

I was here at **Respire**

18th Dec 2022
SEPTEMBER - DECEMBER 2022 Life at ICS
Official triannual communication from Indian Chest Society



HERMES

GREAT SUCCESS OF HERMES 3.0 IN INDIA



YOUR TRUSTED CHOICE FOR ALLERGIC RHINITIS PATIENTS

Allegra[®]-M



The only bioequivalent **FEXOFENADINE & MONTELUKAST combination** published in the IJPS^{*,1,2}

* Indian Journal of Pharmaceutical Sciences

THE SUPERIOR SYNERGISTIC COMBINATION^{1,3,4}

KEY PARAMETERS of Combination	Allegra-M (Fexofenadine + Montelukast)	Levocetirizine + Montelukast	Bilastine + Montelukast
Bioequivalence published data ^{1,4}	Yes	No	No
Synergistic effect ^{1,3,4}	Yes	Yes	No
HTH efficacy data in Indian patients ⁴	Yes	Yes	No
HTH efficacy (TNSS) ⁴	92.5%	85.6%	No HTH data
HTH safety data (Sedation) ⁴	9.6%	23.2%	No HTH data

References: 1. Walekar A, Chodankar D, Naqvi M, Trivedi C. Assessment of Bioequivalence of Fexofenadine and Montelukast Fixed Dose Combination Tablet Versus Separate Formulations of the Individual Components at the Same Dose Levels. Indian journal of pharmaceutical sciences, 2016, 78(5), 651-656
 2. This dissolution study compares Allegra M, Allegra, Singulair and one Fexofenadine + Montelukast fixed dose combination available as a monolayered tablet in India. Data on File, 2012 (b)
 3. Concomitant bilastine and montelukast as additive therapy for seasonal allergic rhinoconjunctivitis and mild-to-moderate asthma. The SKY study, 2019.
 4. Prateek Nayak, et al. A Randomized, Open Label, Prospective, Comparative, Multicentric Study to Evaluate the Efficacy and Safety of Montelukast and Fexofenadine Fixed-dose Combination vs Montelukast and Levocetirizine Fixed-dose Combination in Allergic Rhinitis. Indian Journal of Clinical Practice, Aug 2013.

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References:

1. Lipson DA et al. N Engl J Med 2018; 378:1671–1680. 2. Lipson DA et al. Am J Respir Crit Care Med 2017; 196:438—446 3. Trelegy Ellipta Prescribing Information. Version: TLG/PI/IN/2021/01. Dated 17th August 2021 4. van der Palen J et al. NPJ Prim Care Respir Med 2016; 26:16079. 5. Svedasater H et al. BMC Pulm Med 2013; 13:72. 6. Riley JH et al. Int J Chron Obstruct Pulmon Dis 2016; 11:1873–1880.

CL: PM-IN-FVU-JRNA-220002 and Date of Preparation: June 2022

Safety Information³

Contraindications: Patients with severe milk-protein allergy or who have demonstrated hypersensitivity to fluticasone furoate, umeclidinium, vilanterol or any of the excipients **Undesirable effects:** Very common: Nasopharyngitis, Common ($\geq 1/100$ to $< 1/10$): pneumonia, upper respiratory tract infection, bronchitis, pharyngitis, rhinitis, sinusitis, influenza, nasopharyngitis, candidiasis of mouth and throat, urinary tract infection, headache, cough, oropharyngeal pain, constipation, arthralgia, back pain.

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From the Outgoing President's Desk

Dr. Dhrubajyoti Roy

Dear friends,

It is a proud privilege for me to address as the President of the Indian Chest Society. The last 2 years experienced a tough time due to Covid-19. As the outgoing President, I want to thank every ICS member for the opportunity to serve in this capacity. It has been a valuable experience both personally and professionally. ICS is a well-respected and highly-regarded association, and it has been such an honor just to be a part of a leadership team that continues to strive to be on the cutting edge of the profession. I have been fortunate to have worked closely with such a quality board, committee members, and zonal heads, and appreciate all they've done for ICS during my term.

Thank you.

Dr. Dhrubajyoti Roy

President, ICS



From the Outgoing Secretary's Desk

Dr. Rajesh Swarnakar

It is a situation of mixed feelings for me. My tenure as Secretary of ICS is coming to an end, I reluctantly took this post but When I look back the journey here has been a complete roller coaster. Happy-sad moments, lonely and overcrowded days. But when I look back Everything, literally everything faced here has been incredible. During this phase, I have been working with extraordinary Presidents and enthusiastic GB Members.

But four principles have guided my work during the last 6 years. First, to set priorities and stay focused on providing training opportunities to our young PGTs. Second, to never give up. To keep innovating ... to keep believing ... and to keep working hard until we achieved progress. Third, to keep the focus on members' benefits to being in ICS and enhance their experience. And fourth, to stand up for and raise your voice for truth. I am satisfied that with your cooperation I was able to do something good for the ICS

साथ मिला आपका, उपलब्धियों के उचांक छुए।
बना रहा साथ और मंजिले हासिल हुई।।
विश्वास है, कर्तव्य पथपर अग्रसर होते रहेंगे।
युंही साथ रहियेगा, हम नभ के सितारे होंगे।।

Let us see what we could do during these last six years in ICS,

Brand Building and Management

ICS was a national Society dedicated to research and development in the field of Respiratory medicine. Some very important milestones in this journey were as follows,

1. Making a new Logo for the Society
2. RESPIRE- Branding ICS Newsletter

A new face to the Newsletter. From a normal newsletter to a mouthpiece which was a connection between our members and ICS which published the latest updates in the societies, activities, and relevant information. Special thanks to Dr. Neeraj Gupta for the RESPIRE Quiz every time.

1. ICS International Presence

We started working with international societies to strengthen ties with ICS. Some of these were the International Workshop on Lung Health, the Canadian Thoracic Society, Brazilian thoracic society to name a few. Also with existing societies like the ATS, ACCP, and ERS.

1. Strengthening Ties with members

Our main objective during the tenure remained working for the members and to provide them with good opportunities. We helped members in many ways like understanding their needs through feedback, cleaning the data so that we could stay connected to them, and increasing the number of grants. Talking to them often and motivating them to apply in various fields of interest.

1. Revenue Building and Management

1. Increased membership

In 2017 there were about roughly 1700 members and I am very happy to say that we now are a society of 3700 proud members. Through many small and big activities that society did and due to increased brand image this was a milestone we had achieved. I can proudly say that ICS is the single leading society in the country in the field of respiratory medicine.

1. RESPIRE and Lung India

Building revenue was crucial as the society had to function and provide support to its many activities like research and development. RESPIRE Newsletter attracted many eyeballs and was self-sufficient and also gave back to society...

Lung India is one of our biggest attractions and was also revamped in 2020 and I acknowledge the sincere efforts of Dr. Virendra Singh and Dr. Parvaiz Koul for this.

1. Webinars and Events

ICS had developed webinar guidelines during the difficult covid time and it was approved by the governing body of the ICS and the TEi committee. The webinars generated good revenue for society. We had more than 150 national and international faculties with 50,000-75,000 Plus log-ins from the country and abroad.

1. Project Management

1. HERMES India

HERMES was one of the most successful projects during my tenure and I sincerely appreciate the efforts behind our one-man army Dr. Raja Dhar, Director Hermes India, and his team. We have had two successful exams till now with the latest one at Kolkata on December 18th, 2022.

1. E-voting

Voting was physical earlier and we started online voting in 2018. This led to decreased cost, more transparency and accuracy, and an increased number of votes.

1. Data cleaning

The member's data was in a 20-year-old format which had not been corrected. A third vendor was appointed to manage and clean the data of members giving us a corrected list of emails and mobile numbers in the end.

1. Website and Social Media Management

2. ICS and Public forum Website

We have updated the website 4 times in my six years tenure to make it relevant to these times.

1. Social media management

We have launched Facebook, Twitter, Instagram, Youtube, and Spotify for ICS as well. The followers keep increasing exponentially and the largest audience as of now is on Facebook with roughly 2700 followers.

All these great accomplishments can't be the work of one, it's all of us. But I must thank my back office staff led by Sakshi whose enthusiasm is infectious, she has been a marvelous worker at ICS and indeed an asset, thank you Sakshi. Also thanks to my back office team members Vivek, Shyam, Aaindrilla. We were a perfect team at the ICS Office. Thank you to all the members of ICS for being with us, appreciating us for our good job, and suggesting what needs to further improve so that in the end ICS grew.

मिला जब हाथ से हाथ
तो ये अहसास बुलंद हुआ
हर लम्हा यूंही साथ बसर होगा
करेंगे हर मुश्किल पार
जब आपका हाथ हमारे हाथ होगा

This transformation would not have been possible without hard work, enthusiasm, a sense of duty, and a mission to serve the common interest, with loyalty to this society ICS. I TRIED MY BEST TO GIVE IT ALL. I invite you ALL to keep that spirit and to keep brightening this remarkable Organisation. Be that evolution; that dynamism; remain innovative and open to new ideas; keep challenging conventional thinking while guarding your rigor, your quality, your evidence-based analysis, and recommendations.

The two hardest things to say in life are hello for the first time and goodbye for the last :

So let me conclude this long and wonderful 6-year journey as ICS Secretary with two simple but powerful words :

THANK YOU. Thank you one and all.

Long Live ICS! JAI Hind

Dr. Rajesh Swarnakar
secretary@icsorg.net



A Note from The Incoming President's Desk

Dr. Sundeep S. Salvi

The Indian Chest Society, founded on 18th July 1980 is the leading Respiratory Society in India that has grown from strength to strength because of the immense dedication and contribution by the Founders, Office Bearers and the Members of the Society over the last 42 years. I feel deeply honored and privileged to be the President of Indian Chest Society for the Year 2022-2023 and look forward to taking the Society to newer heights.

India has the largest burden of acute and chronic respiratory diseases in the world. Although we have been immensely successful in controlling the growing burden of Pulmonary Tuberculosis through dedication, research and healthcare policy change over the last several decades, we are now facing a new challenge of the growing burden of non-communicable respiratory diseases, including asthma, COPD, Lung Cancer and Interstitial Lung Disease among others. ICS is gearing towards this new challenge and through research, education, and advocacy we hope to reduce the suffering and death associated with these diseases.

While the New Governing Body will soon take charge, I look forward to working with the new Office Bearers and the Members of the Society and continue to serve the people of India by reducing the growing burden of respiratory diseases through passion, dedication and team work.

Thank you.

Dr. Sundeep S. Salvi

MD, DTCD, DNB, PhD (UK), FCCP, FICS, Hon. FRCP (London)

President, ICS

Late Dr. Ashok Mahashur an Eulogy

by Dr. Nitin Abhyankar



Late Dr. Ashok Mahashur

Dr. Ashok Anant Mahashur was one of the most grounded pulmonologists in India who soared to great heights over the last few decades due to his brilliant clinical acumen and a very polite bedside manner combined with great appetite for research and new knowledge.

He has taught hundreds of students and influenced thousands of pulmonologists all across the country and has inspired all of us to get pulmonology or pulmonary medicine in India to its due glory.

He inherited the great department of pulmonary medicine in King Edward Memorial Hospital from Late Dr. Kamat Sir and took it to new glory. I had the fortune to be associated with him in the air pollution wing for a few months as a registrar and it was a sheer joy of listening to him tell clinical stories and critical thinking while interpreting lung function tests.

He was gracious to help his juniors always and the very first C.M.E. I did in Pune and he was available as a speaker. He was extremely pleasant to talk to but would become a different person on stage. A true professor and a true clinician. His way of emphasizing important clinical points was unique and always used to wonder how much effort he would put into his lectures.

For me and hundreds of clinician friends he was the obvious second opinion. The patients loved him and they would be back with greater clarity and reassurance that they are on the right path. He would never ever cut anything scientific and yet was the tough taskmaster to convey his corrections in a very polite but firm manner.

We see plenty of self-absorbed humans every day and they almost never even notice their juniors. Dr. Mahashur sir, as I referred to him, was always the epitome of being selfless, being the great clinician and great academician and yet one of the most unassuming seniors in pulmonology. He was the fresh breath of air for every student, junior or senior consultants and of course his patient.

Today when I pen these thoughts after a few months of his super sad demise my mind is filled with respect, pride and gratitude to God for giving all of us a great teacher who changed our lives for the better and deep sadness that he had to go one day.

We will always miss you Mahashur Sir!!!

HERMES 3.0 in India - Preparatory Course



Dr. Raja Dhar
Director, HERMES India

The ERS Hermes preparatory course was held under the auspices of the European Respiratory Society and the Indian Chest Society at VPCI, Delhi on the 29th and 30th of October, 2022.

There was tremendous excitement and interest about the course. The course was arranged at Vallabhbhai Patel Chest Institute, Delhi which is categorised as one of the constituent colleges of the University of Delhi and is devoted to research, teaching and patient care. It is one of the apex academic institutions in the country where 93 registered delegates from all across the nation attended the preparatory course. 25 subject experts from India were empanelled as the faculty for this course who delivered the structured course through standard slide decks provided by the ERS.

We set up a veritable academic feast with the best faculty in the country coming to teach at the course. Under Dr. Swarnakar and Dr. Dhar's guidance, Mrs. Sakshi Deshmukh, Mr. Shyam Kumar and Ms. Aaindrila Dutta worked tirelessly to make this event a success. The Exicon team looked after the local logistics to perfection.

Indeed, it did turn out to be a whopping success! Delegates arrived early and stayed till the very end on days which were long with nearly 8 hours of dedicated teaching time. The delegates were seen taking down notes and paying the utmost attention to every lecture in the course. We stuck to the given time frame, both the days. There were no frills at the event and it took us back to our student days when academics meant hard work in classrooms!

The delegates went back with a lot of information, pleasant memories, an ERS ICS Certificate of participation and mementos to remind them of the 3rd HERMES Preparatory Course outside Europe. We now look forward to the HERMES Diploma exam in Adult Respiratory Medicine in Kolkata on the 18th of December, 2022. We are hoping that the final exam is an even bigger success and builds a pathway for our Delegates.



Faculties along with ICS team at the Inauguration Ceremony



Faculties delivering lecture and clearing doubts of delegates



Faculties snapped at the Preparatory course



Esteemed faculties Dr. Anant Mohan and Dr. S. N. Gupta



Dr. Raja Dhar during his lecture



Delegates penning down notes and listening to lectures.



Dr. Rajesh Swarnakar, ICS Secretary taking workshops



Faculties and some delegates snapped together after the course



Entry gate to Welcome delegates to Hermes 3.0



Delegates during Lunch at the Preparatory course



HERMES 3.0 in India - Main Exam

Kolkata, West Bengal witnessed the HERMES 3.0 exam on 18th December, 2022 organised by the Indian Chest Society and European Respiratory Society. The exam took place at the Biswa Bangla Convention Centre in Kolkata, West Bengal. We had one ERS professional, Ms. Angie Tran and 2 ICS Experts Dr. Rajesh Swarnakar and Dr. Raja Dhar, Director-Hermes India, guiding the 102 delegates who registered for this exam. We had the ICS President, Dr. Dhruvyajyoti Roy delivering a note and motivating the students along with another video message from senior member, Dr. A. G. Ghoshal. We received a message from the ERS President appreciating this association with ICS. Other ICS members like Dr. Indranil Haldar and Dr. Shyam Krishnan, were also present to invigilate the exam and guide the delegates. Dr. Dhar along with his Kolkata team, helped us organise the exam. The exam went very well. We had excellent feedback from the delegates.



HERMES 3.0 in India - Feedback

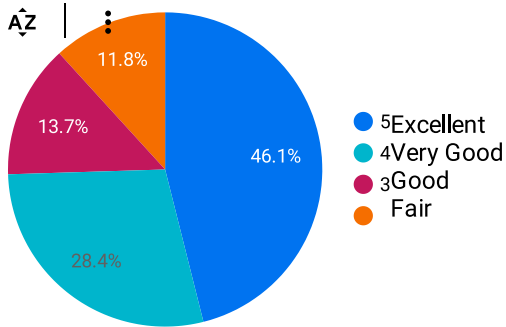
HERMES EXAM HELD SUCCESSFULLY

We thank all the participants for positive feedback.

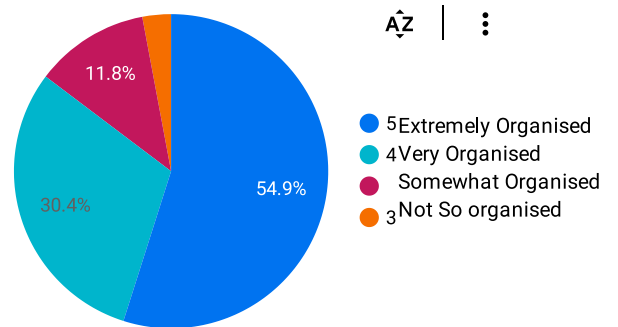
After reviewing the feedback of delegates from the Hermes 2022 exam held in Kolkata, we found that -

- The Delegates were extremely happy about the clinical approach of the question.
- The organisation of the exam, the venue, the pattern of questions, the conduct and behaviour of ICS staff and the arrangement was impressive.
- The delegates suggested to have more mock exams, and to provide them with the material.
- All in all, they were extremely happy with the arrangements, punctuality and smooth functioning of the exam.

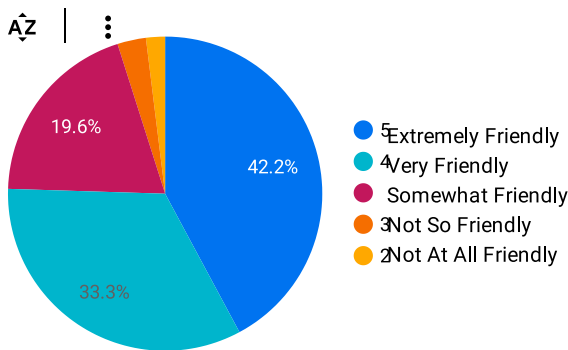
Overall, how would you rate the examination?



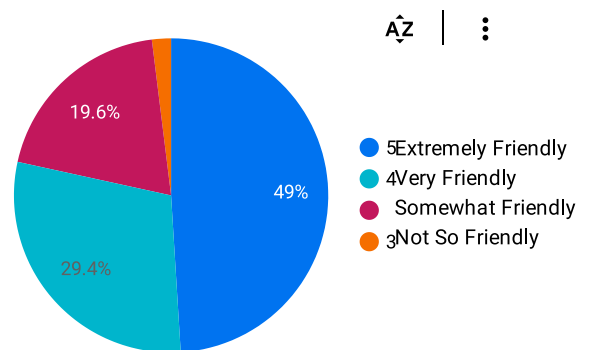
How organised was the examination?



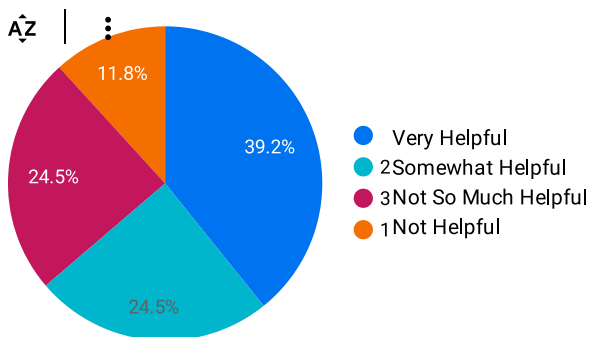
How was the Pre registration Process of the examination?



How friendly was the organising staff at the examination centre?



If you attended the preparatory course did you find it useful after taking the examination?



World COPD Day

16th November 2022

Dr. Radha Munje¹

Dr. Gyanshankar Mishra²

¹Professor & Head, ²Associate Professor

Department of Respiratory Medicine,
Indira Gandhi Government Medical College, Nagpur

COPD

Chronic obstructive pulmonary disease (COPD) is the third leading cause of death worldwide, causing 3.23 million deaths in 2019. And it is also a major cause of mortality and chronic morbidity worldwide. Over 90% of COPD deaths occur in low-income and middle-income countries.¹

COPD is a heterogenous lung condition characterised by chronic respiratory symptoms (dyspnoea, cough, sputum production, exacerbations) caused by abnormalities of the airways (bronchitis, bronchiolitis) and/or alveoli (emphysema) that cause persistent, often progressive, airflow obstruction.²

In India, COPD is the second leading cause of death and disability-adjusted life years (DALYs). The estimated COPD prevalence in India is 37.8 million.³

Causes of COPD :

COPD results from gene(G)-environment(E) interactions occurring over the lifetime(T) of the individual (GETomics) that can damage the lungs and/or alter their normal development / ageing processes.²

- Tobacco smoking in various forms is the leading cause of COPD in developed countries. COPD occurs in the developing world among people exposed to fumes from burning fuel for cooking and heating in poorly ventilated homes, as well as exposure to air pollution or occupational exposure, in addition to smoking.
- Breathing second-hand smoke, working with chemicals, dust, and fumes. (Second-hand smoke refers to the tobacco smoke that people breathe when they are around someone who is smoking).
- A history of childhood respiratory infection and recurrent respiratory infections in adults also gives clues for cause and a clue to suspect the diagnosis. Thus keeping the environment clean is an important preventable factor for the onset of COPD as well as recurrent exacerbations.

Can a non-smoker get COPD?

Contrary to the earlier belief of only smoking and COPD relation, we now have enough evidence that even non-smokers can get COPD. Infact, non-smoking risk factors contribute to 50% or more of

the global burden of COPD. Non-smoking risk factors for COPD are as follows :

- Exposure to biomass (wood, animal dung, crop residues, coal typically burned in open fires or poorly functioning stoves) causes extremely high levels of household air pollution.
- Organic and inorganic dust, chemical agents, and fumes are all examples of occupational exposures.
- The leading known risk factor for COPD in never smokers is air pollution, which typically consists of particulate matter, ozone, oxides of nitrogen or sulphur, heavy metals, and other greenhouse gases.
- Alpha 1 anti-trypsin deficiency is a known genetic risk factor for COPD. The most relevant (albeit rare) genetic risk factor for COPD identified to date are mutations in the SERPINA¹ gene that lead to α -1 anti-trypsin deficiency. Several other genetic variants have also been associated with reduced lung function and risk of COPD, but their individual effect size is small.²

Etiotypes of COPD : 2 Based on etiology, COPD has recently been classified into the following etiotypes :

1. COPD-G: Genetically determined COPD.
2. COPD-D: COPD due to abnormal lung development.
3. Environmental COPD :
 - ◆ COPD-C: Cigarette smoking COPD.
 - ◆ COPD-P: Biomass and pollution exposure COPD.
4. COPD-I : COPD due to infections.
5. COPD-A : COPD & asthma.
6. COPD-U : COPD of unknown cause.

Clinical presentation of COPD :



Figure 1 : Symptoms of COPD

Signs and symptoms of COPD (Figure 1) commonly include :^{4,5}

- Shortness of breath, especially during or after physical activities,
- Wheezing, chest tightness,
- A chronic cough that may produce mucus (sputum) that may be clear, white, yellow, or greenish,
- Frequent respiratory infections, lack of energy,
- Later -unintended weight loss (in later stages), swelling in ankles, feet, or legs.

Symptoms of COPD have a pronounced effect on patients' daily lives (Figure 2).



Figure 2 : COPD affecting people's lives

Complications of COPD :

- Acute exacerbation of COPD, what we now address as a Lung attack or attack of breathlessness.
- Acute and/or chronic respiratory failure.
- Pulmonary hypertension, cor-pulmonale, i.e. effect on the heart.
- Weight loss, bacterial infections, osteoporosis, and pneumonia.

Diagnosis of COPD :²

The presence of non-fully reversible airflow limitation (i.e., post-bronchodilation $FEV_1/FVC < 0.7$) measured by spirometry confirms the diagnosis of COPD in the appropriate clinical context.

Some people can have respiratory symptoms, structural lung lesions (emphysema), and/or physiological abnormalities (including low-normal FEV_1 , gas trapping, hyperinflation, reduced lung diffusing capacity, and/or rapid FEV_1 decline) without having an airflow obstruction (post-bronchodilation $FEV_1/FVC \geq 0.7$). These people are classified as 'Pre-COPD.' The term 'PRISm' (Preserved Ratio Impaired Spirometry) has been proposed to distinguish those with normal

FEV1/FVC ratio but abnormal spirometry. Pre-COPD or PRISm patients are at risk of developing airflow obstruction over time, but not all of them do.

Treatment of COPD :

Patients need treatment for their various symptoms, the underlying disease and complications (Figure 3).^{2,6}

What is good is that people with COPD, having mild forms of the disease, may not need treatment other than smoking cessation or avoiding exposure to dust and fumes; however, such cases are rarely detected in clinical practice. But for those with symptoms or more advanced stages of the disease, effective therapy is needed to control symptoms and slowdown the progression of the disease, reduce the risk of complications and exacerbations, and improve a person's ability to lead an active life. Thus, the early introduction of pulmonary rehabilitation is needed.

Quitting smoking : This is undebated that the most essential step is to quit all smoking. Nicotine replacement therapy and pharmacotherapy consistently increase long-term smoking cessation rates. Smoking cessation will slow the progression of COPD and help in symptomatic improvement in the patients.

Pharmacotherapy : Pharmacological therapy can improve health status and exercise tolerance and reduce COPD symptoms and the frequency and severity of exacerbations. The pharmacological treatment regimen for all patients should be tailored to their specific needs, taking into account the severity of their symptoms, the risk of exacerbations, side effects, comorbidities, drug availability and cost, and the patient's response, preference, and ability to use various drug delivery devices.

Counselling at each visit and at the time of change of therapy is critical for compliance and outcome.

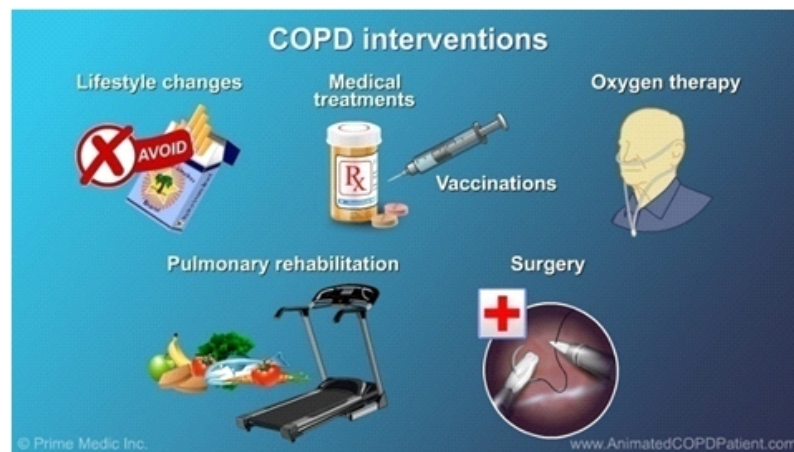


Figure 3 : Various interventions for COPD management

Bronchodilators : Bronchodilators relax the muscles around the airways, help relieve coughing and shortness of breath, and make breathing easier. Depending on the severity of the disease, inhaled medications are prescribed. The updated 2023 Global Initiative on Chronic Obstructive Lung Disease (GOLD) report recommends long-acting muscarinic antagonist (LAMA) plus long-acting beta-agonist (LABA) as an ideal first-line treatment option for most patients with COPD (chronic obstructive pulmonary disease), regardless of exacerbation risk. According to GOLD, LAMA, LABA,

or LAMA+LABA therapy should be used as initial treatment for most patients with COPD, irrespective of the risk of exacerbation. At times inhaled corticosteroids (ICS) may be required to be added to the combination of bronchodilators in COPD patients with increased exacerbations or a specific phenotype. Patients with a history of hospitalisation for COPD exacerbation, ≥ 2 moderate exacerbations per year, eosinophil count of more than 300 cells/microL or past/concomitant history of asthma may benefit from the addition of ICS to their inhaled therapy.

Triple inhaler therapy (LABA+LAMA+ICS) reduces the mortality in symptomatic COPD patients with a history of frequent &/or severe exacerbation. ICS should not be used in COPD patients with repeated pneumonia events, a history of mycobacterial infections or a blood eosinophil count < 100 cells/microL. Also, administering all inhaled medicines in a single inhaler is convenient and effective compared to administering medications through multiple inhaler devices in the same patient.²Few patients may need antibiotics.

Inhalers must be taken using the correct technique and, usually, with a spacer device to help deliver the medication into the airways more effectively. The inhaler technique must be evaluated regularly.¹

Oxygen therapy : ²Long-term oxygen therapy improves survival in patients with severe resting chronic hypoxemia (PaO₂ 55 mmHg or 60 mmHg, and if there is cor-pulmonale or secondary polycythemia). Long-term oxygen therapy should not be prescribed routinely in patients with stable COPD and resting or exercise-induced moderate desaturation. Individual patient factors must, however, be considered when assessing the patient's need and prescribing supplemental oxygen.

Home respiratory support : ²Long-term non-invasive ventilation may reduce mortality and prevent re-hospitalisation in patients with severe chronic hypercapnia and a history of hospitalisation for acute respiratory failure.

Surgical or bronchoscopic interventional treatments are recommended and may benefit select patients with advanced emphysema who have not responded to medical treatment.²

COPD Exacerbation :²

An exacerbation of COPD is defined as an event characterised by dyspnea and/or cough and sputum that worsens over a period of less than 14 days. Furthermore, these COPD exacerbations are frequently associated with increased local and systemic inflammation caused by airway infection, pollution, or other lung insults. Because the symptoms are not unique to COPD, other diagnoses, particularly pneumonia, congestive heart failure, and pulmonary embolism, should be considered in differential diagnoses during such a clinical scenario.

The goals of treating COPD exacerbations are to reduce the current exacerbation's negative impact and prevent similar events in the future. To treat an exacerbation, short-acting inhaled beta-2 agonists with or without short-acting anticholinergics are recommended as the initial bronchodilators. Long-acting bronchodilators should be used for maintenance therapy as soon as possible. In patients with frequent exacerbations and elevated blood eosinophil levels, inhaled corticosteroids should be added to the double bronchodilator regimen. Systemic corticosteroids can improve lung function (FEV₁) and oxygenation and shorten recovery time, including

hospitalisation duration, in patients with severe exacerbations. When indicated, antibiotics can shorten recovery time and reduce the risk of early relapse, treatment failure, and hospitalisation duration. When indicated, the duration of steroid and antibiotic therapies is usually five days. Because of their increased side effect profiles, methylxanthines are not recommended to be used. Non-invasive mechanical ventilation should be used first in COPD patients with acute respiratory failure who have no absolute contraindications because it improves gas exchange, reduces work of breathing and the need for intubation, reduces hospitalisation duration, and improves survival. Exacerbation recovery time varies, taking up to 4-6 weeks for some patients, with some failing to return to a pre-exacerbation functional state. Following an exacerbation, appropriate exacerbation prevention measures should be initiated.

Avoid complications :

Treatment of symptoms and timely identifying and treating recurrent infections are important. This prevents exacerbation and residual damage resulting in rapid deterioration of lung function / remodelling of airways and progression of COPD.

Quitting smoking helps reduce the risk of heart disease and lung cancer. Annual flu vaccination and regular vaccination against pneumococcal pneumonia lessen the risk of or prevent some infections and are recommended.

Educating the patient about early warning signs of exacerbation like increased cough, increased expectoration, change in colour and quantity of sputum, increased breathlessness, fever, and no relief in symptoms even after optimum use of inhalers is very important.

This helps prevent exacerbation, visits to the emergency room, and hospitalisation.

We all know why we use dry powder inhalers (DPI) / metered dose inhalers (MDI) / nebulisers, but explaining to the patient why we use an inhaler and not a tablet is very important and at the same time, doing away with the fears of the patient about inhaler use is necessary for better compliance from patients.

1. The inhaler gets the medicine to the lungs most efficiently and does not go through the bloodstream, kidneys, and heart and then reach the lungs.
2. The doses used in inhalers are very, very small in micrograms and not in milligrams as in tablets or injections, so we avoid complications due to higher doses and quick and direct effective action.
3. Inhalers are not addictive, but it is a good habit to keep control of COPD. COPD & asthma medicines are not habit-forming.

Pulmonary rehabilitation :

A pulmonary rehabilitation programme can assist in learning how to breathe more easily and improve quality of life. It includes breathing exercises, exercise training, education, nutrition counselling, meditation, infection prevention, and early infection treatment. Pulmonary rehabilitation, with its core components of exercise training combined with disease-specific education, improves exercise capacity, symptoms, and quality of life across all grades of COPD severity.² Pulmonary rehabilitation should begin as soon as possible, rather than when the patient

has a severe respiratory disability. This ensures that the disease progresses slowly and that the patient has a good quality of life. Regular exercise has numerous advantages. Exercise, especially aerobic exercise, can :

- Improve circulation and oxygen utilisation in the body.
- Improve COPD symptoms and increase energy levels so that patients can participate in more activities without becoming tired or short of breath.
- Increase endurance by strengthening the heart and cardiovascular system.
- Reduce blood pressure.
- Increase muscle tone and strength; improve balance, joint flexibility, and bone strength.
- Assist in the reduction of stress, tension, anxiety, and depression.

Role of vaccination :

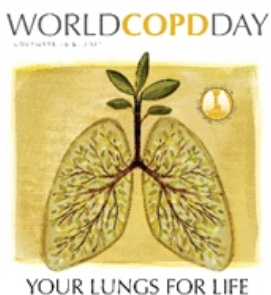
Patients with COPD are more prone to infections than healthy people. Thus, vaccines have a crucial role in preventing infective respiratory exacerbations and decreasing hospitalisation. Hospitalisations accelerate the decrease in lung functions. Also, each infection may cause increased symptoms and worsening of lung health as they are more vulnerable to viral and bacterial lung infections, which are major causes of frequent exacerbation and hospitalisation.

Influenza vaccination and pneumococcal vaccinations decrease the incidence of lower respiratory tract infections. CDC recommends the Tdap vaccination (dTdap/dTpa; pertussis, tetanus, and diphtheria) for COPD patients who were not vaccinated in adolescence, as well as routine use of the shingles vaccine in all COPD patients. Routine covid vaccination is recommended.^{2A} A proper vaccination card should be maintained in these patients.

Why do we celebrate world COPD Day?

The Global Initiative for Chronic Obstructive Lung Disease (GOLD) organises World COPD Day in collaboration with healthcare professionals and COPD patient groups worldwide. Its goal is to raise awareness, share knowledge, and discuss ways to reduce the global burden of COPD.⁷

What is the theme for world COPD Day?



The 2022 theme for World COPD Day on 16th November 2022 is “Your Lungs for Life.”^{2,7} This year’s theme highlights the importance of lifelong lung health. You are born with only one set of lungs. From development to adulthood, keeping the lungs healthy is a very important part of the future health and well-being of oneself, family, and the nation.

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A SALUTE TO THE AUTHORS OF THE BOOK ON PULMONARY DISORDERS IN WOMEN

REPORT OF BOOK RELEASE AT
Sri Ramachandra Institute of Higher Education and
Research (SRIHER), CHENNAI ON 15th AUGUST, 2022

On the historic occasion of India's 75th Independence Day, a book titled 'PULMONARY DISORDERS IN WOMEN' was released at SRIHER, Chennai by Dr. Soumya Swaminathan, Chief Scientist, World Health Organisation (WHO) and the Shri. V. R. Venkataachalam. Chancellor. of Sri Ramachandra Institute of Higher Education and Research. The guest of honor for this landmark event was Dr. Dhruvajyothi Roy, President of the Indian Chest Society. Dr. Vijayalakshmi Thanasekaraan (Editor in Chief and Former Emeritus Professor TB and Chest Diseases SRMC and RI, SRIHER), Dr. Kumari Indira (Editor and Head of Pulmonary Medicine, Narayana Institute of Medical Sciences) and Dr. Uma Maheshwari. K (Professor, Pulmonary Medicine, St. John's Medical College) was also present at the book release. Dr. Mathangi and Dr. Aruna Shanmuganandan were the Masters of Ceremony and smoothly conducted the proceedings with effective time management.

The book was authored largely by women pulmonologists and scientists and addressed gender (women) - specific aspects in the clinical presentation and management of common respiratory diseases.

The proceedings began with an invocation and lamp lighting by the honorable guests followed by a Welcome Address by Dr. Thilagavathy (Head of Respiratory Disease, Vijaya Group of Hospitals). This was followed by a brief introduction to the motivation to write this book and the issues addressed in the book by Dr. Kumari Indira and Dr. Vijayalakshmi Thanasekaraan. Following this, Dr. Uma Maheshwari presented the findings of her survey on 'Women in Pulmonology', wherein the evolution of Pulmonary medicine as a specialty in India and perspectives among women pulmonologists and trainees about pulmonology as a career choice, challenges faced during training and career progression, coping strategies and future directions were highlighted.

Describing the book as a much-needed resource, Dr. Soumya Swaminathan emphasized the importance of undertaking research among early career pulmonologists and trainees. She also discussed the role of geography-specific literature in the management of diseases.

This was followed by a panel discussion titled '**Save her breath-Towards better lung health in women,**' which was moderated by Dr. Priya Ramachandran (Head, Pulmonary Medicine, St. John's Medical College). The panelists were eminent pulmonologists and included Dr. Soumya Swaminathan, Dr. Kalpana Balakrishnan, Dr. Richa Gupta, Dr. Radha Munje, and Dr. Amita Nene. Topics discussed were the impact of TB and COVID-19 on women, environmental exposures and women's lung health, the effect of socio-cultural factors on the occurrence of respiratory diseases, and unique aspects of common respiratory diseases (airway diseases, cancer) in women.

The program ended with the Vote of Thanks delivered by Dr. Sangeetha (Consultant Pulmonologist, Vijaya Group of Hospitals).



ICS Congratulates the TELANGANA State Chapter on its Registration

NEW OFFICE BEARERS OF ICS TELANGANA

Name of the Office Bearers & S/o. D/o. W/o.	Age	Designation	Occupation	Residential Address
DR. K. SUBHAKER S/o Lakshmi Reddy Kandi	62	PRESIDENT	Medical Practitioner	1-95/b/15/1/p Petunia Block, Nectar Gardens Madhapur, Serilingampally Hyderabad-500081
DR. E. RAVINDER REDDY S/o.Methuku Narayana	54	VICE PRESIDENT	Medical Practitioner	H.No2-2-647/182/A/6/4 CE Colony, Shivam Road Amberpet, Hyderabad-500 013
DR. METHUKU NARENDER S/o. Late C. Lakshmi Narayana	63	GENERAL SECRETARY	Professor of Pulmonology, Govt. CHEST Hospital, ERAMNUMA	13-1-9/SR/G3 Moti Nagar, Borabanda Balanagar, Moosapet Hyderabad-500 018
DR. K. DAYANANDA S/o. Late R. Krishna Kumar	53	JOINT SECRETARY	Medical Practitioner	H. No. 3-4-376/7/302 Basanth Colony, Behind Nrupatunga High School Kachiguda, Hyderabad-500 027
DR. V. SUDHEER PRASAD S/o Prasad Krishna	48	TREASURER	Medical Practitioner	16-11-775, Moosaram Bagh Near Rajarajeshwari Temple Moosaram Bagh Hyderabad-500 036
DR. TIRUNAGARI LAXMI NARSHIMHA SWAMY S/o T. Swaminath	51	EXECUTIVE MEMBER	Medical Practitioner	Plot No 68, Mystic Hills, Anjaneya Nagar, Kukatpally Municipal Office, Moosapet Bala Nagar, Hyderabad-500 020
DR. NAVYA SHAKUNTALA SOWJANYA W/o Pavankumar Rao	39	EXECUTIVE MEMBER	Medical Practitioner	1-6-173/3 Zamisthanpur, Musheerabad, Zamisthanpur Hyderabad-500 020

ICS Congratulates Dr. Sheetu Singh



Dr. Sheetu Singh

Dr. Sheetu Singh has been appointed the associate editor for the journal 'Thorax', which has an impact factor of 9.2. It is a matter of privilege and honor as she is the second Indian to probably take up this role after Dr. Zarir Udwadia. This will provide a platform for Indian research to be presented at the international level.

Dr. Singh has played a pivotal role in the ILD India registry. This study was an eye-opener in terms of the epidemiology of ILD in India and showed that Hypersensitivity pneumonitis is probably the most common ILD in India. Subsequent, correlation with air pollutant PM2.5 levels showed a 1 unit increase leading to a 7% increase of having HP. This paper got published in the ERJ and subsequently led to a press release about the same.

Dr. Singh also was the lead author of the ICS-NCCP consensus statement regarding ILD. She contributed to the EMBARC bronchiectasis registry which has had multiple publications in the past few years. Subsequently, she is the lead author of the Global Asthma Network (GAN) study which got published in ERJ open and the second author of the sister paper that got published in the JACI. With this impressive array of work, we wish her the best for the next task ahead.



How to Improvise Medical Conferences

Dr. Vishnu Sharma M.

Professor and Head

Department of Respiratory Medicine

A. J. Institute of Medical Sciences & Research Center

Mangalore, Karnataka

Over the last few years, the number of attentive audience in the medical conference is steadily on the decline despite the best efforts of the organizers to make the conference a success. Hence there is a need to improvise medical conferences to make them a success. I would call a conference a success if more than 90% of the people who attended the conference got some new insight into the subject. The number of attendees, knowledge exchanged, new ideas / resolutions generated, and generation of data / opportunity / collaboration would determine the success of a medical conference.

Why do people attend medical conferences?

People attend the medical conference when invited as faculty, and as a delegate to learn new skills, present their research papers, and exchange ideas. Conference also serves as a place to meet friends, collaborate with others & network.

What is the major change in the last few years?

The era of lecturing is over. Now information can be gathered easily from multiple sources very easily at any point in time. Hence nobody is interested to hear lectures. **Hence it is time to STOP lectures at medical conferences.**

What we need to change

Do not expect everyone to attend from morning till evening. Make conference timings less - 3 hours morning and two hours post lunch i.e. 9 to 1 pm & 2 to 4 pm with 30 minutes tea break in the morning and a 1-hour lunch break so that there is enough breathing time and time for social interaction. Otherwise, social interaction occurs during lecture hours which disturbs the scientific program.

Have dedicated topics in each session and each day so that people can choose and attend their topics of interest. Strictly no repetition of topics/faculty

How to replace the lectures?

Learn from experts : Let the experts in a particular aspect share practical experience - Identify key topics - Have a panel of experts with a chair. 3 months before the conference date encourage people to post questions to the experts - Select questions are taken up for discussion. Share practical tips. Give time for active discussion. Give a reward to the best question of the session

Case discussions :

1. Real-life selected interactive case discussions with specific learning objectives.
2. Learning from mistakes - What went wrong and how these could have been handled better Case scenarios. Learning points
3. Short discussions on - Chest Image / Procedure / Treatment / Novel method / Novel idea / What is new

Practice changing publications / Year in review

Have a dedicated team with a dedicated topic each year

Dedicated topics for PGs

Select topics of interest for postgraduate students. The session should be interactive. Meet the professors to unravel the exam myths. Teachers with more than 10 years of experience should be the faculty.

Debates

Few select, interesting, genuine debates with renowned subject experts

Time for genuine enthusiasts

Youngsters should be encouraged to send a PPT on a newer topic of their choice & based on the quality & relevance should be selected for presentation.

Self-assessment Or Challenge yourself sessions

1. Challenge yourself with sessions on various aspects of the subject. Experts pose questions on a particular topic. The audience should be asked to interact by electronic voting or MCQS with the khahoot app. Discuss the answers in detail.

The best scorer can be given a reward

2. Post-graduate quiz program with prizes
3. Challenging case discussions & images with rewards
4. Fellowship exam

Pose a clinical question to experts

We encounter difficult clinical scenarios. Challenges in evaluation / diagnosis / treatment. An expert consensus may be required in such clinical scenarios. Have a panel of experts & Post a challenging situation encountered in clinical practice to the experts To be posted 4 weeks prior so that adequate literature review etc can be done.

Meet your mentor

Youngsters look for better opportunities. Have a dedicated area where national & international experts in different fields of respiratory medicine can be present for one-to-one interaction with youngsters with prior appointments.

Collaborate

Have a dedicated area where national & international experts in specific fields of respiratory medicine can be present for mutual interaction & collaboration with predetermined agenda

Workshops - The best part of a conference

This is the most sought-after program. People are genuinely interested to learn new skills. Select proper workshop topics/faculty. Avoid lecturing, and conduct only small group discussions & hands-on workshops. Distribute the theory part 4 weeks in advance to all participants. Conduct a pre and post-workshop assessment & certify the successful completion with minimum cut-off marks. Workshops need not be only on pre-conference day. If there is demand it can be conducted or can be repeated for more days. The best prize can be given to the top performing delegate after assessment.

Scientific papers and poster

This again is one of the most important parts of a medical conference. Select faculty who are interested & are experts in judgment. Have a panel of Judges 3 months in advance. Send them details 4 weeks in advance. Minimum two judges per session. Max ten posters and maximum 6 papers per panel of judges. Inform the candidate and judges regarding evaluation and presentation in detail. Encourage youngsters to attend these sessions.

Plan for 2 important conference resolutions

Identify one area of interest for pulmonologists that require in-depth discussion from experts & consensus opinion - Come out with a resolution & publish. Identify another area of interest for the general public domain which requires in-depth discussion from experts & consensus opinion - Come out with a resolution to pass it on to the lawmakers as an expert recommendation. At the end of the conference publicize these two as the conference outcome



ICS Travel Grants Calender

Sr. No.	Type of Conference	No. of Grants	Amounts Sanctioned	Last date for Receiving Applications (Every Year)	Results on or Before (Every Year)	Documents Required
1	ATS USA	TWO	Rs. 1,00,000/-	15th FEB	28th FEB	Before - 1. Acceptance Certificate from ATS 2. Resume 3. Covering letter signed by the HOD 4. Age Proof
						After - 1. Certificate of Attendance 2. Poster/Paper Presentation Letter from ATS 3. Receipt of travel tickets
2	ERS EUROPE	SEVEN	Rs. 75,000/-	15th JUNE	30th JUNE	Before - 1. ERS Application 2. Application forwarded by HOD 3. Resume 4. Selection Letter from ERS 5. Age Proof
						After - 1. Certificate of Attendance 2. Poster/Paper Presentation Letter from ERS EUROPE 3. Receipt of travel tickets
3	CHEST ACCP USA	TWO	Rs. 1,00,000/-	30th JUNE	15th JULY	Before - 1. CHEST ACCP Application 2. Application forwarded by HOD 3. Resume 4. Selection Letter from ACCP 5. Age Proof
						After - 1. Certificate of Attendance 2. Poster/Paper Presentation Letter from CHEST ACCP USA 3. Receipt of travel tickets
4	International Workshop on Lung Health	TWO	Rs. 75,000/-	15th November	15th December	Before - 1. IWLH Application 2. Application forwarded by HOD 3. Resume 4. Selection Letter from IWLH 5. Age Proof
						After - 1. Certificate of Attendance 2. Poster/Paper Presentation Letter from IWLH 3. Receipt of travel tickets

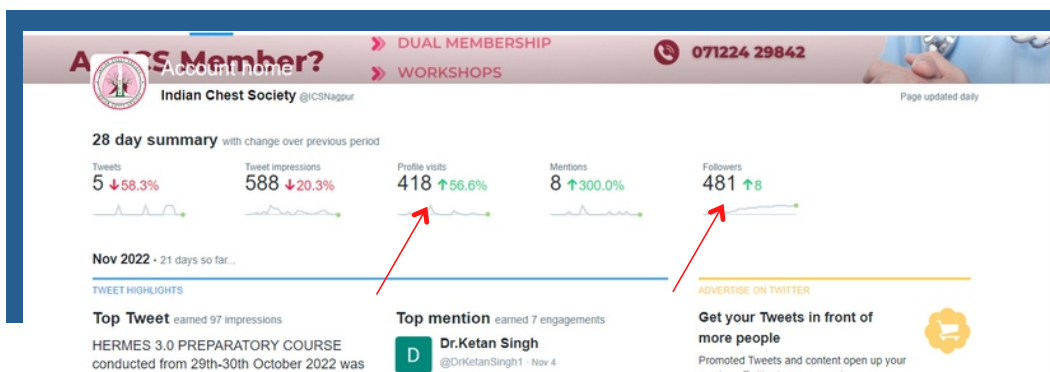
*Pls note that dates of submitting applications may vary due to unprecedented times.

*Keep in touch with us at icsofficeexecutive@gmail.com.

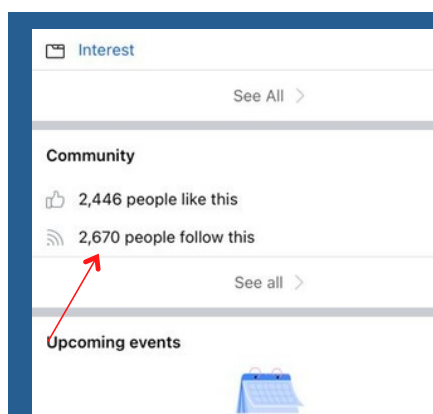


ICS SOCIAL MEDIA

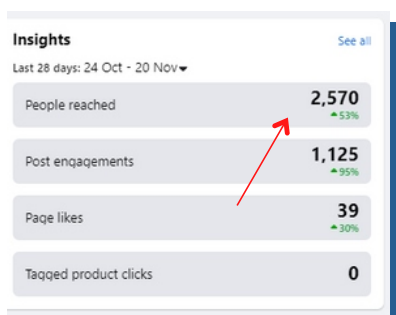
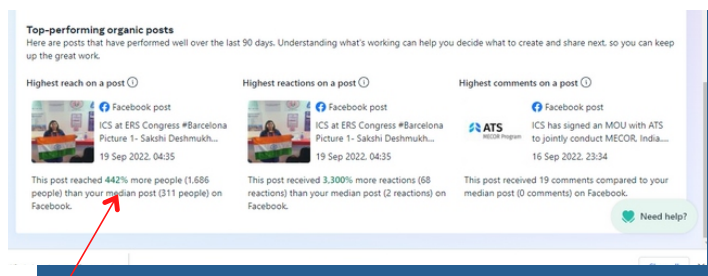
Twitter

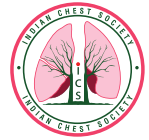


Facebook



Most performing posts/ reels on Facebook





Instagram

indianchestsociety 9+

233 Posts 378 Followers 21 Following

Indian Chest Society
The Indian Chest Society is a not for profit society with the primary goal to foster educational and research activities in respiratory medicine

Professional dashboard
900 accounts reached in the last 30 days.

Edit Profile

ERS Congre... Podcast Webinar's Asthma Week NAPCON21

Most performing post on Instagram

Reel insights

National Doctors Day is on 1st July and ICS is running...

Kate Bush · Running Up That Hill (A Deal With God)
June 30 · Duration 1:00

1132 10 1 3 2

Reel Insights ⓘ

Instagram and Facebook plays 1,185

Instagram likes and Facebook reactions 10

YouTube

Channel analytics

Overview Content Audience Research

Your channel got 516 views in the last 28 days

Views: 516 (+66 more than usual)
Watch time (hours): 21.1 (About the same as usual)
Subscribers: +20 (About the same as usual)

Channel analytics

Current subscribers: 380 (+20 in last 28 days)

Summary
Last 28 days

Views: 516 (+66 more than usual)
Watch time (hours): 21.1 (About the same as usual)

Channel content

Video analytics

Overview Reach Engagement Audience

This video has gotten 181 views since it was published

Views: 181 (+71 more than usual)
Watch time (hours): 18.8 (10.0 more than usual)
Subscribers: +7

Indian Chest Society (ICS) Presents Webinar On

HERMES 3.0
"A Respiratory Update"
All You Need To Know

HERMES 3.0 "A Respiratory Update"

100 views · 3 weeks ago

Most performing video on YouTube (Best of Napcon)

Webinar -14th October 2022



ICS at ERS Congress Barcelona



ICS leadership meets the Turkish Thoracic Society at the ERS Congress in Barcelona



ICS Meeting the ELF team at The ERS congress at Barcelona



ICS meets the Brazilian Thoracic Society leadership at the ERS congress at Barcelona



ICS meets the Brazilian Thoracic Society leadership at the ERS congress at Barcelona



ICS meets the ERS leadership at the ERS congress in Barcelona



ICS leadership meets the ACCP leadership at ERS congress Barcelona

Thank you to all ICS members for liking and subscribing to our YouTube channel and following our Social Media handles.

Please like, subscribe our social media handles for regular updates-



@indianchestociety



Indian Chest Society



Indian Chest Society



Indian Chest Society



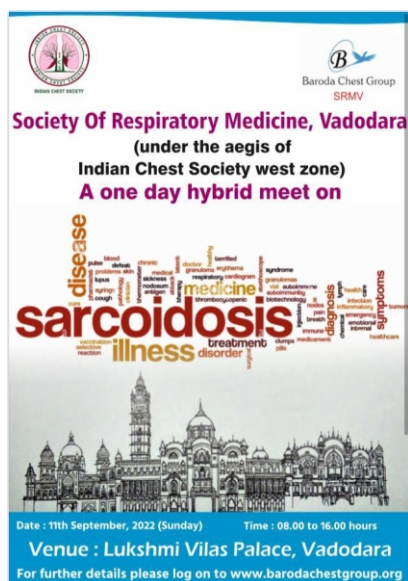
Indian Chest Society

ICS State Activities

West Zone

1. Hybrid Meet on Sarcoidosis - Vadodara, 11th September 2022

A one-day Hybrid meet was organized by the Society of Respiratory Medicine, Vadodara under the aegis of the ICS west zone. The event took place at Lakshmi Vilas Palace from 8-4 pm. It was very well organized and appreciated by the delegates.



Scientific Programme		
08:00 - 08:30 Registration and Breakfast		
08:30 - 10:30	Plenary Session	Moderator: Dharmesh Patel
<ul style="list-style-type: none"> Sarcoidosis update: approaching the disease from multiple directions Robert Baughman (Pulmonary Physician, University of Cincinnati, USA) (ONLINE) The Sarcoidosis - TB conundrum Deepak Talwar (Senior Consultant & Chairman, Metro Respiratory Centre, Noida) Imaging Sarcoidosis Bhavin Jankharia (Radiologist, Picture This, Mumbai) The Pathology of Sarcoidosis - Grappling with the Granuloma Sanjay Mukhopadhyay (Pulmonary Pathologist, Cleveland Clinic, USA) (ONLINE) 		
Discussion over Tea / Coffee		
10:30 - 13:00	Organ Specific	Moderator: Neel Thakkar
<ul style="list-style-type: none"> Ocular Sarcoidosis Avinash Pathangay (Network Director of Education, L V Prasad Eye Institute, Vishakhapatnam) Cardiac Sarcoidosis Shomu Bohra (Consultant Electrophysiologist, U N Mehta Institute of Cardiology and Research Centre, Ahmedabad) Neurosarcoidosis Rohit Benjamin (Professor, Dept of Neurology, Christian Medical College, Vellore) Cutaneous Sarcoidosis Sujay Khandekar (Professor, Dept of Dermatology & Venereology, AIIMS, New Delhi) Rheumatological manifestations Sapan Pandya (Rheumatologist, Vedanta Institute of Medical Sciences, Ahmedabad) Kidney and Sarcoidosis Shahir Gang (Chairman, Dept of Nephrology, Muljibhai Patel Urological Hospital, Nadiad) 		
13:00 - 14:00 Lunch Break		
14:00 - 16:00	Pulmonary Sarcoidosis	Moderator: Arpan Shah
<ul style="list-style-type: none"> Achieving the Diagnosis Bhishk Agrawal (Professor, Dept of Pulmonary Medicine, Post Graduate Institute, Chandigarh) Treating the Disease Sahajal Dhooria (Associate Professor, Dept of Pulmonary Medicine, Post Graduate Institute, Chandigarh) Sarcoidosis in India Moderator: Sonia Dalal Sarcoidosis - Bhishk Agrawal, Sahajal Dhooria, Amit Dave Udayan Kachhhi, Agam Shirvastava, Geet Maheshwari Case Presentation SRMV (BCG) Members 		
Open House Over Tea/Coffee		





2. Workshop on Interventional Pulmonology - Jaipur, 3rd-4th December 2022

The state chapter of ICS (Rajasthan) and RHL Lung Center of Rajasthan Hospital organized a two-day update workshop on Interventional Pulmonology on the 3rd and 4th of December 2022. It was successfully concluded with the participation of 80 young pulmonologists across the state of Rajasthan physically and almost 1000 pulmonologists joined the online link in almost all the states of India. The chief guest of the inaugural ceremony was Dr. S. K. Sarkar and it was presided over by Dr. Nalin Joshi. “The workshop aimed to teach the doctors skills of bronchoscopy and advanced procedures. This way advanced techniques can be provided at all levels of healthcare. Certain lung diseases can be diagnosed accurately with the help of lung biopsies such as ILD. Cryo biopsy is a new technique which provides excellent results told” Dr. Sheetu Singh, Director of Lung Center, RHL, and the organizing secretary of the conference. ILD can be diagnosed by CT scan but the accurate diagnosis of etiological factors can be made by cryo biopsy.

The different techniques were shown with the help of live cases and hands-on training on mannequins. The unique part of the workshop was the chance for young doctors to train on mannequins which would provide them confidence.

“Endobronchial ultrasound-guided FNAC of mediastinal lymph nodes (EBUS bronchoscopy) is a useful technique that helps in the detection of tumors and tuberculosis in lymph nodes around the lung”, said Dr. Nishtha Singh, Director, of Asthma Bhawan. having the first EBUS instrument of the state. It has provided a good tool to diagnose diseases that previously would not have been possible. Among the renowned faculty all across India was Dr. Sahajal Dhooria from PGI Chandigarh, Dr. Sonia Dalal from Baroda, Dr. Visweswaran Balasubramanian, Yashoda Hospital, Hyderabad, and Dr. Atul Luhadia, Udaipur. The workshop concluded with a quiz for the participants. The quiz was organized by Dr. Ambika Sharma, Assistant professor, Institute of respiratory disease, Jaipur.

South Zone

1. ICS National Talent Search 2022

ICS National Talent Search 2022 was conducted on October 8th & 9th in A. J. Institute of Medical Sciences & Research Centre, Mangalore. The programme was organised by department of Respiratory Medicine, A. J. Institute of Medical Sciences & Research Centre under the aegis of Indian Chest Society, South Zone. Total 54 postgraduate students participated. Programme was inaugurated on 09-10-2022 by Dr. Subhakar Kandi, Chairperson ICS south zone. Dr. Radha Munje, Governing Council Member, ICS presided over the function.

Dr. Subhakar Kandi (Hyderabad), Dr. Radha Munje (Nagpur), Dr. C. Ravindran (Kozhikode), Dr. R. Narasimhan (Chennai), Dr. D. J. Christopher (Vellore), Dr. T. Mohan Kumar (Coimbatore), Dr. Huliraj N. (Bangalore), Dr. Rajesh Venkat (Cochin), Dr. Giridhar (Mangalore), Dr. Ashwini Kumar Mahapathra (Manipal), Dr. Vishak Acharya (Mangalore) Dr. Preetam Acharya (Mangalore), Dr. R. C. Sahoo (Mangalore), Dr. Vishnu Sharma M. (Mangalore) were the faculty.

On 08-10-2022 ten cases discussions, five image discussions & prelims of Dr. Drupad Memorial Quiz were conducted. On 10-10-2022 ten cases discussions, five image discussions & final round of Dr. Drupad Memorial Quiz were conducted. It was decided to hold the 2023 programme in Kozhikode, Kerala under the leadership of Dr. C. Ravindran.



2. Postgraduate CME in Pulmonary Medicine - 18th September 2022

Venue : Yashoda Hospital, Secunderabad

Highlights :

- This program was meticulously designed to provide overall reviews and updates in the field of Pulmonology.
- The speakers were all experts in the field of pulmonology and were a great opportunity for all attendees to review and refresh all the essential and practical points.
- This conference was a highly rewarding educational and networking experience for all.
- The main aim of this 1-day conference was to help all post-graduate minds to excel through both theoretical and practical knowledge from those perfectly designed topics.

3. EBUS Workshop - 27th - 28th August 2022;

Venue : Naruvi Hospitals, Vellore

Highlights :

- This workshop was a 2-day hands-on training on animal models and mannequins, limited to 30 delegates only.
- Maximize the diagnostic yield of EBUS procedures.
- EBUS in lung cancer staging
- Lectures and videos on CP EBUS and Radial EBUS.



4. ICS South Zone endorsed Pulmo Mentor - 30th October, 2022

Venue : Yashoda Hospital, Somajiguda

Highlights :

- This programme provided practice updates on Interstitial Lung Diseases and Pulmonary Vascular disorders, and was limited to 50 delegates only.
- Panel discussion was held on real world case scenarios and troubleshooting.
- Latest updates from the best in the field of ILD & Pulmonary vascular disorders.
- Workstations on Rigid Bronchoscopy and Cryobiopsy.

4. State Pulmonologist Conference under South Zone was held from 12-14th August 2022 at KL University, Vijayawada. The theme of this Conference was "Unveiling New horizons of Pulmonology".

North Zone

1. BRONCHOSCOPY IN ICU WORKSHOP - Gurugram, 9th October 2022

BRONCHOSCOPY COURSE IN ICU was conducted under the aegis of the INDIAN CHEST SOCIETY (North Zone) and HARYANA CHAPTER OF INDIAN CHEST SOCIETY on 9th October 2022 at Olympus Centre, Gurugram Haryana under the guidance of Prof Dr. KB Gupta Dr. Rakesh Chawla.

Dr. Manoj Goel was the Course Director of the program. It was a houseful highly successful program with participants from Haryana, and all over India and Bahrain. The faculty included Dr. Bharat Gopal, Dr. Bobby Bhalotra, Dr. Avdhesh Bansal, Dr. Gargi Maitra, Dr. Anant Mohan, Dr. Pratibha Gogia, Dr. Sandeep Nayar, Dr. Prashant Saxena, Dr. Manoj Goel, Dr. Pritpal Kaur, Dr. Ajay Kumar, Dr. Anshum Aneja, Dr. Aditya Chawla, Dr. Saikiran Chaudhary, Dr. Lekender Chandi, Dr. Aditya Chawla.

A total number of 65 participants attended the program and were awarded a certificate and Bronchoscopy in ICU book authored by Dr. Manoj Goel and a program CD for future reference.

The workshop included a hands-on session on an animal model, simulation station, and instrument stations with practical tips and tricks by faculty.



2. Clinical Meet - Online, 26th November 2022

The Haryana Chapter of the Indian Chest Society organized a clinical meeting on 26th November 2022. with pan India presence under the leadership of Chairman Haryana Chapter Prof KB Gupta, Dr. Rakesh Chawla Chairman ICS North zone, and organizing secretary Dr. Manoj Goel & Secretary Dr. Sushil Dhamija.

Dr. Himanshu Verma Senior Vascular Surgeon from FMRI Hospital Gurgaon was the speaker. The topic was Catheter-directed management of Pulmonary Embolism. Panelists were Dr. Arjun Srinivasan, Senior Pulmonologist and Intensivist from Royal Care Hospital Coimbatore, and Dr.

Vinayak Agarwal Director of Cardiology from Fortis Gurgaon. The session was moderated by Dr. Avdhesh Bansal, Senior Pulmonologist and Intensivist from Apollo hospital, Delhi. It was well attended and appreciated by a national and international audience.

INDIAN CHEST SOCIETY (HARYANA CHAPTER)
MONTHLY CLINICAL MEETING (VIRTUAL)
 26th November, 2022 Saturday | 7.30 pm to 8:30 pm

TOPIC : Catheter Directed Pulmonary Thrombo-Embolectomy : When & How?

MODERATOR
Dr. Avdhesh Bansal
 Senior Consultant
 Pulmonology & Critical Care
 Apollo Hospital, New Delhi

SPEAKER
Dr. Himanshu Verma
 Senior Vascular Surgeon
 FMRI, Gurugram

PANELIST
Dr. Vinayak Agrawal
 Director, Cardiology
 FMRI, Gurugram

PANELIST
Dr. Arjun Srinivasan
 Senior Consultant, Pulmonology & Critical Care
 Royal Care Hospital, Coimbatore

<https://www.bigmaker.com/imagicahealth1/ICS-2611>

Prof. K B Gupta
 Chairman, ICS
 (Haryana Chapter)

Dr. Sushil Dhamija
 Secretary, ICS
 (Haryana Chapter)

Dr. Manoj K Goel
 Convener
 (Fortis, Gurugram)

Academic Support: **RESPIRA**

For Registration Contact Dr. Manoj K Goel : 9958840415

LIVE

Dr. Manoj Goel | **Dr. Himanshu Verma**

Dr. Vinayak Agrawal | **Dr. Arjun Srinivasan**

Dr. Sushil Dhamija | **Dr. Avdhesh Bansal**

LIVE

Catheter Directed Thrombolysis

- An infusion catheter is advanced up to pulmonary artery
- Thrombus is engaged
- Infusion Thrombolysis
 - Acts faster
 - Smaller dosage

(Diagram showing a catheter inserted into a pulmonary artery to reach a thrombus.)

(Small video inset showing Dr. Himanshu Verma speaking.)

East Zone

1. Paediatric Pulmonology meeting endorsed under the auspices of IAP in Kolkata.
2. Virtual meeting on Lung cancer endorsed by ICS, held under the banner of Apollo Cancer Centre.
3. Banner events on World Asthma Day in various cities as the East Banner events on World COPD day various cities in East.
4. Bihar conducted a RESPIRATORY UPDATE ON 26th - 27th February

The department of Pulmonary Medicine, AIIMS Patna organized a RESPIRATORY UPDATE 2022 on 26th - 27th February on hybrid mode under the aegis of the Bihar state chapter of the Indian Chest Society. The program was inaugurated by AIIMS Patna Director Dr. Saurabh Varshney and Dr. D. Behra Ex-Professor & Head, of Pulmonary Medicine PGI, Chandigarh. This update includes deliberation on various respiratory topics, panel discussion, and Case discussion. This update was organized under the chairmanship of Dr. D. P. Singh, Professor & Head, of Respiratory disease JNMC, Bhagalpur, and Dr. Deependra Kr Rai, Additional Professor & Head, of Pulmonary Medicine, AIIMS Patna was organizing secretary for the program. More than 100 people logins online and almost 50 delegates participated offline held in Hotel Chanakya, Patna. The Eminent speaker from all over India like Dr. D. Behra from Chandigarh, Dr. G. C. Khilani from Delhi, Dr. Raja Dhar from CMRI, Kolkata, Dr. Deepak Talwar from Metro Hospital, Noida, Dr. Vijay Kumar from Hyderabad, Dr. Amita Nane from Mumbai, Dr. Rupak Singla from Delhi and many more had given their deliberation.

RESPIRATORY UPDATE 2022
UNDER THE AEGIS OF INDIAN CHEST SOCIETY
BIHAR CHAPTER
26-27 Feb 2022 | 6 pm - 9 pm Virtual

26th Feb 2022 - Saturday
6 pm to 9 pm Virtual

Time	Topic	Speaker	Chair Person
6:00 pm to 6:25 pm	Hotel Chanakya, Patna Inauguration by Saurabh Varshney	Dr. Deepak Talwar	Dr. Saurabh Varshney Dr. P. K. Gupta Dr. G. C. Khilani Dr. G. C. Khilani
6:25 pm to 6:50 pm	Treatment of Primary Hyperparathyroidism (Pulmonary Perspective)	Dr. Agam Verma	Dr. B. B. Thakur Dr. H. S. Sharma Dr. S. K. Singh Dr. A. K. Singh
6:50 pm to 7:15 pm	Treatment of Pneumonia in Immunocompromised host	Dr. R. Vijay Kumar	Dr. H. S. Sharma (Moderator) Dr. S. K. Singh Dr. S. K. Singh Dr. S. K. Singh
7:15 pm to 7:40 pm	PPP Therapy in COPD	Dr. Animesh Ray	Dr. S. K. Singh (Moderator) Dr. P. K. Gupta Dr. G. C. Khilani
7:40 pm to 8:05 pm	Case Based Workshop on Hypertension	Dr. Animesh Ray	Dr. S. K. Singh (Moderator) Dr. P. K. Gupta Dr. G. C. Khilani
8:05 pm to 8:30 pm	Treatment of COPD Panel Discussion	Dr. D. P. Singh	Dr. S. K. Singh (Moderator) Dr. P. K. Gupta Dr. G. C. Khilani

27th Feb 2022 - Sunday
6 pm to 9 pm Virtual

Time	Topic	Speaker	Chair Person
6:00 pm to 6:25 pm	Treatment of Progressive Fibrosis LD	Dr. Raja Dhar	Dr. D. P. Singh (Moderator) Dr. S. K. Singh Dr. A. K. Singh
6:25 pm to 6:50 pm	Targeted Therapy in Lung Cancer	Dr. D. Behra	Dr. D. P. Singh (Moderator) Dr. S. K. Singh Dr. A. K. Singh
6:50 pm to 7:15 pm	Treatment of Post COVID-19 Pulmonary Sequelae	Dr. G. C. Khilani	Dr. D. P. Singh (Moderator) Dr. S. K. Singh Dr. A. K. Singh
7:15 pm to 8:00 pm	Case Presentation (All Cases of Pneumonia)	Dr. Animesh Ray Dr. S. K. Singh Dr. P. K. Gupta Dr. G. C. Khilani	Dr. D. P. Singh (Moderator) Dr. S. K. Singh Dr. A. K. Singh
8:00 pm to 8:30 pm	Panel Discussion on Pharmacological Treatment of COPD	Dr. D. P. Singh	Dr. D. P. Singh (Moderator) Dr. S. K. Singh Dr. A. K. Singh

RESPIRATORY UPDATE 2022
UNDER THE AEGIS OF INDIAN CHEST SOCIETY
BIHAR CHAPTER
26-27 Feb 2022 | 6 pm - 9 pm Virtual

Eminent Speakers

- Dr. D. Behra, Ex-Professor & Head, Pulmonary Medicine PGI, Chandigarh
- Dr. G. C. Khilani, Professor & Head, Respiratory Disease, JNMC, Bhagalpur
- Dr. S. K. Singh, Professor & Head, Respiratory Disease, JNMC, Bhagalpur
- Dr. Raja Dhar, Professor & Head, Pulmonary Medicine, CMRI, Kolkata
- Dr. Animesh Ray, Professor & Head, Pulmonary Medicine, AIIMS Patna
- Dr. Deepak Talwar, Professor & Head, Pulmonary Medicine, Metro Hospital, Noida
- Dr. Vijay Kumar, Professor & Head, Pulmonary Medicine, AIIMS Patna
- Dr. Saurabh Varshney, Director, AIIMS Patna
- Dr. D. P. Singh, Professor & Head, Respiratory Disease, JNMC, Bhagalpur
- Dr. S. K. Singh, Professor & Head, Respiratory Disease, JNMC, Bhagalpur
- Dr. A. K. Singh, Professor & Head, Respiratory Disease, JNMC, Bhagalpur

Inauguration on 27th Feb 5.50 pm by

- Inauguration by: Dr. D. Behra
- Inauguration Chief Guest: Dr. Saurabh Varshney
- Guest of Honour: Prof. Dr. Saurabh Varshney

Eminent Panelists

- Dr. Saurabh Varshney
- Prof. Dr. Saurabh Varshney

Organizing Committee

- Dr. D. P. Singh
- Dr. Saurabh Varshney
- Dr. Saurabh Varshney
- Dr. Saurabh Varshney

To Register & Join
https://live.imscghealth.com/respiratory_update_2022

5. Bihar Pulmonary conference (BIPCON 2022)

The Department of Pulmonary Medicine, AIIMS, Patna under the aegis of the Bihar chapter of the Indian Chest Society, organized the 4th Bihar Pulmonary Conference (BIPCON-22) which was held on 10th - 11th December at AIIMS, Patna. This conference was organized under the chairmanship of Dr. D P Singh, Professor & Head, of Respiratory disease JNMC, Bhagalpur, and Dr. Deependra Kr Rai, Additional Professor & Head, of Pulmonary Medicine, AIIMS Patna was organizing secretary for the program. Dr. Saurabh Karmakar was co-organising secretary, Dr. Sudhir Kumar was the chairman scientific committee and Dr. Sanjay Kumar was the co-chairman. Treasurer was Dr. Saket Kumar.

On 1st day of the conference (10th December 2022), a live workshop on Linear and Radial EBUS conducted. Hands-on did on EBUS as well as medical thoracoscopy, and video bronchoscopy. More than 40 delegates attended and received certificates of participation. The workshop Co-ordinator was Dr. Deependra Kumar Rai and Dr. Manoj Goel from Fortis Gurgaon and Dr. Shyam Krishnan from CMRI Kolkata were the expert faculty for the workshop.

On 2nd day of the conference, eminent speakers Like Dr. Rajendra Prasad from Lucknow, Dr. Raja Dhar from CMRI Kolkata, Dr. Deepak Talwar from Metro hospital Noida, Dr. Manoj Goel from Fortis Gurgaon, Dr. Amita Nane from Bombay hospital, Dr. P. R. Mahapatra from AIIMS Bhuwenswar, Dr. Sahiwal Khandelwal from Max Delhi have given deliberations on various topic of pulmonary diseases. More than 150 delegates participated in the conference. A quiz among Post graduates students of Medicine and Respiratory medicine was conducted and 24 PGs participated. First, second and third rankers were awarded with certificates and Rs. 3000, 2000 & 1000 rupees.



ICS East Zone State Chapter

Table 1. : List of Chairman and Secretary ICS State Chapter (East Zone)

Sr. No.	State	Post	Name	Membership No.	Updated Contact Details
1	Orissa	Chairman	Dr. Narayan Mishra	L-70	2nd Lane, Gajapati Nagar, Berhampur, Ganjam, Orissa. E-mail : doctor_narayan@yahoo.com M : 09337 505646
2	Bihar	Chairman	Dr. Deependra Kumar Rai	L-1191	Assistant Professor Dept. of Pulmonary Medicine & TB All India Institute of Medical Sciences, Phulwaria Sarif, Patna (Bihar). E-mail : deependra78@gmail.com M : 07764 981421
3	Jharkhand	Chairman	Dr. Syamal Sarkar	L-528	201, Gulmohar, Residency States, Modi Compound, Lalpur, Ranchi-834 001 (Jharkhand) E-mail : syamalsarkar@yahoo.co.in M : 094313 91501
4	Assam	Chairman	Dr. Pranab Baruwa	L-903	GNB Road, Near Hanuman Mandir New Guwahati, Assam-781 020 E-mail : Barwapranab@yahoo.com M : 09864 06807
		Secretary	Dr. Jogesh Sarma	L-917	VIII Jatia (Near L.P. School) P.O. Assam Sachivalaya Dispur, Guwahati-7810 063 E-mail : jogesh_sarma@yahoo.co.in M : 094350 11172
5	West Bengal	Chairman	Dr. Indranil Halder	L-986	Bandel Station Road, Opp. Water Tank (Children's Park) Bandel, P.O. Hooghly, Hooghly-712 103 E-mail : indranil.h@yahoo.com M : 09830 383102
		Secretary	Dr. Anirban Sarkar	L-1073	60/10, Nimchand Moitra Street, Baranagore, Kolkata-700 035 E-mail : anirbansrkr10@gmail.com M : 098301 26579

ICS West Zone State Chapter

Table 2. : List of Chairman and Secretary ICS State Chapter (West Zone)

Sr. No.	State	Post	Name	Membership No.	Updated Contact Details
1	Maharashtra	Chairman	Dr. Sanjeev Kumar Mehta	L-2645	Golden Palace, 191/192, Turner Road, Near Union Bank, Bandra (West) Mumbai-400 050 (Maharashtra) E-mail : dr.sanjeevmehta@hotmail.com M : 098210 45149
2	Madhya Pradesh	Chairman	Dr. Salil Bhargava	L-1362	Gyanpushp Villa, 48, Dhar Kothi, Indore-452 001 (M.P.) E-mail : bhargavasalil@hotmail.com M : 098270 60404, 088189 40404
3	Chhattisgarh	Chairman	Dr. Trinath Dash	L-1493	Rose, 108, A-Block, Gate 2, International Colony, Talpuri, Bhilai-490 026 (Chhatisgarh) E-mail : dr.trinathdash@gmail.com M : 094079 82786
4	Gujarat	Chairman	Dr. Manoj Yadav	L-830	B-155, Saurabh Park, Near Balaji Nagar, B/H Samta Flats Vadodara-390 021 (Gujarat) E-mail : drmanojyadav@yahoo.com M : 098250 60468
		Secretary	Dr. Amitkumar Dave	L-2093	G-101 Vishranti Tulips, Behind Maa Party Plot, Airport-Harni Road, Harni, Vadodara-390 022 (Gujarat) E-mail : amitdave1984@gmail.com M : 094265 23963
5	Rajasthan	Chairman	Dr. Mahesh Goyal	L-1703	1/31, Vidhyadhar Nagar, Jaipur-302 023 (Raj.) E-mail : drmaheshgoyal@gmail.com M : 09314504531
		Secretary	Dr. Neeraj Gupta	L-508	Opp. Savitri Girls College, Civil Line, Ajmer-305 001 (Rajasthan) E-mail : drneerajajmer@yahoo.com M : 098291 01942

ICS North Zone State Chapter

Table 3. : List of Chairman and Secretary ICS State Chapter (North Zone)

Sr. No.	State	Post	Name	Membership No.	Updated Contact Details
1	J&K	Chairman	Dr. Parvaiz Ahmed Koul	L-1370	SKIMS, Soura, Srinagar-190011 E-mail : parvaizk@gmail.com M : 094190 04822
		Secretary	Dr. Bikram Singh Datta	L-1327	Green View Colony, Lane-2 (Near Sacred Mission School), Aluchi Bagh, Srinagar-190 008 E-mail : drbsdutta@yahoo.co.in M : 094190 06854
2	Himachal Pradesh	Chairman	Dr. Malay Sarkar	L-1028	C/o Mr. Vishal Mohan, Folly Town End, Jakhu, Set-7, Shimla-171 001 (HP) E-mail : drsarkarmalay23@rediffmail.com M : 097361 71778
		Secretary	Dr. Devendra Singh Dadhwal	L-1197	V.P.O. Bongta, Teh. Dehra (Kangra) 177 101 H.P. E-mail : drdadhwal@gmail.com M : 070181 17110, 094180 17081
3	Haryana	Chairman	Dr. Krishna Bihari Gupta	L-317	6J/18, Medical Campus, PGIMS, Rohtak-124 001 E-mail : dr_kb_gupta@yahoo.com M : 098960 73449
		Secretary	Dr. Sushil Dhamija	L-744	Dhamija Chest Hospital, Rohtak Gate, Bhiwani, Haryana-127 021 E-mail : dhamijasushil@gmail.com M : 098120 30447
4	Punjab	Chairman	Dr. H. J. Singh	L-355	Ranjit Chest Hospital, 58, Kapurthala Road, Patel Chowk, Jalandhar-144 001 (Punjab) E-mail : drhj86@gmail.com M : 098142 17738
		Secretary	Dr. Vishal Chopra	L-730	27, Bank Colony, Patiala-147001 E-mail : drvishalchopra@gmail.com M : 09814 146788

ICS North Zone State Chapter

Table 4. : List of Chairman and Secretary ICS State Chapter (North Zone)

Sr. No.	State	Post	Name	Membership No.	Updated Contact Details
5	Chandigarh	Chairman	Dr. D. Behera	L-181	Professor & Head, Department of Respiratory Medicine, Post Graduate Institute of Medical Sciences and Research, Chandigarh-160 012 E-mail : dirlrsi@gmail.com M : 098157 05357
		Secretary	Dr. Ashok Kumar Janmeja	L-467	1117, Sector 32-B, Chandigarh-160 030 E-mail : akjanmeja@gmail.com, Ashokjanmeja@hotmail.com M : 096461 21621
6	Uttarakhand	Chairman	Dr. Girish Sindhwani	L-672	House No. 42, Ground Floor, Hill View Colony, Indra Nagar, Dehradun-148 001 E-mail : girish.sindhwani@gmail.com M : 078950 50321
		Secretary	Dr. Mayank Mishra	L-1459	Assistant Professor, Department of Pulmonary Medicine, AIIMS, Rishikesh-249 201 (Uttarakhand) E-mail : virgodrmayank@gmail.com M : 090587 88799
7	Delhi	Chairman	Dr. Randeep Guleria	L-410	K-11, Green Park Extension, New Delhi-110 016 E-mail : randeepg@hotmail.com M : 098101 84738
		Vice Chairman	Dr. Deepak Talwar	L-1479	E-47, Sector 55, Noida to Noida-201 301 E-mail : dtlung@hotmail.com M : 098990 50000
		Secretary	Dr. Anant Mohan	L-1842	Room No. 3098, 3rd Floor, Teaching Block, AIIMS, New Delhi-110 029 E-mail : anantmohan@yahoo.com
8	Uttar Pradesh	Chairman	Dr. Surya Kant	L-583	49-B, Jagat Narain Road, Near Medical College Crossing, Lucknow-226 003 E-mail : skantpulmed@gmail.com M : 094150 16858
		Secretary	Dr. Ashok Kumar Singh	L-1584	4/218-A, Subhedar Niwas, Vishnupuri, Kanpur-208 002 E-mail : dr_ashok_rhl@yahoo.com M : 098390 96578

ICS South Zone State Chapter

Table 5. : List of Chairman and Secretary ICS State Chapter (South Zone)

Sr. No.	State	Post	Name	Membership No.	Updated Contact Details
1	Tamil Nadu	Chairman	Dr. R. Narasimhan	L-515	20, Lake View Road, West Mambalam, Chennai-600 033 E-mail : drnrarasimhan@gmail.com M : 098400 52803
2	Karnataka	Chairman	Dr. P. A. Mahesh	L-494	Allergy Asthma & Chest Center 1397, IV Cross, Krishnamurthypuram, Mysore Dist, Karnataka-570 004 E-mail : mahesh1971in@yahoo.com M : 094480 44003
		Secretary	Dr. Vishnu Sharma	L-1246	Santhrupthi, Nodu Lane, Batta Gudda, Bejai, Mangalore-575 004, Karnataka E-mail : drvishnusharmag@gmail.com M : 094481 26321
3	Andhra Pradesh	Chairman	Dr. Ravindra Babu	L-345	14-25-17/12, Doctors Plaza, Opp Z.P. Office, Visakhapatnam-530 002 AP E-mail : ravindragbabu@yahoo.co.in M : 098481 89289
		Secretary	Dr. P. Yugandhar	L-1011	Pragna Chest Clinic, 23B-8-2, Kunapalli Vari Street, RR Pet, Eluru, WG Dt, Andhra Pradesh-534 002 E-mail : yugs@rediffmail.com M : 094402 25565, 093920 55615
4	Telangana	Chairman	Dr. R. Vijaya Kumar	L-151	1-4-159/1/36, Sri Chakra Enclave 6th Avenue Road, Sainikpuri Secunderabad-500 094 E-mail : drvijaipulmo@yahoo.co.in M : 098496 94016
		Secretary	Dr. Kandala Venu	L-634	S. D. Road, Navaketan Complex 310, Secunderabad-500 003 (A.P.) E-mail : kandalavenu_ap2003@yahoo.com M : 098496 66925
5	Kerala	Chairman	Dr. C. Ravindran	L-295	Navaneeth, Evanhi Palam Calicut-673 020 (Kerala) E-mail : crcalicut@gmail.com M : 094469 51712
		Secretary	Dr. Rajesh Venkat	L-1679	"Shreyas", 49/1884-B, Raghavan Pillai Road, Edappally, Kochi-682 024 (Kerala) E-mail : rajeshdhanya@rediffmail.com M : 097455 01976
6	Pondicherry	Chairman	Dr. Pajanivel R.	L-996	No. 24, Thiruvavuvar Street, Bharathypuram, Pondicherry-605 011 Kochi-682 024 (Kerala) E-mail : pajanivelr18@hotmail.com M : 09443 493122

Indian Chest Society Membership Benefits

1. Dual Membership of Indian Chest Society (ICS) and European Respiratory Society (ERS).
2. Access to online content on ERS website like Journals, Monographs, Breath Magazine, etc.
3. Receive lifelong printed copies of Lung India (An Indexed Publication) - six times a year.
4. Receive lifelong printed copies of Respire, the ICS Newsletter, three times a year.
5. A chance to get various ICS Travel Grants (ACCP, ERS, ATS), Short Term Fellowships and training, research Fellowships.
6. Discounted ICS Membership rates for CME / Conferences.
7. Discounted ICS Membership rates for ERS Conference.
8. Opportunity to participate in ICS research activities / Indian Registries for respiratory diseases and contribute to building robust data for the nation.
9. Participate in the ICS Kothari Young Researcher (PG) Award Session at NAPCON every year.
10. Can apply for the FIC - Fellowship of Indian Chest Society Awarded at Annual Conference.
11. Take part in the ICS Leadership Election conducted via e-voting.
12. Apply for various Awards, Fellowships, Orations given by the ICS at NAPCON.
13. Avail reduced registration fee for members at Annual ICS Conference.
14. Participate in the Annual General body and be a part of the decision making process of ICS.
15. Become a part of the electoral process of ICS e-voting rights to all life members.
16. Opportunity to become an office bearer of this prestigious society.
17. Enhancing knowledge by attending workshops and events under the ICS Banner

18. Association / Networking with Top Notch Doctors and Academicians in the field of Respiratory Industry.
19. Avail exclusive deals for ICS Members for International Conferences & other Medical Events.
20. ICS has exclusive tie up with Lung Health Organisation for travel grants, Rising Star programme and discount for their Lung Health Workshops.
21. Avail ICS-ERS Clinical and Research Fellowship ranging from 1-6 months.
22. Benefit of Short Term Fellowship in various Centre of Excellence within India in Interventional Pulmonology, Critical Care, Sleep Medicine, etc.
23. Ever increasing tie up with international societies with ACCP BTS on the anvil.

You can become our member online by going to www.icsorg.net, filling in your details and making an online payment. It's hassle free and gets completed in less than 5 mins. Go green and become an ICS member online today !!!

ICS Goals and Objectives

1. Promoting research and academic activities.
2. Organising periodic academic meetings and conferences at international, national, zonal and local level and to bring together periodically, the medical fraternity interested in Respiratory Medicine, at a common meeting point.
3. Organising periodic patient awareness and educational programmes to promote understanding about the important respiratory diseases.
4. To assist in creating technical manpower required to handle various diagnostic and therapeutic equipments related to Respiratory Medicine.
5. To assist in creating trained medical manpower required to handle various patient related activities.

ICS National Leadership (2021-22)



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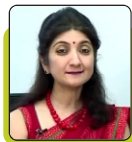
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Please visit our website www.icsorg.net*

ICS ELECTIONS 2022-23 RESULTS



INDIAN CHEST SOCIETY GB ELECTIONS – 2022-23

DECLARATION OF RESULTS

POST: PRESIDENT - ONE POST (for the term 2022 – 2023)

S. No.	Name	Result
1	Dr. Sundeep Santosh Salvi (L-415)	Elected (Unopposed)

POST: PRESIDENT ELECT - ONE POST (for the term 2022 – 2023)

S. No.	Name	Result
1	Dr. J K Samaria (L-310)	Elected (Unopposed)

POST: VICE PRESIDENT - ONE POST (for the term 2022 – 2023)

S. No.	Name	Result
1	Dr. Rakesh Chawla (L-737)	Elected (Unopposed)

POST: HON. SECRETARY - ONE POST (for the term 2022 – 2025)

S. No.	Name	Result
1	Dr. Raja Dhar (L-1453)	Elected (Unopposed)

POST: HON. TREASURER - ONE POST (for the term 2022 – 2025)

S. No.	Name	Result
1	Dr. Rajesh Swarnakar (L-465)	Elected (Unopposed)

POST: MEMBER OF GOVERNING BODY - THREE POSTS (for the term 2022 – 2024)

No. of votes polled – 1261

S. No.	Name	Votes Obtained	Result
1	Dr. Amita Nene (L-1986)	998	Elected
2	Dr. Anant Mohan (L-1842)	406	Elected
3	Dr. Paramez A. R. (L-2065)	317	Elected
4	Dr. Vishnu Sharma Moleyar (L-1778)	278	-

5	Dr. Ramesh Bharate (L-1111)	260	-
6	Dr. Kumar Utsav (L-1892)	246	-
7	Dr. Dharm Prakash Dwivedi (L-1778)	199	-
8	Dr. Santhosh Kumar (L-1347)	168	-
9	Dr. Tariq Mahmood (L-638)	127	-
10	Dr. Ajeet Singh Shaktawat (L-1577)	76	-

POST: ZONAL CHAIRPERSON NORTH ZONE - ONE POST (for the term 2022 – 2024)

S. No.	Name	Result
1	Dr. Gopichand Khilnani (L-320)	Elected (Unopposed)

POST: ZONAL CHAIRPERSON EAST ZONE - ONE POST (for the term 2022 – 2024)

S. No.	Name	Result
1	Dr. Sudarsan Pothal (L-1175)	Elected (Unopposed)

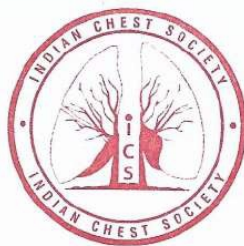
POST: ZONAL CHAIRPERSON South ZONE - ONE POST (for the term 2022 – 2024)

No of members who voted: 1176

S. No.	Name	Votes Obtained	Result
1	Dr. Chandrakant Tarke (L-1979)	656	Elected
2	Dr. Balamugesh Thangakunam (L-1003)	520	-

Dr. D J Roy

Dr. D J Roy
President
Indian Chest Society (2021-22)



Dr. D. J. Christopher

Dr. D. J. Christopher
Returning Officer
ICS GB Election 2022-23
Dated: 04-Oct-2022

Know Your Elected Governing Body Members 2022-23



DR. SUNDEEP SALVI

President

Director
Pure Foundation, Pune



DR. DHRUBAJYOTI ROY

Immediate Past-President

Pulmonologist
Manipal Hospital, Kolkata



DR. J. K. SAMARIA

President Elect

Director & Chief Consultant
Centre for Research and Treatment of Allergy,
Asthma & Bronchitis, Varanasi



DR. RAKESH CHAWLA

Vice-President

Sr. Consultant Respiratory Medicine,
Critical Care and Sleep Medicine
Interventional Pulmonologist
Jaipur Golden Hospital, Saroj Hospital,
Rajiv Gandhi Cancer Institute, New Delhi



DR. RAJA DHAR

Secretary

Director and HOD, Department of Pulmonology
CMRI Hospital, Kolkata



DR. RAJESH SWARNAKAR

Treasurer

Director and HOD,
Department of Pulmonology
Getwell Hospital and Research Institute, Nagpur

Know Your Elected Governing Body Members 2022-23



DR. G. C. KHILNANI

Chairperson-North Zone

Chairmen, PSRI Institute of Pulmonology,
Critical Care & Sleep Medicine
Delhi NCR



DR. CHANDRAKANT TARKE

Chairperson-South Zone

Senior Consultant and Interventional
Pulmonologist and Sleep Disorder Specialist
Apollo Hospitals, Hyderabad



DR. SUDARSAN POTHAL

Chairperson-East Zone

Professor, Department of Pulmonology
Shri Jagannath Medical College, Puri-Odiasha



DR. NEERAJ GUPTA

Chairperson-West Zone

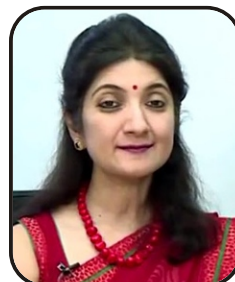
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Jawaharlal Nehru Medical College, Ajmer



DR. RADHA MUNJE

GB Member

Professor and Head,
Department of Pulmonary Medicine,
Indira Gandhi Government
Medical College and Hospital, Nagpur



DR. AMITA NENE

GB Member

Pulmonologist
Bombay Hospital & Medical Research
Centre, Mumbai

Know Your Elected Governing Body Members 2022-23



DR. ANANT MOHAN

GB Member

Director and HOD, Department of Pulmonory,
Critical Care and Sleep Medicine,
AIIMS, New Delhi



DR. PARAMEZ A. R.

GB Member

HOD, Pulmonary Medicine Department,
Lisie Hospital, Kochi



DR. RAVINDRAN C.

GB Member

Senior Consultant, Dept. of Pulmonology,
Chief of Medical Services,
Baby Memorial Hospital, Calicut



DR. INDRANIL HALDER

GB Member

Consultant Pulmonologist
Dr. Indranil Halder Clinic,
Hooghly



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Editor-Lung India

Director, Sher-i-Kashmir Institute of
Medical Sciences, Srinagar (J&K)



DR. D. J. CHRISTOPHER

Chairperson, Research Committee

Prof. and HOD, Department of Pulmonology
Christian Medical College, Vellore

RESPIRE QUIZ

(September - December 2022)

All of the following statements regarding Isoniazid - Rifapentin regimen (3 HP) for tuberculosis preventive therapy are correct except-

1. Frequency is three times a week.
2. Total number of doses are twelve.
3. Consumption of 90 percent of doses would qualify for treatment completion.
4. Must complete doses within 120 days.



Please send correct answers to Dr. Neeraj Gupta
at E-mail : drneerajajmer@yahoo.com and cc to icsofficeexecutive@gmail.com
First three correct winners stand a chance to feature in the next issue of Respire Quiz Section

Correct response for RESPIRE (May - August 2022)

It works by reduction of production of RNA by Bacteria. It is related to natural metabolites of *Nocardia Mediterranei*. Hydrazone with N-amino-N' - Methylpiperazine is most active form.

This molecule is-

- A. Rifampin B. Bedaquiline C. Clofazimine D. Ethionamide

Correct Answer : A. Rifampin

Congratulations to RESPIRE Quiz Winners for the issue (May - August 2022)

1. Dr. Parikshit Thakare (L-2661) 2. Dr. Sujith Thomas Chandy (L-2778) 3. Dr. Akula Anusha (L-2840)



The background is a dark, deep blue gradient. It is filled with numerous vertical streaks of golden light, resembling falling rain or sparks, which vary in length and brightness. Interspersed among these streaks are small, bright white and golden stars, some of which have a soft, glowing aura. In the upper corners, there are stylized representations of fireworks or bursts of light, with multiple thin lines radiating outwards. The overall effect is one of a festive, celebratory atmosphere.

2023

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Full prescribing information available on request.

Expiry date- November 2023

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