it is imperative for blood banks to check for HCV among other Transfusion Transmitted Infections (TTIs) before blood transfusion.

Currently majority of pathology labs in India perform HCV Elisa testing based on 3rd generation assays that detect

antibodies against the infection only. Though this has been the current method, 4th generation assay offers additional advantages that result in early and more accurate detection of the HCV infection.

ErbaLisa HCV Gen4 Ag+Ab kit is intended for the detection of HCV core antigen (viral protein) and anti-HCV antibodies, simultaneously, in human serum and plasma. It has a sensitivity of 100% and specificity of 99.67%.

Erba Lisa® HCV Gen4 Ag+Ab
India's 1st indigenously developed 4th Gen ELISA Kit



Features	HCV 4 th Generation ELISA	HCV 3 rd generation ELISA
Detects HCV Antigen	✓	✗
Detects Anti-HCV IgG Antibody	✓	✓
Detects Anti-HCV IgM Antibody	✓	✗
Window period	< 28 Days	> 66 days
Accuracy	Highly accurate due to antigen detection	Accurate

A window period is the time between the first infection and when the test can reliably detect the infection. Any third generation kit usually offers a window period in the reported range of 15 - 180 days. The simultaneous detection of antigen and antibodies with ErbaLisa HCV Gen4 Ag+Ab will greatly aid in screening HCV more accurately, as the window period for HCV detection will be reduced to less than 28 days.

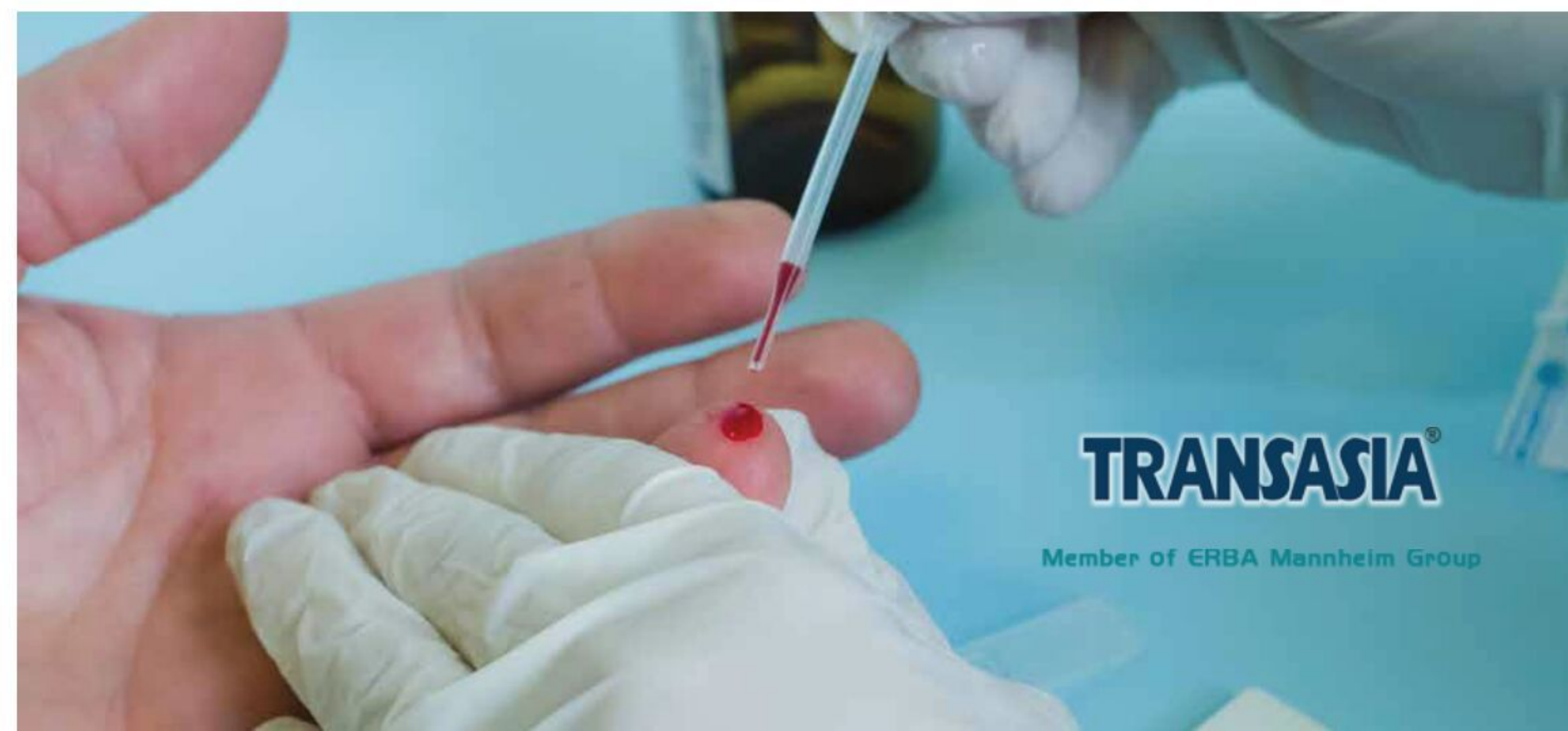
"In the last two years, the focus has been on COVID-19. Needless to say, there are other infectious diseases too, that need immediate attention. Viral hepatitis continues to be a growing concern in India, and is equated as a threat comparable to the big three communicable diseases - HIV/AIDS, Malaria and TB. It is crucial to screen blood donors for HCV. **ErbaLisa HCV Gen4 Ag+Ab** kit on one hand offers better and reliable screening of blood in blood banks prior to transfusion and on the other hand for the labs and patients, it allows an opportunity for early detection and better management of infection", cited Mr. Suresh Vazirani, Founder Chairman & Managing Director, Transasia-Erba International Group of Companies.

As per WHO, in India, as of 2020, about 60 lakh to 1.2 crore people are infected with hepatitis C, primarily a result of blood transfusions. With international organizations such as WHO

running campaigns such as 'Hep Can't Wait' and the Indian government aiming at a nationwide eradication of hepatitis by 2030, accurate screening along with the screening of reduced window period samples with a product such as ErbaLisa HCV Gen4 Ag+Ab is the need of the hour.

The **ErbaLisa HCV Gen4 Ag+Ab kit** is fully adaptable on reputed automated ELISA processors. The assay can be run in 150 mins only and is pre-programmed on Transasia's Elan 30s, a fully automated ELISA system and Lisa XL, a fully automated, six plate microprocessor.

To conclude, Dr. Anusha Rohit, Sr. Consultant & Head of Department - Microbiology, and Chair - Infection Control, Madras Medical Mission, Chennai, quoted, "If we do not keep up with newer technologies, we cease to progress and grow in our fields and quality. The newer technology of using a 4th generation test that can simultaneously detect antigen and antibodies has been successfully used in HIV and dengue to greatly improve the sensitivity and enhance early detection and diagnosis. Now Transasia has come up with the first Made in India 4th Gen HCV kit, the **ErbaLisa HCV Gen4 Ag+Ab** ELISA kit that will ensure early detection of cases of HCV. This will be a game-changer for many hospitals, labs and blood banks."



DIABETES MELLITUS: SCREENING AND DIAGNOSIS



Diabetes is one of the most prevalent chronic diseases and emphasis is being placed on prevention and screening of this condition. This group of metabolic diseases is characterized by hyperglycemia that results from defects in insulin secretion or action. Uncontrolled or untreated diabetes can lead to cause several health issues like blindness, amputation of the limbs, kidney failure, certain vascular disease, and even cardiac vascular diseases.

It is estimated that in the coming 10 years, the number of persons with diabetes across the globe will be approximately double in reference to current prevalence. Hence, it is important that regular diagnostic testing should be performed in individuals with a clinical history or those who are showing indicative symptoms of diabetes. It is important that if one is experiencing symptoms of diabetes like polydipsia, fatigue, blurry vision, sudden weight loss, fatigue, poor wound healing, numbness, and tingling must opt for immediate diagnosis. Early detection of pre-diabetes has shown a delay and prevented progression from pre-diabetes to diabetes.

Diabetes disease occurs when the blood sugar or glucose level is too much high than the normal level. Blood glucose comes from food and is the main source of energy. Insulin is a type of hormone produced by the gland pancreas, and it works by utilizing glucose into the body cells so it can be used for energy or stored for later use in the body. In the most common form of diabetes like Type II diabetes, some body's cells become resistant to the action of insulin, so the pancreas produces more and more insulin to balance the glucose level as the blood sugar level frequently increases.

Sooner or later, the pancreas is unable to keep the flow, and the blood sugar levels become limitless, and the disease of diabetes is triggered in the body.

The most popular way of screening diabetes is the hemoglobin A1c (HbA1c) test. Glycosylated hemoglobin, not only provides information to diagnose prediabetes or diabetes but also gives data about the blood sugar levels over three months. This test measures the percentage of hemoglobin in the RBCs, as the RBCs have a three-month lifespan before they are destroyed and replaced by the new red blood cells, they have glucose molecules attached to them and are termed as glycosylated. Glycosylated hemoglobin result can help one determine prediabetes and diabetes.

Trivitron's HbA1c test:

Trivitron HbA1c test can help monitor one's condition and glucose levels. This test is a better indicator of diabetes and is

most frequently used to measure fasting glucose. HbA1c test has low variability on a daily basis and levels are not affected by patient illness and stress. The test is more stable and the patient does not need to fast prior to the test being performed.

Clinereact ITA HbA1c Test Reagent Kit (by Turbilatex Method) is intended for the quantitative determination of HbA1c in human serum by Spectrophotometry. The kit is available in convenient pack size of 40 ml with an onboard stability of 15 days at 2-8° C.

Lifestyle modifications can prevent the rise of diabetes or its complexities. A reduction of body weight through yoga, exercises, and a healthy diet, can prevent diabetes and provide reduced insulin resistance and better glucose control. Regular physical exercise, such as walking also helps decrease the risk of the many serious complexities that are better to prevent than to treat.

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- 3000+ National & International Delegates
- Country Partner: Netherland
- Supported by: United Kingdom of Great Britain
- 5 day Conference with 04 Fireside Chats & 01 Country session
- 10 Leadership Dialogue Series & 05 Sectorial Seminars
- 125+ National & International Speakers

Factsheet

- 100+ Exhibitors
- Flexibility of timing 24x7
- Technical Talk Series & Webinars as precursor to the main event
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CONTACT

SAURABH RAJURKAR
+91 98331 41942 | saurabh.rajurkar@cii.in

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