



# 6<sup>th</sup> IAPSM Young Leaders' National Conclave 2025

6th and 7th December 2025

**Theme:**

**“Digitalisation, Data and Decisions –  
Youth at the Forefront of Health Tech”**

**Pre-Conclave Workshops: 5th December 2025**

# SOUVENIR

**VENUE**

**Goa Medical College and  
Hospitals, Bambolim – Goa**

**ORGANISED BY**

**Department of Community Medicine,  
Goa Medical College & Hospitals in collaboration with IAPSM**



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## HON. HEALTH MINISTER'S MESSAGE

I am pleased to extend my warm greetings to the Indian Association of Preventive and Social Medicine (IAPSM) on the occasion of the Young Leaders' National Conclave 2025. The theme of this year's conclave, **“Digitalisation, Data and Decisions - Youth at the Forefront of Health Tech,”** captures the spirit of transformation in India's healthcare landscape. As we increasingly adopt digital tools and data-driven strategies, the role of young professionals becomes more crucial than ever. Their energy, innovation, and adaptability are shaping the way we deliver healthcare services and make informed public health decisions.

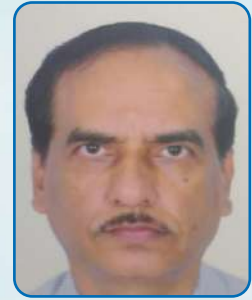
Today's technology has the potential to bridge longstanding gaps in access, equity, and efficiency within our healthcare systems. I believe empowering youth to lead this transformation will not only strengthen our healthcare delivery but also ensure a healthier and more resilient future for our country.

I congratulate IAPSM for organising this conclave and providing a platform for young leaders to engage, collaborate, and inspire meaningful change. Goa is proud to host such a dynamic gathering of minds, and I wish the event great success.

**Vishwajit P. Rane**  
**Minister for Health, Urban Development,**  
**Women and Child Development, Town and Country Planning, Forests**







## DEAN'S MESSAGE

It is my privilege to extend warm greetings to the Indian Association of Preventive and Social Medicine (IAPSM) on the occasion of the Young Leaders National Conclave 2025. This event reflects IAPSM's dedication to nurturing the next generation of public health leaders.

The theme, **“Digitalisation, Data and Decisions – Youth at the Forefront of Health Tech”**, is timely and important. The use of digital tools and reliable data is changing how healthcare is planned, delivered, and improved. These developments can help make healthcare more accessible, efficient, and fair. In this journey, young professionals play a vital role through their fresh ideas, adaptability, and commitment to innovation.

India is at a stage where technology can help close long-standing gaps in healthcare. From telemedicine services for rural areas to new diagnostic methods in cities, modern solutions are helping to overcome barriers. The energy and leadership of our youth will be central to building a strong and resilient health system for the future.

I appreciate IAPSM's efforts in bringing together young leaders to share experiences, learn from each other, and work towards positive change. Goa, with its welcoming environment, is an ideal setting for such an exchange of ideas. I wish the conclave great success and hope it leads to lasting improvements in public health.

**Dr. J. P. Tiwari**  
Dean,  
Professor and Head,  
Department of Nephrology  
Goa Medical College, Bambolim, Goa







## IAPSM PRESIDENT'S MESSAGE

It is with great honour and privilege that I extend my warm greetings to the organisers and participants of the **6<sup>th</sup> IAPSM Young Leaders' National Conclave 2025**, being held at the esteemed **Goa Medical College and Hospitals on 6<sup>th</sup> & 7<sup>th</sup> of December 2025**.

In an era increasingly defined by digital transformation, integrating technology innovation and data-driven insights into health systems is not just aspirational, but imperative. The theme for the Conclave “**Digitalisation, Data and Decisions: Youth at the Forefront of Health Tech**” is thoughtfully chosen. By placing youth at the forefront of this transformation, the Conclave recognises their critical role as innovators, catalysts, and future custodians of Public Health . The sessions and discussions envisaged herein are expected to illuminate the path towards more informed decision-making, efficient health interventions, and equitable healthcare delivery.

The Indian Association of Preventive and Social Medicine (IAPSM) has long upheld its commitment to nurturing future leaders who can advance the science and practice of Public Health. I am confident that the deliberations, exchanges, and collaborations that will take place during this Conclave shall significantly contribute to the professional development of its participants, and by extension, to the strengthening of our Public Health System.

I congratulate the organizing team at Goa Medical College and Hospitals, along with the dynamic members of IAPSM, for their dedication and meticulous efforts in bringing this event to fruition. I also extend my best wishes to all delegates for a productive, inspiring, and enriching experience. May the Conclave achieve all its envisioned objectives and serve as a beacon for future initiatives in Public Health leadership.

**Dr. Ashok Kumar Bhardwaj**  
**National President**  
**Indian Association of Preventive & Social Medicine**





## HON. SECRETARY GENERAL'S MESSAGE

Dear Esteemed Delegates,

It is my great pleasure and honor to welcome you all to the 6<sup>th</sup> IAPSM Young Leaders' National Conclave 2025 being organized by Department of Community Medicine, Goa Medical College, Bambolim, Goa. I extend my heartfelt congratulations and best wishes to the entire organizing team of IAPSM Young Leaders' National Conclave 2025 led by Prof. (Dr.) Jagadish A Cacodcar, Organising Chairperson and Prof. (Dr.) Hemangini K Shah, Organising Secretary for their dedication and efforts to make this event a grand success.

This year's theme - "**Digitalisation, Data and Decisions: Youth at the Forefront of Health Tech**" - is the need of the hour. Digital tools and data-driven approaches are reshaping public health practice across India and globally. Young professionals bring the curiosity, technical fluency, and creative drive we need to harness these advances for equitable, efficient, and evidence-led health systems. This conclave offers a unique national forum where youth and experts/ leaders in public health converge to chart the future of community medicine and public health.

I congratulate the organising team for putting together a thoughtfully curated program. The range of pre-conclave workshops, plenary sessions, and skill-building tracks—spanning digital health, artificial intelligence, surveillance, implementation research, and qualitative methods—reflects a clear commitment to practical learning and capacity building. I am certain that this conclave will set new benchmarks in academic rigor, scientific discourse, and professional networking. I urge our young delegates to make the most of these two days.

Engage actively in sessions, question assumptions, share your field experiences, and build cross-institutional networks. Seek mentorship from senior colleagues, collaborate with peers across states and disciplines, and bring home actionable ideas to implement in your institutions and communities. I am confident our faculty and senior professionals' guidance, critical feedback, and willingness to nurture new leaders will multiply the impact of this conclave far beyond these halls.

Let us use this conclave to translate data into decisions, digital tools into improved care, and youthful enthusiasm into sustainable public health impact. Wishing everyone a productive, thought-provoking, and enjoyable conclave at beautiful Goa.

Long Live IAPSM !!

**Dr. Manish Kumar Singh**  
Secretary General  
Indian Association of Preventive & Social Medicine





## MESSAGE

Warm greetings from the Land of Sun, Sand and Sea - GOA!

It is with immense pleasure, on behalf of the Organising Committee of the 6<sup>th</sup> IAPSM Young Leaders' National Conclave 2025, that I extend a heartfelt welcome to each one of you to the historic **Goa Medical College, Bambolim** - one of Asia's oldest medical institutions, established in 1842 (as Escola Medica) and renamed as Goa Medical College after Goa's liberation.

This year's Conclave is centered around the innovative and future-oriented theme “**Digitalisation, Data and Decisions**”, highlighting the pivotal role of **Youth at the Forefront of Health Tech**. The event aims to provide a National platform for young and aspiring public health professionals to exchange ideas, learn and grow in the ever-evolving fields of Community Medicine and Public Health.

We have thoughtfully curated an engaging academic program featuring renowned National and International experts, who will share their insights on contemporary and emerging topics. Their sessions are designed to ignite curiosity, inspire innovations and open up diverse avenues for career advancement among young leaders in public health.

I sincerely look forward to your enthusiastic participation - from esteemed Faculty, Senior Resident Doctors, Postgraduate students and young Professionals alike - to make this Conclave a memorable and enriching experience. Alongside the academic feast, I invite you to experience the warmth, beauty and vibrant culture of our picturesque Goa, known as Pearl of the Orient, which promises to leave you with the memories to treasure for a lifetime.

Welcome to Goa - where knowledge meets inspiration!

**Dr. Jagadish A. Cacodcar**  
**Organising Chairman**  
**Young Leaders' National Conclave 2025**







## MESSAGE

**Dear Young Leaders,**  
Namastey and Swagatam!

As we stand on the threshold of a new era in health, the synergy between technology, data, and innovation has never been more critical.

The theme of IAPSM Young Leaders National Conclave, 2025, "**Digitalisation, Data & Decisions: Youth at the Forefront for Health Tech**", is a testament of your power to shape the future of public health.

Hon'ble Prime Minister Shri Narendra Modi's call for a **Swasth Bharat** and **Ayushman Bharat** is not just a policy — it's a mission and you are the *Health Tech Generation* — where stethoscope meets smartphone, and data drives decisions. Digital tools are your scalpel, analytics your diagnosis — use them to heal not just communities, but systems. As Hon'ble Health Minister Shri J. P. Nadda urges the youth to lead India's health transformation with courage, skill, and compassion, may this Conclave that we have the honour of hosting in association with the Indian Association of Community Medicine (IAPSM), be your launchpad to turn vision into victory for the society at large.

Community Medicine needs young leaders like you who are disruptors, who can think, act, and inspire. Harness your latent power to make healthcare universal, inclusive, and future-ready. Be the doctors who not only prevent & contain epidemics but shape the nation's wellness... Remember, Nation first and First always.

Together, let's script a legacy where “Naya Bharat” leads the world in health, hope, and humanity in the era of digitalization.

**Dr. Hemangini Kishore Shah**  
**Organising Secretary**  
**Young Leaders' National Conclave 2025**



## Host Institute

**Goa Medical College and Hospital (GMCH)** is among the oldest medical colleges in India, located in Bambolim, Goa, first established in the year 1842 as Escola Medica, it was later renamed as Goa Medical College in 1963. Today, GMC is the premier tertiary care State-run medical institution and is affiliated to the Goa University.

The college campus is spread over an area of 139 acres and includes various buildings like the main college building, library, hostels, and hospital. Over the years, GMC has grown in size and reputation, and is now one of the most prestigious Medical colleges and Hospitals in India. The college offers undergraduate and postgraduate courses in various medical and paramedical disciplines, including MBBS, MD, MS, AHS, as well as Super Speciality courses (DM/M.ch).

In addition to academic programs, GMC also provides healthcare services to the Goan community through its fully equipped hospital that has over 1500 beds and is the largest hospitals in the State. The hospital provides various medical facilities like ICU, emergency services, and diagnostic services. A State-of-Art 540 bedded Super Specialty Block was recently inaugurated by Honorable PM.

The College has well-furnished lecture halls that are equipped with modern audio-visual aids like projectors and sound systems to facilitate effective teaching and learning. The college has well-equipped laboratories for different departments like Anatomy, Physiology, Microbiology, Pathology, Pharmacology and Community Medicine. The College has a well-stocked library that houses a vast collection of medical books, journals, and other resources. The library also provides access to various online medical databases. The college provides separate hostel facilities for both male and female students.

GMC has produced many notable Alumni, including renowned medical professionals, researchers, and public health experts. The College continues to attract students from all over India and Foreign Medical Graduates, who are drawn to its reputation for academic excellence and commitment to providing



## Department of Community Medicine



The Department of Community Medicine has its headquarters at the new Super-Speciality Block on the seventh floor. We have two health centers directly under the administrative control of Dean (GMC), namely RHTC Mandur & UHC St. Cruz. A third is a CHC for training purposes of Medical Interns & PGs in Sanquelim, which is under the administrative control of DHS.

Our Department is spearheading the Mobile Cancer Screening Abhiyaan of the Goa Government. Equipped with advanced technology, the van - donated via CSR by BEL and manufactured by CDAC - enables early cancer detection across Goa. So far, the Abhiyaan has been successfully implemented in 18 rural locations across Goa, setting a strong foundation for the campaign's expansion. In addition, the Department has successfully assisted in organising 17 Mega Medical Camps to extend healthcare access across Goa. Our Department also Heads the Model Anti Rabies Clinic (MARC) at Goa Medical College. We have previously successfully organised APCRICON 2017, EFICON 2023, IMA MSN West Zone Conclave 2024 & IntPcon 2024. With a strong focus on research and faculty development, the Department seeks to build epidemiological and biostatistical capacity through international collaborations and advanced training programs at Goa Medical College.



## About IAPSM



The Indian Association of Preventive and Social Medicine, is a National level Professional body in the field of Community Medicine / Public health. It was founded in 1974. It is a “not for profit” organization of specialists Preventive & Social Medicine / Community Medicine / Public Health.

Members of IAPSM are specialists in Preventive & Social Medicine, Community Medicine, Public Health, Epidemiology, Health Management, Health Promotion, and Family Medicine. It has 8000 plus members from across the India serving in Medical Colleges, National & state Government health departments, various health institutes working in the field of research, training, epidemiology, surveillance etc. Also, many of its Members are working as experts in International development agencies, NGOs or working as freelance public health consultants.

It is formally registered (No. S/14240) under Society Act XXI 1860 on 13th February 1984 in the office of Registrar of Society, New Delhi. IAPSM is dedicated to the promotion of public health by bringing its members' expertise to the development of health policies, an advocate for Medical education, Health Research, Health care and Health Programs and providing a forum for the regular exchange of views & information. IAPSM is an important stakeholder in Health care services, Medical Education and Public Health/Community Medicine.

The IAPSM effectively facilitate creation of evidence based Policy and planning by the Administrators and Public Representatives. IAPSM also contribute in promotion of peoples health through extending technical support like capacity building, monitoring and evaluation of health services/programs, epidemiological and health system research.



## YLNC 2025



Warm greetings to each one of you from the Land of Sun, Sea & Sands - Goa. It is with great enthusiasm that our dynamic Organising Committee of the 6<sup>th</sup> IAPSM Young Leaders' National Conclave 2025 cordially welcomes you to the historic venue of the Goa Medical College, Bambolim Goa, one among the oldest medical institutions in Asia (since 1842). Our conclave has an innovative theme **"Digitalisation, Data and Decisions"** which is especially to **"Youth at the Forefront of Health Tech"**. It will provide a National platform primarily to young Public Health Specialists & the budding ones to teach and learn various academic as well as additional skills and knowledge in the vast field of Community Medicine & Public Health. We have carefully designed a rich ensemble of novel topics of learning aligned with the Theme by renowned international & national subject experts who have graciously consented to ignite young minds and offer a variety of options for career progression in their bright lives ahead.

Looking forward to your active participation along with Faculty & Postgraduate students to make our Conclave a successful one, while you also soak in the spirit of our beautiful and picturesque Goa that will leave memories to cherish for a lifetime.

## IAPSM Head-Quarters Office Bearers



**Dr. Ashok Bhardwaj**  
National President



**Dr. Manish Kumar Singh**  
Hon. Secretary General



**Maj Gen Dr. Atul  
Kotwal SM. VSM**  
President Elect



**Dr. Annarao Kulkarni**  
Immediate Past President

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**Joint Secretary:** Dr. B Thirumala Rao

**Treasurer:** Dr. Medhavi Agarwal

**Chief Editor IJCM:** Dr. Pankaj Bhardwaj

**Past Secretary General:** Dr. Purushottam Giri

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<b>West</b>	Dr. Anish Sinha, Dr. Parag Chavda

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Minister for Health,  
Urban Development,  
Women and Child Development,  
Town and Country Planning, Forests



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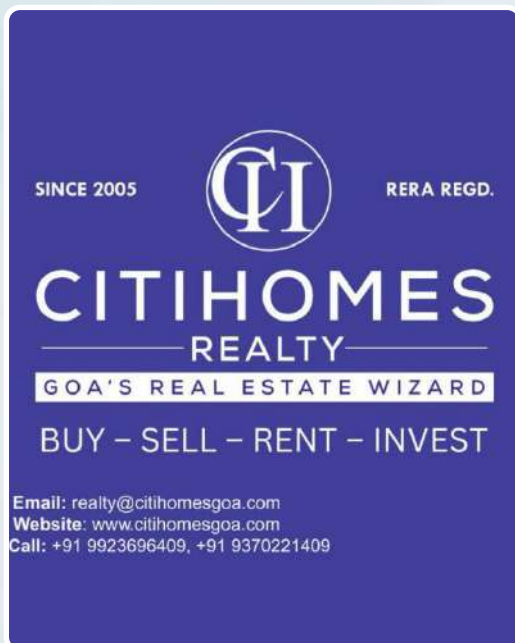


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Senior Resident



**Dr. Rukmita Naik**  
Junior Resident

## Sponsors for IAPSM YLNC



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## Pre-Conclave Workshops

Sr. No.	Title	Time	Faculty
1.	Implementation Research for transforming public health practice: focus on chronic conditions	9am-5pm	Dr Limalemla Jamir Dr Sharad Philip Dr Anindo Majumdar Dr Ankita Kankaria Dr Neha Dahiya
2.	Healthy Workforce for Viksit Bharat: Opportunities for Young Doctors	9am-1pm	Dr Bhavesh Modu Dr Ankit Sheth Dr Ankit Viramgami Dr Mohit Makwana
3.	Outbreak Investigation: A Hands-on Case Study	9am-5pm	Dr Abhishek Bicholkar Dr Kalyani S
4.	How to Build & Launch Your Online Course using AI Tools: A Hands-on Training	9am-5pm	Dr Sajjan Madapaddy Dr Anu Mohandas
5.	Health Technology Assessment (HTA)	9am-1pm	Brig. (Dr) Kunal Chatterjee Dr Kapil Pandya Dr Madhurima Ghosh Dr Seema Patrikar
6.	Systematic Review and Meta Analysis	2pm-5pm	Brig. (Dr) Kunal Chatterjee Dr Kapil Pandya Dr Madhurima Ghosh Dr Seema Patrikar
7.	R Basics and Data Visualisation	9am-5pm	Dr Rudresh Negi Dr Subba Krishnan

# SCIENTIFIC PROGRAMME

**YLNC Day One ( Saturday, 6<sup>th</sup> December 2025)**  
**Venue: New Auditorium, Next to Examination Hall**

TIME	SESSION	SPEAKER
9:00 - 9:15 AM	<b>Welcoming of Delegates, Theme, Competitions</b>	
9:15 - 9:30 AM	IAPSM YLNC 2025 YOUNG LEADERS' AMBASSADOR	Dr. Meenal Thakare
9:30 - 10:15 AM	Adolescent Health unlocked: from Systems to Communities- Navigating Healthcare, Nutrition, Research Challenges and Innovative Models	Dr. Arti Gupta Reddy Dr. Madhur Verma Dr. Ankita Kankaria Mrs. Lakshmi Durga Chava
10:15 - 11:00 AM	Future Ready Classrooms- Integrating Digital Technologies for Effective Learning	Dr. Yugantara R. Kadam Dr. Rashmi Hullali Dr. Deepali Jankar
11:00 - 11:30 AM	<b>KEYNOTE ADDRESS - 1: Digitalisation, Data and Decisions: Youth at the Forefront of Health Tech</b>	Dr. K. Madan Gopal
11:30 - 12:00 PM	<b>KEYNOTE ADDRESS - 2: From Data to Decisions: AI-Enabled EHRs for Effective Chronic Disease Surveillance</b>	Surg Cmde (Dr.) Sougat Ray
12:00 - 12:30 PM	Digital Health Intelligence: Navigating Ethics	Prof. (Dr.) Lisa Sarangi
12:30 - 1:00 PM	Screening Methods for Cancer Cervix: Which one to choose?	Dr. Pragti Chhabra
1:00 - 2:00 PM	<b>LUNCH BREAK</b>	
2:00 - 2:15 PM	Ayushman Bharat Digital Mission	Dr. Yogesh D. Potdar
2:15 - 3:00 PM	Drone Technology for Healthcare – A Flying Potential	Dr. Rashmi Agarwalla Prof. (Dr.) Bobby Paul
3:00- 3:30 PM	Not just a Clinic: How I created a scalable preventive care ecosystem as a PSM Doctor	Dr. Arundas H
3:30 - 4:00 PM	Strengthening of MPH Programs in India	Dr. Anand Krishnan Prof. (Dr.) Pankaj Bhardwaj Prof. (Dr.) Bobby Paul
4:00 - 5:00 PM	<b>Dr. Sushila Nayar Young IAPSM ORATION</b>	
5:00 - 6:00 PM	<b>Inaugural Ceremony</b>	
7:00 PM Onwards	<b>Networking Dinner at International Centre Goa</b>	

*\*Respected Guest Speakers / Orator / Panelists / Chairpersons are kindly requested to strictly adhere to their allotted timings to ensure smooth conduct & completion of the Scientific Programme.*

# SCIENTIFIC PROGRAMME

**YLNC Day Two (Sunday, 7<sup>th</sup> December 2025)**

**Venue: New Auditorium, Next to Examination Hall**

TIME	SESSION	SPEAKER
9:00 - 10:15 AM	<b>IAPSM YLNC 2025 YOUNG LEADERS' PARLIAMENT</b>	
10:15 - 11:00 AM	Mortality from pre-term births in LMIC: Understanding the causes and interventions for reducing the burden	Dr. Avinash Kavi
11:00 - 11:45 AM	Youth at the forefront of Tobacco Control: Leveraging Digitalisation & Research for a Tobacco Free India	Prof. (Dr.) Sonu Goel (Moderator) EXPERT PANEL DISCUSSION
11:45 - 12:15 PM	Data Digitalization, Automation and Integration for Strengthening Laboratory-Based Disease Surveillance	Dr. Deepak S. Khismatrao Dr. Tarak G. Shah
12:15 - 1:00 PM	From Human Touch to Digital Nexus: Bridging Human Connection	Dr. Mukta Parashar Panda
1:00 - 2:00 PM	<b>LUNCH BREAK</b>	
2:00 - 2:30 PM	Mind Matters: Unveiling Mental Health through the Lens of Community Medicine	Dr. Pracheth R
2:30 - 3:00 PM	FAP: Nurturing Young Leaders in Community Health	Dr. Abhishek Garg Dr. Malatesh Undi
3:00 - 3:30 PM	Recent Advances in National Tuberculosis Elimination Programme	Dr. Ashok Kumar Bhardwaj
3:30 - 4:00 PM	Technology Driven Health Research: From Field Notes to AI	Dr. Hinal Baria
4:00 - 4:15 PM	Recent Updates on Rabies	Dr. Manish Kumar Singh
4:15 - 5:15 PM	<b>IAPSM YLNC 2025 QUIZ - FINAL ROUND</b>	
5:15 - 6:00 PM	<b>Award Distribution &amp; Valedictory Ceremony</b>	
6:00 PM Onwards	<b>HIGH TEA</b>	

*\*Respected Guest Speakers / Orator / Panelists / Chairpersons are kindly requested to strictly adhere to their allotted timings to ensure smooth conduct & completion of the Scientific Programme.*

# **AAHAAR BILL, 2025**

**(AAHAAR: Hindi for Diet/Food)**

## **The AAHAAR (Nutrition, Food Literacy, and Consumer Protection) Bill, 2025**

A Bill to strengthen public health nutrition, ensure transparent food environments, regulate high-fat, high-sugar, high-salt (HFSS) advertising, protect traditional foods, enhance labeling accountability, and promote reformulation towards healthier dietary choices in India.

**Proposed by: Team\_01\_YLP\_2025IAPSM YLNC 2025**

**Scan Here to Access the Full AAHAAR Bill, 2025**





# YLNC Competitions

## **Young Leaders' Parliament**

A dynamic platform for emerging public health professionals to design, discuss, and propose impactful health policies. “Step into power, speak for health” Join the Young Leaders' Parliament where vision shapes policy. Engage in legislative simulations, craft impactful health reforms, and develop solutions for the public good.

## **National Level Quiz 2025**

Get ready for the YLNC 2025 Quiz – a stage for young minds to shine. From quick thinking to deep knowledge, every skill counts. Compete, collaborate and be part of an unforgettable learning experience.

## **Young Leaders' Ambassador Award 2025**

An excellent opportunity for young leaders dedicated to health, who have demonstrated commitment, innovation, and impact in their public health efforts.

## **Pix-Scripton**

Capture health through your lens! The On-the-Spot Photography Competition invites participants to showcase creativity and a keen eye by freezing unique moments from the Conclave. One theme, one click, endless perspectives.

## **Ad-VOCACY**

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## **Laughter-The Best Meme-dicine**

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## Table of Oral Paper Presentation

DAY 1 ; Date: 6.12.2025, TIME: 2:00 pm to 5:00 pm			
VENUE	Lecture Hall 4	Lecture Hall 5	Lecture Hall 6
THEME	Digital Health	Maternal & Child health + Nutrition	Miscellaneous

DAY 2; Date: 7.12.2025, TIME: 10:30 am to 1:30 pm			
VENUE	Lecture Hall 4	Lecture Hall 5	Lecture Hall 6
THEME	Communicable Diseases	Non-Communicable Diseases	Mental health

## Table of Poster Presentation

DAY 1; Date: 6.12.2025		
VENUE	New Examination Hall, adjoining Auditorium	
TIME	2:00 pm to 3:30 pm	3:30 pm to 4:30 pm
THEME	Non- Communicable Diseases	Maternal and Child Health
		Mental Health
		Nutrition

DAY 2; Date: 7.12.2025		
VENUE	New Examination Hall, adjoining Auditorium	
TIME	10:30 am to 12:00 pm	12:00 pm to 1:30 pm
THEME	Digital Health	Miscellaneous
	Communicable Diseases	



# **Abstracts for Oral Presentations**





# **Title: Sarcopenia in Southeast Asia: The Silent Epidemic Among Older Adults-Multi-National Systematic Review and Meta-Analysis of Prevalence and Risk Factors**

**Authors:** Dr. Vaibhavkumar Nitinkumar Shrivastav, Dr. Mohit N. Makwana, Harsh Patel

**Affiliation:** Shri. M. P. Shah Government Medical College, Janmnagar

**Study Design:** Systematic Review and Meta-Analysis

**Introduction & Objectives:** Sarcopenia, a progressive skeletal muscle disorder associated with falls, fractures, and mortality, poses significant challenges for Southeast Asia's aging population. This systematic review and meta-analysis determined sarcopenia prevalence among Southeast Asian older adults and identified associated risk factors.

**Materials and Methods:** We searched PubMed/MEDLINE, Embase, Scopus, and Web of Science through December 2024 for studies reporting sarcopenia prevalence in adults aged  $\geq 45$  years using validated criteria (AWGS, EWGSOP). Two reviewers independently conducted selection, extraction, and quality assessment using the JBI Critical Appraisal Checklist. We calculated the pooled prevalence using a random-effects meta-analysis, which provided 95% confidence intervals. Meta-regression and meta-moderator analysis explored heterogeneity sources. Publication bias was assessed using Begg's and Egger's tests and funnel plots. Sensitivity analysis, GRADE assessment, and Baujat plots evaluated robustness and evidence quality.

**Results:** Thirty-six studies (99,008 participants) from Thailand ( $n = 18$ ), India ( $n = 16$ ), and Indonesia ( $n = 2$ ) were included. Pooled sarcopenia prevalence was 26% (95% CI: 20-33%) with substantial heterogeneity ( $I^2 = 98.7\%$ ). Country-specific prevalence varied: Indonesia 56% (95% CI: 42-69%), India 32% (95% CI: 21-45%), and Thailand 19% (95% CI: 14-25%). Hospital-based studies reported a higher prevalence (31%) compared to community-based studies (21%). Countries with official sarcopenia policies demonstrated a lower prevalence (19%) versus those without guidelines (35%). Significant risk factors included advanced age ( $>75$  years: OR 11.23, 95% CI: 4.55-27.73), underweight (BMI  $<18.5$ : OR 6.49, 95% CI: 2.26-18.62), suboptimal calf circumference (OR 6.48, 95% CI: 4.44-9.45), and female gender (OR 1.57, 95% CI: 1.06-2.32). Meta-moderator analysis identified sample size (29.7%), country effects (16.5%), and national guidelines (13.9%) as the primary sources of heterogeneity. Publication bias was detected (Egger's  $p = 0.0014$ ), but it had a minimal impact on the estimates. The GRADE assessment indicated low certainty evidence.

**Conclusion:** Sarcopenia affects one in four Southeast Asian older adults, representing a substantial public health burden. Geographic variations and the protective effects of national policies support the implementation of systematic screening programs and evidence-based interventions targeting modifiable risk factors to address this growing epidemic.

**Keywords:** Sarcopenia; Southeast Asia; Meta-analysis; Prevalence; Older adults

## **Title: Association Between Spiritual and Religious Practices of Jainism and Perceived Health**

**Authors:** Dr. Harshita S. Jain, Dr. Ankita Parmar, Dr. Niraj Pandit

**Affiliation:** Community Medicine

**Study Design:** Cross sectional

**Background:** Mental health is a state of well-being in which individuals realize their potential, cope with normal life stresses, and contribute productively to their communities. Religious and spiritual practices are known to influence health behaviors, coping strategies, and stress management. Understanding their perceived impact on mental well-being can help design culturally sensitive mental health interventions.

**Aim:** To assess the association between religious and spiritual practices and mental health among college students practicing Jainism.

**Objectives:**

1. To assess the relationship between engagement in religious/spiritual Jain practices and mental health among Jain college students.
2. To document the frequency, type, and intensity of religious/spiritual practices among Jain students.
3. To evaluate Mental health status using validated tools.

**Methods:** A cross-sectional study was conducted at the campus of SBKS MI RC, Sumandeep Vidyapeeth, Vadodara. 100 MBBS students practicing Jainism were selected. A stratified sampling technique was used, sample taken was evenly distributed across the four academic years, with 25 students randomly selected from each year. Questions on religious and spiritual practices was made using Likert scale and scoring was done from 0-40. Perceived Stress Scale (PSS) was used to assess stress.

**Result:** 100 participants were taken for the study. 54% of the study participants were female and 46% male. 73% belonged to the age group of 18-21 years. 67% participants got spirituality scores of 14-26, which shows moderate engagement in spiritual practices. 81% participants got PSS score of 14-26, which indicates moderate level stress. It was observed that there was increase in spiritual practices in about 42% of participants during stressful times. 65% of participants believe that spiritual practices helps them in coping stress. The association between spiritual practices and stress scores was found to be statistically significant ( $p = 0.0307$ ).

**Conclusion:** This study demonstrates a significant difference between Jain college students' spirituality and mental health. The positive impact of spirituality on emotional resilience is reflected in the rise in spiritual practices during difficult times. According to the statistically significant correlation between spiritual engagement and reduced stress levels ( $p = 0.0307$ ), including spiritual and religious aspects in mental health promotion initiatives may improve

young people's general well-being. These results highlight the value of spiritually and culturally sensitive methods in promoting college students' overall mental health.

**Keywords:** Mental health, Religion, Spirituality, Jainism, Students



**Title: A Comparative Study of Digital Health Literacy Among Ageing Population in Rural and Urban areas of Goa**

**Authors:** Dr. Ira Sanjay Sahakari, Dr. Vedika Gad, Dr. Jagadish A. Cacodcar,

**Affiliation:** Goa Medical College

**Study Design:** Cross sectional

**Background:** Digital health, which includes mobile health and telehealth, integrates technology to promote wellbeing and manage diseases effectively. Digital Health Literacy (DHL) is the ability to seek, find, understand, and appraise health information from electronic sources and apply the knowledge gained to address or solve a health problem. As ageing leads to chronic diseases and diminished quality of life, enhancing digital health literacy among older adults is essential for better health outcomes and improved wellbeing.

**Aims/Objectives:** To assess digital health literacy levels and determine the associated factors amongst rural and urban populations in Goa.

**Methods:** A facility-based cross-sectional study was conducted among individuals aged 45 years and above attending the routine outpatient departments at the Rural Health and Training Centre, Mandur and the Urban Health and Training Centre, Santa Cruz. Data were collected using a semi-structured questionnaire with eHealth Literacy Scale (eHEALS). At a proportion of 20.4%, 95% confidence interval, 5% absolute error the sample size was calculated as 250 participants each from rural and urban areas, totalling 500. Systematic random sampling was employed.

**Results:** Overall, only 146(29.2%) participants had good DHL with a mean DHL score of 15.3+10.7. In urban area, 95(19%) participants had good DHL with a mean DHL score of 17.8+11.8 while only 51(10.2%) participants in rural area had good DHL with a mean DHL score of 12.8+8.89. Poor DHL was associated with age above 60 years, being illiterate, unemployed, rural residence, presence of chronic diseases, lack of personal digital devices, and absence of internet access at home.

**Conclusion:** Considering the low DHL among the ageing population, enabling environment with enhanced access to mobile phones/smartphones and familiarity with information and communication technology gadgets must be established to improve their DHL.

**Keywords:** Ageing; Digital health; Health literacy, eHEALS

**Title: Evaluation of Anemia Mukht Bharat Programs Interventions Service Utilization at the Beneficiary Level**

**Authors:** Dr. Abhishek Malu, Dr. Bhargav Rana; Dr. Nilesh G Patel; Dr. Niraj B. Pandit,

**Affiliation:** Community Medicine

**Study Design:** Community-Based Mixed-Method Cross-Sectional Study

**Background / Introduction:** Anemia continues to be a major public health concern across India, particularly impacting women, children and adolescents. The Anemia Mukht Bharat (AMB) program, initiated in 2018, implements a comprehensive strategy including iron and folic acid (IFA) supplementation, deworming, food fortification, anemia testing, and behavioral change communication. Despite these extensive national interventions, the prevalence of anemia remains high, highlighting knowledge and utilization gaps, especially in underserved populations.

**Aim:** To evaluate the coverage and utilization of AMB program interventions among targeted beneficiaries in Gujarat.

**Objectives:** 1. To evaluate the interventional strategies of the Anemia Mukht Bharat program.  
2. To assess the service utilization of the Anemia Mukht Bharat program at the beneficiary level.

**Materials and Methods:** A community-based mixed-method cross-sectional study was conducted in Chhota Udaipur district. Twenty-five Primary Health Centers (PHCs) were randomly selected. At each PHC, interviews were conducted with Medical Officers to appraise intervention delivery and structured surveys were administered to six eligible beneficiaries per PHC—including pregnant women, lactating women, women of reproductive age, adolescents and children (6–59 months and 5–9 years)—totaling 150 participants. Quantitative data included receipt and usage of IFA and deworming tablets; qualitative data explored awareness, experiences, and barriers through in-depth interviews.

**Results:** AMB's six interventional strategies were implemented at most centers, but delivery consistency varied. IFA coverage was 73.3% overall, highest among pregnant and lactating women, but very low in children (10% in ages 6–59 months; 7.14% in ages 5–9 years). Deworming coverage was 38%, lowest among children and adolescents. Only 22% had heard of AMB, and participation in awareness activities was minimal among youth. In total, only 20% of beneficiaries reported active and consistent program utilization. Key barriers were lack of awareness (63.3%) and unclear access pathways (14.7%).

**Conclusion:** The AMB program's interventional framework is robust, but significant gaps in execution and community-tailored delivery hinder its impact among the most vulnerable groups. Broader outreach, culturally-relevant education and improved last-mile service delivery are critical to augmenting awareness and service uptake, ultimately reducing anemia prevalence in rural India.



**Keywords:** Anemia; Anemia Mukht Bharat; Public health; Iron supplementation; Community utilization



# **Title: Dietary Influence on Nutritional Status of Tribal Women(15-49 yrs): A Cross-Sectional Study**

**Authors:** Dr. Manisha Tandon, Dr. Shital Dhoble

**Affiliation:** Community Medicine

**Study Design:** Cross sectional study

**Introduction:** Indigenous populations constitute 8.6% of India's population and are divided across 705 communities recognized as "scheduled tribes." Women in tribal area face a high burden of malnutrition due to limited dietary diversity, poor healthcare access, and socio-economic constraints. Their diets are predominantly cereal-based with inadequate pulses, dairy, fruits, and vegetables, resulting in undernutrition and anaemia. This study assessed the dietary habits of women in tribal area and their association with BMI and anaemia.

**Aim:** To examine how dietary pattern and meal frequency are associated with nutritional status.

**Objectives:**

1. To determine the prevalence of underweight, normal weight, overweight, and obesity among women in tribal areas aged 15–49 years using BMI.
2. To describe dietary pattern and food group frequency.
3. To estimate the prevalence and grades of anaemia among participants based on WHO criteria.

**Methodology:** A descriptive, community-based cross-sectional study was conducted over 3 months among 337 women in tribal area of reproductive age. Data were collected using a pre-tested, semi-structured questionnaire through interviews. Statistical tests were applied, with  $p < 0.05$  considered significant.

**Results:** Among 337 participants, 115 (34.1%) were underweight, reflecting a high burden of undernutrition. Women consuming only two meals per day had a higher prevalence of underweight (62.5%) compared to those consuming  $\geq 3$  meals (16.7%), ( $p < 0.0000001$ ). Cereals were the main staples, with rice consumed daily by 295 (87.5%) and wheat by 200 (59.4%). Overall prevalence of anaemia was 69.7%, with mild anaemia being most common (36.8%), followed by moderate anaemia (31.8%) and severe anaemia (1.2%). Only 30.3% of women were non-anaemic.

**Conclusion:** Dietary diversity strongly influences nutritional status among women in tribal area. Cereal-based diets with limited protein-rich foods, dairy, fruits, and vegetables were linked to undernutrition and anaemia. Improving access to balanced diets, coupled with culturally sensitive nutrition programs, is essential to address these disparities and enhance health outcomes of women in tribal area.

**Keywords:** Tribal; Nutritional status; BMI; Malnutrition; Dietary pattern

# **Title: Knowledge to Action: A Quasi-Experimental Study on Malaria & Dengue Risk Reduction through Health Education**

**Authors:** Dr. Aleena Joseph, Dr. Shuvajit Roy, Sarat Chandra Chattopadhyay Gov

**Affiliation:** All India Institute of Hygiene & Public Health, Kolkata

**Study Design:** Community-based Quasi-Experimental Study Design

**Introduction:** In recent years, mosquito-borne diseases (MBDs) have emerged as a serious public health concern in India. Despite ongoing control efforts, malaria and dengue continue to pose significant health threats, with rising cases and associated mortality in various regions of the country.

**Objectives:** To assess knowledge & practices on malaria and dengue prevention, identify gaps, and evaluate changes post-health education among adults in selected villages of Singur.

**Methodology:** A community-based quasi-experimental study was conducted from July 2024 to August 2025 among adult residents in selected villages of Singur, West Bengal. Following IEC approval, multi-stage random sampling was used to select 144 households, enrolling one adult participant per household. Baseline data were collected using a pre-designed, pre-tested structured interviewer-administered questionnaire covering socio-demographic details, environmental observation checklist, knowledge, and practices on malaria and dengue. Based on identified gaps, health education intervention package was designed and implemented. The package included lecture-discussions with participatory storytelling and local examples, and demonstrations. IEC materials were used to reinforce messages. Interactive Q&A sessions and short quizzes further engaged participants. ASHAs, ANMs, Panchayat members, and RHU & TC staff were also involved. Total of 5 session, each lasted 60–70 minutes, conducted in small locality-based groups. After three months, the same questionnaire was re-administered to assess changes in knowledge and practices. Data were entered in MS Excel 2021, and analysed using JAMOV version 2.6.13.

**Result:** Median age of the study participants was 40 years with IQR (34,50), and 53.5% were males, 37.5% belonged to the lower socio-economic class (As per modified BG Prasad classification 2025) and 34.7% were educated up to secondary level. The baseline assessment showed that 14.5% of participants had adequate knowledge of malaria and dengue across all six domains. On risk reduction practices, only 20.8% demonstrated adequate preventive practices. Post-intervention, there was a statistically significant improvement in composite knowledge scores (median increased from 41 [IQR 37.8-44] to 53 [52-53];  $p < 0.001$  on Wilcoxon Rank test) and practice scores (median rose from 3 [2-5] to 7 [6-8];  $p < 0.001$  on Wilcoxon Rank test).

**Conclusion:** The study highlights significant pre-existing gaps in community knowledge and practices that were effectively addressed through a structured health education intervention, underlining the importance of sustained community-based awareness and vector control efforts to mitigate malaria and dengue risks.

**Keywords:** Dengue, Knowledge, Malaria, Practices, Rura”

# **Title: Maternal and Child Health Service Utilisation in Urban Slum Migrant Populations of Aligarh: A Mixed-Method Analysis**

**Authors:** Dr. Tijo Rahim, Dr. Saira Mehnaz

**Affiliation:** Jawaharlal Nehru Medical College, Amu, Aligarh

**Study Design:** Mixed Method

**Introduction:** Given their restricted access to maternity and child health (MCH) services, migrant communities living in urban slums are an especially susceptible demographic. Due to structural, societal, and financial barriers, disparities in the use of prenatal, intranatal, postnatal, and child immunisation services continue to exist. Designing responsive health interventions requires an understanding of both the factors that promote and prevent service uptake.

**Objectives:**

1. To estimate the utilisation of MCH services among the migrant population in urban slums of Aligarh.
2. To identify the facilitators and barriers influencing service utilisation.
3. To explore gaps in the existing healthcare delivery system.
4. To suggest recommendations for improving MCH service delivery among migrant slum populations.

**Materials and Methods:** A community-based mixed-method study was conducted in selected urban slums of Aligarh. Quantitative data were collected from 421 married migrant women (currently pregnant or delivered in the last 5 years) using simple random sampling and analyzed with descriptive and inferential statistics. The qualitative component included 11 in-depth interviews and 6 focus group discussions with women, men, ASHA workers, ANMs, and medical officers, selected through convenience sampling. Thematic analysis was applied to qualitative data to complement quantitative findings.

**Results:** Utilisation of MCH services was suboptimal: only 42% of women received  $\geq 4$  ANC visits, 38% had institutional deliveries, 28% received adequate postnatal care, and 55% of children were fully immunised. Facilitators included the active role of frontline health workers, conditional cash transfers (JSY/JSSK), outreach programmes, and respectful care. Major barriers were low education and awareness, financial constraints, sociocultural norms, legal insecurities linked to migration status, and health system weaknesses such as poor outreach and inadequate public–private linkages. Identified gaps included weak data monitoring, limited male involvement, and lack of structured feedback mechanisms.

**Conclusion:** MCH service utilisation among migrant women in Aligarh's urban slums remains inadequate, shaped by intersecting individual, socio-cultural, and systemic barriers. While facilitators like frontline health workers and incentive schemes play a positive role, gaps in healthcare delivery constrains the impact. Strengthening outreach, enhancing awareness, integrating migrants into health systems, and fostering community engagement are critical to improving MCH outcomes in similar urban slum settings.

**Keywords:** Maternal and Child Health; Service Utilization; Migrant Population; Urban Slums; Barriers and Facilitators; Aligarh





# **Title: Health-Seeking Behavior and Barriers to Tuberculosis Diagnosis and Treatment in Rural Gurugram, India: A Mixed-Methods Study**

**Authors:** Dr. Vineet Kumar Pathak, Dr. Madhulekha Bhattacharya,

**Affiliation:** Department of Community Medicine, IMS, BHU

**Study Design:** Mixed-Methods Study

**Background:** Tuberculosis (TB) remains a significant public health challenge in India, exacerbated by delays in diagnosis and treatment, particularly in rural settings. Understanding health-seeking behavior (HSB) and associated hurdles is critical to achieving the goals of the National TB Elimination Program (NTEP)

**Objective:** This study aimed to assess healthcare utilization patterns, identify barriers and enablers to TB diagnosis and treatment, and explore patient and provider perspectives in rural Gurugram, Haryana.

**Methods:** A mixed-methods cross-sectional study was conducted among 201 TB patients registered in the Nikshay Portal (November 2021–October 2022) under CHC Farukhnagar. Quantitative data were collected via semi-structured interviews and analyzed using STATA SE, employing univariate and multivariate regression. Qualitative data from five focused group discussions (FGDs) across villages were analyzed using NVivo software to identify thematic insights.

**Results:** The mean age of participants was 35 years (SD 15.3), with 56.7% aged  $\leq 35$  years and 53.2% male. Good HSB was observed in 58.2%, significantly associated with knowledge that TB is infectious (OR 2.78, 95% CI 1.39–5.54,  $p=0.003$ ) and visiting health facilities when home remedies failed (OR 13.07, 95% CI 6.63–25.7,  $p<0.001$ ). Barriers included delayed diagnosis (32.3%), financial hardship (43.8% incurred costs), and limited awareness of TB's link to smoking (23.9%). Qualitative findings highlighted stigma, inadequate counseling, and reliance on private care as key hurdles. Conclusion: Enhancing HSB requires targeted education on TB's infectious nature and symptoms, alongside improved access to public health services and reduced out-of-pocket expenditure. These findings inform NTEP strategies for TB elimination by 2025 in rural India.

**Keywords:** Tuberculosis, health-seeking behavior, barriers, rural India, NTEP, mixed-methods

**Title: Burden of tuberculosis in an urban slum- A comparative analysis with national indicators**

**Authors:** Dr. Naveenprasad G, Dr. C. P. Silpa, Dr. Mayuri Raul, Dr. Vijay Kumar Singh

**Affiliation:** Seth Gs Medical College And Kem Hospital Mumbai

**Study Design:** Retrospective cross-sectional descriptive study

**Background:** Tuberculosis continues to be a major public health challenge in India, with the End TB Strategy setting ambitious targets for reduction in incidence and mortality. Treatment outcomes, drug resistance and paediatric case proportion are critical indicators for monitoring progress, particularly in urban slums where transmission and programmatic gaps persist.

**Objectives:** To assess the treatment outcomes, rifampicin resistance and paediatric case proportion among tuberculosis patients registered in an Urban Tuberculosis Unit (TU) in 2024, and compare them with national indicators and End TB targets.

**Materials and Methods:** A retrospective analysis of secondary data from the Malvani TU notification register (January–December 2024) was undertaken. Key variables included age, gender, type and site of disease, treatment outcomes, and drug resistance testing results. Proportions with 95% confidence intervals were calculated. Findings were compared with India TB Report 2024 indicators, and statistical significance was assessed using one-sample proportion tests.

**Results:** A total of 937 tuberculosis cases were notified from the Malvani TU in 2024. Treatment outcomes were available for 616 patients, of whom 543 were successfully treated, giving a success rate of 88.2%. While comparable to the national average (87.6%), this remained below the End TB target of 92% ( $p < 0.001$ ). Missing outcome data in 34% of cases highlights a major reporting gap. Universal Drug Susceptibility Testing (UDST) coverage was 45.9%, lower than the national average (~58%). Rifampicin resistance was detected in 15.1% of those tested, with notable resistance even among new cases. Pediatric cases (0–14 years) comprised 69 (7.4%), significantly higher than the national pediatric proportion (5.7%,  $p < 0.05$ ). Among pediatric cases, extrapulmonary tuberculosis constituted 60.9%, exceeding national levels (~44%).

**Conclusion:** Malvani TU data revealed a significantly higher pediatric burden, suboptimal treatment success relative to End TB targets, and worrying rifampicin resistance rates amidst low UDST coverage. These findings underscore the urgent need to strengthen pediatric case-finding, ensure universal DST, improve treatment outcome reporting, and intensify drug resistance surveillance in urban slum settings.

**Keywords:** Tuberculosis, Pediatrics, Treatment Outcome, Drug Resistance, End Tb

## **Title: Depression And Anxiety Among Institutionalized Children In Kerala; Cross Sectional Study**

**Authors:** Dr. Meera Varghese, Dr. Sruthi M. V.

**Affiliation:** Department Of Community Medicine, Sut Academy Of Medical Sciences, Trivvandum

**Study Design:** Cross Sectional study

**Introduction:** Institutionalised children are special group of children who feels deprived and are prone to develop psychiatric and affective disorders. The survival and development of child's optimal potential are disrupted because of illness or death of a parents which causes withdrawal, depression and anxiety. Adolescence is the transitional phase where the child goes through many physical and psychological changes. Adolescence health is inherently related to the environment and the conditions in which children live. If they pass through adolescence in the same state of mind it may negatively influence their performance and quality of life in later years.

**Objectives:** The present study was done to assess the depression, anxiety and contributing factors among adolescents in shelter homes.

**Methodology:** A cross sectional study was done in Thrissur and Ernakulam districts of Kerala in 12 shelter homes among 331 inmates between March 2021 to November 2022. The shelter homes were selected by simple random sampling. Sociodemographic data were obtained through semi structured questionnaire. Depression and anxiety were assessed through RCAD 25 questionnaire.

**Results:** 63.4% were females and 36.6% were males. Mean age was  $14 \pm 2.1$  years. Inmates staying in government shelter homes were 23.3% and 76.7% were staying in private shelter homes. 43.2% had both parents, 48.3% had only single parent and 8.5% don't have parents. 67.4% of inmates have a duration of stay  $< 5$  years. On ordinary logistic regression duration of stay OR 0.552, Help in studies OR 1.914, not having friends in school OR 2.170 and feeling of lonely OR 2.962 were the important predictors of depression and anxiety.

**Conclusion:** The prevalence of mild, moderate and severe depression and anxiety in present study are 77%, 12% and 11% respectively.

**Keywords:** Depression, Anxiety, Kerala, Institutional homes

**Title: Effect of an Interactive Audio-Visual and Social Media based Health Education Intervention on Knowledge and Attitude Regarding Childhood Injuries among Caregivers of Under Five Children in an Urban Slum of Kolkata**

**Authors:** Dr. Soumik Ghosh, Dr. Lina Bandyopadhyay

**Affiliation:** Department of Community and Family Medicine, AIIMS Deoghar

**Study Design:** Non Randomised Controlled Design

**Background:** Unintentional childhood injury is a major public health concern however they are largely preventable. Caregivers of children play an important role in preventing the injuries during the formative years of childhood. Health education is an important weapon to improve knowledge and change attitude which in turn brings about behaviour change.

**Objectives:** To find out the effect of health education intervention on the knowledge and attitude regarding childhood injuries.

**Methods:** The study was a community-based, non-randomised controlled interventional study conducted at an urban slum, from July 2022 to June 2024. Caregivers of under-five children residing in the area for more than one year were selected by simple random sampling from two purposively chosen areas. A total of 76 participants per group were enrolled at baseline, with 72 in each group completing the study. Data were collected using a pre-tested schedule and an observational checklist across three phases: pre-intervention (baseline survey on background characteristics, knowledge, attitude, and home hazards), intervention (group health education sessions using videos, posters, and leaflets through lecture and interactive methods followed by the video uploaded on YouTube and shared with the participants for reinforcement), and post-intervention (re-assessment after three months to evaluate effectiveness). Data were analysed using MS-Excel 2019 and SPSS 16.0, employing descriptive statistics, Mann-Whitney U test, and Wilcoxon signed rank test. Ethical approval was taken.

**Results:** The median age was 29 years in the intervention group and 25 years in the control group; all participants were female caregivers, mostly mothers. Median schooling was 10 and 8.5 years, respectively. Most belonged to the lower middle class. Post-intervention, the median knowledge score was 16 in the intervention group and 10 in the control group, showing a statistically significant improvement. Median attitude scores were 12 and 11, respectively, with no statistically significant difference.

**Conclusion:** The intervention enhanced the knowledge on childhood injuries. Health education programs to be conducted frequently and study participants were recommended to disseminate the knowledge and the materials gained during the process in the community. The study lays a strong foundation for future initiatives aimed at creating safer environments for children through community-driven efforts and continuous education.

**Keywords:** childhood injuries, intervention, non-randomised control trial, caregivers

**Title: Assessment of Academic Stress Among Medical and Engineering Aspirants in Jodhpur, Rajasthan**

**Authors:** Dr. Kalpana Joshi, Dr. Manoj Kumar Gupta

**Affiliation:** CMFM Department, AIIMS Jodhpur

**Theme:** Mental health

**Study Design:** Cross Sectional

**Background:** There is a notable prevalence of high academic stress among students preparing for medical and engineering entrance examinations. This stress is often exacerbated by the intense pressure to perform well, coupled with high parental and teacher expectations. In many cases, these external pressures not only contribute to academic stress but are also linked to mental health challenges such as depression and anxiety. Research suggests that students preparing for these exams face multiple stressors—academic, parental, personal, and environmental—that significantly impact their mental well-being. there remains a significant gap in research specifically examining with academic stress, particularly among students in Western Rajasthan Objective To assess the proportion of academic stress among medical and engineering aspirants in Jodhpur.

**Method and Methodology:** This cross-sectional study aimed to assess academic stress among students preparing for the NEET UG (National Eligibility cum Entrance Test for Undergraduate) and IIT JEE (Indian Institutes of Technology Joint Entrance Examination) entrance examinations. A total of 350 participants were included in the study, who met the specific inclusion criteria designed for this research. Data were collected using the Perceived Stress Scale (PSS), an established tool for measuring the degree to which individuals perceive their life situations as stressful. The English version of the PSS was utilized for this study.

**Results:** Out of all the participants included in this study, 52% were boys and 48% were girls. A significant portion of the participants, 60 % were repeat aspirants (commonly known as “droppers”). The participants’ ages ranged from a minimum of 15 years to a maximum of 20 years, with a mean age of 17.88 years. In terms of perceived stress levels, the study found that 80% of participants reported experiencing moderate stress, while the remaining 20% reported low levels of stress. Detailed findings of the study will be presented during the conference.

**Conclusion:** The findings of this study indicate that academic stress is prevalent among students preparing for medical and engineering entrance exams.

**Keywords:** Academic stress, PSS, Medical and engineering aspirants, NEET-UG, IIT-JEE



## **Title: Strengthening Digital Health Security: A Study on Cybersecurity Awareness Among Future Indian Medical Professionals**

**Authors:** Maj. (Dr). Pragadeeshwer S, Surg Capt. (Dr). Shabeena Tawar, Col. (Dr). Yadu Vir Singh

**Affiliation:** Armed Forces Medical College, Pune

**Study Design:** Descriptive Cross-sectional Study

**Background:** The rapid digitisation of healthcare system have increased the need for robust cybersecurity measures to protect sensitive patient data and healthcare information. The healthcare sector in India has digitally transformed, but the vulnerabilities have increased due to outdated systems, the quick adoption of digital technology without proper security, and the exposure of sensitive patient data. In 2024, healthcare industry was most targeted, accounting for nearly 22% of India's cyberattacks. Despite this, medical education in India lacks sufficient cybersecurity training, creating major gaps in knowledge and skills among the medical professionals. Strengthening cybersecurity awareness and practising responsibly in healthcare and medical training is important to protect patient data and ensure safe delivery of health services.

**Objectives:**

1. To assess the level of cybersecurity awareness, perceptions of online safety and adherence to secure digital practices among undergraduate medical students.
2. To identify the existing gaps to strengthen digital health security.

**Materials & Methods:** A descriptive cross-sectional study was conducted with 655 undergraduate medical students from an urban region in western India. We utilised a pre-validated, semi-structured questionnaire to assess individuals' knowledge on cybercrime, their password management practices, their methods of storing sensitive data on devices, and their perceptions of online safety. We used frequencies and percentages to look at the data in a descriptive way.

**Results:** The results showed, 66.9% were aware of cybercrime, but only 21.8% demonstrated a comprehensive understanding. About 46.3% felt safe online, while 42.8% did not update passwords regularly. Nearly 20.1% reported using personal devices for handling sensitive data, and 20.4% were uncertain about proper cybersecurity protocols. These findings reveal significant gaps in awareness and safe digital practices among medical students.

**Conclusion:** This study emphasised the critical necessity of incorporating structured cybersecurity training into the undergraduate medical curriculum. It is important for future medical professionals to be aware of, responsible with, and resilient in the digital world. This will help make digital health systems stronger and protect patient data in the digital age.

**Keywords:** Cybersecurity Awareness; Digital Health Security; Medical Students; Online Safety; Health Information Protection

**Title: Knowledge, attitude, and practices among postgraduate doctors about perinatal depression in a tertiary care hospital in Goa: A cross sectional study**

**Authors:** Dr. Rukmita Naik, Dr. Krutika Kharbe, Dr. Jagadish A. Cacodcar

**Affiliation:** Community Medicine

**Study Design:** Cross-sectional study

**Introduction:** Perinatal depression is defined as depression occurring in a woman during pregnancy or within 12 months of delivery. Perinatal depression manifests in different ways, varying in severity and period of onset: prenatal depression, “baby blues,” and postpartum depression. Perinatal depression has been associated with many poor outcomes, including maternal, child, and family unit challenges. The pooled prevalence of post-partum depression in India from 2024 is approximately 22%. Frontline healthcare workers play a critical role in early detection and management of perinatal mental health.

**Objectives:** To study the knowledge, attitude, and practices about perinatal depression among postgraduate doctors of Goa Medical College.

**Materials and Methods:** This cross-sectional study was conducted among postgraduate doctors of Goa Medical College from March 2025 to August 2025. 150 participants were included in the study. Convenience sampling was used. Data was collected by using a semi-structured questionnaire via google forms and analysed using SPSS software.

**Results:** A total of 150 doctors participated in the study. All the participants were aware about the term “Perinatal depression”. More than 90 % of the doctors do not routinely screen for perinatal depression with a questionnaire. Less than 10 % had heard about a screening questionnaire. Only about 6 % of the postgraduate doctors felt that they were competent in dealing with psychiatry symptoms. Almost 90% agreed that all health professionals should have the skills in recognizing symptoms of perinatal depression.

**Conclusion:** There is a need to educate doctors of all specialities about screening for perinatal depression thus leading to improvement in the quality of life of the perinatal women and to prevent any complications due to untreated mental illness. Dedicated perinatal mental health services should be stressed upon while preparing guidelines and incorporated in National Programmes

**Keywords:** Perinatal depression, postpartum, baby blues

**Title:** A Study on Nutritional Status and its Association with Eating Behavior

**Authors:** Dr. Mousumi Khatun, Dr. Ankur Chaudhari

**Affiliation:** Dept. Of Psm, All India Institute Of Hygiene And Public Health

**Study Design:** A community-based cross-sectional study

**Introduction:** Malnutrition in children, including both under nutrition and over-nutrition, poses a global concern. Children ages 6–12 years' experience rapid growth and cognitive development, making this stage crucial for establishing healthy eating habits. Objectives: To assess the nutritional status of children aged 6–12 years residing in a rural area of West Bengal and to determine its association with eating behavior among the study participants.

**Methodology:** A community-based cross-sectional study was conducted from November 2024 to May 2025 at RHU & TC, Singur, Hooghly district, West Bengal. Following ethical approval from the Institutional Ethics Committee, AIHH & PH, Kolkata, 150 children were selected through multistage random sampling. Data were collected through face-to-face interviews using a predesigned and pretested structured schedule, which included the Child Eating Behaviour Questionnaire (CEBQ), Dietary Diversity Score (DDS), and Household Food Insecurity Access Scale (HFIAS). Anthropometric measurements were taken, and Height-for-Age and BMI-for-Age z-scores were calculated using WHO AnthroPlus software to determine nutritional status. Data were entered in MS Excel 2021 and analysed using JAMOV version 2.6.17. Chi-square/Fisher's Exact tests and logistic regression were used to identify associations.

**Results:** Among the 150 participants, 52.7% were female and 60% belonged to the lower-middle socio-economic class (Modified BG Prasad SES, January 2025). Overall, 22.7% were undernourished (13.4% thinness, 9.3% severe thinness), 32% overnourished (15.3% overweight, 16.7% obese), and 18.7% had chronic malnutrition (12% stunted, 6.7% severely stunted). Inadequate dietary diversity was found in 60%, and 73.3% households experienced food insecurity. Undernutrition was significantly associated with acute illness (AOR: 8.72; CI: 2.74–27.7), pallor (AOR: 4.17; CI: 1.23–14.15), food fussiness ( $p < 0.001$ ), slowness of eating ( $p < 0.001$ ), and emotional undereating ( $p = 0.003$ ). Overnutrition was linked to higher SES (AOR: 3.81; CI: 1.25–11.57), enjoyment of food, desire to drink, satiety responsiveness ( $p < 0.001$ ), and food responsiveness (AOR: 5.66; CI: 1.17–27.27). Stunting was significantly associated with household food insecurity (OR: 12.68; CI: 1.66–96.77) and lower maternal education (AOR: 7.92; CI: 1.98–31.53).

**Conclusion:** Malnutrition and its consequences can be prevented through IEC for healthy eating behaviour, nutritional education, parental awareness, and school-based interventions.

**Keywords:** Body mass index, CEBQ, Dietary diversity, Food insecurity, Nutritional status.

**Title: Tobacco Free Educational Institution guidelines - Implementation status and barriers to implementation in Faridabad district, Haryana**

**Authors:** K. S. Pranav Sankar, Dr. Sumit Malhotra, Dr. Kiran Goswami, Dr. Sonali Jhanjee, Dr. Rakesh Kumar

**Affiliation:** All India Institute of Medical Sciences, New Delhi

**Theme:** Non communicable diseases

**Study Design:** Mixed -methods study

**Introduction:** The initiation of tobacco use typically occurs during adolescence, with progression to dependence over time. 18% of Indian students aged 13-15 have used tobacco at least once. The Tobacco Free Educational Institution (ToFEI) guidelines, launched under the National Tobacco Control Programme of India, is an initiative to safeguard children from exposure to tobacco use.

**Methods:** 105 schools were randomly selected in Faridabad district, Haryana, and ToFEI guidelines implementation was assessed using the scorecard provided under the tobacco control programme. Total and mandatory ToFEI scores were calculated for each school. Interviews of key stakeholders, including school principals, and focus group discussions involving students were carried out to understand implementation barriers.

**Results:** None of the schools assessed implemented all components of the guidelines. Total ToFEI scores ranged from 0 to 74, with a mean score (SD) of 13.6 (13.4). Government schools had significantly higher ToFEI scores as opposed to private schools ( $p$ -value<0.01). Limited awareness of the ToFEI guidelines, communication gaps between district authorities and schools, externalization of the problem, resistance from shopkeepers, demanding academic schedules, and weak enforcement of tobacco control laws were some of the facilitators identified. Strong anti-tobacco culture within schools and novel initiatives like the Dhakad programme played a facilitating role in keeping the school tobacco-free.

**Conclusion:** Study findings suggest poor overall implementation of ToFEI guidelines in schools of the Faridabad district. Barriers like principals' lack of awareness, poor communication from district authorities, weak Cigarettes and Other Tobacco Products Act (COTPA) enforcement, and resistance from shopkeepers need to be addressed for improved implementation.

**Keywords:** Tobacco, School, Adolescents, Anti-tobacco legislations



**Title: Perceptions of climate change and its impact on human health among adults of Gummadidala village, Telangana: A mixed method approach**

**Authors:** Dr. Rudrakshala Divyasri

**Affiliation:** Department of Community Medicine

**Study Design:** Mixed Method - Cross Sectional Study Design

**Background:** Climate change is a major global challenge involving long-term shifts in temperature and weather patterns, primarily driven by human activities like greenhouse gas emissions and deforestation. It affects physical, mental, and reproductive well-being and increases diseases such as malaria, diarrheal infections, and heat-related illnesses, particularly affecting vulnerable rural communities relying heavily on agriculture and natural resources. Most research has focused on urban populations, leaving a gap in understanding rural impacts. AIM To study the perceptions of adults in Gummadidala village, Telangana, regarding climate change and its impact on human health.

**Objectives:** 1) To determine the level of awareness and understanding of climate change  
2) To identify the perceived effects on health  
3) To assess the adaptation and mitigation strategies being employed.

**Methodology:** A mixed-method cross-sectional study was conducted in Gummadidala village, Telangana (Feb–Jul 2025), among adults  $\geq 18$  years residing there for  $\geq 1$  year. Quantitatively, 170 participants were selected via simple random sampling and surveyed using a pre-tested semi-structured questionnaire on socio-demographics, climate change awareness, health impacts, and adaptive behaviors. Qualitatively, five Focus-Group-Discussions ( $n=30$ ) were conducted using purposive sampling. Quantitative data were analysed using SPSS (descriptive statistics, Chi-square, Regression;  $p \leq 0.05$ ), and thematic analysis was done to identify major themes and subthemes from FGDs. Ethical approval and informed consent were obtained priorly.

**Results:** A total of 170 adults participated (mean age 45.8 years; 52.4% females). Most (53.5%) perceived climate change as fluctuations in weather patterns during different seasons, stating industrial and vehicular emissions (61.8%) and deforestation (56.5%) as major causes. Commonly observed changes were rising temperatures (73.5%) and irregular rainfall (58.8%). Respiratory (74.1%) and mosquito-borne diseases (66.5%) were major health impacts, with children and elderly most vulnerable. Only 10.6% felt well prepared. Major adaptive actions included afforestation (71.8%) and pollution reduction (58.8%). Education and Socioeconomic status were significantly associated with rate of understanding ( $p \leq 0.05$ ). FGDs revealed perceptions such as temperature extremes, pollution, and worsening chronic illnesses.

**Conclusion:** Participants showed only moderate understanding of climate change. Although adaptive measures like planting trees and other conservation methods were practiced, there is still a felt need to strengthen community education and health system preparedness.

**Keywords:** Climate Change, Rural Health, Mixed-methods study

**Title:** An epidemiological study of animal bite cases at Model Anti-rabies clinic (MARC) in a tertiary care hospital in Goa

**Authors:** Dr. Krutika A. Kharbe, Dr. Vishal KK, Dr. Jagadish A. Cacodcar

**Affiliation:** Goa Medical College and Hospital, Bambolim

**Study Design:** Cross-sectional

**Introduction:** Animal bites represent an important public health concern affecting both children and adults across the globe. Rabies is an endemic, vaccine preventable zoonotic disease. Dog bite is the major cause (99%) followed by cat bites, monkey bites, etc. About 59,000 people die from rabies each year.

**Objectives:** The current study aims to describe the epidemiological profile of animal bite cases attending MARC at Goa Medical College and to study the factors associated with it.

**Materials And Methods:** A cross sectional, hospital-based study was conducted at MARC at Goa Medical College. A pre-tested, semi-structured questionnaire was administered to the animal bite patients fulfilling the inclusion criteria. Data was analyzed using SPSS software and expressed in frequencies and percentages.

**Results:** Out of all the 390 patients, maximum were males (65.9%) and most of the patients were bitten by dog (87.9%). More than half of the bites were by stray animals (54.9%) and the most common site was lower limbs (61%). Category 2 bites were more frequently encountered while treating the patients (66.7%). Animal bites were more common during the evening hours of the day (48.2%), the frequency of the bites were seen more during summer season. Majority of the patients reported to hospital within 6-24 hours following the bite (47.2%). Among those who reported late, unawareness about the vaccine was the most common reason (50%). More than three-fourth of the patients took immediate measures for the wound before coming to the hospital (88.7%). There is a significant association between education and knowledge of rabies among patients. Also awareness about anti-rabies vaccines and immunoglobulin availability was associated with education level ( $p < 0.05$ )

**Conclusion:** Our present study reveals that the frequency of animal bite cases were more during the summer season and evening hours probably due to increased human-animal interaction during these periods, based on this finding awareness can be generated among people to be careful during these periods. There is a need to strengthen awareness about the availability of functional anti-rabies clinic in Goa Medical College, mass media platforms such as RJ-led radio programs and community campaigns can be used to spread awareness.

**Keywords:** Animal bite, Epidemiological, Model Anti-rabies clinic, Rabies, Tertiary care, Goa



**Title: Impact Of Active Tuberculosis Screening On Case Detection Trends In a Tertiary Hospital: A Retrospective Analysis Using Machine Learning-Based Surveillance Tools.**

**Authors:** Dr. Ankeeta Menona Jacob, Ajit M. Hebbale

**Affiliation:** Nitte Deemed To Be University, Community Medicine, Ks Hegde Medical Academy

**Study Design:** Retrospective Case Record Analysis Using Ai-Ml Tools

**Background:** The End Tb Strategy In India Emphasises Reduction In Tb Incidence, Mortality And Financial Burden. Passive Case Finding Of Tb Has Resulted In Missing Cases Of Tb Being Notified Every Year. Therefore, Active Tb Screening Is The Cornerstone Of India's National Tb Policy. The 4S Screening (Fever, Cough, Weight Loss And Evening Rise Of Temperature/Night Sweats) Was Initiated In a Tertiary Care Hospital In April 2025.

**Objectives:** To Compare The Trends In Reporting Of Tb Cases After Implementation Of Active Screening At a Tertiary Healthcare Facility Using Supervised Machine Learning Algorithms.

**Methodology:** Retrospective, Case Record-Based Observational Study Analysing Month-Wise Hospital-Level Tb Case Reporting Data From January 2023 To September 2025. The Present Study Applied Advanced Artificial Intelligence (Ai) And Machine Learning (Ml) Techniques To Evaluate The Performance Of Tuberculosis (Tb) Surveillance Models Under Two Different Case Detection Strategies — Passive Case Detection (January 2023 To March 2025) And Active Case Detection (April To September 2025) From Nikshay Data And Routinely Collected Data On The Medical College Performance In Ntep. Random Forest And Gradient Boosting Regressors Were Used To Predict Changes In Tb Caseloads. Long Short-Term Memory (Lstm) Networks Were Used To Forecast Patient Loads.

**Results:** The Random Forest Model Had The Most Robust Predictive Capability Across Both Phases ( $R^2$  Value- 0.91) For Passive Detection And 0.87 For Active Detection, Confirming Its Adaptability To Complex, Multivariate, And Slightly Imbalanced Datasets. A Two-Sample t-Test Was Conducted On The Predicted Versus Observed Microbiologically Confirmed Tb Cases To Assess The Differences In Terms Of Case Outcomes Between The 2 Phases. A Mean Case Difference Of 42.3 Cases Per Month Was Seen Between The 2 Phases (p-Value 0.018). The Calculated Cohen's d Value (0.68) Suggested a Moderate-To-Strong Effect Size. Complementary To Regression Models, Lstm-Based Time-Series Forecasting Predicted a 4–6% Rise In Total Tb Incidence During Post-Monsoon Months, Aligning With Epidemiological Expectations Of Elevated Respiratory Infections.

**Conclusion:** There Is a Significant Change In The Pattern Of Reporting Of Cases In The Active Screening Phase And a Slight Increase In Post-Monsoon Months.

**Keywords:** Tuberculosis, Screening, Random Forest, Forecasting, Artificial Intelligence

**Title:** Knowledge, attitude and practice about red eye among rural community in Goa

**Authors:** Naik Tanay Bhanu, Dr. Sparsh Naik, Dr. Vivek Naik

**Affiliation:** Dept of Community Medicine, Goa Medical College

**Study Design:** Cross-sectional community based

**Background:** Red eye is one of the most common ophthalmological complaints among patients coming to the general outpatient department. However, red eye may not always be a symptom of an infection or an allergy, but may be due to various other causes. Redness when associated with pain or decreased vision can be indicative of an ophthalmic emergency, which may lead to permanent loss of vision. According to previous similar studies, awareness about the causes of red eye other than infection has been seen to be less among the rural population. The findings of this study will provide information on eye health awareness among the rural people and help in identifying gaps in the public health awareness activities, especially regarding ophthalmic diseases.

**Objectives:** To assess knowledge, attitude and practices about red eye among rural community in Goa.

**Materials and Methods:** A Descriptive Cross Sectional study was conducted after obtaining Institutional Ethics Committee approval among 117 people above 18 years of age visiting the Rural Health and Training Centre General OPD using systematic random sampling method over a duration of 3 months. After informed consent, a pre-designed semi-structured questionnaire on knowledge, attitude and practices regarding red eye was used for data collection and data will be entered on MS Excel and analysed using jamovi statistical software by applying Chi square test.

**Results:** awaited

**Conclusion:** awaited

**Keywords:** Knowledge, Attitude, Practice, Red eye, Rural

**Title: Barbie/Ken? - Exploring the relation between Body Image Perception & Social Media usage in young adults**

**Authors:** Dr. Payel Sarkar, Prof Dr. Ranabir Pal

**Affiliation:** Mata Gujri Memorial Medical College & L.S.K Hospital

**Study Design:** Cross Sectional

**Introduction:** Body image, the mental picture of one's own size, shape & form deeply influences self esteem, emotional well-being & quality of life. Social media, as an omnipresent platform for image-centric content, often promotes unrealistic beauty standards, potentially contributing to body dissatisfaction among young adults.

**Objectives:** The study aimed to explore the relationship between body image perception & social media usage patterns in young adults, focussing on medical students. Methodology: An observational, cross-sectional study was conducted among 90 medical students & interns. Socio-demographic data & social media usage information were collected alongside the Body Self-Image Questionnaire (BSIQ). Medical or psychiatric comorbidities & incomplete forms were excluded from the analysis.

**Results:** Out of 90 participants, 61% were female, & the median age was 26 years. The most commonly used social media platforms were You Tube (100%), WhatsApp (100%) & Instagram (94%). About 49% of participants reported body dissatisfaction. A significant association was found between the type of content consumed (self-comparison, trend-following, mood-seeking) & higher BSIQ scores, indicating greater body image concerns. However, no significant association was observed between socio-demographic factors & BSIQ scores.

**Conclusion:** Social media notably influences body image perception among young adults. The type of content consumed plays a critical role, emphasizing the need for mindful & cautious engagement with social media platforms to mitigate negative body image impacts.

**Keywords:** Body image, Social media, Young adults, Body Self-Image Questionnaire (BSIQ)

**Title: Factors associated with uncontrolled diabetes mellitus among adult patients attending a tertiary care centre in Goa: a cross-sectional study**

**Authors:** Dr. Shefali Rama Harmalkar, Dr. Vanita G. Pinto da Silva

**Affiliation:** Department of Community Medicine, Goa Medical College

**Study Design:** Hospital-based cross-sectional study

**Background:** Diabetes mellitus (DM) is a major public health problem worldwide, with India often referred to as the “diabetes capital of the world”. Poor glycaemic control in patients with diabetes increases risks of complications and burden over the health system. Despite the availability of affordable and effective treatment, a large proportion of patients still remain with uncontrolled diabetes due to multiple factors. Goa, with its unique mix of urban and rural populations and rising prevalence of diabetes, provides an important setting to study these determinants. Identifying these factors associated with uncontrolled DM in the local context will help target interventions. (education, adherence support, medication/insulin optimization, screening programs).

**Objectives:** To identify sociodemographic, clinical, behavioural and treatment-related factors associated with uncontrolled DM.

**Methods:** Hospital-based cross-sectional study will be conducted across Inpatient wards of the tertiary care centre in Goa (General medicine and General surgery wards). Approval will be obtained from the institutional ethics committee. Study participants include adults aged  $\geq 18$  years with diagnosed type 2 DM undergoing inpatient treatment at Goa Medical College. Sample size calculated as  $n = z^2 \times p \times q / d^2$ , taking prevalence as 75%, absolute precision of 5% and  $z = 1.96$  at 95% confidence interval is found to be 288. Stratified random sampling will be used with Medicine wards as one strata and Surgery wards as another strata. Semi-structured questionnaire will be administered by face-to-face interview. Data will be entered in MS Excel and analyzed using SPSS software. Appropriate statistical tests will be applied.

**Results and Conclusion:** awaited

**Keywords:** Uncontrolled Diabetes Mellitus, Self-care, medication adherence, HbA1c

**Title:** Gaming disorder and its association with depressive symptoms among undergraduate students of Agartala Government Medical College, Tripura: A cross sectional study

**Authors:** Dr. Shubhadeep Biswas, Dr. Chanda Mog

**Affiliation:** Agartala Government Medical College

**Study Design:** Cross Sectional Study

**Introduction:** Gaming disorder is characterized by craving of the person to play video games and WHO has recognized gaming disorder as major problem.

**Objective:** To estimate the prevalence of gaming disorder and its association with socio-demographic, internet gaming characteristics depressive symptoms among undergraduate (UG) medical students of AGMC.

**Methodology:** A cross-sectional study was conducted among 375 UG students (1st prof to 3rd prof) at AGMC for a period of 20 days using a structured questionnaire The Nine-Item Internet Gaming Disorder Scale-Short Form (IGDS9-SF) and PHQ-9. Data analysis was performed by using SPSS version 25 and to find out the association. Chi Square and Man Whitney U test were used.

**Result:** The mean age of the subjects was  $21 \pm 1.79$ . Most of the respondents were male (56.8%) and hostel residents (42%). The Prevalence of Gaming disorder was 44.8% and the factors like type of game playing, time spend for gaming, device used, alter sleep pattern and depression symptoms were found significantly associated with gaming disorder.

**Conclusion:** The prevalence of gaming disorder was found quite high among the UG students of AGMC.

**Keywords:** Gaming Disorder, IGDS9-SF, PHQ-9



**Title: Prevalence Of Locomotive Syndrome And Its Relationship With Body Composition And Cardiometabolic Disorders Among The Geriatric Population At An Urban Health Centre In A Metropolitan City In Maharashtra: A Cross-Sectional Study**

**Authors:** Dr. Ajith Ramalingam, Rashmi Urkude

**Affiliation:** Grant Government Medical College and Sir JJ Group of Hospitals, Mumbai

**Study Design:** Cross-sectional study

**Background:** India is witnessing rapid population ageing and urbanization. Locomotive Syndrome (LS), characterized by reduced mobility due to impairment of locomotive organs, is common among the elderly and affects independence and quality of life. However, evidence on its magnitude and determinants in India remains limited.

**Objectives:** This study aimed to estimate the prevalence of LS and assess its association with body composition and cardiometabolic disorders among geriatric population at an urban health centre in a metropolitan city in Maharashtra.

**Materials and Methods:** A cross-sectional study was conducted among elderly individuals ( $\geq 60$  years) attending the outpatient department of an Urban Health Centre in Maharashtra. A total of 264 participants were selected through non-probability convenience sampling. After informed consent, sociodemographic details, clinical history, and anthropometric measurements (height, weight, BMI, waist, and hip circumference) were collected using a structured questionnaire. LS was assessed using the 25-item Geriatric Locomotive Function Scale (GLFS-25), the Two-Step Test, and the Stand-Up Test. LS was categorized into LS1, LS2, and LS3, corresponding to mild, moderate, and severe impairment in mobility and daily function, respectively. Associations between categorical variables and LS status were analyzed using the Chi-square test, with  $p < 0.05$  considered statistically significant.

**Results:** Based on GLFS-25, the prevalence of LS was 83.3% (95% CI: 78.3–87.6%), comprising 12.5% LS1, 15.5% LS2, and 55.3% LS3, while 16.7% were non-LS. By the Two-Step Test, 21.2% LS1, 48.5% LS2, and 30.3% LS3; by the Stand-Up Test, 45.5% LS1, 12.1% LS2, and 42.4% LS3. LS prevalence was significantly higher among females than males ( $p = 0.002$ ) and increased with age ( $p = 0.004$ ). Significant associations were observed with history of fall ( $p < 0.001$ ), hypertension ( $p = 0.033$ ), diabetes ( $p < 0.001$ ), smoking ( $p = 0.002$ ), obesity ( $p < 0.001$ ), and central obesity ( $p < 0.001$ ), while other variables showed no significant association.

**Conclusion:** Nearly half of the participants had severe LS (LS3). The condition was more common among females, older adults, and those with obesity, metabolic disorders, and history of fall. These findings highlight the need for early screening and preventive interventions to maintain mobility and promote healthy ageing.

**Keywords:** Body Mass Index, Cardiometabolic Diseases, Geriatrics, Locomotive Syndrome, Urban Population, Waist-Hip Ratio



**Title: Dynamics of Drug inventory management at a Rural Health and Training Centre using Mixed-method study**

**Authors:** Dr. Dixita Karapurkar, Dr. Hemangini K. Shah

**Affiliation:** Department of Community Medicine, Goa Medical College

**Study Design:** Concurrent Mixed-method Study

**Background:** Drug inventory management is an essential component of health system logistics, ensuring continuous drug availability while minimizing wastage and financial loss. Rural health institutions often depend on manual inventory systems. With increasing emphasis on digitalisation in healthcare, understanding existing inventory dynamics and staff readiness for digital transition is critical.

**Objectives:**

- i. To identify high-priority drugs requiring close monitoring.
- ii. To assess the pattern of drug movement
- iii. To explore the views of doctors, nurses, and ANMs through Focus Group Discussions on the challenges, opportunities, and training needs for digitalisation of drug inventory
- iv. To provide recommendations for strengthening the inventory system.

**Materials and Methods:** A concurrent mixed-method study was conducted at RHTC Mandur (June 2024–May 2025). The quantitative component included a record-based analysis of all listed drugs using ABC, VED, and FSN techniques, followed by an ABC–VED matrix for prioritisation. Data were extracted from stock registers and issue records. The qualitative component comprised Focus Group Discussions (FGDs) with doctors, staff nurses, and ANMs to explore perceptions on digitalisation needs and feasibility.

**Results:** Of 161 drugs analysed, 11.18% (18 drugs) accounted for 69.89% of total expenditure (Category A), 14.9% (24 drugs) for 20% (Category B), and 73.9% (119 drugs) for 10% (Category C). Based on VED classification, 60 drugs were vital, 82 essential and 19 desirable. FSN analysis revealed 112 fast-moving, 21 slow-moving, and 28 non-moving drugs. All groups of healthcare staff reported drug shortages, manual errors, and poor communication between pharmacy and clinical teams. Manual systems were seen as slow and inefficient. While digitalization was widely supported for improving stock tracking and coordination, concerns about training and infrastructure persisted. Overall, attitudes shifted from initial hesitation to readiness for adopting digital tools in inventory management.

**Conclusion:** Variations in drug utilisation patterns exist, highlighting the need to identify and closely monitor high-priority medicines. Manual inventory systems remain a significant barrier to efficient drug management at the primary care level. The study underscores institutional readiness for digital transformation, contingent upon proper infrastructure, workforce training, and inter-departmental coordination

**Keywords:** Drug inventory, Digitalisation, ABC-VED-FSN analysis, Rural

# **Title: Comparative Evaluation of Health Information from Traditional Search Engines and AI Tools: Assessment of Credibility, Reliability, Readability, and Satisfaction**

**Authors:** Dr. Anagha .J. Thakur, Dr. Abhinaya .R

**Affiliation:** Community medicine

**Study Design:** Cross -sectional study

**Background:** Access to credible and reliable health information is essential for medical students, the future prescriber. Traditional search engines (Google/Bing) have been primary sources for information. Recently, AI-based platforms (ChatGPT/Gemini) have gained popularity for rapid information retrieval. However, concerns remain regarding the accuracy, credibility, and readability of AI-generated content. Comparative evaluation helps determine whether AI tools are suitable and safe sources of health information in medical education.

**Objectives:** 1. To compare credibility, reliability, and readability of health information from traditional search engines (Google, Bing) and AI platforms (ChatGPT, Gemini) among students.  
2. To assess the reliability and quality of Google over AI-based tools for health information among medical faculty.

**Methods:** A cross-sectional study was conducted among 402 medical students of private medical college in Chennai. The sample size was derived from a previous study based on Nelson et al. Data were collected using a semi-structured questionnaire for students and the validated DISCERN tool for faculty assessment. Convenience sampling was applied, and analysis was performed using SPSS v28. Descriptive statistics summarized student preferences, and mean DISCERN scores were compared using ANOVA.

**Results:** Among 402 students, ChatGPT/Gemini outperformed Google/Bing in the following criteria : •Credibility: 339 (84.3%) •Reliability: 246 (61.2%) •Readability: 254 (63.4%) •Satisfaction: 218 (54.2%). Additionally, 302 participants (75.1%) believed AI tools could replace traditional search engines. Faculty evaluation using DISCERN for malarial vaccine content showed Google-sourced information scored higher than AI-generated content, with AI losing points on reliability and safety criteria.

**Conclusion:** AI tools are perceived by students as more credible, reliable, readable, and satisfactory. However, traditional search engines continue to provide more accurate, evidence-based content, as shown by faculty DISCERN scores. While AI enhances accessibility and engagement, expert validation remains essential to ensure reliability and safety. Further refinement of AI tools is needed to improve the accuracy of health-related information.

**Keywords:** DISCERN, ChatGPT, Google , Medical students

**Title: Exploring The Experiences Of Community Medicine Residents In District Residency Programme In A Metropolitan City Of Maharashtra- A Qualitative Study**

**Authors:** Dr. Aishwarya Balakrishnan, Dr. Neha Shet, Senior Resident, Dr. Geeta Pardeshi

**Affiliation:** Department of Community Medicine, Grant Government medical college, Sir JJ group of hospitals, Mumbai

**Study Design:** Qualitative study design

**Background:** The District Residency Program (DRP), launched by the National Medical Commission, started a three-month posting of postgraduate residents in district health systems to enhance practical skills, community engagement and understanding of district healthcare administration. In Mumbai, the residents are posted in the public health department of the Municipal Corporation which has the potential to give unique experience in urban health care system.

**Objective:** This qualitative study aimed to explore the expectations, experiences, perceptions and challenges of Community Medicine residents during their three-month District Residency Program in a Metropolitan City of Maharashtra.

**Methods:** A qualitative research design was employed in which we conducted in-depth interviews using semi-structured schedules. The study was conducted among Community Medicine residents who had completed their three months District Residency Program rotation. The interview guide focused on their expectation before the posting, their experiences, challenges and suggestions for improving the programme. We used a grounded theory approach and analysed the interview transcripts to identify the emerging themes.

**Results:** Five major themes emerged during analysis- peer experiences, initial expectations, positive experiential learning, negative experiences and challenges, suggestions for improving the programme. Peer experiences included support and guidance, negative feedback and posting uncertainty. Initial expectations included field exposure, administrative work and active involvement with some expectation experience gap. Learning through teaching and mentorship, skill building, professional role development, exposure to ground realities and supportive team building led to positive experiences. Structure and system issues, some learning barriers, superficial learning, resource constraints led to negative experiences. The respondents gave suggestion related to their posting, training, supervision and guidance and resource management for improvement of the programme.

**Conclusion:** The District Residency Programme provided the Community Medicine residents with valuable exposure to real-world public health systems, administrative functioning and community engagement in an urban context. While the program enhanced professional growth, skill development, and practical learning, challenges related to structure, supervision and resource constraints limited its full potential. Strengthening training guidelines, ensuring better coordination and mentorship and addressing logistical gaps can help optimize the programme's effectiveness and enrich resident's learning experiences.

**Keywords:** District Residency Programme, Qualitative Study, Community Medicine, Medical Education



## **Title: Facilitators and Barriers in Implementing Family Adoption Program in India: A Qualitative Study**

**Authors:** Dr. Rudresh Negi

**Affiliation:** Dept of Community Medicine, Government Medical College, Haldwani, Uttarakhand

**Study Design:** Qualitative study

**Background:** The Family Adoption Program (FAP) represents a transformative initiative which mandates medical students to adopt and longitudinally follow families in rural or underserved communities throughout their undergraduate education. Despite its nationwide implementation, the FAP's operationalization has encountered diverse challenges and facilitators that significantly impact its effectiveness.

**Objectives:** To explore and understand the facilitators and barriers in the implementation of the Family Adoption Program among medical students in India. **Methods-** It is a qualitative study using thematic analysis framework on essays compiled in "Making of a Family Physician: Reaching the Roots," published by the National Medical Commission. This compilation contains selected essays from MBBS undergraduate and postgraduate students from medical institutions across India, providing geographically and institutionally diverse perspectives on FAP experiences.

**Results:** Of the total 89 essays, 70 were from undergraduates, 18 from postgraduates and 1 from senior resident. The major themes that emerged for facilitators were Trust building and rapport, Communication and language, Healthcare service delivery, Community engagement and education, Institutional support and guidance and Empathy and cultural understanding. Some of the themes related to barriers in implementation were Relationship-building, Communication, Logistics, Operational Systems and Student Factors.

**Conclusion:** The study provided an in depth- data regarding the facilitators and barriers in implementing FAP, which would help in devising intervention for better operationalization.

**Keywords:** Qualitative research, family adoption program, barriers, facilitators



**Title: Digital Health Literacy and Utilization of Telemedicine among Adults in Rural Areas of District Etawah, Uttar Pradesh: A Mixed-Methods Study**

**Authors:** Dr. Sneha M B, Dr. Nareshpal Singh

**Affiliation:** Department of Community Medicine, UPUMS, SAIFAI, UP

**Study Design:** Mixed method study

**Background:** The rapid expansion of telemedicine under the Ayushman Bharat Digital Mission (ABDM) has transformed healthcare delivery in India. However, the extent of digital health literacy (DHL) and community-level use of telemedicine remain uncertain in semi-urban districts such as Etawah. Assessing DHL and identifying barriers to telemedicine use are essential to bridge the digital divide and strengthen equitable access to healthcare.

**Objectives:** 1. To assess digital health literacy among adults in District Etawah. 2. To determine awareness and utilization of telemedicine services. 3. To identify factors associated with adequate DHL and telemedicine use. 4. To explore community perceptions, barriers, and facilitators influencing telemedicine adoption.

**Materials and methods:** Study design: Community-based explanatory sequential mixed-methods study. Study setting: District Etawah, Uttar Pradesh. Study population: conducted among adults above 18 years those who will give consent and available during the survey period. Sample size: Approximately 400 participants, calculated assuming 50% adequate DHL, 5% precision, and 95% confidence level. Sampling technique: Two-stage cluster sampling; households selected systematically from chosen clusters. Quantitative tool: eHealth Literacy Scale (eHEALS) – 8-item validated instrument assessing digital health literacy. Telemedicine Utilization Module – structured questionnaire assessing awareness, usage, satisfaction, and barriers. Qualitative tool: 10 in-depth interviews and 2 focus group discussions with selected community members to explore perceptions and barriers. Data analysis: Quantitative data analyzed using descriptive statistics, chi-square test, and logistic regression. Qualitative data analyzed thematically. Integration of findings through a joint-display matrix for interpretation and policy implications.

**Results:** Results are awaited.

**Conclusion:** Findings are awaited .

**Keywords:** Digital Health Literacy · Telemedicine Utilization · Mixed-Methods Study



**Title: Epidemiological Profile and Trends of Drug-resistant Tuberculosis in two districts of Central Maharashtra between 2022-2024.**

**Authors:** Dr. Sujata Rajendra Patil, Dr. Kaustav Dasgupta

**Affiliation:** MGM Medical College, Aurangabad

**Study Design:** Secondary Data Analysis

**Background:** Drug-resistant TB (DRTB) continues to contribute significantly to TB mortality. Monitoring trends and understanding patterns at the district level is essential for guiding local programmatic management of drug-resistance tuberculosis (PMDT). With the availability of case-based surveillance data through Nikshay portal, retrospective analysis can provide valuable insights into evolving trends or patterns.

**Objective:** To assess the epidemiological profile and trends of DRTB in two districts, Chh. Sambhajinagar (CSN) and Hingoli of central Maharashtra between 2022-2024, using data from the Nikshay-portal. **Methods:** A secondary data analysis was done, sourcing data from the Nikshay portal for the years 2022-2024. All cases reported under NTEP in the selected districts were included. Variables assessed were; absolute numbers and proportions of DR-TB among new and retreatment TB cases, resistance pattern (RR/MDR, H-mono/poly resistant, pre-XDR/XDR), universal drug susceptibility testing (UDST) coverage, death rates, demographic characteristics (age, sex, BMI), site of disease (pulmonary/extrapulmonary), and prevalence of HIV, diabetes.

**Results:** Our analysis showed that the UDST improved significantly, from 63.0% to 81.5% in the predominantly rural district of Hingoli, stagnated in the predominantly urban CSN district, from 82.8% to 79.1% (coinciding with a slight increase in the proportion of extrapulmonary TB, from 35.6% to 38.5%). Notably, while DRTB proportions saw a decrease in both districts, from 3.5% and 1.9% of all cases in CSN and Hingoli respectively in 2022, to 3.1% and 1.6% in 2024. Additionally, TB death rates declined in both districts. While CSN saw the DRTB death rate decrease from 14.0% (2022) to 11.1% (2024), in Hingoli, it slid from 8.8% to 5.5%. The overall TB death rates declined from 5.1% to 4.5% in CSN and 2.8% to 1.9% in Hingoli.

**Conclusion:** The plateauing in the proportion of DRTB among TB cases is consistent with global and national findings. UDST has improved in rural areas, possibly with increased NAAT capacity. While death rates continue to decrease, efforts towards case-finding, early diagnosis, and early and appropriate treatment, must be intensified even further, as we move closer towards our goals of TB elimination.

**Keywords:** Tuberculosis, Antimicrobial Resistance, Lung Health, NTEP

**Title: Knowledge of Type 2 Diabetes Mellitus Among Rural Areas of Bareilly, Uttar Pradesh-A Cross-Sectional Study**

**Authors:** DR. DIVYENDRA KUMAR, Dr. Rakesh Kumar, Dr. Nikhat Naaz, Dr. Mukul Maheshwari

**Affiliation:** Rajshree Medical Research Institute, Bareilly, Uttar Pradesh

**Study Design:** A Cross-Sectional Study

**Background:** Background: Diabetes mellitus (DM) is one of the non-communicable diseases that has reached the levels which need concern for all individuals. So, all individuals should have knowledge regarding DM, and this will help to understand the disease and its management strategy.

**Objectives:** To assess the knowledge about DM in rural areas of Bareilly, Uttar Pradesh and its association.

**Methods:** A cross-sectional study was conducted among 465, aged  $\geq 18$  years, selected by simple random sampling. Data collected by using pre-tested semi-structured questionnaire which covers sociodemographic details, clinical details. Knowledge about DM was assessed by using 20-items standardized scale and it is categorized according as poor (0-7), fair (8-13) and good (14-20). Statistical analysis done by Jamovi. Association checked by Chi-square test,  $p < 0.05$  considered significant.

**Results:** 273 participants were male and 192 were females. Majority were in the 30–44-year age group 35.5%. Most of involved in occupation of farmers/shop-owners 32.7%, and 28.9% belonged to socioeconomic status (SES) class III. Prevalence of DM was 22.2%. Among DM, 70.9% had DM duration  $> 5$  years, on treatment 79.6%. Regarding knowledge of DM, 39.4% had poor, 44.1% fair and 16.5% good. Higher level of education, SES class and family history of DM were significantly associated with higher knowledge scores.

**Conclusion:** Knowledge about DM in rural areas of Bareilly is not adequate, especially among those having lower level of education and low SES class. There is need of community based educational intervention regarding DM. There is also a need of improving screening and management services in rural areas.

**Keywords:** Knowledge, Diabetes Mellitus, Rural, Bareilly.

**Title:** Knowledge, attitude and practice regarding tobacco chewing among adults in bareilly, Uttar pradesh

**Authors:** Dr. Ravi Dangi, Dr. V. K. Agrawal, Dr. Rakesh Kumar

**Affiliation:** Rajshree Medical Research Institute, Bareilly

**Background:** Tobacco chewing remains a significant public health problem in India, especially in rural areas where social acceptance and low awareness persist. Assessing knowledge, attitude, and practice (KAP) regarding tobacco chewing is essential for designing behavioral interventions.

**Objectives:** To evaluate KAP on tobacco chewing among adults in Bareilly and its relation to sociodemographic factors.

**Methods:** A community-based cross-sectional study was conducted among 435 adults ( $\geq 18$  years) residing in field practice area of Rajshree medical research institute, Bareilly, Uttar Pradesh. Participants were selected by systematic random sampling and interviewed using a pretested, semi-structured KAP questionnaire. Knowledge, attitude, and practice scores were categorized as good, moderate, or poor. Data were analyzed using Jamovi, and associations were tested using the Chi-square test at  $p < 0.05$ .

**Results:** Among 435 participants, 243 were current tobacco chewers, 56 were past users, and 136 never used tobacco. Good knowledge about harmful effects of tobacco chewing was observed in 182, and 166 had a positive attitude toward quitting. Only 139 demonstrated favorable practices (non-chewing or cessation attempts). Education and socioeconomic status were significantly associated with knowledge and attitude levels ( $p < 0.001$ ). Males and lower SES groups had higher tobacco use.

**Conclusion:** Despite moderate awareness, a large section of adults continues to chew tobacco. Focused community education and behavioral change communication are crucial to bridge the gap between awareness and practice.

**Keywords:** Tobacco chewing, Knowledge, Attitude, Practice, Rural population

**Title:** A survey on safe drinking water supply in a rural village of Western Maharashtra

**Authors:** Dr. Kunal Chatterjee, Dr. Shabeena Tawar, Dr. Yadu Vir Sin , Dr. Shubhangini Singh

**Affiliation:** Armed Forces Medical College, Pune

**Study Design:** Surveillance Study

**Background:** Water is essential for all forms of life. Global efforts are still underway to ensure Sustainable Development Goal (SDG) 6 of providing enough clean drinking water to sustain public health in many regions. This study assessed the accessibility, sufficiency, and potability of safe drinking water sources for the households of a rural village community of Western Maharashtra.

**Methods:** A community-based cross-sectional descriptive study with 240 households using a structured interviewer-administered questionnaire to the households by house-to-house survey in the field practice area of a tertiary care centre in Pune district. Also, information was collected on the availability, functionality, and maintenance of water facilities from field observations. Random water samples were collected at various sources in sterile containers for microbiological and chemical analysis and to determine the residual chlorine in the drinking water using O-Toluidine.

**Results:** Overall, 57.08% ( $0.57 \pm 0.49$ ) households relied upon the reverse osmosis plant as their source of drinking water. 85.41% ( $0.85 \pm 0.35$ ) of the households spent less than 15 minutes to complete the round trip to the water sources, suggesting that the water sources are accessible. About 23.75% ( $0.23 \pm 0.42$ ) of households reported water insufficiency with only 20.8% ( $0.20 \pm 0.40$ ) households using some method to purify drinking water. The physical quality of household drinking water supply was within the acceptable limits. However, 80% ( $0.8 \pm 0.44$ ) of samples collected from different sources for chemical analysis and 65.5% ( $0.65 \pm 0.48$ ) of samples collected at consumer level of corresponding sources were positive for coliform indicating that the majority of drinking water sources were chemically and microbiologically not potable for drinking purposes. O-toluidine reagent testing also showed similar findings with no free residual chlorine detected in 80.8% of household drinking water supply.

**Conclusion:** Most of the households in the study area had easily accessible and considerably sufficient drinking water sources. Only a small proportion practiced any method of water purification. The absence of residual chlorine and widespread microbial contamination indicates poor potability, highlighting the urgent need for enhanced chlorination, monitoring, and community awareness to ensure safe and sustainable drinking water in alignment with SDG 6.

**Keywords:** Rural India, Drinking water, accessibility, sufficiency, potability, Drinking water

**Title: Effectiveness of Supportive Supervision in Community based Management of Severe and Moderate Acute Malnutrition among Under-5 Children in Rural Jodhpur**

**Authors:** Dr. Nagbhushan Jigajinni, Dr. Srikanth Srinivasan, Dr. Pankaj Bhardwaj, Dr. Manoj Kumar Gupta, Dr. Prasanna T

**Affiliation:** Department of CMFM AIIMS Jodhpur

**Study Design:** Interventional Study

**Background:** As per NFHS-5 (2019) wasting and severe wasting were present in nearly 19.3% and 7.7% of under-5 children respectively. Compared to well-nourished children, those suffering from severe acute malnutrition (SAM) have a nine-fold increased risk of mortality. Further improper management of moderate acute malnutrition (MAM) increases the risk to progression to SAM. Usually, MAM and SAM children without complications are managed at Community/Home. However, as no guidelines exist for community management of MAM/SAM, there is lack of proper supervision and management of these children. This Interventional study was undertaken to assess the improvement in nutritional status of SAM and MAM children by community based supportive supervision.

**Methods:** A list of SAM/MAM children was generated from 95 Anganwadi centers in a randomly selected rural block of Jodhpur district. Their nutritional status was re-assessed by the investigator. Seventy children of age (6-54 months) were enrolled for Supportive supervision for 3 months and followed up till 6 months. Supportive supervision included dietary counselling and hand hygiene practices. The guidelines for Supportive supervision were adopted from Dietary Guidelines of NIN, ICMR, WASH guidelines, WHO/UNICEF initiatives. Anthropometric measurements were assessed at baseline and at end of 6 months.

**Results:** The mean age of children was  $32.53 \pm 3.84$  (months). Most of them were girls ( $n=42$ , 60%). 13 (18.5%) were SAM and 57 (81.5%) were MAM. Statistically significant ( $p<0.001$ ) increase in mean height (cm) (pre vs post) ( $83.5, +11.3$  vs  $87.1, +10.8$ ), mean weight (kg) ( $9.5, +1.9$  vs  $10.8, +2.1$ ), and mean MUAC (cm) ( $12.0, +0.4$ ,  $13.2, +0.6$ ) were observed post supervision.

**Conclusion:** Supportive supervision had a significant positive impact on children's nutritional status of SAM and MAM children.

**Keywords:** Malnutrition, SAM, Supportive Supervision, Community, Management, Children



## **Title: Development of Targeted Client Communication for self-care of Diabetes Mellitus and Hypertension in Puducherry**

**Authors:** Dr. Balaji R, Dr. Subitha L, Dr. Sitanshu Sekhar Kar, Dr. Balasubramaniyan Vairap

**Affiliation:** JIPMER

**Study Design:** Mixed methods, multi-phase study

**Background:** Globally, NCDs account for nearly 75% of all deaths. According to ICMR-INDIAB study, the prevalence of diabetes and hypertension is 11.4% and 35.5% respectively. Providing conventional face-to-face care for such a large population is challenging due to inadequate healthcare infrastructure and human resources. Evidence-based digital health interventions can deliver tailored lifestyle and behavioural support at scale and lower cost. Objectives To develop a Targeted Client Communication (TCC) intervention for NCD self-care based on needs identified through stakeholder interviews .

**Methods:** A mixed-method, multi-phase study was conducted to develop and pilot a tailored mobile health intervention for self-care among patients with diabetes and hypertension in Puducherry. In Phase 1, purposive maximum variation sampling was used to conduct six in-depth interviews with patients/caregivers and six key informant interviews with healthcare providers using Health Belief Model based guides. Phase 2 involved targeted message development using the COM-B framework and validation through PEMAT-P tool. Phase 3 focused on algorithm-driven (using BP, blood glucose and next visit date) technology platform development for personalized messaging, followed by Phase 4, which pilot-tested the TCC among volunteers to assess feasibility, functionality, and tailoring accuracy.

**Results:** A total of 12 qualitative interviews were analyzed thematically with findings summarized under Health Belief Model domains. Fifty messages were initially developed across three domains - clinical status updates, treatment adherence, and self-care promotion—of which 40 were finalized after improving understandability and actionability scores using PEMAT-P. A dual-architecture technology platform integrating a front-end interface and back-end targeting algorithm with WhatsApp Cloud API enabled semi-automated targeted message delivery. Pilot testing among volunteers demonstrated overall feasibility and system functionality, though message reach was affected in a few cases due to WhatsApp privacy restrictions and outdated application versions.

**Conclusion:** The targeted client communication intervention demonstrated feasibility, scalability, and user acceptability for NCD self-care. Algorithm-driven personalized messaging via WhatsApp shows potential to strengthen patient engagement and continuity of care in primary health settings.

**Keywords:** Targeted Client Communication, mHealth, digital health intervention, self-care, non-communicable diseases



## **Title: A Mixed-Methods Study on the Healthcare Seeking Behaviour of Brick-kiln Workers in Singur, West Bengal**

**Authors:** Dr. Akash Dasgupta, (Dr). Debashis Dutt

**Affiliation:** Department of Community and Family Medicine, AIIMS Deoghar

**Study Design:** Mixed Methods Descriptive Observational Study with Convergent Parallel Design

**Background:** Rapid industrialization and urban development are driving demand for bricks, raising concerns about the plight of unorganized brick-kiln workers in Southeast Asia, particularly in West Bengal. Morbidity profile and healthcare seeking behaviour of brickkiln workers is continually evolving with this socio-economic transformation.

**Objectives:** 1. To assess the socio-demographic, occupational, and behavioral characteristics and morbidity profile of the Brick-kiln workers in Singur block, West Bengal 2. To explore their healthcare seeking behaviour and its barriers.

**Material and Methods:** This descriptive, observational study used a convergent parallel mixed-methods design from July 2022 to June 2024 in three randomly selected rural brick-kilns in Singur, West Bengal. The quantitative component was a cross-sectional survey of 205 workers (aged  $\geq 14$ , employed  $\geq 6$  months). Morbidity profile was evaluated through the survey and clinical examinations. Findings were triangulated with non-participant observation. Healthcare-seeking behaviour was assessed quantitatively by face-to-face interviews, which ran parallel to in-depth interviews among workers and key-informant interviews among stakeholders. Quantitative data were analysed using SPSS v16 and GeoDa, while qualitative data from translated transcripts were analysed manually.

**Results:** A total of 205 brick-kiln workers surveyed revealed a young (median age: 28 years), predominantly male (58.5%), seasonal migrant (85.9%) population with low literacy. Acute illnesses, mostly respiratory, gastrointestinal or injuries, affected 85.4% of workers. Chronic conditions, mostly musculoskeletal, were reported by 58%. Examinations revealed widespread anaemia (78.5%), underweight (36.7%), hypertension (31.2%), and impaired lung function (25.4%). While most sought care for acute (64.9%) and chronic (74.4%) conditions, treatment was often delayed (41.6% for acute illness) and reliant on over-the-counter medications from pharmacies (73.0% for acute, 58.6% for chronic). Qualitative findings identified multi-level barriers. At individual level, low perceived severity, workload, and financial constraints were prominent. Interpersonally, language and gender-based challenges impeded access. Systemically, limited-service supply, inconvenient timings, and fragmented public healthcare were key barriers.

**Conclusion:** Migrant brick-kiln workers bear a significant burden of occupational and poverty-related diseases, which is compounded by fragmented and inaccessible public health services. This leads to a heavy reliance on informal, over-the-counter treatments from pharmacies. Sustainable policy initiatives need to be considered to percolate the industrial profits into health and wellbeing of its vulnerable builders.

**Keywords:** morbidity; migrant; occupational health; healthcare seeking; mixed-methods; brick-kiln



**Title: Assessment of water quality index(WQI) of various domestic water storage tanks in urban area, Belagavi – A Cross-sectional study**

**Authors:** Dr. Rajesh Sharma, Dr. Sulakshana S. Baliga

**Affiliation:** Jawaharlal Nehru Medical College, Belagavi

**Study Design:** Cross-Sectional study

**Background:** Unhygienic household water storage is a significant contributor to the deterioration of water quality from source to consumption, increasing the risk of waterborne diseases in urbanizing areas of India. The physical condition and maintenance of domestic water storage tanks are critical yet often overlooked factors in public health.

**Objectives:** To assess water quality index(WQI) among various domestic water storage tanks in urban area  
**Methods:** A Analytical type of Cross-sectional study was done in urban field practice area Rukmini nagar. 5 out of 9 sub-centres were chosen randomly. 207 households out of 7952 households were selected using proportionate to size method. Information regarding sociodemographic details, quality of water and tank condition of domestic water source were collected. Tank condition was determined using a set of guiding questions and a risk rating ranging from low to critical. Samples were collected from various sources like tap water, well water, borewell water in sterile polythene plastic bottles. Samples were tested for temperature, pH value, turbidity, colour, odour, electrical conductivity, total hardness, total dissolved solids, free chlorine, total chlorine, nitrate, nitrite, total coliforms, faecal coliforms and Escherichia coli. Data was analysed using R software.  $P < 0.05$  was considered as statistically significant.

**Results:** Microbiological analysis revealed significant faecal contamination, with E. coli present in 16.43% of samples and total coliforms in 23.67%. While 74.88% tanks were in low risk category, 7.25% were classified as critical. Poor physical conditions such as the absence of lid, cracks, and infrequent cleaning were significantly associated with poor WQI ( $p < 0.0001$ ). A moderate positive correlation ( $p = 0.48$ ,  $p < 0.0001$ ) was found between the physical risk score and WQI, confirming that water quality declined as physical defects increased.

**Conclusion:** This study concludes that physical condition of domestic water storage tanks critically determines household water quality. Poor tank maintenance, such as being uncovered, cracked or infrequently cleaned was significantly associated with higher risk scores, poor water quality index(WQI) ratings and the presence of microbiological contaminants like E.coli. These findings highlight that improper household storage is a key source of secondary contamination, underscoring an urgent need for public education on routine tank maintenance to prevent waterborne disease.

**Keywords:** Water Quality, Water Storage, Water Quality Index (WQI), Risk Assessment, E. coli, Waterborne Diseases

# **Title: Evaluating Breast Imaging Reporting and Data System (BI-RADS) Distribution and Breast Density in Mammographic Screening at State Cancer Institute of Western India - Insights from a Cross Sectional Study**

**Authors:** Dr. Mohit N. Makwana, Dr. Anand Shah

**Affiliation:** Department of Community Oncology, The Gujarat Cancer & Research Institute (GCRI), Ahmedabad

**Study Design:** Cross-sectional study

**Background:** Breast cancer remains a leading cause of cancer mortality among women in India. Mammography serves as a crucial early detection tool, reducing morbidity and mortality through timely diagnosis. However, limited data exist on BI-RADS categorization and breast density patterns in Indian screening populations.

**Objectives:** To evaluate the distribution of Breast Imaging Reporting and Data System (BI-RADS) scores, assess breast density patterns, and explore associations with mammographic findings among women attending a cancer screening outpatient department at GCRI, Ahmedabad.

**Methods:** A cross-sectional study was conducted among 899 women who underwent mammographic screening between 2021 and 2024. BI-RADS scores, breast composition, and incidental findings were assessed by a trained radiologist. Descriptive statistics and inferential analyses (correlation and association tests) were performed to identify significant relationships.

**Results:** Of the 899 screened women, 61.2% were categorized as BI-RADS 1 and 23.5% as BI-RADS 2. Breast masses were detected in 32.5% of participants, with fibroadenoma (right 37.4%, left 40.2%) and calcified oil cysts being common benign findings. Biopsy was advised for BI-RADS 4 and 5 lesions (n=37), confirming malignancy in 20 women (2.2%), predominantly invasive ductal carcinoma (1.56%). A significant correlation was observed between BI-RADS score and breast mass size ( $r=0.355$ ,  $p<0.001$ ), as well as with parenchymal pattern ( $p<0.001$ ). Breast density type C was most prevalent (42.7%).

**Conclusion:** Most mammographic findings were benign or normal, yet screening effectively identified malignancies among BI-RADS 4 and 5 cases. Breast density significantly influenced BI-RADS categorization, emphasizing the need for adjunct imaging in dense breasts. Findings reinforce the importance of structured mammography screening, especially among high-risk women in India.

**Keywords:** Breast Cancer Screening, Mammography, BI-RADS Classification, Breast Density, Screening OPD

**Title: Utilization of Growth Chart available in Mother and Child Protection Card Among Beneficiaries in North India: A Community-Based Cross-Sectional Study**

**Authors:** Dr. Aniruddh Ranga, Dr. S. K. Jha, Dr. Vijay Silan

**Affiliation:** Dept of Community Medicine, BPSGMC for Women, Khanpur Kalan, Sonapat

**Study Design:** Community Based Cross-Sectional Study

**Background:** The Mother and Child Protection (MCP) card, introduced under the National Rural Health Mission and Integrated Child Development Scheme, is a vital tool for tracking maternal and child health. It aims to empower families by providing information and facilitating access to essential health services for pregnant women and children. Despite its importance, utilization of the growth chart in MCP card among beneficiaries in North India remain under explored.

**Objective:** To assess the utilization of growth chart in MCP cards among pregnant and lactating mothers or family members with children below three years in district Sonapat.

**Materials and Methods:** A community-based cross-sectional study was conducted with 178 participants selected through multistage sampling from health centres in Sonapat district. Data collection involved household surveys with semi-structured questionnaire to assess knowledge and usage of MCP cards. Quantitative data were analysed using descriptive statistics and chi-square tests.

**Results:** Mothers constituted the primary caregivers (85.4%), with 72.3% possessing an MCP card and 82% attending Anganwadi visits. However, knowledge of growth monitoring in MCP card was low (24.7%), and 75.3% lacked confidence in using the MCP card. Only 18% reported adequate filling of growth charts in MCP cards. Guidance regarding growth charts in MCP cards was received by roughly half the participants, mostly through ASHA and Anganwadi workers. Significant gaps in practical use and understanding of MCP cards were identified despite high ownership and attendance.

**Conclusion:** While MCP card ownership and Anganwadi service utilization are high, substantial knowledge deficits, lack of confidence, and incomplete use of growth chart in MCP card hinder its effectiveness. Strengthening training, enhancing user-friendly education, and improving support from frontline workers are necessary to optimize growth chart in MCP card utilization and improve the child health outcomes.

**Keywords:** Mother and Child Protection card, child health, Anganwadi, growth monitoring



**Title: A Cross-Sectional Study To Determine The Food Addiction And Its Associated Factors Among Youth (15-29 Years) In Urban Field Practice Area Of Osmania Medical College, Hyderabad**

**Authors:** Dr. Narayanasinghaladi Mathavan, Dr. Nirmala Devi B

**Affiliation:** Osmania Medical College

**Study Design:** Cross-Sectional study

**Background:** Youth policy in India defines Youth as the people from the age 15-29 years, these age group people are considered as the bigger asset of the nation. In India as years passes by introducing to variety of foods and changing lifestyle practices leads to food addiction among people. Food addiction is defining it as “specific adaptation to one or more regularly consumed foods to which a person is highly sensitive and produces symptom similar to addictive processes”. Prevalence of food addiction was seen to be 33.98%. Sometimes it is relied on the behavioural as well emotional overeating to relieve from negative moods, involvement of reward mechanism affecting the mood of person. Studies on this topic is barely done, to evaluate the associated factors which made me to choose this topic.

**Objectives:** 1. To determine the prevalence of food addiction in youth residing in urban field practice area of Osmania Medical College, Hyderabad  
2. To assess the associated factors for food addiction in youth.

**Materials & Methods:** This is a community based Cross-sectional study in the urban field practice area of Osmania Medical College, Hyderabad in the age group 15-29 years, using simple random sampling method during month of October & November 2025. Sample size of the study is 100 using the formula  $4pq/l^2$  ( $p=33.98$ ,  $l=10\%$ ). Data is gathered using predesigned, semi-structured questionnaire, also using Yale food addiction scale 2.0, after taking proper consent from study subject. Collected data will be analysed using MS Excel, SPSS Software V25.

**Results:** Initial study showed the prevalence of food addiction as 20%. the study is on-going and data will be analysed after completion of data collection. Further result will be presented in the conference .

**Conclusion:** Food addiction is seen among one fifth of the participants and factors like emotional overeating, high palatability of food, easy accessibility of home delivery, availability through round the clock of food are the factors found to have association.

**Keywords:** Youth, Food addiction, Emotional overeating



## **Title: Digital Health Literacy Among Youth in India: A Scoping Review**

**Authors:** Dr. Saniya Qureshi, Major (Dr). Deepak Mundhe

**Affiliation:** Department of Operational & Implementation Research, ICMR-NIRRH, Mumbai

**Theme:** Digital health

**Study Design:** A Scoping Review

**Background:** India's youth, representing over one-third of the population, are at the forefront of the digital revolution. Yet, their ability to discern credible online health information — digital health literacy (DHL) — remains poorly characterized. In an era of telemedicine, social-media health influencers, and AI-driven health platforms, inadequate DHL risks amplifying misinformation and digital inequities. This review systematically maps the current evidence on DHL among Indian youth to guide future digital health and education initiatives.

**Objectives:** To synthesize available evidence on digital health literacy among Indian youth, identify existing tools and determinants, and highlight policy and research gaps.

**Materials and Methods:** Following Arksey & O'Malley's framework and PRISMA-ScR guidelines, comprehensive searches were conducted across PubMed, Scopus, Web of Science, and Google Scholar using keywords related to digital health literacy, e-health literacy, adolescents, young adults, and India. Studies published in English from 2010–2025 involving participants aged 10–29 years were included. Data were charted for study characteristics, instruments, determinants, and outcomes, and synthesized thematically.

**Results:** Twenty-eight studies met inclusion criteria, primarily cross-sectional and conducted in higher-education or urban settings. Only five explicitly assessed DHL using standardized tools such as eHEALS or its adaptations; the rest examined overlapping domains like online health information-seeking or digital skills. Overall, Indian youth demonstrated moderate to low DHL, with pronounced rural–urban, gender, and socioeconomic disparities. Key barriers included limited critical appraisal skills, low awareness of credible online sources, linguistic diversity, and restricted device autonomy among young women. Interventions were scarce, with only three small-scale initiatives targeting digital health education. No India-validated DHL instrument for youth was identified.

**Conclusions:** Digital health literacy among Indian youth remains an under-researched but pivotal determinant of equitable health outcomes. Integrating DHL into school and university curricula, developing culturally relevant tools, and embedding youth-friendly digital health training within national programs such as Ayushman Bharat Digital Mission could bridge the digital divide and empower India's next generation as informed, resilient digital citizens.

**Keywords:** digital health literacy, youth, India, eHealth, scoping review, digital divide

**Title: Sleep quality and mental health among medical students in Hyderabad, Telangana: A Cross Sectional Study**

**Authors:** Dr. Paluchuri Jesse Enoch, Dr. B. Nirmala Devi

**Affiliation:** Osmania Medical College

**Study Design:** Cross-Sectional Study

**Background:** Insufficient sleep quality has detrimental consequences, including daytime fatigue, cognitive impairment, and increased risk of mental health disorders like depression and anxiety. Medical students face unique challenges that can impact their sleep patterns. Demanding academic curriculum, long working hours and exposure to emotionally challenging clinical experiences can disrupt sleep wake cycles and contribute to sleep disturbances. In medical students' high prevalence of mental health issues, such as anxiety, depression, and stress, among are well documented. These stressors can have a substantial impact on the mental and physical well-being of medical students, resulting in elevated rates of anxiety, depression, and stress. Adequate sleep of high quality and optimum duration facilitates memory processing and learning. Sleep and mental health are major public health concerns, each significantly affecting individuals and society. While poor mental health was once thought to cause poor sleep, research now shows that poor sleep can also trigger, sustain, or worsen mental health issues.

**Objectives:** 1. To assess the sleep quality and mental health among medical students.  
2. To determine the association between sleep and mental health outcomes.

**Materials & Methods :** This cross-sectional study was carried out among 340 medical students at a medical institute in Hyderabad, Telangana. Participants were chosen through convenience sampling after informed consent was obtained. Data collection involved a predesigned questionnaire, which included the Pittsburgh Sleep Quality Index (PSQI) to assess sleep quality and the Depression Anxiety Stress Scale 21 (DASS-21) for evaluating mental health. Data entry was done using Excel, and statistical methods were applied to analyse associations and compare means among study variables. ETHICAL CONSIDERATION: Applied for institutional ethical clearance.

**Results:** Early data show that many medical students experience poor sleep quality. The research is still underway, and full results will be shared at the conference.

**Conclusion:** This study sheds light on how inadequate sleep relates to mental health among medical students. The findings stress the need for medical college to support better sleep habits, balance academic demands, and offer regular mental health assessments to safeguard student wellness and learning performance

**Keywords:** Sleep Quality, Mental Health, Medical Students

**Title: Refractive Error Screening in the Community: Results from Family Adoption Programme of a Medical College using WHOEyes Application.**

**Authors:** Dr. Nishanth Krishna K, Dr. Agnes Moira Preethi DSouza

**Affiliation:** Community Medicine, Father Muller Medical College

**Study Design:** Record-based study

**Background:** Refractive errors are a leading cause of preventable blindness globally. Family Adoption Programme (FAP) is a community-based initiative to improve health of the community, which offer a strategic platform for integrating refractive error screening at primary healthcare level. WHOEyes, a mobile application by the World Health Organization, facilitates screening for refractory errors in a primary healthcare setup.

**Objectives:** To estimate the proportion of individuals with refractive errors among community members enrolled in the Family Adoption Programme (FAP) of a medical college using WHOeyes application.

**Methods:** A record-based study was conducted using data obtained during the FAP activities of the second year MBBS students in the year 2024. The screening outcomes using the WHOEyes app were analysed to assess the visual acuity among the individuals. The results of the screening were categorised as per the WHO categorisation for both near and distant vision as- • Good vision: 6/6, 6/7.5, 6/9.5, 6/12. • Vision impairment: 6/15 or worse. Data analysis was done using SPSS 20.0.

**Results:** Of the 147 valid records, • 85(57.8%) individuals self-reported not having any difficulty in vision. • 51 (34.7%) self-reported difficulty in vision, of whom only 28 (19%) reported wearing spectacles. •63 (43%) respondents had the last eye check-up more than a year ago, while another 63 (43%) had never availed eye check-up. Screening using WHOEyes app revealed that •16(10%) had impaired near vision. •Distant vision: 27 (18.4%) had impaired vision in the right eye and 28 (19%) had impaired vision in the left eye.

**Conclusion:** Although one-third of the respondents self-reported vision difficulties, nearly one-fifth of them had either near vision or distant vision impairment or both. The lack of regular eye screening highlights the missed opportunities for early diagnosis and intervention. Integrating outreach activities like Family Adoption Programme and mobile based tools like WHOEyes could enhance early detection and thus reducing the burden of these correctable causes of blindness.

**Keywords:** Refractive errors, WHOEyes, Mobile Applications, Family Adoption Programme, Vision Screening

**Title: Perception And Challenges Towards Family Adoption Program Among Undergraduate Students Of A Medical College In Hyderabad, India**

**Authors:** Dr. Sandra Sebastian, Dr. B. Nirmala Devi

**Affiliation:** Osmania Medical College

**Study Design:** Cross-Sectional Study

**Background:** In 2022 NMC has introduced family adoption program as part of Community Medicine curriculum to provide community-based experience to students, improve rural health outcomes, and develop their interpersonal skills. Community Medicine departments accomplish this through field practice and family health studies. Community engagement in medical education gives the students an insight into the living conditions of the public and how they influence their health. Though FAP is a novel program but it has got many challenges and opportunities. Also, very few studies have been conducted in our country till date on perception of students regarding FAP since its implementation.

**Objectives:**

1. To assess perception towards FAP among first and second professional medical students of a medical college in Hyderabad.
2. To determine the challenges encountered by the students during family adoption visits.

**Materials And Methods:** A cross-sectional study was undertaken involving first- and second-year MBBS students at a medical college in Hyderabad over a duration of one month. The study included all eligible students from these cohorts, with a total sample size of 500. Participants were selected via convenience sampling following the acquisition of informed consent. Data were collected using a semi-structured questionnaire, entered in Excel, and analysed using SPSS software. Perceptions regarding FAP were assessed on a 1–5-point Likert scale, where 1 represented the lowest and 5 the highest score. Ethical Consideration: Applied for institutional ethical clearance.

**Results:** Initial findings showed that, regarding perception of students towards FAP, majority agreed that it will create health awareness in community and can understand dynamics of rural community. Communication and leadership skills can be improved and can provide early clinical exposure to students. Students faced challenges like, families expected curative treatments which they were not eligible to provide, language barrier and cooperation from the families. This study is ongoing, final results will be presented in the conference.

**Conclusion:** Family adoption helps the students to learn communication and leadership skill and it will improve health awareness in the community.

**Keywords:** Family adoption, Perception, Challenges



# **Title: Impact of Cesarean Delivery on Early Initiation of Breastfeeding in Health Facilities in India: A Secondary Data Analysis Using NFHS-5 Data**

**Authors:** Dr. Gowtham khan, Dr. Frederick vaz, Dr. Paramveer Singh

**Affiliation:** Department Of Community Medicine, Goa Medical College

**Study Design:** Secondary analysis

**Background:** Early initiation of breastfeeding (EIBF) within one hour of birth is a critical public health intervention to reduce neonatal morbidity and mortality. Caesarean section (C-section) delivery is a known barrier to EIBF due to delayed maternal recovery and reduced immediate mother–infant contact. With institutional deliveries and C-sections rising across India, understanding their implications on breastfeeding practices is essential. Digitally collected large-scale data such as the National Family Health Survey (NFHS-5) offers valuable opportunities to inform maternal and child health decisions.

**Objective:** To assess the association between mode of delivery and early initiation of breastfeeding in India, using nationally representative survey data.

**Methodology:** A secondary analysis was conducted using the NFHS-5 Birth Recode (BR) dataset (2019–21). The study included women aged 15–49 years who had a live institutional birth in the two years preceding the survey. The outcome was EIBF (within one hour). The primary exposure was C-section delivery, with facility type (public vs. private) considered an effect modifier. Covariates included maternal age, education, parity, antenatal care (ANC) visits, birthweight, residence, and wealth index. Digitally structured NFHS-5 data enabled use of survey-weighted descriptive statistics, Rao–Scott corrected chi-square and Kruskal–Wallis tests, and multivariable logistic regression to estimate adjusted odds ratios (aORs) with 95% confidence intervals.

**Results:** Of 124,412 institutional births, 45% were initiated on breastfeeding within one hour. C-section was associated with significantly lower odds of EIBF (aOR = 0.61; 95% CI: 0.57–0.66). Births in public facilities also showed reduced EIBF odds (aOR = 0.83; 95% CI: 0.79–0.88). Higher education, birthweight, and ANC visits were positively associated with EIBF.

**Conclusion:** This study highlights how digitized national health data can drive evidence-based decisions. Strengthening post-C-section breastfeeding support across sectors is essential for improving newborn outcomes in India.

**Keywords:** Caesarean delivery

## **Title: Burden and Socio - Demographic Correlates of Adverse Childhood Experiences in Adults in Urban Jodhpur**

**Authors:** Nishit Chaudhary, Dr. Neeti Rustagi

**Affiliation:** CMFM, AIIMS Jodhpur

**Study Design:** Cross-sectional

**Background:** Global evidence shows that Adverse Childhood Experiences (ACEs) before the age of 18 significantly increase the risk of both mental and physical health issues in adulthood. ACEs have intergenerational effects on mental health and well-being of future generations.

**Objective:** To determine the sociodemographic correlates of adverse childhood experiences among parents of children aged 6 - 17 years in urban Jodhpur.

**Methods:** It is a cross sectional-study. Multi-stage sampling method was used to recruit study participants. Urban Jodhpur has two municipal corporations. South corporation was selected via simple random sampling. From its wards, 25% are randomly chosen, and within each selected ward, one cluster is randomly identified. 23 Households in each cluster were then selected using systematic random sampling. Either parent from each household was interviewed using Adverse Childhood Experiences International Questionnaire .

**Results:** In this study, there are total 340 parents of school going children, out of which 62% are female. Of the 13 ACEs, most prevalent ACEs were emotional abuse (82.8%), household member treated violently (80.7%), community violence (70.3%), and physical abuse (47.2%). The prevalence of experiencing two or more ACEs was 93.9%, and three or more ACEs, was 82.5%. Except for contact sexual abuse, males have significantly higher odds of experiencing other ACEs. Higher education of respondents was associated with lower odds of having an alcohol or drug abuser in the household.

**Conclusion:** Our study reveal a substantial burden of ACEs, necessitating targeted mental health interventions, at household level complemented by community-based support programs. This highlights the need for preventive policies and psychosocial support services to mitigate long-term impact of ACEs at primary healthcare level.

**Keywords:** Adverse Childhood Experiences (Aces), Burden, Parents, Urban Jodhpur



**Title: Functional Dependence and Its Correlates Among Older Adults in Northern India: A Community-Based Cross-Sectional Study**

**Authors:** Dr. Neeraj Pawar, Dr. Aayushi Goyal, Dr. Mukesh Shukla, Dr. Sourabh Paul

**Affiliation:** AIIMS Raebareli

**Study Design:** Cross-sectional study

**Background:** India's population is rapidly aging, and socially it is transitioning from joint to nuclear family structure, this leaves many older adults potentially living alone with minimal family and social support and thus increasing their susceptibilities to functional dependence. This study is thus planned to identify the sociodemographic, health, and psychosocial factors influencing independence in Activities of Daily Living, to help develop targeted interventions.

**Objectives:** To determine the prevalence of functional dependence and identify correlates of dependence in Activities of Daily Living among older adults in northern India. **Methods:** A cross-sectional study was conducted among 507 older adults aged  $\geq 60$  years, selected via multistage random sampling in Raebareli district, Uttar Pradesh. Data included sociodemographic details, living arrangements, chronic health conditions, healthcare access, assistive device use, social frailty (HALFT scale), and depressive symptoms (PHQ-2). Functional independence was assessed using the Katz Index of Independence in Activities of Daily Living. Ordinal logistic regression was used to examine univariate associations between predictors and functional dependence.

**Results:** Mean age was  $70.2 \pm 7.4$  years; 35% were female. Functional dependence was observed in 26% of participants. On univariate ordinal logistic regression, significant predictors of higher ADL dependence included: age  $\geq 70$  years (OR = 2.27, 95% CI: 1.36–3.57,  $p < 0.001$ ), Not co-residing with family (OR = 6.05, 95% CI: 2.07–17.61,  $p = 0.001$ ), chronic health conditions (OR = 3.33, 95% CI: 1.99–5.30,  $p < 0.001$ ), use of assistive devices (OR = 1.98, 95% CI: 1.17–3.34,  $p = 0.010$ ), depressive symptoms (OR = 1.72, 95% CI: 1.00–2.97,  $p = 0.047$ ), and social frailty (pre-frail OR = 2.73, frail OR = 9.50, both  $p < 0.05$ ).

**Conclusion:** Functional dependence among older adults is strongly associated with advanced age, living independently (not co-residing with family), chronic health conditions, social frailty, depressive symptoms, and use of assistive devices. These findings underscore the need for targeted community-based interventions focusing on social support, chronic disease management, and rehabilitation strategies to maintain independence and promote healthy aging.

**Keywords:** Functional Independence, Activities of Daily Living, Geriatrics, Social Frailty, Depression

**Title :** Exploring the Impact of use of internet for health information and its influence on health-seeking behaviour among different age groups in an urban slum of a metropolitan city: A Comparative Cross Sectional study

**Authors:** Dr. Gonsalves Karen Rolina, Dr. Rujuta Hadaye

**Affiliation:** Department Of Community Medicine, T.N.M.C and B.Y.L NAIR Charitable Hospital, Mumbai

**Study Design:** A Comparative Cross-Sectional Study.

**Background:** In recent years, the internet has significantly altered the healthcare landscape. However, inequalities in access, literacy and trust may influence how different age groups use the internet. This study aimed to assess and compare the use of internet for health information and its influence on health-seeking behaviour among individuals of different age groups in an urban slum of a metropolitan city.

**Objectives:**

1. To compare internet usage patterns, including access, frequency of use and the types of activities engaged in among different age groups in an urban slum of a metropolitan city.
2. To assess the frequency and types of health information sought online, and to assess the perception and health-seeking behaviour.

**Methodology:** A Comparative Cross-Sectional Study was carried out in an urban slum of a metropolitan city among 279 participants selected through Stratified Random Sampling, with equal representation of all three age groups. Data were collected with the help of an Interview Schedule validated for the study. Descriptive statistics and Chi-Square tests were performed using SPSS 28.0 to analyse the data.

**Results:** In this study, 76.3% (n=279) of participants had access to the internet, with young and middle-aged adults (63.8%) more likely to have access and spend longer hours on the internet as compared to the elderly (12.5%). It was primarily being used for entertainment (46.2%) and communication (35.8%) while use for health information was not found to be common. 34.3% (n=213) had searched for health-related information in the past one month, with young and middle-aged adults (33.4%) searching more frequently than the elderly (0.9%). General health tips and preventive care were most searched for, followed by information about medications. This was often followed up with a visit to a healthcare professional and changing diet/exercise.

**Conclusion:** The study reveals significant age-related differences in internet use and health information-seeking behaviour, with the younger and middle-aged individuals utilizing the internet more for health-related information than the older adults.

**Keywords:** Internet use, Health information, Health information-seeking behaviour.

**Title: Knowledge Attitude and Practice regarding Ocular emergencies among MBBS graduates in North Goa- A Cross - Sectional Study**

**Authors:** Dr. Shahanas S, Dr. Sparsh Naik, Dr. Vivek Naik

**Affiliation:** Department of Community Medicine, Goa medical college

**Study Design:** Cross Sectional

**Background:** Ocular emergencies such as chemical injuries, acute angle-closure glaucoma, penetrating ocular trauma, and sudden vision loss require rapid recognition and management to prevent irreversible visual impairment. In India, MBBS graduates often serve as the first point of contact for such cases, particularly in primary care and peripheral health settings. Their knowledge, attitude, and practice (KAP) regarding ocular emergencies play a pivotal role in timely intervention and patient outcomes. However, data on the preparedness of MBBS graduates in Goa remain limited.

**Aim:** To assess the knowledge, attitude, and practice related to the recognition and initial management of ocular emergencies among MBBS graduates working in North Goa.

**Objectives:**

1. To evaluate the level of knowledge, attitude, and practice concerning ocular emergencies among MBBS graduates in North Goa.
2. To identify factors associated with adequate knowledge and appropriate practices, such as prior ophthalmology exposure, years since graduation, and experience managing ocular emergencies.
3. To recommend targeted educational interventions and curriculum modifications based on identified gaps.

**Materials and Methods:** A cross-sectional study will be conducted over four months among MBBS graduates working in tertiary hospitals, peripheral public health centres, and private clinics in North Goa. Ophthalmology residents, consultants, interns, and undergraduates will be excluded. Data will be collected through a validated, self-administered online questionnaire distributed via Google Forms. The minimum sample size, calculated using a prevalence of 55.03%, a 95% confidence interval, and a 6% margin of error, is 264. Participants will be selected using stratified random sampling proportional to workplace type. Data will be analysed using descriptive and inferential statistics to assess KAP levels and their associated factors.

**Results:** awaited

**Expected Outcome:** The study aims to identify existing gaps in knowledge, attitude, and practice among MBBS graduates regarding ocular emergencies and to provide recommendations for strengthening undergraduate ophthalmology training and continuing medical education in Goa.

**Keywords:** Ocular emergencies, MBBS graduates, red eye, ocular trauma

**Title: Effectiveness of a Behavioural intervention for tobacco cessation among females: A quasi-experimental study in an urban slum of Chandigarh.**

**Authors:** Divya Sharma, Tanvi Kiran

**Affiliation:** Post Graduate Institute of Medical Education and Research (PGIMER), Chandigarh

**Study Design:** Quasi-experimental

**Background:** Tobacco use among women in an urban slum setting remains an under-addressed public health issue in India. The WHO estimates over 8 million annual deaths from tobacco use, with over 80% of users residing in LMICs. Despite known reproductive and long-term health consequences, NFHS-5 data reveal that 2.5% of pregnant and 3.2% of lactating women use tobacco, over 85% in smokeless form, highlighting the urgent need for gender-responsive cessation strategies within reproductive health programs.

**Objective:** To evaluate the effectiveness of a behavioural intervention on tobacco cessation, nicotine dependence, and motivation to change among females residing in an urban slum of Chandigarh city.

**Methods:** A quasi-experimental pre-post study was conducted among 127 female tobacco users aged 18 years and above attending the Public Health Dispensary, Sector 25, Chandigarh, a North Indian city. Standardized tools, including WHO-ASSIST, Fagerström Test for Nicotine Dependence, and Readiness to Change Questionnaire, were administered at baseline and 15 days post-intervention. The intervention comprised face-to-face counselling, group sessions, and culturally tailored informational materials. Pre-post differences in risk, dependence, and readiness were analyzed using the Wilcoxon Signed-Rank Test.

**Results:** Following the intervention, participants demonstrated significant improvements across most outcomes. WHO-ASSIST scores remained at a median of 17 ( $Z = -6.28$ ,  $p < 0.001$ ), indicating stable overall risk but significant individual variation in substance use patterns. Nicotine dependence scores decreased from a median of 2 to 1 ( $Z = -4.30$ ,  $p < 0.001$ ), reflecting reduced physiological dependence. Readiness to change scores increased from 0 to 1 ( $Z = -7.07$ ,  $p < 0.001$ ), showing enhanced readiness and motivation to quit. The results indicate that the intervention translated into behavioural and motivational gains within a short follow-up period.

**Conclusion:** The behavioural intervention, integrating education, counselling, digital nudges, and peer support, proved effective in reducing tobacco use and strengthening motivation to quit among women in an underserved urban setting. The results highlight the potential for scaling such community-based, gender-sensitive cessation models through primary health and reproductive health programs to advance India's tobacco control and women's health goals.

**Keywords:** Tobacco cessation, behavioural intervention, counselling, females, urban slum



**Title: Traditional versus Applied Role-play and Media-Integrated (ARMI) approach for Attitude, Ethics and Communication (AETCOM): A Quasi experimental study among undergraduate medical students in a metropolitan city of Maharashtra**

**Authors:** Dr. Neha Shet, Dr. Sonal Shetye

**Affiliation:** Grant Government Medical College and Sir JJ Group of Hospitals, Byculla, Mumbai.

**Study Design:** Quasi experimental study design

**Background:** The Medical Council of India introduced the competency-based undergraduate curricula (CBME), which includes training of undergraduate students on the Attitude, Ethics, and Communication (AETCOM) module, including fiduciary duty. However, Conventional medical education does not provide adequate training to undergraduates to resolve healthcare-related ethical dilemmas. Therefore, we have adopted the ARMI (Applied role play and media integrated) approach, and the current study is trying to see if the outcome differs using this approach.

**Aims and Objectives:** To assess and compare the effectiveness of traditional teaching methods and the Applied, role-play and media integrated (ARMI) teaching approach in enhancing knowledge, comprehension and applicability of AETCOM (Attitude, Ethics, and Communication) competencies among medical students.

**Materials and Methods:** A Quasi-experimental study design was adopted with a pre-test and post-test comparison among 3rd MBBS students (Batch 2022). A universal sampling technique will be adopted. A total of 110 participants will be randomly assigned to the two groups, with a minimum of 55 students per group. The control group received Conventional Lecture-Based Teaching using a PowerPoint presentation, and the Study Group received the ARMI approach with applied case-based discussion with media tools like reels and role plays. The difference in Knowledge, Comprehension, and Applicability of AETCOM module 3.5 fiduciary duty of students in both groups was recorded. Feedback was collected at the end of each session.

**Results:** The intervention group showed a significant improvement in post-test scores (Wilcoxon  $W = 276$ ,  $p = 0.001$ ), while the control group showed no significant change ( $W = 423$ ,  $p = 0.921$ ). Between-group comparison of post-test scores revealed no significant difference (Mann-Whitney  $U = 1389$ ,  $p = 0.44$ ). Learning gain analysis showed a moderate gain in the intervention group ( $g = 0.338$ ) and a negligible gain in the control group ( $g = -0.008$ ). During the feedback session, it was seen that 70% of the participants strongly agreed that a more interactive and media-integrated approach would help in improving better understanding of the modules.

**Conclusion:** It can be concluded that it is possible to improve the knowledge, comprehension and applicability of the AETCOM module using the ARMI approach.

**Keywords:** CBME-based curriculum, AETCOM module, fiduciary duty, ARMI approach, Learning gains

**Title: Digital Health Literacy Among Rural Adults in Gujarat: Determinants, Disparities, and Implications For Telehealth Readiness.**

**Authors:** Dr. Zinal Surti , Dr. Yogesh M

**Affiliation:** Shri M. P. Shah Medical College

**Study Design:** Cross Sectional Study

**Background:** As India accelerates its digital health transformation through the Ayushman Bharat Digital Mission, digital health literacy has emerged as a critical determinant of equitable healthcare access. Limited research exists on digital health literacy in rural Indian populations, who comprise nearly two-thirds of the country's population and face unique barriers to digital engagement. So, this study aimed to assess digital health literacy among adults in rural Gujarat using a contextually adapted instrument and identify associated factors.

**Methods:** A community-based cross-sectional study was conducted among 301 adults (aged 18-59 years) with access to digital devices from randomly selected villages in rural Gujarat. Digital health literacy was assessed using a contextually-adapted, self-developed multidimensional instrument measuring seven distinct skills, following comprehensive validity and reliability testing (Cronbach's  $\alpha = 0.83$ ). Multiple linear regression identified factors independently associated with digital health literacy scores.

**Results:** Approximately 49.5% of participants demonstrated adequate digital health literacy. Significant disparities existed across skills: information seeking (92.2%) and operational skills (82.7%) were widely prevalent, while privacy protection (22.5%) and reliability assessment (30.5%) were notably deficient. Education emerged as the strongest predictor ( $\beta=29.15$ ,  $p<0.001$  for college versus primary education), followed by age ( $\beta=-29.64$ ,  $p<0.001$  for 50-59 versus 18-29 years) and gender ( $\beta=-12.37$ ,  $p<0.001$  for females). Health concerns and chronic disease status showed positive associations with digital health literacy scores.

**Conclusion:** Rural adults in Gujarat demonstrated moderate digital health literacy levels with significant disparities across socio-demographic groups and skill domains. Findings highlight the need for targeted, comprehensive interventions to enhance digital health literacy, particularly among older adults, women, and those with lower educational attainment.

**Keywords:** Digital Health Literacy, Rural Health , Telehealth Readiness, Health Disparities, Ayushman Bharat Digital Mission



## **Title: Exploration of Awareness and Utilisation of Jan Aushadhi Kendras in Jodhpur**

**Authors:** Dr. Mamta, Dr. Chitransha Sharma,

**Affiliation:** AIIMS Jodhpur

**Study Design:** quasiexperimental

**Background:** Rising healthcare costs in India burden many with limited resources. To address this, the government launched PMBJP in 2008, providing quality generic medicines at affordable prices through Jan Aushadhi Kendras. Assessing public awareness, acceptance, and utilization of this scheme is essential.

**Objective:** To assess people awareness and utilisation regarding Jan Aushadhi Kendras in Jodhpur.

**Method:** A Mixed methods study was conducted in Jodhpur District, Rajasthan, addressing urban population. Semi-structured questionnaire was used to study awareness of people regarding generic medicines and Jan Aushadhi Kendras. IDI were done among study participants, in Hindi language, audio recorded, and translated to English. Total 247 participants are selected through simple random sampling. Quantitative descriptive and Inferential analysis done using Chi-square, Independent t test, qualitative data were coded, thematic analysis done manually.

**Results:** 27.5% (68 out of 247) of people were aware of Jan Aushadhi Kendras out of these 67.6% (46 out of 68) were aware about Pradhan Mantri Bhartiya Jan Aushadhi Pariyojana (PMBJP) scheme, but only 38.2% (26 out of 68) had ever purchased medicines from them. Awareness about JAK significantly higher among male ( $p < 0.001$ ) and higher education status ( $p < 0.001$ ). Utilization was higher among those who were aware of JAK ( $p < 0.01$ ), male participants ( $p < 0.01$ ), higher education status ( $p < 0.006$ ) and participants who felt cost of medicines as burden ( $p < 0.01$ ). 46.1% (12 of 26) had quality concerns. Major barriers to usage included lack of information 88.2% (218 out of 247), limited availability of prescribed drugs 83.8% (207 out of 247), and fear of being Counterfeit drugs 31.9% (79 out of 247). Respondent unaware of the existence of JAK, lacks understanding of the distinction between generic vs branded medicines. Not aware of alternative places to buy cheaper medicines, assumes cheaper ones are lower quality and work slower, follows hospital prescriptions without exploring alternatives for medicine procurement. Important Verbatim- “Generic me thoda Vo salt Jo hota hai vo low hota hai, branded me thoda high salt hota hai” “Janaushadhi Kendra k bare me nhi suna hai” “kuch pharmacist se suna hai, pr koi kehta hai vo asar nhi krti hai”.

**Conclusion:** Gaps in awareness about JAKs hinder their full utilization. Targeted awareness campaigns, may enhance greater utilisation.

**Keywords:** an Aushadhi Kendras, Pradhan Mantri Bhartiya Jan Aushadhi Pariyojana, Generic medicines

**Title:** Knowledge, attitudes and practices regarding telemedicine among medical professionals- A cross sectional study

**Authors:** Dr. Rama Sansgiri, Dr. Nitin Dhupdale

**Affiliation:** Department of Community Medicine, Goa Medical College

**Study Design:** Cross Sectional study

**Background:** Telemedicine is the delivery of healthcare services at a distance using information and communication technologies (ICTs) such as video calls, phone, or online platforms — for diagnosis, treatment, prevention of disease, and patient education. It has emerged as a vital tool in healthcare delivery, especially since the COVID-19 pandemic, by improving accessibility and continuity of care. Its successful implementation relies on the knowledge, attitudes, and practices of healthcare professionals, as well as awareness of national guidelines and ethical standards. Despite its growing importance, gaps remain in understanding how medical professionals perceive and utilize telemedicine in their clinical practice. This study was conducted to assess knowledge, attitude of medical professionals at Goa Medical College and the barriers regarding the practice.

**Objectives:** To determine the levels of knowledge, attitudes, and practices regarding telemedicine among medical professionals and to identify barriers that hinder its effective implementation.

**Materials and Methods:** A cross-sectional study was conducted among 180 doctors at Goa Medical College, Bambolim, Goa, over the month of October 2025. Data was collected using a semi-structured, pretested questionnaire disseminated via Google Forms. The tool assessed socio-demographic and professional characteristics, knowledge, attitudes, practices, and perceived barriers related to telemedicine. Participation was voluntary, and informed consent was obtained. Data was entered in Microsoft Excel and analyzed using SPSS software. Descriptive statistics were used to present frequencies, proportions, and means.

**Results:** Awaited

**Conclusion:** Awaited

**Keywords:** Telemedicine, Knowledge, Attitudes, Practices, Medical Professionals

**Title: Digital Health Competence and Human Papillomavirus Vaccine Literacy Among Medical Interns: Evaluating Readiness for Digital Counselling and Immunization Advocacy**

**Authors:** Dr. Divya Rohidas Murgaonkar, Dr. Delia D'Souza

**Affiliation:** Community Medicine /Goa Medical College

**Study Design:** Analytical Cross-sectional Study

**Background:** Human Papillomavirus (HPV) infection is a well-established cause of cervical and other anogenital cancers. India accounts for nearly one-fourth of global cervical cancer deaths. Safe and effective vaccines are now available, and the indigenous CERVAVAC has been recommended for inclusion in the Universal Immunization Programme (UIP). In the era of the Digital Health Mission and digital platforms such as eVIN, U-WIN, and CoWIN, healthcare workers are increasingly engaging with patients through digital tools like teleconsultation, WhatsApp for counselling. Digital counselling is therefore emerging as a core clinical competence. Medical interns who serve as the first line of patient educators must be equipped to provide accurate HPV vaccine counselling both face-to-face and through digital platforms. Understanding their literacy, confidence, and readiness will guide the integration of digital-health training in undergraduate curricula.

**Objectives:** The study aimed to assess HPV vaccine literacy, evaluate readiness for digital counselling, determine awareness of national digital health platforms and identify training gaps among medical interns.

**Materials and Methods:** An analytical cross-sectional study was conducted among 100 MBBS interns at Goa Medical College for six weeks after obtaining Institutional Ethics Committee approval. Data was collected through a structured self-administered Google Form that included seven sections: consent, socio-demographic details, HPV vaccine knowledge, counselling competence, digital readiness, awareness of digital platforms, and perceived barriers. Responses were analyzed using Jamovi software. Descriptive statistics, chi-square/t-tests, and multivariate logistic regression were applied to identify predictors of good counselling competence at a significance level of  $p < 0.05$ .

**Results:** Awaited.

**Conclusion:** Awaited.

**Keywords:** Human Papillomavirus vaccine literacy, digital counselling, medical interns, digital health competency

# **Title: Contrasting Associations of Human Development Index with Malaria and Dengue Incidence in India: An Ecological Analysis**

**Authors:** Dr. Joyce Inas Bardeskar, Dr. Geeta Pardeshi

**Affiliation:** Grant Government Medical College Mumbai

**Study Design:** Ecological Study

**Background:** The Human Development Index (HDI), which integrates life expectancy, education, and income, is a measure of societal progress and population health. Vector borne diseases which pose major public health challenges in India, are influenced by socio-economic factors. This study examines the association between HDI and the incidence of malaria and dengue across Indian states during 2019-22.

**Objective:** To examine the association between HDI and the incidence of malaria and dengue across Indian states during 2019-22. **Methods:** An ecological analysis was conducted using data from 36 Indian states and union territories over the study period. State-level HDI values were obtained from the Global Data Lab. Annual case counts and mid-year population estimates were sourced from the National Center for Vector Borne Diseases Control portal to calculate incidence per 100,000 population. As HDI exhibited minimal variation within states over the study window, we focused on, between-state contrasts using population-averaged Poisson regression, adjusting for year effects, rainfall, temperature, humidity, and urbanization.

**Results:** Scatter plots showed a weak inverse relationship between HDI and malaria, whereas dengue incidence showed a modest positive relationship with HDI. In Poisson models with year effects, a 0.01 point HDI increase corresponded to a non-significant 8% decrease in malaria incidence (IRR = 0.92; 95% CI: 0.82–1.04;  $p = 0.192$ ), which remained unchanged after adjusting for climate and urbanization. In contrast, each 0.01 HDI increase was significantly associated with a 9% rise in dengue incidence (IRR = 1.09; 95% CI: 1.03–1.15;  $p = 0.002$ ), strengthening to 11% (IRR = 1.11; 95% CI: 1.03–1.19;  $p = 0.007$ ) after accounting for climate and urbanization.

**Conclusion:** In this state-level ecological analysis, HDI showed contrasting associations with two major vector-borne diseases. While malaria incidence showed no clear association with HDI, dengue incidence rose with higher HDI. These patterns align with programmatic and ecological factors: malaria burden is already low and geographically constrained in many higher-HDI states, while dengue transmission is linked to urban density and water/solid-waste infrastructure.

**Keywords:** Human Development Index, malaria, dengue, vector-borne diseases, urbanization

## **Title: Assessment Of Social Media Addiction, Internet Gaming Disorder And Their Impact On Sleep Quality Among Undergraduate Students—A Cross-Sectional Study**

**Authors:** Gaurav mane, M. R. Gudadinni, Chandrika Doddihal

**Affiliation:** B.L.D.E / Community Medicine / SHRI. B. M. Patil Medical College, Hospital And Research Centre

**Study Design:** Cross-sectional study

**Background:** Academic progress, emotional equilibrium, and cognitive function all depend on getting enough sleep. Academic stress, variable scheduling, and extended screen time cause sleep difficulties for students. Despite being accessible and entertaining, social media and gaming are becoming more closely associated with addictive behaviours and poor sleep. Recent data points to a close relationship in which each can aggravate the other. Determining risk factors among students requires an understanding of this relationship.

**Objectives:** 1. To assess the prevalence of Social Media Addiction and Internet Gaming Disorder  
2. Assess the sleep quality of undergraduate students & correlate with social media addiction and Internet gaming disorder.

**Materials and Methods:** Universally accepted and adopted Internet Gaming Disorder Scale, Pittsburgh Sleep Quality Index, and Bergen Social Media Addiction Scale.

**Results:** Of the of 519 undergraduate students, 57.7% were female and 42.3% were male. , The prevalence of social media addiction was found to be 64%, and Internet gaming disorder was 0.02%. Poor sleep quality accounted for 72%. Social media addiction, Internet gaming disorder, and sleep quality are found to be statistically associated.

**Conclusion:** The findings above suggest that excessive engagement with digital media may negatively influence sleep patterns and overall well-being, emphasising the need for awareness and interventions to promote balanced technology use and healthy sleep habits.

**Keywords:** Social Media Addiction, Internet Gaming Disorder, sleep quality, undergraduate students, screen time



**Title: Development of a tool to measure screen time in toddlers and preschoolers in rural Haryana, India**

**Authors:** Shahana Singh, Mohan Bairwa, Partha Halder, Baridalyne Nongkynrih

**Affiliation:** Centre for Community Medicine, All India Institute of Medical Sciences, New Delhi

**Study Design:** Mixed method study

**Background:** Measuring screen time of children aged 2-5 years is challenging. Despite extensive research across the globe, issues pertaining to measurement instruments such as lack of valid and reliable tool, lack of an objective measure has been acknowledged to downgrade quality of evidence.

**Objectives:** Hence this study was done as an attempt to develop a simple reliable tool which can be administered to parents in a rural setting of India. **Materials and Methods:** To measure screen time in children, both a questionnaire and a 7-day prospective diary were developed. A detailed literature review was conducted to identify constructs and develop a draft of tools. A qualitative study was conducted to refine the tool to suit parents' understanding and knowledge. The diary and questionnaire were compared by Cohen Kappa to assess agreement for excessive screen time and correlation of screen time duration was established by Pearson co-efficient. A 2-week test-retest reliability was also studied.

**Results:** Findings from literature were used to develop a questionnaire and a 7-day prospective diary as effective and simple tools for assessing screen time in children aged 2-5 years. This was then refined based on a focus group discussions conducted which highlighted the importance of inquiring about individual device use, frequency, content, and parenting practices to measure screen time. Both the diary and questionnaire showed excellent test-retest reliability for screen time duration, with ICC values of 0.92 (95% CI 0.84-0.96) for the questionnaire and 0.95 (95% CI 0.84-0.98) for the 7-day diary, both statistically significant ( $p < 0.001$ ). There was moderate agreement (Kappa 0.41) and correlation ( $r=0.44$ ) (95% CI 0.32-0.55) between diary and questionnaire methods for assessing screen time ( $p \text{ value} < 0.001$ ).

**Conclusion:** Screen time measurement can be done using a simple diary or a questionnaire, with both methods showing excellent test-retest reliability and moderate correlation. Further research is required to develop a measurement technique that can be used globally to better understand screen use in children.

**Keywords:** Screen time, Children, Tool, Rural, Under 5 child

# **Title: Publication Trends in Health-related Systematic Reviews and Meta-analyses on India: A Bibliometric Analysis**

**Authors:** Dr. Dumpettiwar Bhagyashri Anil, Dr. Geeta Pardeshi

**Affiliation:** Department Of Community Medicine / Grant Government Medical College And Sir JJ Group Of Hospitals Mumbai 400008

**Study Design:** A Bibliometric Analysis

**Background:** Bibliometric analyses quantify research output and highlight publication trends, thematic priorities, and methodological patterns. In India, systematic reviews and meta-analyses (SRMAs) span multiple health domains, yet comprehensive evidence on their temporal and thematic trends is limited.

**Objectives:** To describe year-wise publication trends from 2013 to 2025 of health-related SRMAs on India and examine their distribution by Sustainable Development Goal (SDG) indicator category, underlying study designs, and databases searched.

**Materials and Methods:** We searched PubMed on 16 September 2025 using India in Title/Abstract and the SRMA filter. After screening 1,679 records, 261 SRMAs met inclusion criteria. Pre-specified variables (year, SDG category, design of included primary studies, number and names of databases) were extracted into Microsoft Excel 2024 and analyzed in IBM SPSS Statistics v26. Pre- ( $\leq 2019$ ) versus post-COVID-19 ( $\geq 2020$ ) distributions were compared using  $\chi^2$  tests.

**Results:** SRMA publications showed a steady increase over time, peaking in 2020. Most SRMAs synthesized observational studies (94.3%). Non-communicable diseases (SDG 3.4.1) were the largest thematic group (n=111; 42.5%), followed by coverage of essential health services (SDG 3.8.1; n= 43;16.5%). (79.69 %) searched three or more databases, and the most commonly searched database was PubMed (n=256, 98.6 %). Pre/post-COVID topic distribution ( $\chi^2=5.91$ , p=0.116) and number of databases used ( $\chi^2=2.54$ , p=0.111) did not differ significantly.

**Conclusion:** India-related SRMAs have grown steadily, with NCDs predominating and no clear shift in topic mix or database breadth after COVID-19. Broader application across under-represented SDG areas and more comprehensive, multi-database searches could strengthen the national evidence base for policy and practice.

**Keywords:** Systematic Review and Meta-Analysis, Bibliometric analysis, COVID-19, Infectious Diseases

**Title: Early Nurture, Lasting Impact: Understanding Responsive Caregiving for Children Under Three in a Small District Town of Central India: Cross Sectional study.**

**Authors:** Dr. Titiksha Wadate, Dr. Anuj Mundra, Dr. Rajshekhar M, Dr. Subodh Gupta

**Affiliation:** MGIMS Sevagram Wardha

**Study Design:** cross sectional study design

**Background:** A child's early years shape lifelong health and development, with caregiving quality being crucial. Responsive caregiving marked by warmth, stimulation, and consistency fosters optimal growth. Amid urbanization and shifting family roles, this study examines socio-demographic and environmental determinants of caregiving among urban families in Central India.

**Objectives:** To study current practices of responsive caregiving in urban families for children aged 0-3 years and their determinants.

**Methodology:** This quantitative study was conducted in a small district town in central India among parents of children aged 0–1 year and 1–3 years. Data was collected using the standardized HOME Inventory (Infant/Toddler version) assessing six subdomains—Responsivity, Acceptance, Organization, Learning Materials, Involvement, and Variety. A sample of 192 participants per age group was selected through probability proportionate to population sampling across 12 urban clusters using list of children aged 0-3 year from ASHA workers. We have performed multivariate linear regression to identify the determinants.

**Results:** The HOME Inventory assessed across 385 households showed a mean total score of  $32.70 \pm 5.57$ . Caregiver-related domains—Responsivity ( $10.23 \pm 0.77$ ), Acceptance ( $5.78 \pm 0.74$ ), and Involvement ( $4.99 \pm 1.29$ )—were higher than reference means, indicating strong caregiver–child interactions. Conversely, Organization ( $3.75 \pm 1.24$ ), Learning Materials ( $4.81 \pm 2.72$ ), and Variety ( $3.15 \pm 1.23$ ) were lower, reflecting limited material and structural support in the home environment. Regression analysis revealed that child's age and mother's education were the most significant predictors of HOME scores ( $\beta = 2.74$  and  $0.43$ , respectively;  $p < 0.001$ ), together explaining 38.8% of the variance. Higher maternal education and older child age were associated with better caregiving practices and enriched home environments, while greater number of children and lower socioeconomic status predicted lower HOME scores. These findings underscore the importance of maternal education and family resources in shaping early caregiving environments.

**Conclusion:** Maternal education, child's age, and family resources strongly influence responsive caregiving. The study revealed limited awareness about the importance of responsive caregiving during infancy (0–1 year). Enhancing parental awareness and supporting low-resource families through targeted interventions can foster nurturing home environments and promote optimal early development.

**Keywords:** Responsive caregiving, Early childhood development, HOME Inventory, Urban families, Quantitative stu

**Title: Assessing Sexual Health Knowledge, Attitude and Perception Among Adolescents: A Pre-Post Intervention study in Varanasi**

**Authors:** Dr. Prayag Khandelwal, Dr. Ravpreet Kaur, Dr. Vineet Pathak, Dr. Ravi Shankar

**Affiliation:** Institute of medical sciences, Banaras Hindu University

**Study Design:** Pre-post Intervention Study

**Background:** Adolescence is a pivotal stage characterized by rapid physical, emotional, and social changes. Limited knowledge of sexual and reproductive health (SRH) during this period can foster misconceptions and risky behavior, resulting in preventable outcomes such as unintended pregnancies and sexually transmitted diseases (STDs). Comprehensive Sexuality Education (CSE) offers accurate information, positive attitudes, and essential skills to help adolescents make informed choices regarding their bodies and relationships. However, implementation of sex education remains restricted in many Indian semi-urban and rural areas due to cultural barriers and insufficient institutional support. This study evaluated baseline SRH knowledge among Varanasi adolescents and assessed the impact of a structured educational intervention.

**Objectives:** The research aimed to assess the baseline level of sex education knowledge among adolescents in Varanasi, analyze associations between selected demographic and psychosocial variables with their knowledge levels, and evaluate how a structured educational program would affect students' understanding of sexual and reproductive health.

**Methods:** A pre-post intervention design was applied among 370 adolescents (aged 13–19) sampled via stratified random sampling from urban and rural Varanasi schools. A pre-tested, semi-structured questionnaire collected socio-demographic data and information on knowledge, attitudes, and opinions about sex education. An adapted educational module from the National Adolescent Health Program was delivered interactively. Data were analyzed using STATA-SE, employing descriptive statistics, Chi-square, and logistic regression at a significance level of  $p < 0.05$ .

**Results:** Post-intervention, students demonstrated significant knowledge gains in all domains. Prior exposure to sex education correlated with markedly higher knowledge (OR = 4.79, 95% CI: 2.62–8.75;  $p < 0.001$ ). STD awareness (OR = 6.56; 95% CI: 3.45–12.46) and in-school sex education programs (OR = 5.23; 95% CI: 2.79–9.81) had the strongest positive associations. Predictors of better child safety included LGBT familiarity (OR = 4.09), ability to distinguish good/bad touch (OR = 3.42), and comfort discussing sex with parents (OR = 2.94).

**Conclusion:** Comprehensive, culturally sensitive school-based sex education, coupled with parental and institutional support, significantly improves adolescent knowledge and decision-making regarding sexual health. Regular CSE programs foster informed, safer, and more confident youth.

**Keywords:** Adolescents, Sexual health, Awareness, Intervention, Pre post study



**Title: Gender inclusive Awareness on Human Papilloma Virus and its Vaccine among the Adolescents and Health -Care providers under a tertiary care hospital in Telangana, India -A mixed -method study**

**Authors:** Dr. Vanimina Triveni

**Affiliation:** Department of Community Medicine

**Study Design:** Explanatory Mixed Method Design

**Background:** The human papillomavirus, or HPV, is one of the most prevalent STDs in the world. The majority of HPV infections resolve on their own, but some may persist and develop into precancerous lesions and cancers. HPV affects both sexes, although cervical cancer is frequently addressed. Therefore, preventing HPV primarily in women ignores a significant portion of the disease burden. In addition to protecting males by immunising them, it lowers the community's total rate of transmission. Research indicates that, primarily as a result of low vaccination rates, cultural hurdles, and a lack of knowledge, cervical cancer is still the second most frequent malignancy in women in India and causes about 20% of all cervical cancer deaths worldwide.

**Objective:** To determine the awareness of HPV and its vaccine among the adolescents, and to explore the cultural, logistical, and health care system barriers and challenges regarding the HPV Vaccine from the health care professionals.

**Methodology:** •An explanatory mixed method design in which the quantitative phase (Survey) was followed by the qualitative phase (In Depth Interviews) was done among the adolescents from the Secondary Schools and Undergraduate colleges and Specialists from departments of Obstetrics & Gynaecology and Paediatrics in the field practice area of a Tertiary care hospital between September to November 2025

- A pretested semi-structured Questionnaire was used among the adolescents, and an in-depth interview guide for adolescents and the health care professionals separately.

- Institutional Ethics Committee (IEC) approval was taken.

**Results:** The majority of the study population were males (56.3%) and unmarried (95.4%) from different branches, which include High school (16.9%), Medical (33.7%), Nursing (4.5%), Pharmacy (11.2%), Engineering (22.5%), and Allied sciences (11.2%). Most of the students haven't heard about the HPV (79.3%) or the HPV Vaccine (75.9%). 42.5% students don't know the right age for the HPV vaccination. Half of the students are not willing to take the vaccine due to the lack of knowledge and fear of side effects. (Qualitative Data Analysis is pending and will be discussed at the conference)

**Conclusion:** There is very low awareness among adolescents about HPV and its Vaccine. Most of them are not comfortable discussing their personal health with their friends, who show stigma on HPV in the community.



**Keywords:** HPV Vaccine, Awareness, Cervical Cancer, Adolescents, Indepth Interviews



**Title: Comprehensive School-Based Health Screening for Early Detection of Non-Communicable Diseases and Common Illnesses Among Students in Bathinda, Punjab.**

**Authors:** Dr. Deepa Bharti, Rakesh Kakkar

**Affiliation:** AIIMS Bathinda

**Study Design:** Cross Sectional

**Background:** Schools are crucial for child health (ages 5-18), shaping development and lifelong habits. This period is vital for physical growth, cognitive development, and the formation of lifelong habits. Poor health and nutritional deficiencies may lead to reduced academic performance and long-term health risks. School-based health screening enables early detection of non-communicable disease (NCD) risk factors and common illnesses, ensuring timely intervention. This study assesses the health status of school children in Bathinda, Punjab, through a comprehensive screening camp.

**Objectives:**

1. To assess the overall health and nutritional status of school students through comprehensive screening, including BMI evaluation and identification of risk factors for non-communicable diseases.
2. To detect common health problems—particularly related to eye, ENT, and dental health—and provide appropriate referral and counselling for further management.

**Methodology:** A cross-sectional school-based health screening was conducted at the Government School of Bathinda. A total of 680 students aged 5–18 years were examined. Height and weight were recorded using standardised equipment, and BMI was assessed using WHO age- and sex-specific growth charts. Multispecialty screenings—including Eye, ENT, and Dental examinations—were performed by trained specialists. Identified cases received basic counselling and referrals for further evaluation or treatment.

**Results:** A total of 680 students were screened, comprising 345 (50.7%) females and 335 (49.3%) males. Based on BMI assessment, 453 (66.6%) students were within the normal range, while 125 (18.3%) were overweight or obese, and 102 (15.0%) showed thinness or severe thinness. Most students (601; 88.3%) had normal height for age. Anaemia was the most common health issue, identified in 312 (45.8%) students, followed by refractive errors in 157 (23.0%) and dental problems in 74 (10.8%). A few students were also found to have elevated blood pressure suggestive of hypertension.

**Conclusion:** School-based health screening effectively identifies early nutritional issues, NCD risk factors, and common illnesses. Early detection enables timely counselling, referral, and preventive action to improve students' long-term health outcomes.

**Keywords:** Non Communicable Disease, School Students, Common Illnesses

# **Title: Prevalence Of Hypertension In School Going Adolescents And Identifying The Associated Risk Factors In Manipur: A Cross-Section Study**

**Authors:** Khumukcham Sushma Devi, Moirangmayum Sonia Devi

**Affiliation:** Shri M. P. Shah Medical College

**Study Design:** Cross Section Study

**Background:** Hypertension is increasingly recognized as a major health concern beginning in adolescence, contributing significantly to cardiovascular morbidity later in life. In Manipur, data on adolescent hypertension and its risk factors remain limited. This study aimed to determine the prevalence of hypertension and identify associated risk factors among school-going adolescents in central region of Manipur.

**Methods:** A cross-sectional study was conducted among school-going adolescents aged 10 to 17 years from selected schools in central region of Manipur using multistage random sampling. Blood pressure was measured with a digital BP apparatus (OMRON Digital BP Monitor) with hypertension defined as blood pressure above the 90th percentile according to IAP Standard treatment guidelines committee 2022. Anthropometric measurements including body mass index (BMI) were recorded. Family history, lifestyle factors and perceived stress were assessed using structured questionnaires.

**Results:** The overall prevalence of hypertension was found to be approximately 6.7%. Males showed slightly higher rates compared to females. Significant associations were observed between hypertension and obesity as indicated by elevated BMI, stress and family history of hypertension ( $P < 0.05$ ). Lifestyle factors such as sedentary behavior and dietary habits were further found as contributory risks.

**Conclusion:** The study revealed a notable prevalence of hypertension among adolescents in Central region of Manipur, with obesity and familial cardiovascular risk factors showing significant correlations. These findings highlight the urgent need for early screening and targeted interventions addressing modifiable risk factors in this population.

**Keywords:** Adolescent hypertension, Prevalence, Obesity, BMI, Family history, Manipur

**Title:** Estimation of Prevalence of Parenterally Transmitted Infections (Human Immunodeficiency virus, Hepatitis B, and Hepatitis C) Among Drug Users Attending De-Addiction Treatment Facility, Government Psychiatric Diseases Hospital, Jammu.

**Authors:** Dr. Kavinkumar K. G., Dr. Rakesh Bahl, Dr. Manu Arora

**Affiliation:** Government medical college, Jammu

**Study Design:** Cross Sectional Study

**Background:** Intravenous drug abuse represents a significant public health challenges, including the transmission of bloodborne infections such as HIV, Hepatitis B, and Hepatitis C. Globally, these infections are associated with high morbidity and mortality. In India, where injectable drug use is prevalent, Co-infection with HIV and Hepatitis C Virus is a major concern as the burden of these infections among Intra venous drug users is alarming. The estimated prevalence of Human Immunodeficiency Virus among people who inject drugs is 6.23%, with Hepatitis C Virus rates reaching 50-60% in some regions .

**Objectives:** 1. To estimate the prevalence of HIV, Hepatitis B, and Hepatitis C among intravenous drug users attending the Deaddiction treatment facility, Government Psychiatric Diseases Hospital, Jammu.  
2. To identify risk factors associated with these infections in the study population.

**Methods:** In this Hospital based cross sectional study we have collected 345 samples from Intravenous Drug Users, Individuals attending the De-addiction treatment facility at Government Psychiatric Diseases hospital, Jammu with their informed consent.

**Results:** In this study ,study population was predominantly male, young less than 24 years and unemployed/unskilled workers. Hepatitis C Virus prevalence:23.5% (81 cases) Hepatitis B Virus prevalence:9.9% (34 cases) Human Immunodeficiency Virus prevalence (16 cases) no infection reported: 62% (214 cases). Despite relatively high awareness of risks, unsafe practices (38.8% using non-sterile needles, 29.9% sharing needles) were common.

**Conclusion:** A high prevalence of Hepatitis C Virus Hepatitis B Virus, and Human Immunodeficiency Virus among drugs users, largely driven by unsafe injection practices. Strengthening Education, counselling Hepatitis B Virus vaccination and access to sterile injection equipment is essential to reduce transmission

**Keywords:** Parenterally transmitted infections, Hepatitis B, Hepatitis C, Intravenous Drug Users

**Title: Mixed Methods Study: Influence of Perceived Stigma and Mental Health on Treatment Adherence and Outcomes Among Tuberculosis Patients and Their Contacts.**

**Authors:** Dr. Shruti Bobde, Dr. Yogesh M

**Affiliation:** Shri M. P. Shah

**Study Design:** Mixed method study

**Background:** Perceived stigma and psychological issues like depression and anxiety among tuberculosis (TB) patients can impede motivation and willingness to adhere to lengthy treatment regimens often required for cure. However, the magnitude and lived experiences of these barriers spanning from compliance to final unfavorable outcomes is less characterized in endemic regions like India.

**Objectives:** We aimed to assess perceived stigma, mental health disorders (anxiety, depression, stress), and their influence on anti-TB treatment (ATT) compliance and success among patients on ATT and contacts on preventive therapy (TPT) in Gujarat using a mixed methods approach.

**Methodology:** An explanatory sequential mixed methods study that first recruited 200 TB patients and 400 contacts to evaluate perceived stigma, mental health scores, and associations with ATT/TPT compliance issues and treatment outcomes. This was followed by in-depth interviews with 30 TB patients and 15 household contacts selected through maximum variation sampling to explore lived experiences of stigma and psychological distress. Quantitative data collection included sociodemographic proforma, Perceived TB Stigma Scale, Depression Anxiety and Stress Scale (DASS-21), self-report on ATT/TPT compliance, and pill counts. Qualitative data were collected through semi-structured interviews and analyzed using thematic analysis. Integration occurred at the interpretation and reporting stages using a joint display approach.

**DIGITALISATION, DATA AND DECISIONS**

**Results:** Quantitative findings showed approximately 67% of patients versus 45.5% of HCCs had high stigma scores above 12. Multivariable regression indicated that perceived stigma, depression, anxiety, and stress were significantly higher in patients compared to contacts ( $p < 0.05$ ) and were each associated with a higher likelihood of non-adherence. Qualitative analysis revealed five major themes: (1) Internalized shame and self-isolation, (2) Community misconceptions fueling discrimination, (3) Fear of economic consequences, (4) Complex emotional burden affecting treatment motivation, and (5) Coping mechanisms and support systems. Integration of findings demonstrated how quantitative associations between stigma and non-adherence were explained by patients' narratives of avoiding medication in public settings and concealing their diagnosis due to fear of rejection.

**Conclusion:** The mixed methods approach provided complementary insights showing TB stigma and psychological morbidities as key underlying drivers of compliance issues and unfavorable treatment outcomes, while revealing the complex lived experiences and contexts that explain these relationships. Holistic patient support measures addressing both clinical and psychosocial dimensions are necessary.



**Keywords:** Tuberculosis, stigma, mental health, compliance, treatment outcomes, mixed methods



**Title: A Cross Sectional study on prevalence of physical activity and its impact on emotional intelligence in Medical Students in Hyderabad**

**Authors:** Dr. Atmudi Vijay Sai Krishna, Dr. Ritika Verma, Dr. B. Nirmala Devi

**Affiliation:** Osmania Medical College

**Study Design:** Cross sectional study

**Background:** WHO defines physical activity as any bodily movement produced by skeletal muscles that requires energy expenditure. Physical activity refers to all movement including during leisure time, for transport to get to and from places, or as part of a person's work or domestic activities. Both moderate & vigorous-intensity physical activity improve health and mental well-being.[1] Emotional intelligence is the capacity to be aware of, control, and express one's emotions, and to handle interpersonal relationships judiciously and empathetically.[2] This study is planned to assess the prevalence of physical activity and its association with emotional intelligence among the medical college students.

**Objectives:** 1) To estimate the prevalence of physical activity among medical students

2) To determine the association of physical activity with emotional intelligence

**Materials and Methods:** A cross sectional study done by gathering list of undergraduate students of Osmania medical college to list out all the Participants. Procedure and benefits of the study was explained to students. Informed consent taken. Data collected by visiting the colleges using a questionnaire including socio-demography of participants and standard questionnaires GPAQ, BEIS-10.[3][4] Data is analysed using Microsoft excel and SPSS V25.

**Results:** The participants mean age is around  $20 \pm 1.2$  years, 59% females and 41% males, with 59.1% doing some kind of physical activity. Mean emotional intelligence score is  $36.39 \pm 5.41$  and 58.1% belong to average emotional intelligence.

**Conclusion:** Major study population belong to average emotional intelligence and doing physical activity shows more emotional intelligence among the study population.

**Keywords:** Physical Activity, Emotional intelligence.

## **Title: Understanding Doctors' Perspectives on Technology-Enabled Mental Health Care in India: A Qualitative Exploration**

**Authors:** Dr. Vibha Swaroop, Dr. Nidhi Bhatnagar

**Affiliation:** Institute Of Medical Sciences Bhu Varanasi

**Study Design:** Qualitative

**Background:** Doctors, as frontline caregivers, play a vital role in maintaining others' health but often overlook their own well-being. The demanding nature of their work, long hours, and emotional strain contribute to high levels of stress and burnout. Despite being aware of the importance of mental health, many hesitate to seek help due to stigma, lack of time, and confidentiality concerns. With the growing presence of digital health platforms, Technology-Enabled Mental Health Care offers new possibilities, yet doctors' perspectives on such interventions remain underexplored.

**Objective:** To explore the barriers and facilitators influencing doctors' attitudes and willingness to seek technology-enabled mental health care.

**Methods:** A qualitative study was conducted among 20 doctors from the Department of Community Medicine, Maulana Azad Medical College, New Delhi. Participants were purposively selected to ensure variation in designation and experience. In-depth interviews were carried out using a semi-structured topic guide, and data were analyzed inductively using NVivo software.

**Results:** Four key themes emerged: (1) attitudes toward mental health; (2) perceptions of technology in care; (3) personal and professional influences; and (4) coping and support mechanisms. While participants appreciated the accessibility of digital platforms, concerns about privacy, lack of personal connection, and limited customization reduced their acceptability.

**Conclusion:** Doctors acknowledged the potential of technology-enabled mental health services but expressed hesitation due to trust and confidentiality issues. Enhancing privacy safeguards and promoting personalized, user-friendly platforms may encourage greater acceptance and normalize help-seeking in the medical community.

**Keywords:** Doctors, digital health, mental well-being, barriers, facilitators, qualitative study

## **Title: Missed Opportunities for the Congenital Anomaly Scan during Antenatal Care: A Cross-Sectional Study**

**Authors:** Dr. Sourav Agrawal, Dr. Priyanka Chintaram Sahu, Dr. Smitabh Barik

**Affiliation:** Shri Balaji Institute of Medical Science, Raipur

**Study Design:** Cross Sectional Study

**Background:** Congenital anomalies are among the leading causes of perinatal morbidity and mortality worldwide, with many preventable through timely detection during the mid-trimester anomaly scan (18–24 weeks). Despite clear national guidelines, a large proportion of women in rural India either miss or delay this essential screening due to limited awareness, late antenatal registration, inadequate infrastructure, and socio-cultural barriers. In resource-limited states such as Chhattisgarh, identifying the magnitude and determinants of missed opportunities for congenital anomaly scans is crucial for strengthening antenatal service delivery.

**Objectives:** To estimate the prevalence of missed opportunities for the congenital anomaly scan and to identify associated socio-demographic and health-system factors among pregnant and recently delivered women in rural Chhattisgarh.

**Material and Methods:** A community-based cross-sectional study was conducted over six months in seven villages (population  $\approx$  18,900) under the Rural Health Training Centre of Shri Balaji Institute of Medical Sciences, Raipur. Using stratified random sampling with proportionate allocation, 428 eligible participants (pregnant  $>$  24 weeks or delivered within 12 months) were interviewed using a pre-tested semi-structured questionnaire. Descriptive statistics were used to estimate prevalence; Chi-square and multivariable logistic regression identified independent predictors ( $p < 0.05$ ).

**Results:** Overall, 61.2% (95% CI: 56.6–65.7%) missed the anomaly scan by 24 weeks. Late ANC registration (AOR 3.4), low maternal education (AOR 2.6), lower socioeconomic class (AOR 2.1), and distance  $>$  5 km from ultrasound centres (AOR 3.9) were independent predictors. Key reasons included lack of awareness (42%), late advice by health workers (33%), and facility unavailability (28%).

**Conclusion:** Missed chances for anomaly scans remain alarmingly high in rural Chhattisgarh, indicating deficits in knowledge, counselling, and service accessibility. To ensure universal coverage of fetal anomaly screening and contribute to reducing preventable perinatal morbidity and mortality, strengthening early ANC registration, frontline worker capacity should be built, ultrasound facilities should be decentralized, and community awareness campaigns should be launched.

**Keywords:** Congenital Anomaly Scan, Antenatal Care, Ultrasound Accessibility

**Title: Prevalence of affiliate stigma among caregivers of patients with schizophrenia attending outpatient department of a mental health tertiary care institute**

**Authors:** Dr. Manu Goel, Dr. Sanjiv Kumar Bhasin,

**Affiliation:** University College of Medical Sciences

**Study Design:** Institution-based cross sectional

**Background:** Affiliate stigma is the manifestation of cognitive, behavioural and affective responses in caregivers due to their association with patients with schizophrenia. To the best of our knowledge, no study has been conducted to assess this phenomenon among caregivers of schizophrenics in Delhi using a validated Hindi tool.

**Objectives:** To assess the levels of affiliate stigma among caregivers of patients with schizophrenia attending the outpatient department of a mental health tertiary care institute in Delhi. **Materials and Methods –** It was an institution based cross sectional study conducted at the Institute of Human Behaviour and Allied Sciences, Delhi. Using random sampling, 288 caregivers were interviewed using the Affiliate Stigma Scale from April 2024 to August 2025. The data collected was analysed using SPSS 20.0. Means ( $\pm$  standard deviations) and medians (with interquartile range) for continuous variables and proportions (percentages) for categorical data were calculated.

**Results:** In our study, it was found that 89.2% of caregivers had low affiliate stigma (score of 22-55 on the scale) followed by 4.5% and 6.3% who experienced average (score of 56-62 on the scale) and high levels (score of 63 or higher on the scale) of affiliate stigma, respectively according to the affiliate stigma scale. The mean scores for the total affiliate stigma and the affective, behavioural and cognitive domains were 1.78 ( $\pm$  0.57), 2.26 ( $\pm$  0.81), 1.42 ( $\pm$  0.50), and 1.7 ( $\pm$  0.65) respectively.

**Conclusion:** The presence of a patient with schizophrenia causes his/her caregiver to experience affiliate stigma. Thus, medical professionals must focus on the needs of the caregiver-patient dyad to ensure healthy outcomes for both. Further, policymakers must ensure reduction of stigma against mental illnesses in the community.

**Keywords:** Affiliate Stigma, Mental Health, Schizophrenia, Caregivers



**Title: Patterns, Effects and Predictors of Digital Device Use Among School-Going Children:  
A Cross-Sectional Study from Goa**

**Authors:** Dr. Cinclaire Jacia Fernandes, Dr. Vanita G. Pinto Da Silva

**Affiliation:** Department of Community medicine- Goa Medical College

**Study Design:** Cross sectional study

**Background:** The use of digital devices among children has rapidly increased, with potential implications on academic performance, sleep and health. Evidence on patterns, predictors and effects of digital device use in Indian school children remains limited. This study aimed to assess usage patterns, identify predictors and examine the effects of digital device use among school-going children in Goa.

**Objectives:** To study the Patterns of Digital Device Use Among School-Going Children To study the Effects of Digital Device Use Among School-Going Children To study the Predictors of Digital Device Use Among School-Going Children

**Methods:** A cross-sectional study was conducted among parents of 360 students aged 6–17 years, selected through stratified random sampling from government and private schools in Goa. Data was collected using a pretested structured questionnaire covering sociodemographic details, device access and use, parental supervision, academic performance, sleep and health. Screen time was calculated as average daily hours. Logistic regression was used to identify predictors of high screen time (>4 hours/day), academic decline and sleep insufficiency.

**Results:** Awaited

**Conclusions:** Awaited

**Keywords:** Digital devices, screen time, academic performance, school children, Goa

**Title: Determinants of tobacco addiction severity and associated oral potential premalignant lesions among tobacco users attending a tobacco cessation clinic in tertiary cancer hospital**

**Authors:** Dr. Shraddha Badgujar, Dr. Sharmila Pimple

**Affiliation:** Department of Preventive Oncology, Tata Memorial Centre, Mumbai

**Study Design:** Retrospective audit

**Background:** Tobacco use is a major preventable cause of oral cancer globally and in India. The WHO Clinical Treatment Guideline for Tobacco Cessation in Adults 2024 emphasizes that cessation support is a key demand-reduction strategy. It recommends integrating standardized dependence assessments and behavioural interventions into routine health services. Understanding the relationship between addiction severity and oral lesions can guide more effective, personalized cessation strategies in Tobacco Cessation Clinics. Objectives: To assess the pattern of tobacco use, its association with oral potential premalignant lesions, and nicotine dependence among patients attending a Tobacco Cessation Clinic.

**Materials and methods:** A retrospective study audit of 8,245 tobacco users attending the Tobacco Cessation Clinic between 2016-2022 was conducted in a tertiary cancer hospital. Data on sociodemographic characteristics, pattern of tobacco use and association with oral lesions, and Fagerström Test for Nicotine Dependence scores were analysed using descriptive statistics, chi-square test, and regression models with statistical significance at  $p < 0.05$ .

**Results:** The mean age of tobacco users was  $45.9 \pm 12.5$  years, with 88.7% males and 11.3% females, and a majority (74.8%) residing in urban areas. Smokeless tobacco use was predominant (70.3%) with a mean onset at 29.6 years of age. The most common lesions associated with smokeless tobacco were leukoplakia (38.4%) and submucous fibrosis (12.7%) ( $p < 0.0001$ ). Higher nicotine dependence was associated with oral potential premalignant lesions, and lower readiness to quit ( $p < 0.0001$ ). Multivariate analysis showed that smoked tobacco use was associated with increasing age [OR=1.021 (1.014–1.029)]; smokeless tobacco use was associated with male gender [OR=20.395 (10.871–38.265)], rural residence [OR=1.561 (1.364–1.787)] and family history of tobacco use [OR=1.008 (1.004–1.012)]; dual use was associated with younger age [OR=0.979 (0.972–0.986)], lower education [OR=0.743 (0.642–0.861)], and higher nicotine dependence [OR=1.016 (1.014–1.018)].

**Conclusion:** This study provides a strong association between addiction severity and risk of oral potential malignant lesions. Integration of oral cancer screening, with Fagerström Test for Nicotine Dependence scores and behaviorally tailored counselling, can enhance cessation outcomes.

**Keywords:** Determinants of tobacco addiction severity and associated oral potential premalignant lesions among

## **Title: Effect of Health Education on Road Traffic Accidents among Young Adults: A Scoping Review**

**Authors:** Dr. Gopal Jani, Dr. Manoj Kumar Gupta, Dr. Anubhav Shrivastava

**Affiliation:** Community Medicine AIIMS Jodhpur

**Study Design:** Scoping Review

**Background:** Road traffic accidents (RTAs) are a major cause of morbidity and mortality among young adults, driven by risky behaviors and lack of safety measures. Health education and promotion enhance awareness and safer practices, but evidence of their effectiveness in reducing RTAs among young adults is limited. This scoping review maps existing literature on health education's impact in preventing RTAs among young adults.

**Objectives:** To assess the effect of health education intervention on the prevention of road traffic accidents among young adults.

**Methods:** A scoping review was conducted using PubMed and Google Scholar as the primary electronic database. The search strategy was as follows: (((("Young Adult"[Mesh]) OR "Adult"[Mesh]) AND "Health Education"[Mesh]) OR ("Health Literacy"[Mesh] OR "Health Communication"[Mesh] OR "Health Promotion"[Mesh] OR "Consumer Health Information"[Mesh])) AND ("Accidents, Traffic/mortality"[Mesh] OR "Accidents, Traffic/prevention and control"[Mesh] OR "Accidents, Traffic/statistics and numerical data"[Mesh] OR "Accidents, Traffic/trends"[Mesh])). Peer-reviewed English-language studies from 2000 to 2025 were included. Eligible studies examined educational or behavioral interventions aimed at reducing traffic-related injuries, risk behaviors, or accident rates among young adults.

**Results:** This scoping review analyzed peer-reviewed studies on the impact of health education on RTA among young adults. Eight key studies were included. One intervention study showed significant improvement in knowledge ( $t = 31.28, p < 0.05$ ), attitudes ( $t = 4.39, p < 0.05$ ), and practice ( $t = 10.89, p < 0.05$ ) post-education. One reported 32% reduction in distracted driving and greater helmet and seatbelt use, while another found emotive, relatable content improved engagement. However, one study noted a decline in knowledge and behavior after two months, suggesting the need for reinforcement. Overall, health education effectively enhanced short-term awareness and safe practices among young adults, though sustaining behavioral change remains challenging.

**Conclusion:** Health education enhances road safety awareness and promotes safer behaviors among young adults. While short-term behavioral improvements are evident, further longitudinal studies are needed to assess sustained effects on accident reduction. Integrating health education into school curriculum and community programs is essential to strengthen road safety initiatives and reduce the burden of road traffic accidents.

**Keywords:** Road Traffic Accidents, Young Adults, Health Education

**Title: Binge Watching And Its Association With Depression, Anxiety And Stress Among Medical Undergraduate Students Of Tertiary Care Teaching Hospital, Tumkur - A Cross Sectional Study.**

**Authors:** Dr. Nivedha A E, Dr. Ramya K S, Sri Siddharth

**Affiliation:** Sri Siddhartha medical college, tumkur Karnataka

**Study Design:** Cross-sectional Study

**Background:** Binge-watching defined as viewing multiple episodes of television or online series in a single sitting which has become a frequent habit among medical undergraduate students, potentially harming their mental health. The relationship between binge-watching and medical student's stress, anxiety, and depression is investigated in this study. The study intends to raise awareness of healthier screen-time practices for improved mental health and draw attention to possible hazards by evaluating these psychological consequences.

**Methodology:** A Cross-sectional study was conducted among 616 medical undergraduate students from a tertiary care teaching hospital in Tumkur. The sample size was calculated using 95% CI and Design Effect of 2, considering a Prevalence of 72% (Meriem et Al) for binge-watching among students. Probability Proportionate to Size (PPS) sampling method was employed to select the participants from different phases of course. A semi-structured questionnaire was used to collect sociodemographic information such as age, gender, year of study, and marital status. Binge-Watching Addiction Questionnaire (BWAQ) was administered to assess binge-watching behavior and Depression Anxiety Stress Scale (DASS-21) was used to measure psychological outcomes. Informed consent was obtained from all participants prior to data collection.

**Objectives:**

1. To assess the proportion of binge-watching among medical undergraduate students.
2. To Assess the levels of depression, anxiety, and stress among medical undergraduates.
3. To determine the association between binge-watching behavior and depression, anxiety, and stress.

**Results:** A significant proportion of medical undergraduate students were engaged in problematic binge-watching, with varying degrees of addiction as assessed by the BWAQ. Statistically significant ( $p < 0.05$ ) association was found between problematic binge-watching and depression, anxiety, and stress among undergraduate students. Sociodemographic factors such as age, gender, year of study, Marital status influence binge-watching behavior and its psychological impact.

**Conclusion:** The study highlights an association between binge-watching and increased levels of depression, anxiety, and stress among medical undergraduate students. This emphasizes the need for awareness programs on balanced screen usage and mental well-being. Encouraging

students to adopt healthier viewing habits and engage in alternative stress management techniques may help mitigate the adverse psychological effects of binge-watching

**Keywords:** Binge-watching, Medical undergraduate students, Depression, Anxiety, Stress





**Title:** A cross-sectional study on Breast cancer risk communication and Breast cancer screening behaviours among married women in urban areas of selected districts of Madhya Pradesh.

**Authors:** Dr. Yeluri Sudeepa Libny, Dr. Deepti Dabar, Dr. Anindo Majumdar, Dr. Pankaj Prasad

**Affiliation:** AIIMS Bhopal

**Study Design:** Cross Sectional Study

**Background:** Breast cancer is the most common malignancy among Indian women and a growing public health concern. Despite the inclusion of screening under the NPNCD (National Programme for Prevention and Control of Non-Communicable Diseases), delayed presentation remains to be widespread. Awareness, personal risk perception, and preventive practices such as breast self-examination (BSE) remain low in India.

**Objectives:** This study aimed to assess awareness, perceived risk, and its relationship with screening behaviours for Breast cancer among married women residing in selected urban areas of Bhopal, Madhya Pradesh.

**Materials and Methods:** A community-based cross-sectional study was conducted among 122 urban married women aged  $\geq 30$  years from the urban field practice area of AIIMS, Bhopal. Data were collected using a bilingual, pretested semi structured questionnaire. Information regarding socio demographics, awareness, beliefs, and screening practices was obtained. Data were entered into Microsoft Excel and analyzed using Jamovi. Descriptive and inferential statistics, including the chi-square test ( $p < 0.05$ ), were applied.

**Results:** The mean age of participants was  $35 \pm 7.6$  years. Only 14 % had heard of breast cancer, and a similar proportion were aware of any screening methods. Knowledge of warning signs and risk factors was minimal. Merely 7% had practiced BSE, 6% had undergone a clinical breast examination (CBE), and many reported having a mammogram reflecting opportunistic or misinterpreted testing rather than organized screening. Perceived personal risk was exceptionally low, most women believed the disease affected only older or genetically predisposed women. Fear and embarrassment were the most frequently reported barriers. Higher educational levels and family history were significantly associated with greater awareness.

**Conclusion:** The study reveals poor awareness, minimal risk perception, and limited screening practices for breast cancer among urban married women in Bhopal. Strengthening community based, culturally sensitive health education and risk communication initiatives is essential to promote early detection and reduce preventable breast cancer deaths.

**Keywords:** Breast cancer; Risk perception; Screening behaviour; Urban women; Public health.

**Title:** A study to identify the prevalence of tobacco abuse among the support staff and the effectiveness of the planned teaching program in terms of KAP.

**Authors:** Anu Barthwal, Dr. A. Malar Selvi, Ms. Arshi Anjum Khan

**Affiliation:** AIIMS Gorakhpur

**Study Design:** Two-Phase Research Design

**Background:** A two-phase study was conducted to identify the prevalence of tobacco abuse and to develop and evaluate the effectiveness of a planned teaching program on prevention and management of tobacco abuse in terms of knowledge, attitude and practice among the support staff in a selected hospital in New Delhi.

**Objectives:** The objectives of the study were to find out the prevalence of tobacco abuse among the support staff, to develop a planned teaching program and assess its effectiveness in terms of knowledge, attitude & practice, and find out the association between tobacco abuse and selected demographic variables.

**Materials & Method:** During phase-I of the study, 200 support staff were selected as samples by using the total enumeration sampling technique. Structured tools containing socio-demographic variables, a prevalence assessment tool for tobacco abuse, a knowledge questionnaire, an attitude scale, and a practice scale were administered as a pre-test. During phase- II of the study administration of the planned teaching program was done for all the 200 support staff. A post-test was conducted for 66 tobacco abusers identified during phase- I of the study based on the prevalence.

**Result:** The study results revealed that the prevalence rate of tobacco abuse among the support staff was 33%. Out of this 33% of the tobacco abusers, 26.5% were smokeless tobacco users and 6% were smoking tobacco abusers. The mean difference of pre-test and post-test knowledge, attitude, and practice scores were found out to be 2.95, 1.99, and 0.69 respectively. The demographic variables such as age, sex, gender, educational qualification, marital status, and monthly income were found to be significantly associated with tobacco abuse among the support staff.

**Conclusion:** The planned teaching program was effective in increasing the knowledge score of the tobacco abusers but there was no effect of PTP on attitude and practice score.

**Keywords:** Tobacco Abuse, Knowledge, Attitude, Practice

**Title:** Prevalence and predictors of sarcopenia and sarcopenic obesity in older adults: a cross sectional study in Gujarat.

**Authors:** Vishwa Manish Kakaiya, Yogesh M

**Affiliation:** Shri M. P. Shah Medical College

**Study Design:** Cross sectional study

**Background:** Sarcopenia, characterized by progressive loss of skeletal muscle mass and function, is a key determinant of frailty and disability among the elderly. In India, unique risk factors such as chronic protein deficiency, vitamin D insufficiency, and the characteristic “thin-fat” phenotype predispose older adults to sarcopenia and related metabolic consequences.

**Objective:** To determine the prevalence and predictors of sarcopenia and sarcopenic obesity among older adults in Gujarat. **Materials and Methods:** A cross-sectional study was conducted among 100 adults aged  $\geq 60$  years attending community and outpatient health services. Sarcopenia was diagnosed using the Asian Working Group for Sarcopenia (AWGS, 2019) criteria, which include measures of muscle strength (handgrip dynamometry), muscle mass (bioelectrical impedance analysis), and physical performance (6-meter gait speed). Multivariate regression analyses adjusted for age, sex, education, and comorbidities were performed to identify independent associations.

**Results:** Out of 100 older adults (mean age  $70.5 \pm 5.3$  years; 52% male), 47 were multimorbid. Sarcopenia and sarcopenic obesity were observed in 38% and 19% participants, respectively—both significantly higher among the multimorbid group (53.2% vs 24.5% and 29.8% vs 9.4%;  $p < 0.05$ ). Multimorbid individuals had greater adiposity, physical inactivity, and polypharmacy. Logistic regression identified age, physical inactivity, multimorbidity, and polypharmacy as independent predictors of sarcopenia, while age, female sex, physical inactivity, multimorbidity, and obesity predicted sarcopenic obesity.

**Conclusion:** Sarcopenia and sarcopenic obesity are common among older adults, especially those with multimorbidity. Multimorbidity nearly triples the risk of sarcopenic obesity and doubles the risk of sarcopenia. Addressing physical inactivity, obesity, and polypharmacy through integrated geriatric care is essential to reduce the dual burden of muscle loss and fat accumulation in aging populations.

**Keywords:** Sarcopenia, obesity, multi-morbidity, geriatric health, physical inactivity

## **Title: Effect of maternal diet diversity on neonatal birth weight – a scoping review**

**Authors:** Dr. Hrushali Wahadane, Dr. Srikanth Srinivasan

**Affiliation:** Community Medicine

**Study Design:** Scoping Review

**Background:** The nutritional status of the mother prior and during pregnancy plays a vital role in foetal growth and development, and maternal undernourishment may lead to adverse perinatal outcomes including intrauterine growth restriction (IUGR), neonatal undernutrition and anaemia. Maternal malnutrition is a key contributor to poor foetal growth, low birth-weight and short and long-term infant morbidity and mortality. This review summarised the evidence on association of maternal nutrition with birth outcomes along with effects of balanced protein-energy supplementation during pregnancy on same.

**Objective:** To assess the effect of maternal dietary diversity during pregnancy on neonatal birth weight. **Method:** A comprehensive review of literature was undertaken via electronic databases PubMed, Google Scholar and Scopus. Electronic databases PubMed was searched using the following search strategy (((("Pregnancy"[Mesh]) OR "Maternal"[Mesh]) AND "Food"[Mesh]) AND "Food Quality"[Mesh]) AND "Infant, Newborn"[Mesh]) AND "Body Weight"[Mesh] and Google Scholar using keywords like "maternal dietary diversity" and "neonatal birth-weight". Included articles were those published in English, in scholarly journals, interventional studies, longitudinal studies like cohort which provided information about diet and nutrition during pregnancy and its outcomes like neonatal birth-weight.

**Results:** A total of 5,480 records were identified through database searching (PubMed = 4500, Scopus = 150 Google Scholar = 830). After removing 1,291 duplicates, 4,686 articles were screened by title and abstract. Of these, 137 full-text articles were assessed for eligibility, and 13 met the inclusion criteria. The main reasons for exclusion were irrelevance to maternal diet diversity (n=95) and lack of neonatal birth weight data (n=29). The included studies were published between 1895 and 2024, conducted across numerous countries predominantly in low- and middle-income settings. Most studies were longitudinal like cohort (n=5), cross-sectional (n=3) and interventional (n=5). Sample sizes ranged from 150 to 250 participants, with maternal age ranging between 18 and 45 years. The study findings revealed that mothers with high dietary diversity scores were having normal body mass index (BMI) and haemoglobin levels. The risk of low-birth weight in newborns of mothers with inadequate dietary patterns was 2.6 times higher compared to newborns from mothers with adequate diet.

**Conclusion:** No Interventional studies were conducted which assessed dietary diversity during the third trimester. Only few studies (n=3) highlighted importance of micronutrients like vitamin D, zinc consumption in the perinatal period. Also data on interventional studies like dietary patterns across pregnancy were lacking. There was also limited evidence from rural South Asian settings. In conclusion, providing pregnant females with balanced protein-energy supplementation and micronutrients like vitamin D, folic acid, and zinc is an effective intervention to reduced risk of small for gestational age and undernourished infants, especially

among undernourished pregnant women.

**Keywords:** diet diversity, neonates, birthweight, micronutrients, foetus, malnutrition,





## **Title: Assessing Healthcare Utilisation And Patient Satisfaction Under PM-JAY: Evidence From CHC Jawan**

**Authors:** Dr. Nishu Malik, Prof. Najam Khalique

**Affiliation:** JNMC AMU

**Study Design:** Cross Sectional

**Background:** The Pradhan Mantri Jan Arogya Yojana (PM-JAY) is a flagship health insurance scheme designed to enhance healthcare access for economically vulnerable populations in India. Community Health Centres (CHCs) play a pivotal role in implementing this program. This cross-sectional study assesses the utilisation, satisfaction, and financial burden associated with PM-JAY services at CHC Jawan.

**Objective:** To assess and analyse the utilisation pattern, beneficiary satisfaction, and out-of-pocket expenditure among PM-JAY beneficiaries at CHC Jawan. **Methods:** A cross-sectional study was conducted at CHC Jawan, among 416 PM-JAY beneficiaries. Data on socio-demographic details, satisfaction level (on a five-point Likert scale), and out-of-pocket expenditure were collected using a pre-designed semi-structured questionnaire. Descriptive statistics were applied to assess utilisation and satisfaction trends.

**Results:** A total of 416 PM-JAY beneficiaries at CHC Jawan were analysed. The majority (42 %) belonged to the 20–29 years age group, and female beneficiaries (72.6 %) outnumbered males, reflecting higher utilization of maternal health services. About 74.8 % of respondents were satisfied or very satisfied with PM-JAY services, while 48.1 % reported some out-of-pocket expenditure, mainly for medicines and diagnostics not available at the facility. Additionally, only 72 % of households had full PM-JAY card coverage, indicating incomplete enrollment and the need for improved awareness and accessibility.

**Conclusion:** This cross-sectional study highlights that PM-JAY has substantially improved healthcare access at CHC Jawan, especially for maternal and emergency care. However, partial household card coverage, moderate out-of-pocket costs, and satisfaction gaps indicate the need for strengthening service delivery, drug supply, and awareness measures to ensure equitable and comprehensive healthcare utilisation.

**Keywords:** PM-JAY, Cross-sectional Study, Healthcare Utilisation, Patient Satisfaction, Out-of-Pocket Expenditure

**Title: Determinants of Intent-to-Use Clean Cooking Fuel in Rural Jodhpur: A mixed-method study**

**Authors:** Dr. Neeti Rustagi, Dr. Prasanna Thirunavukkarasu, Dr. Suman Saurabh, Dr. Ranjitha, Dr. Ashlesh

**Affiliation:** AIIMS Jodhpur

**Study Design:** A cross-sectional study

**Background:** Globally, around 2.1 billion people—nearly one-third of the world’s population—rely on open fires or inefficient stoves using kerosene, biomass (such as wood, animal dung, and crop waste), and coal for cooking. The resulting household air pollution contributes significantly to noncommunicable diseases, including stroke, ischaemic heart disease, chronic obstructive pulmonary disease (COPD), and lung cancer.

**Objectives:** To assess the determinants of Intent-to-Use Clean Cooking Fuel in Rural Jodhpur.

**Methods:** The study design was a sequential mixed-methods approach. It had quantitative and qualitative components. The quantitative part was an analytical cross-sectional study, which was conducted among 422 households using biomass fuel in rural Jodhpur, Rajasthan. The study area included two rural blocks—Luni and Keru. A multistage random sampling technique was employed. Village Sarpanch, informal leaders, and ASHA workers were sought to identify 10–11 households in villages using biomass fuel. Data were collected from the primary cook of each household using a pretested, semi-structured questionnaire that captured demographic and socioeconomic information. The intent-to-use clean fuel was assessed using a Likert scale ranging from 0 to 10. In the qualitative part, in-depth interviews and focus group discussions were held.

**Results:** Among the 422 participants, 398 (94.3%) were registered for LPG, and among these 398 participants, 174 (43.7%) were beneficiaries of the Ujjwala scheme. 348 (82%) of 422 households have their own lands. Mean age of the primary cook was 38.6 ( $\pm 12.2$ ). Mean intent-to-use score for clean fuel among primary cooks was 6 ( $\pm 4$ ). Multiple linear regression revealed that increasing age of the primary cook ( $\beta = -0.12$ ,  $p < 0.05$ ) and high land ownership ( $\beta = -0.13$ ,  $p < 0.05$ ) predicted poor intent-to-use clean cooking fuel. In the qualitative part, themes were identified based on the health belief model.

**Conclusion:** The majority of participants were registered for LPG, and nearly half were beneficiaries of the Ujjwala scheme. Greater land ownership and older age of the primary cook were associated with lower intent to use clean cooking fuel.

**Keywords:** Cross-sectional, Cooking, rural Population, Indoor air pollution

**Title: Utilization of Mobile Phones for Personal Health Care Among the Elderly: A Cross-sectional Study in Urban and Rural Areas of Bhopal.**

**Authors:** Dr. Syed Ashish E A, Dr. Surya Bali

**Affiliation:** Department of Community and Family medicine, AIIMS Bhopal

**Study Design:** Cross sectional Study

**Background:** As India advances towards digital health integration, ensuring elderly participation in mobile-based healthcare is vital for equitable access. However, evidence on mobile phone use for health among the elderly in urban and rural India remains limited. Understanding these practices is crucial in the context of national initiatives such as the Ayushman Bharat Digital Mission (ABDM) and the National Programme for Health Care of the Elderly (NPHCE).

**Objectives:** To assess the utilization of mobile phones for personal health care among the elderly in Bhopal.

**Methods:** A community-based cross-sectional study was conducted among 150 elderly individuals aged 60 years and above, selected from urban and rural areas of Bhopal. Data were collected using a pre-tested structured questionnaire. Data were entered into Microsoft Excel and analyzed using Jamovi. Descriptive and inferential statistics, including the chi-square test ( $p < 0.05$ ), were applied. Ethical approval was obtained from the Institutional Human Ethics Committee.

**Results:** The mean age of participants was  $68.4 \pm 6.2$  years, with a female predominance (58%). Overall, 69% of participants owned a mobile phone, of which 42% were smartphone users. Mobile phones were used for any health-related purpose by 13% of participants. Mobile-based health use was slightly higher in urban areas (17%) compared to rural areas (10%). The most reported uses included watching health-related videos on YouTube, searching for health information online, calling healthcare providers, and setting medication reminders. Reported barriers to mobile-based health use included difficulty in understanding or using mobile applications (55%), lack of awareness about mobile health features (30%), and physical/vision-related limitations (25%).

**Conclusion:** Although mobile phone ownership among the elderly is widespread, health-related utilization remains low. Strengthening digital literacy and designing elderly-friendly interfaces under Ayushman Bharat Digital Mission could significantly enhance technology-supported geriatric healthcare.

**Keywords:** Elderly, Mobile health, Telemedicine, Digital health, ABDM

# **Title: Prevalence of Risk Factors for Non-communicable Diseases Among Adults Attending the Outpatient Department of a Rural Health Training Centre of a Tertiary Care Centre in Central India: A Cross-Sectional Study**

**Authors:** Dr. Palash Fating, Dr. Sameer Golawar, Dr. Uday Narlawar

**Affiliation:** Community Medicine, GMC Nagpur

**Study Design:** A Cross-Sectional Study

**Background:** Non-communicable diseases (NCDs) are a growing public health concern in India, increasingly affecting rural populations. Identifying their risk factors is crucial for targeted interventions. This study aimed to assess the prevalence and pattern of major NCD risk factors among adults attending the Outpatient Department (OPD) of a Rural Health Training Centre (RHTC) in Central India.

**Methods:** A facility-based cross-sectional study was conducted from June to September 2025 among adults aged 18–69 years attending the RHTC OPD. Using convenient sampling, 250 participants were enrolled. Data were collected using a pretested, semi-structured questionnaire adapted from the WHO STEPS approach, covering behavioural (tobacco, alcohol, diet, physical activity), anthropometric (height, weight, waist circumference), and physiological (blood pressure, fasting blood glucose) parameters. Data were analyzed using descriptive statistics and logistic regression to identify determinants of hypertension and clustering of risk factors.

**Results:** The mean age of participants was  $42.1 \pm 13.6$  years, with 56% females. Current tobacco use was 25.2%, harmful alcohol use 9.6%, physical inactivity 44.8%, and inadequate fruit and vegetable intake 65.2%. Overweight/obesity ( $\text{BMI} \geq 25 \text{ kg/m}^2$ ) and abdominal obesity were observed in 36.4% and 40.8%, respectively. Raised blood pressure ( $\geq 140/90 \text{ mmHg}$  or on medication) and raised fasting blood glucose ( $\geq 126 \text{ mg/dL}$  or on medication) were found in 29.2% and 13.6%. Overall, 41% had three or more risk factors. Older age ( $\geq 45$  years), male sex, and higher BMI were significantly associated with hypertension (AOR 2.5; 95% CI: 1.5–3.9).

**Conclusion:** A high prevalence and clustering of behavioural and metabolic NCD risk factors were found among rural adults. Regular screening, lifestyle counselling, and health education through primary care are essential to curb the NCD burden in rural India. Keywords: Non-communicable diseases, risk factors, hypertension, obesity, diabetes.

**Keywords:** Non-communicable diseases, risk factors, hypertension, obesity, diabetes.

**Title: Assessment of utilisation of nutritional support schemes and their associations among Tuberculosis patients in Delhi**

**Authors:** Dr. Henna Bhandari, Dr. Farzana Islam

**Affiliation:** Hamdard Institute of Medical Sciences and Research

**Study Design:** Mixed Method Study

**Background:** India bears the highest burden of TB cases and deaths. Research suggests these fatalities could be prevented by good nutrition and treatment. The Government of India introduced Nikshay Mitra scheme (NMS) in 2022 and Nikshay Poshan Yojana (NPY) in 2018 to improve nutritional status of TB patients. This study aims to assess the utilisation of both schemes among Tuberculosis patients in Delhi.

**Methods:** This cross-sectional study includes 380 TB patients enrolled in 2024 in South-East district of Delhi using simple random sampling. Data was collected telephonically using a semi-structured questionnaire and entered in MS-Excel. Data was analysed and associations were drawn using SPSS.

**Results:** NPY utilization was 78% while NMS utilization was 18%. Bank details were collected for almost all (93%) patients, 83% received cash transfers and only 51% were aware of receiving it. Cash transfers were mainly used for purchasing food. Those who did receive food baskets under NMS, used mainly by the family collectively. Average travel costs were ₹63.5. Patients incurred out-of-pocket-expenditure of ₹1372.3 during the treatment. (Complete results will be presented at the time of conference.)

**Conclusion:** The study highlights gaps in the utilisation of Nikshay Poshan Yojana, with low cash transfer receipt despite high bank detail collection and limited food basket distribution. Strengthening implementation is crucial to improving nutritional support for TB patients in Delhi.

**Keywords:** Nikshay Poshan Yojana, Tuberculosis, Nikshay Mitra Scheme, Delhi



## **Title: Role of physical activity and Music therapy on sleep disorders among the IT Professionals**

**Authors:** Dr. Jillapegu Isaac Newton, Dr. Sheldon Thompson

**Affiliation:** Osmania Medical College

**Study Design:** a cross sectional study

**Background:** Sleep plays a vital role in regulating both psychological and physiological processes. Good sleep is essential for maintaining cognitive performance, immune function, and overall well-being. However, according to the World Health Organization, about 27% of the global population suffers from sleep disorders, with insomnia being one of the most common causes of impaired mental and physical health. Sleep disorders involve disturbances in sleep quality, duration, or abnormal sleep behaviors, including insomnia, hypersomnia, and sleep apnea. These conditions are linked to an increased risk of depression, cardiovascular diseases, diabetes, dementia, and even mortality. Treatment options range from lifestyle modification to pharmacological management. Recently, non-pharmacological therapies such as massage, aromatherapy, cognitive-behavioral therapy, sleep hygiene, physical activity (PA), and music therapy (MT) have shown promising results. PA improves both physical and mental health by enhancing sleep outcomes through physiological mechanisms involving increased energy expenditure, improved mood, and hormonal regulation (serotonin, melatonin, growth hormone). Similarly, MT is a low-cost, side-effect-free intervention that enhances parasympathetic activity, reduces anxiety, and improves overall sleep quality. Music with a slow tempo and harmonious rhythm has shown particular benefit. While various studies have explored these interventions among general and healthy populations, limited data exist regarding their effects on sleep among Information Technology (IT) professionals. Therefore, this study aims to evaluate the relationship between physical activity, music therapy, and sleep disorders in this occupational group.

**Objectives:** To determine the role of physical activity and music therapy in improving sleep quality among IT professionals with sleep disorders. **Materials and Methods:** A cross-sectional study was conducted in the field practice area of a medical college over three months. The study included 73 adults aged 20–50 years of either gender. Participants on antipsychotics, with substance abuse, epilepsy, or mental illness were excluded. Data were collected using a pre-tested semi-structured questionnaire covering socio-demographic details, physical activity, and music therapy practices. After obtaining ethical clearance and informed consent, data were analyzed using descriptive statistics, with qualitative variables expressed as percentages and quantitative variables as means  $\pm$  standard deviations.

**Results:** awaited

**Conclusion:** Both physical activity and music therapy are promising, non-pharmacological strategies to improve sleep quality among IT professionals. Encouraging regular exercise and relaxation through music may help mitigate sleep disturbances and enhance overall well-being

**Keywords:** music therapy physical activity ,sleep disorders

## **Title: Exploring Community- Based Interventions for Non-Communicable Diseases in India: A Scoping Review**

**Authors:** Dr. Monika Khichi, Dr. Prasanna Thirunavukkarasu

**Affiliation:** AIIMS Jodhpur

**Study Design:** Scoping Review

**Background:** Noncommunicable diseases are a major global health challenge, responsible for over 74% of all deaths worldwide. In India, NCDs account for an estimated 63% of total deaths, affecting both urban and rural populations and contributing significantly to morbidity, mortality. Despite the existence of various national programs and policies, the growing burden of NCDs highlights the need for effective, sustainable, community-based interventions. These interventions are crucial in promoting health awareness, facilitating early detection, improving access to care, and encouraging lifestyle modifications and management of NCDs in India. This scoping review explores the scope, effectiveness, and other aspects of such interventions across diverse community settings in India.

**Objective:** To explore various types of community-based interventions for the prevention and control of noncommunicable diseases in India.

**Method:** This scoping review investigates community-based interventions. Electronic databases, including PubMed and Google Scholar, were searched for studies published between 2015 and 2025 using the search strategy. Comprising key words community AND non-communicable diseases AND India. Studies focusing on community-based interventions for the prevention and management of non-communicable diseases assess the effectiveness of these interventions among populations in India. Data were extracted and summarised to identify the types of interventions, focus area, study outcomes, effectiveness, and barriers/facilitators.

**Results:** A total of 2,838 citations were identified through database searches. 744 duplicates removed. The included studies were 6 randomised controlled trials and two quasi-experimental studies. Interventions included improving access, training ASHA, Health Coaching, text messaging, and lifestyle interventions, such as yoga, leading to optimised health service delivery, strengthening community platforms for medicine access, demonstrating positive impacts on NCD prevention, reducing recurrent strokes and mortality, and improving engagement of community health workers. Interventions strengthened health service delivery, enhanced medicine availability across PHCs, increased patient access, and reduced out-of-pocket expenditure for non-communicable diseases in India.

**Conclusion:** This review highlights that various community-based interventions have been explored in Indian settings for the prevention and management of non-communicable diseases and have been largely effective in addressing lifestyle behaviours, disease management and improving access.

**Keywords:** Community, Non-Communicable Diseases, India

**Title: Psychosocial needs assessment among head and neck cancer patient:**

A cross sectional study from tertiary care hospital in southern India

**Authors:** Dr. Smriti Jain, Dr. T Susila

**Affiliation:** PGIMER, Chandigarh

**Study Design:** Cross sectional

**Background:** With increasing risk factors and improved cure rates, the number of people living with head and neck cancers is rising. Despite significant advances in diagnostic and therapeutic techniques, the psychological and social aspects of cancer remain largely unexplored.

**Objectives:** This study aims to explore the psychosocial needs of patients with head and neck cancers.

**Materials and Methods:** The survey was conducted in a tertiary care hospital in southern India among head and neck cancer patients attending the OPD in the Radiology and Oncology departments. A structured questionnaire with two parts was used. Section A included sociodemographic and disease-related details of the patients. Section B assessed psychosocial needs (adapted from the Psychosocial Needs Inventory by Lancaster University) across five domains: practical day-to-day needs, social support network, self-identity and spiritual needs, information and interaction with healthcare professionals. Each item was rated on a 5-point Likert scale for importance and satisfaction. Face-to-face interviews were conducted to administer the questionnaire.

**Results:** The study included 90 participants, with the majority under 60 years of age, male, of lower socioeconomic status, living with someone, having a primary caretaker, and functionally independent. Participants had cancers of the oral cavity, pharynx, larynx, and salivary glands, with most diagnosed more than six months prior and receiving combination therapy (radiotherapy, chemotherapy, and surgery). Health professional and informational needs were rated most important, followed by social support network, spiritual and self-identity needs, emotional needs, and practical day-to-day needs. The highest unmet needs were in the social support network domain, followed by practical day-to-day needs, spiritual and self-identity, emotional needs, and informational and healthcare professional needs.

**Conclusion:** This study highlights the psychosocial needs of patients with head and neck cancers and can guide the planning of supportive services to address gaps in the psychosocial care of these patients. Addressing these needs is likely to enhance the quality of life for individuals living with head and neck cancers.

**Keywords:** psychosocial, needs assessment, head and neck cancer, quality of life, unmet needs

# **Title: Scroll, Sleep & Study: Assessment Of The Triangular Impact Of Smartphone Addiction On Undergraduate**

**Authors:** Fazeelah Tasleem

**Affiliation:** Hamdard Institute of Medical Sciences and Research

**Study Design:** Cross Sectional Study

**Background:** Social media, defined as interactive, network-based platforms for user-generated content, has transformed how young people connect and learn. While it can support collaboration and access to information, excessive use disrupts attention, working memory, and self-regulation. The instant gratification from likes and notifications triggers dopamine release, reinforcing habitual use and diminishing motivation for academic tasks.

**Aims and Objectives:**

1. To estimate the prevalence of smartphone addiction among Undergraduate medical students.
2. To find the association between smartphone use and sleep quality.
3. To find the association between smartphone use and academic performance.

**Methodology:** The cross-sectional study was conducted among 300 medical students from a medical college in Uttar Pradesh. The online data was collected through a questionnaire consisting of four sections. The first section concerned the demographic characteristics of the participants with Pittsburgh sleep quality index (PQSI), Smartphone Addiction Scale Short Version (SAS-SV), and Academic Performance Scale.

**Results:** The prevalence of smartphone addiction is found out to be 57.44% in males and 65.17% in females. The sleep data show that 62.23% of males and 67.86% of females are getting poor-quality sleep. There is a positive correlation between overall PQSI scores and SAS-SV scores and Academic performance score.

**Conclusion:** This study illustrates the need for self-regulation of smartphone use among the medical undergraduates and the youth in general. It reveals not only the smartphone addiction of medical undergraduates, but also its impact on their academic performance and sleep quality. Empowering students to express emotions without bias would facilitate self-awareness and help-seeking behaviors. There should also be strong support for them. A change needs to be made in the academic curriculum regarding these issues to raise awareness. Classrooms should be designated as no smartphone zones to deal with the problem.

**Keywords:** SMARTPHONEADDICTION,SLEEPQUALITY,ACADEMICPERFORMANCE



**Title: Development and Validation of a Mental Health Literacy Tool in India: A Mixed-methods Study**

**Authors:** Dr. Subham Roy Choudhury, Dr. Jyotika Singh

**Affiliation:** Department of PSM/ All India Institute of Hygiene and Public Health, Kolkata

**Theme:** Mental health

**Study Design:** A community based Mixed-methods study (Exploratory Sequential - QUAL + Quan)

**Background:** Mental Health Literacy (MHL) is a set of knowledge and beliefs about mental disorders aiding early recognition, identification and prevention of mental health disorders. Paucity of any universal tool is compounded by the absence of various domains of health literacy as proposed by WHO, moreover none are suited to the Indian context.

**Objective:** To develop and validate a mental health literacy tool for adults in Indian context: and to assess the construct validity and estimate the reliability of the newly developed tool.

**Methodology:** A community based Mixed-methods study (Exploratory Sequential -QUAL + Quan) was conducted over a period of 10 months from December 2024 to September 2025. After obtaining institutional ethical clearance for the proposed tool development, a pool of 134 items was generated deductively (in light of WHO's health literacy framework) by extensive literature view and In-depth interview of experts. The generated items were subsequently screened, refined and prioritised by a panel of 5 experts by e-Delphi technique. After content validation, the tool was administered to adult residents(n=231) of a selected ward in Kolkata, West Bengal selected randomly from the voters list for interview. Exploratory factor analysis (with Oblimin rotation and Eigenvalue >1) was conducted with 21 measurement (i-CVI cutoff > 0.83) variables to construct the MHL tool. The internal consistency was estimated with Cronhbach's alpha, item-rest correlation, domain wise reliability.

**Result:** Thematic analysis of the content of IDIs were coded to relevant phrase and triangulated with the screened items of generated pool. An i-CVI > 0.83 and S-CVI/Ave = 0.84 was found. A 20-item (factor loading > 0.40) MHL tool comprising of three domains – understanding, appraisal and application was constructed with an overall internal consistency (Cronbach's alpha = 0.906), each domains having internal consistency of 0.887, 0.926, 0.856 respectively.

**Conclusion:** The strong internal consistency observed in this study suggests that the instrument adequately measures interconnected the multi-dimensional construct of mental health literacy. This tool could be further used to asses MHL in adult Indian population explore various associations.

**Keywords:** Development; Validation: Mental Health Literacy Tool; Indian-context; multi-dimensional



**Title:** To study the prevalence of Cyberchondria in the undergraduate students of a Government Medical College in Northern India

**Authors:** Dr. Ujjwala Gangwal, Dr. Tasvinder Kaur

**Affiliation:** GMC, Jammu

**Study Design:** Cross-sectional

**Background:** Cyberchondria is the term used to describe an increase in anxiety for one's own health state brought on by an excessive amount of online research on health topics. Because information and communications technology is developing so quickly, the internet has become a popular way for the general population to obtain health information. Online resources offer a wealth of health-related information, but some of it may be inaccurate, potentially misleading patients. This study aims to explore the prevalence of cyberchondria in the undergraduate students of Government Medical College, Jammu.

**Objectives:** To study the prevalence of cyberchondria in undergraduate students of GMC, Jammu.

**Methods:** This descriptive cross-sectional study was conducted on MBBS undergraduate students of all the professional years studying in Government Medical College and Hospital, Jammu. A pre tested CSS-15 questionnaire was administered and data was collected as per convenience sampling.

**Results:** • Most participants (around 90%) fall into the moderate-to-high range of cyberchondria. • Severe cyberchondria is present in about 3% of the population, which still indicates a notable minority experiencing significant distress from health-related internet use. • The average total score ( $\approx 29$ ) also aligns with a moderate overall level of cyberchondria.

**Conclusion:** Overzealous internet searches for health information have the potential to exacerbate health worry and transmit threats among people. By educating the public on how to use web search engines appropriately, we can solve this issue.

**Keywords:** Cyberchondria; Health Anxiety; Internet; Medical Search Online

**Title: Epidemiology of snakebite cases in Odisha under Integrated Disease Surveillance Programme- Integrated Health information Platform 2022-2024**

**Authors:** Spandan Kumar Bhanajdeo, Tanveer Rehman

**Affiliation:** Public Health section, CDM & PHO Office, Phulbani, Kandhamal, Odisha

**Study Design:** Cross-sectional study

**Background:** Snakebite envenoming, a neglected tropical disease, remains a significant public health challenge in India. India reports approximately 4 million snakebite cases and 58,000 deaths annually, with Odisha among the most affected states. Strengthening surveillance through the Integrated Health Information Platform (IHIP) under the Integrated Disease Surveillance Programme (IDSP) enables timely detection, monitoring of trends, and supports the goals of the National Action Plan for Prevention and Control of Snakebite Envenoming (NAPSE).

**Objective:** We aimed to describe the epidemiological profile of snakebite cases reported in Odisha by time, place, and person from 2022 to 2024. **Methods:** We conducted a cross-sectional descriptive analysis of the secondary data on snakebite cases reported through the P-form of the IHIP portal in Odisha between January 2022 and December 2024. We extracted the State Surveillance Unit data and analysed it in MS Excel. Variables included age, sex, date of onset, district, and reporting facility type. Annual notification rates (NR) were calculated as the number of snakebite cases per 100,000 population, using projected district-wise population estimates for each year. Temporal, spatial, and demographic distributions were analysed to identify patterns and high-burden areas.

**Results:** Odisha reported 30,231 snakebite cases between 2022 and 2024. The NR increased from 10 per 100,000 ( $n = 4,777$ ; 16%) in 2022 to 33 per 100,000 ( $n = 16,280$ ; 54%) in 2024. Males accounted for 61% ( $n = 18,375$ ) of all cases, with the 15–44 age group comprising approximately 30% ( $n = 8,901$ ). Seasonal analysis showed a sharp increase in cases between June and September. Jagatsinghpur reported the highest NR ( $\approx 112$  per 100,000), followed by Sambalpur ( $\approx 82$  per 100,000). NR increased steadily from 19 in 2023 to 33 in 2024, and was higher among males (40/100,000) than females (25/100,000). By facility type, District Hospitals reported approximately 43% ( $n = 13,148$ ) of cases, followed by Community Health Centres contributing 39% ( $n = 11,870$ ).

**Conclusion:** Snakebite cases in Odisha showed a rising trend, with marked seasonality, male predominance, and concentration among the 15–44 age group. High-burden districts require targeted interventions, while low-reporting areas need strengthened surveillance and community awareness to minimise under-reporting.

**Keywords:** Snakebite envenoming, Odisha, IDSP, IHIP, Surveillance, NAPSE

**Title: Epidemiology of dengue under the Integrated Health Information Platform, Ganjam, Odisha 2022-2024**

**Authors:** Mukesh Chandra Mali, Abhishek Bicholkar, Kalyani S

**Affiliation:** NCD Cell, CDM & PHO, Ganjam, Odisha

**Study Design:** Cross-sectional study

**Background:** In 2023, Odisha contributed to four percent of the total dengue cases in India, mostly from its coastal districts of Cuttack, Khordha, and Ganjam. Although the Integrated Health Information Platform (IHIP) captures real-time, case-based data, no systematic analysis of dengue cases from Ganjam has been done in the past five years. Such analysis can identify high-risk blocks to guide targeted interventions and resource allocation for dengue control.

**Objective:** To describe the epidemiology of dengue cases reported in the L-form of IHIP in Ganjam district by time, place, and person from 2022 to 2024. **Materials and methods:** We conducted a cross-sectional descriptive analysis of dengue cases reported through the L-form of the IHIP in Ganjam district from January 2022 to December 2024. We assessed the month-wise trend and calculated the notification rate (NR) as confirmed cases per million population and test positivity rate (TPR) as the proportion of positive cases among those tested by year, block, age, and gender.

**Results:** Among 2,480 suspect cases, 14% (n=352) were laboratory confirmed. Of these, 65% (n=230) were males and 70% (n=248) were reported in 2024. Monthly trends showed a consistent rise during the monsoon season each year. The TPR declined from 27% (n=28) in 2022 to 13% (n=230) in 2024. The highest TPR of 47% (n=8) was seen in Beguniapada, followed by 43% (n=10) in the Chikiti block. The NR among males was 29 in 2023 and 83 in 2024. Meanwhile, the NR was 10 and 43 among females in 2023 and 2024, respectively. Similarly, males had a higher overall TPR of 16% (n=230) than females (TPR: 12%; n=122). The individuals aged 15–64 had the highest NR of 66 in 2023 and 25 in 2024. The children aged <15 had the highest overall TPR of 21% (n=84).

**Conclusions:** Reported dengue cases increased markedly from 2022 to 2024, peaking consistently during the monsoon. The highest TPR was seen in the Beguniapada & Chikiti block and among individuals aged 15–64. We recommend enhancing community awareness and behaviour-change campaigns before monsoons, targeting the hotspot blocks and high-risk groups.

**Keywords:** Dengue epidemiology, Ganjam district, Integrated Health Information Platform (IHIP), Notification

## **Title: Preparedness of Primary and Secondary Level Healthcare Facilities for Early Detection of Common Cancers in Jodhpur District**

**Authors:** Dr. Anubhav Shrivastava, Dr. Pankaja Raghav

**Affiliation:** AIIMS JODHPUR

**Study Design:** Cross Sectional Study

**Background:** Cancer remains a major public health challenge, with a rising global and national burden. As per the Global Cancer Observatory (GLOBOCAN) 2022, there were 19.9 million new cancer cases and 9.7 million deaths worldwide. India reported 1.4 million new cases and 0.9 million deaths. The three most common cancers in India—breast, lip and oral cavity, and cervix—are amenable to early detection through screening. Effective screening requires adequate logistics and trained human resources at various healthcare levels.

**Objective:** To assess the preparedness of primary and secondary level healthcare facilities for early detection of common cancers in Jodhpur district  
**Methods:** Three administrative blocks (including one urban) of Jodhpur district were selected by simple random sampling. Preparedness of Subcentres, PHCs, and CHCs for early detection of common cancers was assessed in terms of logistics and human resources. Availability of logistics for screening of oral, breast, and cervical cancers was evaluated as per NPNCD guidelines, and human resources were compared against IPHS 2022 norms.

**Results:** The selected blocks covered a population of about 7.5 lakh, including 26 PHCs, 7 CHCs, and associated subcentres. For oral cancer screening by Oral Visual Examination, wooden tongue depressors were available in 3/14 rural PHCs and none of the UPHCs, while torches were available in 9/14 rural PHCs and 10/12 UPHCs. For breast cancer screening by Clinical Breast Examination, examination gloves were available in all PHCs and CHCs. For cervical cancer screening by Visual Inspection using Acetic Acid, Cusco's speculum was available in 8/14 rural PHCs and half of the UPHCs, while glacial acetic acid was available in only 1/14 rural PHCs and none of the UPHCs. As per IPHS 2022 norms, adequate ANM staff were present in 11/14 rural PHCs and 6/12 UPHCs. All rural PHCs had at least one Medical Officer, while none of the UPHCs had the required two.

**Conclusion:** Major gaps exist in logistics for oral and cervical cancer screening, while breast screening logistics were adequate. Rural PHCs showed relatively better human resource availability. Strengthening logistics and staffing is essential for effective cancer screening services.

**Keywords:** Logistics, Human Resources, Common Cancers, Screening

**Title: Investigation of Chikungunya outbreak among residents of Podia Block, Malkangiri District, Odisha, M**

**Authors:** Lalit Mohan Sahu, Sasmita Mallick

**Affiliation:** State NCD Cell, Directorate of Public Health, Odisha

**Study Design:** Cross-sectional study

**Background:** In May 2025, the Podia block, Malkangiri District, Odisha, reported an unusual fever cluster with joint pain.

**Objective:** We confirmed the existence of the outbreak, investigated it to describe its epidemiology and identify its potential risk factors.

**Methods:** We defined a suspect case as an occurrence of fever and joint pain among Podia's residents after 07 April 2025, and a confirmed Chikungunya case as one positive for IgM ELISA. We conducted a house-to-house survey in the five affected villages and used a semi-structured questionnaire to collect sociodemographics and clinical history. We plotted the epi-curve and calculated the Attack Rate (AR%) by village, age, and gender. We conducted an environmental investigation to observe mosquito breeding sites and the use of protective nets. We tested blood samples of suspect case-patients at the District Public Health Laboratory.

**Results:** We surveyed 1665, of whom 684 (AR: 41) were suspect case-patients. The epi-curve indicated a prolonged transmission over 12 weeks, peaking in the fourth week of May, and declining thereafter. Christian Sahi had the highest AR (57%; 372/681). Females (36%; 367/1018) had higher AR than males (30%; 320/1068). Residents aged  $\leq 18$  were most affected (AR 37%; 107/286). OF 125 serum samples, 118 (94%) were Chikungunya positive. Environmental investigation found multiple mosquito breeding sites, poor waste disposal, and low mosquito net usage after heavy rains.

**Conclusion:** Stagnant water following heavy rains and low mosquito net usage triggered the outbreak. We must strengthen surveillance, improve sanitation, and raise awareness about protective nets to prevent future outbreaks.

**Keywords:** Chikungunya Fever, Mosquito Nets, Disease Outbreaks



**Title: A Comparative Interventional Study on the Impact of Health Education on Human Papillomavirus Awareness and Vaccination Willingness Among Medical and Non-Medical Male Undergraduate Students of Jabalpur, Madhya Pradesh**

**Authors:** Dr. Harshada Shinde, Dr. Akanksha Tomar, Dr. Preeti Gupta

**Affiliation:** Netaji Subhash Chandra Bose Medical College, Jabalpur

**Study Design:** Quasi experimental interventional study

**Background:** Human papillomavirus (HPV), a common sexually transmitted infection, can cause cancers in both men and women. In India, HPV vaccination programs mainly focus on females, with limited awareness among males. Since male university students are at an ideal age to adopt preventive health measures, educational interventions can effectively improve their knowledge and attitudes toward HPV prevention. This study is justified by the paucity of evidence from India on this subject.

**Objectives:** 1. To assess and compare the effect of a structured health education intervention on knowledge and attitude regarding HPV infection among medical and non-medical male undergraduate students.  
2. To evaluate the change in willingness to accept HPV vaccination following the intervention. 3. To identify common barriers and misconceptions related to HPV vaccination among participants.

**Materials and Methods:** Male undergraduate students, ages 18 to 25, from a medical and non-medical institutes connected to a university in Jabalpur, Madhya Pradesh, are participating in a quasi-experimental interventional study. The method used to choose participants is stratified random sampling. A pre-validated semi-structured questionnaire measuring knowledge, attitude, and willingness toward HPV vaccination is being used to gather data. After gaining informed consent, responses are being recorded using a self-administered Google Form. A post-test is given after a pre-test and an organized, audiovisual-assisted, 30- to 40-minute health education program. SPSS will be used to analyze the data; the independent t-test/Mann-Whitney U test will examine differences between groups, and the paired t-test/Wilcoxon signed-rank test will evaluate pre-post changes within groups. The Institutional Ethics Committee has granted its ethical approval.

**Results:** The process of gathering and analyzing data is ongoing. The final findings will assess how well the educational intervention improved male undergraduates, both medical and non-medical, in terms of their knowledge, attitudes, and willingness to get vaccinated against HPV. **Conclusion:** The purpose of this study is to produce data regarding the contribution of structured health education to raising young males knowledge of HPV and encouraging their acceptance of vaccines. It is anticipated that the results will help gender-neutral vaccine awareness campaigns and advance India's overall HPV prevention initiatives.

**Keywords:** Human Papillomavirus, Vaccination, Health Education, Awareness

## **Title: Tracing the Journey to a Tuberculosis Death in an Urban Slum: A Case Study**

**Authors:** Dr. C. P. Silpa, Dr. Naveenprasad G, Dr. Mayuri Raul, Dr. Vijaykumar Singh

**Affiliation:** Seth GS Medical College and KEM Hospital Mumbai

**Study Design:** Case Study

**Background:** Despite advances in medical science and public health, tuberculosis (TB) remains a leading cause of infectious disease mortality worldwide. India, with one of the highest TB burdens, lacks sufficient evidence on factors contributing to TB deaths. In areas with poor death certification systems, verbal autopsy serves as a vital tool to identify causes and understand the determinants of TB mortality.

**Objectives:** To understand the factors contributing to a TB death in an urban slum.

**Methods and materials:** This death review was conducted among the relatives of a deceased TB patient using the WHO verbal autopsy field interview instrument in an urban slum area of Mumbai, a region characterized by a high TB burden and multiple contributing risk factors such as overcrowding and substance use.

**Results:** The deceased, a 51-year-old male tile worker from an urban slum, with a history of tobacco, cannabis, and alcohol addiction, had a two-year history of cough that was initially self-treated and neglected indicating patient delay. On developing shortness of breath, he was taken to a tertiary care centre located about 20 km from his residence, where he was diagnosed with pulmonary and abdominal TB and anti-tubercular treatment (ATT) was initiated after a delay of around 30 days. Two months after starting ATT, he developed bilateral pedal edema and ascites, and was diagnosed with cardiac failure, which led to cardiac cirrhosis, for which treatment was initiated and patient was clinically improving. Despite a negative end-intensive phase Acid Fast Bacilli (AFB) result, he suddenly collapsed and died at home during the fifth month of ATT.

**Conclusion:** The verbal autopsy revealed multi-dimensional contributors including delayed diagnosis, comorbid cardiac disease, substance use etc; highlighting systemic and behavioral gaps in TB care under National Tuberculosis Elimination Program(NTEP). This case also underscores the need to increase awareness among people about TB for early diagnosis and also to ensure integrated management of comorbid conditions. Incorporating routine verbal autopsies for community TB deaths and reviewing each case of TB mortality can provide valuable insights toward achieving the NTEP goal of 'Zero TB Deaths.'

**Keywords:** Verbal autopsy, tuberculosis death, urban slum, NTEP

## **Title: A Qualitative Exploration of Working Conditions and Occupational Hazards among Mine Workers in Jodhpur**

**Authors:** Dr. Vibhuti Aggarwal, Dr. Pankaja Raghav, Dr. Nav

**Affiliation:** AIIMS Jodhpur

**Study Design:** Qualitative

**Background:** Jodhpur, renowned for its extensive sandstone mines, employs a large workforce engaged in physically demanding and hazardous mining activities. There are around 5,900 sandstone quarries. Workers are routinely exposed to silica dust, extreme temperatures, noise, vibrations, and inadequate safety measures. These occupational exposures substantially increase the health risk, underscoring the need for in-depth qualitative exploration.

**Objectives:** To qualitatively explore the working conditions and occupational health hazards among mine workers engaged in sandstone mining in Jodhpur district.

**Materials & Methods:** A qualitative study was conducted among key stakeholders in sandstone mines of Jodhpur district. Data collection -through in-depth interviews with mine owners, elderly workers, women workers, adolescent workers, and workers diagnosed with silicosis, s along with focus group discussions among active mine laborers until thematic saturation was achieved. An observational checklist- based on the CDC's Ergonomic Principles for Mining and the Human Factors Analysis and Classification System (HFACS) framework was implemented to assess workplace safety practices and ergonomic risks. Statistical Analysis - All interviews and discussions were audio-recorded, transcribed verbatim, and analyzed using thematic analysis in MAXQDA software to identify recurring patterns and underlying determinants of occupational hazards and working conditions

**Results:** The study revealed distinct job profiles among mine workers, each exposed to varying intensities of silica dust, noise, and extreme temperatures. Observational assessment indicated non-adherence to the hierarchy of control measures, with an absence of engineering controls and failure to provide even basic personal protective equipment. दिगी नकिल गी भारी दपहरी म डरलि मशीन चालावता चालावता, धळ उडे, हाथ-पग दख, सास नी आव, चक्कर आव –काय करा, ई तो काम ह यहा को टीगरी भरूं खनयिोंम... बेटो घर पाडो है, बमिरी होगी वान, टाबरां ह... बह वान देख... पइसा को नीआव.....such painful words were voiced by several workers. Similar feelings of helplessness, exhaustion, and silent suffering were echoed in the narratives of most participants.

**Conclusion:** The study highlights the alarming occupational hazards and unsafe working conditions prevalent in Jodhpur's sandstone mines. Lack of protective measures and policy enforcement demands urgent interventions focusing on occupational safety, health surveillance, and welfare of this vulnerable workforce .

**Keywords:** Mine Workers, Working Conditions, Occupational Hazards, HFACS, Ergonomics

**Title: Impact of Augmentation of Self-monitoring of Blood Glucose with Digital Therapeutic Intervention on Lifestyle and Glycated Hemoglobin in Type 2 Diabetes patients of urban Aligarh: A Randomized Controlled trial**

**Authors:** Dr. Chelsea, Dr. Mohammad Salman Shah, Dr. Hamid Ashraf

**Affiliation:** Department of community medicine, Jawaharlal Nehru medical College, Aligarh Muslim University

**Study Design:** Randomized controlled trial

**Background:** Diabetes mellitus, one of the greatest contributors of global burden, and its aftermath necessitates a holistic perspective for its treatment and prevention. Self-Monitoring of Blood glucose encompasses all the fundamental principles and approaches of Diabetic management. Applying novel digital innovation in SMBG can improve clinical outcomes and quality of life.

**Objective:** The aim is to evaluate the effect of combining digital therapeutic intervention with self-monitoring of blood glucose on T2DM patients. **Material and Methods:** A randomized controlled trial was conducted in urban Aligarh on 132 diabetic individuals. After enrollment, participants were allocated into 3 groups by randomization- (1) No SMBG (2) SMBG thrice weekly (3) thrice weekly SMBG users with digital feedback. Data was obtained at baseline, 3 months and 6 months on diet, physical activity and HbA1c.

**Results:** The overall diet, physical activity and HbA1c reduced from baseline to 3 months and further reduced at 6 months. Group 3 showed consistent and significant reduction with time. Inter-group (Group 2 vs 3) for HbA1c and within-group comparisons of HbA1c at 6 months shows statistically significant reductions ( $P < 0.04$ ). NNT analysis indicated that for every 10 patients treated with SMBG+DTI, one additional patient achieved HbA1c  $< 6.5\%$  compared to control and 14 patients for SMBG alone.

**Conclusions:** Group which received the combined intervention of SMBG and DTI, exhibited the most significant improvements in glycemic control, suggesting that digital tools can empower patients with diabetes to take control of their health.

**Keywords:** Digital Therapeutic Intervention (DTI), Self-Monitoring of Blood Glucose (SMBG), Type 2 Diabetes mel



## **Title: Acceptability and Feasibility of Cervical Cancer Screening Human Papilloma Virus Self-Sampling (HPV-SS) Understanding Women's Perspective**

**Authors:** Dr. Devisowmiya Thiruvengadam, Dr. Sharmila Pimple

**Affiliation:** Tata Memorial Hospital, Mumbai

**Study Design:** Cross Sectional Study

**Background:** Cervical cancer is the second leading cause of cancer deaths among Indian women, with over 127,000 cases and 79,000 deaths annually. In India, poor screening uptake contributes to high mortality, with rates far below the WHO's target and currently just 1.2%. Over 90% of cases are linked to high-risk HPV. Barriers such as stigma, lack of awareness, and discomfort with clinician-led methods hinder participation and hence, HPV self-sampling ensures an alternative strategy. This study aims to explore factors influencing women's decisions and their experiences with self-sampling.

**Objectives:** Within the larger study on increasing the adoption of cervical cancer screening in resource poor settings, the study aimed to: 1) To identify factors influencing women's decisions to undertake Human Papilloma Virus Self-Sampling (HPV SS). 2) To explore concerns and understand user experiences of women who have undertaken HPV self-sampling.

**Methodology:** The Cross-sectional study was conducted in Mumbai suburban area, among women aged 30-55 years. After household survey, eligible women were invited for awareness sessions, 500 consenting women were recruited for cervical cancer screening by HPV-SS. Trained healthcare workers guided participants on HPV-SS. A structured questionnaire was administered to a subsample of 260 women to explore factors influencing HPV-SS uptake & experience and among 61 to investigate reasons for refusal. The outcomes studied were determinants influencing acceptance and refusal for HPV-SS.

**Results:** A total of 1767 eligible women were identified and invited for cervical cancer screening by HPV SS. 561 attended awareness session, and 500 consented to HPV SS. 61 declined the test. Among a sub-sample of 260 women who accepted HPV-SS, 57% cited free availability and 28% accepted as it is self-performed. Concerns included lack of confidence in results (64%) and discomfort with touching genital area (57%). Most of the women reported no pain or bleeding while performing the test. Among the 61 women who refused HPV SS, Key reasons for refusal included lack of perceived need (56%) and spousal disapproval (54%), embarrassment (27.9%), lack of family permission (27.9%), and fear for the procedure (11.5%) were other major factors.

**Conclusion:** These findings highlight that women find HPV self-sampling acceptable, with lack of perceived need and spouse disapproval being the predominant reasons for non-participation. This supports the feasibility and acceptability of self-sampling as a less invasive cervical cancer screening option for women

**Keywords:** HPV-self sampling, Cervical cancer, women's experiences, Cancer Screening, Cancer Prevention



# **Title: Knowledge, Attitude And Practices Of E-Waste Management Among Medical Students In A Tertiary Care Centre**

**Authors:** Dr. Rajesh Prabakaran, Dr. Hemangini K. Shah

**Affiliation:** Goa Medical College

**Study Design:** Cross- sectional

**Background:** The rapid advancement and widespread use of electronic devices have resulted in a significant global increase in electronic waste (e-waste). E-waste contains hazardous substances such as lead, mercury, and cadmium, posing serious threats to environmental and human health if not managed properly (Subhprada & Kalyani, 2017; Jena & Goel, 2015). Developing nations face greater challenges due to inadequate infrastructure, insufficient regulatory enforcement, and limited public awareness (Maphosa, 2021; Nisha et al., 2022). Medical students, as frequent users of electronic devices and future healthcare professionals, play a pivotal role in promoting sustainable e-waste disposal practices. However, studies reveal inconsistencies in awareness and a gap between positive attitudes and actual disposal behaviors (Ghosh et al., 2024; Kshtriya & Anchala, 2023; Yee et al., 2024), mainly due to insufficient knowledge, lack of training, and absence of institutional guidelines (Sharma et al., 2019; Mane et al., 2019).

**Objectives:** 1. To assess the knowledge, attitude, and practices (KAP) regarding e-waste management among medical undergraduate students  
2. To determine the e-waste generation rate of commonly used devices.

**Methodology:** Study design: Cross- sectional study Study setting: hospital setting. Study participants: interns and third year of goa medical college Study tools: semi-structured questionnaire with Socio Demographic details. Study duration: six months Inclusion criteria: MBBS students (Interns + 3rd year) in Goa Medical College, has a phone and laptop. Exclusion criteria: MBBS students (Interns+3rd year) in Goa Medical College, who doesn't have a phone or laptop. Sampling technique: Stratified Random sampling Sample size calculation:  $Z^2 \times p \times (1-p)/e^2 = 197$  Where  $Z = 1.96$  for 95% confidence level  $p = 0.5\%$ , taken from the previous study by Pranav S Kshtriya  $e =$  margin of error, 5% The calculated sample size is  $197 \approx 200$

**Results:** Awaited

**Conclusion:** Awaited

**Keywords:** Medical students, Public health, Electronic waste, Healthcare education

# **Title: Efficacy of Statin Therapy in Reducing Cardiovascular Events in the Indian Population: A Systematic Review and Meta-Analysis**

**Authors:** Dr. Aishwarya R, Dr. Abdul Basith K M, Dr. Smriti Jain, Dr. Tarundeep Singh

**Affiliation:** Post Graduate Institute of Medical Education & Research

**Study Design:** Systematic Review and Meta-Analysis

**Background:** Cardiovascular disease remains the leading cause of mortality in India with onset nearly a decade earlier than Western counterparts. Indians exhibit a unique pattern of atherogenic dyslipidemia characterized by modest LDL-C levels but elevated small, dense LDL-C, high triglycerides & low HDL-C. Pharmacokinetic variability of lipid-lowering drugs due to genetic polymorphisms and lower BMI further influences optimal dosing. Despite these ethnic differences, current dyslipidemia management is largely based on Western trials. This review synthesizes evidence from major Indian studies evaluating statin efficacy and compares their outcomes with global data.

**Objectives:** To evaluate the efficacy of statin therapy in reducing cardiovascular events and lipid parameters in the Indian population compared to control, placebo, or alternative lipid-lowering therapies.

**Materials and Methods:** This systematic review and meta-analysis followed the PRISMA 2020 guidelines. Electronic searches were conducted across PubMed, Embase, Cochrane, Scopus, Web of Science and Clinical Trial Registries from 1990-2024. Eligible studies included randomized controlled trials, registry, cohort and observational designs encompassing a population of 18617. Primary outcome was reduction in major adverse cardiovascular events (MACE). Data were pooled using a random-effects (DerSimonian–Laird) model, with heterogeneity assessed via  $I^2$  statistic.

**Results:** A total of 745 articles were identified through database search. After removing 255 duplicates, 490 articles underwent title and abstract screening, of which 105 articles were reviewed in full-text, and the eligible studies which met the inclusion criteria were included in the final analysis. It was found that statin therapy was associated with a 27% reduction in odds of ACE compared to control (pooled OR = 0.73; 95% CI 0.58–0.93;  $p = 0.01$ ). Statistical heterogeneity was low ( $I^2 = 25\%$ ), and effects were directionally consistent across study designs. Several studies also demonstrated significant reductions in total cholesterol and LDL-C following statin therapy.

**Conclusion:** Statin therapy significantly reduces cardiovascular events in Indian populations, achieving 27% risk reduction and greater LDL-C lowering per milligram dose than reported globally. This response likely reflects pharmacokinetic and genetic differences suggesting heightened sensitivity to lower doses. These findings highlight the need for ethnicity-specific dosing strategies and pharmacogenomic considerations in cardiovascular prevention guidelines for India.

**Keywords:** Statins; Cardiovascular Disease; India; Meta-analysis; Pharmacogenomics; LDL Cholesterol

**Title: Prevalence and Factors associated with Vitamin D deficiency in the Elderly in a Rural area of Goa**

**Authors:** Dr. Saish Pramod Naik, Dr. Amit Dias, Dr. Rajat Sawant

**Affiliation:** Department of Community Medicine, Goa Medical College

**Study Design:** Cross -Sectional

**Background:** Vitamin-D plays a crucial role in blood calcium and phosphate homeostasis supporting the body's metabolic functions, neuromuscular transmission and bone mineralization. The prevalence of vitamin D deficiency from new-born to infancy, childhood and adult male and females (non-pregnant, pregnant and lactating) is widespread. However, the information available on vitamin D status in elderly Indians is limited.

**Objectives:** 1. To estimate the Prevalence of Vitamin-D deficiency in the elderly.  
2. To find out the factors associated with Vitamin D deficiency

**Methodology:** Cross sectional Study (community based study) undertaken in field Practice area covered under RHTC Mandur (Mandur, Neura, Azossim, Dongrim, Sub Centre of Goa Velha, Curca, Agassaim) Study tools used are

- Semi-structured questionnaire which will be administered by the investigator.
- Vit-D estimation by CMIA method, anthropometry, dietary history.
- Anthropometry measurements: Weight will be measure by same weighing scale and Height will be measure using non stretchable measuring tape .

Inclusion Criteria: People aged  $\geq 60$  years.

Exclusion criteria: People with cancer, on chemotherapy, <3 months post surgery and post blood transfusion ,suffering chronic kidney disease. Sample size:  $Z_{1-\alpha/2} = 1.96$  is read from a standardized normal distribution table with 95% confidence interval Margin of error:  $d = 3\%$  Prevalence: 95.8% Sample size(n): 202

- (Bachhel R, Singh NR, Sidhu JS. Prevalence of vitamin D deficiency in north-west Punjab population: A cross-sectional study. International Journal of Applied and Basic Medical Research. 2015 Jan;5(1):7.) Sampling technique: Systematic random sampling.

**Results:** awaited

**Conclusion:** awaited

**Keywords:** vit d, deficiency, elderly, rural

# **Title: Fear Of Missing Out (Fomo), Self-Esteem & Social Media Disorder Among Medical Students In A Tertiary Healthcare Facility In Imphal, Manipur: A Cross-Sectional Study**

**Authors:** Dr. Mani Raranam Bhowmick, Dr. Soubam Christina

**Affiliation:** Community Medicine//Regional Institute Of Medical Sciences

**Study Design:** Cross-sectional study

**Background:** Fear of Missing Out (FoMO) is a pervasive apprehension that others might be having rewarding experiences from which one is absent. Self-esteem is the degree to which the qualities and characteristics contained in one's self-concept are perceived to be positive. Social media disorder (SMD) is problematic and addictive patterns of social media use. FOMO, low self-esteem, and compulsive social media use can lead to poor academic performance among medical students, thereby reducing clinical competence.

**Objectives:** 1. To assess the prevalence of Fear of Missing Out (FoMO), self-esteem and social media disorder among medical students  
2. To determine the association between socio-demographic characteristics, FoMO, self-esteem and social media disorder among medical students

**Materials and Methods:** A cross-sectional study was conducted among 507 MBBS & BDS students in a tertiary healthcare facility in Imphal. Data was collected using structured questionnaire consisting of 4 sections-socio-demographics, FoMO, self-esteem & Social Media Disorder. Descriptive statistics employed mean, standard deviation, frequency and percentages. Chi-square test was done to see the association between FoMO, self-esteem and social media disorder with socio-demographic characteristics. A "p value" of <0.05 was considered statistically significant.

**Results:** Among the 507 medical students, 49.9% of the participants had moderate to severe FoMO, 35.7% had low self-esteem & 32.3% had social media disorders. Gender and relationship with family/guardian were significantly associated with FoMO. Domicile state/UT, living situation and relationship with family/guardian were significantly associated with self-esteem. Academic phase, self-rated academic performance and relationship with family/guardian were significantly associated with SMDs.

**Conclusion:** Half of the participants had moderate to high FoMO, 1/3rd of the participants had low self-esteem & 1/3rd of the participants had SMDs. Negative correlation seen between FoMO & self-esteem scores and also between self-esteem & SMD scores. Positive correlation between FoMO and SMD scores. Key-words: Fear of Missing Out (FoMO), self-esteem, social media disorders, medical students, Imphal

**Keywords:** Fear of Missing Out, FoMO, self-esteem, social media disorders, medical students, Imphal

**Title: Emotional Intelligence, Perceived Stress, And Academic Performance: A Cross-Sectional Study**

**Authors:** Dr. Soham Sarkar, Dr. Jalina Laishram

**Affiliation:** Community Medicine//Regional Institute Of Medical Sciences

**Study Design:** Cross-sectional study

**Background:** Emotional Quotient (EQ), often called Emotional Intelligence (EI), is the ability to recognize, understand, manage, and reason with emotions in oneself and others. Students are subjected to various stressors, and having emotional intelligence enables individuals to cope with stress.

**Methods:** An analytical cross-sectional study was conducted among phase II, phase III part I, and part II students. All students from the respective phases were included. The Schutte Self-Report Emotional Intelligence Test and Cohen's Perceived Stress Scale were used. A T-test/ANOVA was applied to compare differences in mean scores, while Pearson's correlation was used to compare EI scores and perceived stress scores.

**Results:** Among the 340 study participants, the mean age was  $22.38 \pm 1.32$  years. The majority 179 (52.6%) were male. The mean emotional intelligence (EI) score was  $79.49 \pm 11.21$ , and the mean perceived stress score was  $19.09 \pm 5.42$ . Of the total participants, 43% had lower EI scores, and 77% experienced moderate stress. A significant positive correlation was found between EI and PSS scores ( $r = 0.246$ ,  $p < 0.001$ ), but there was no correlation with academic performance.

**Conclusion:** EI scores had a positive correlation with perceived stress. Teaching medical students about EI, either as part of their regular curriculum or through workshops, should be considered.

**Keywords:** Emotional intelligence, perceived stress, academic performance, medical students.



## **Title: Prevalence And Determinants Of Burnout Among Resident Doctors In A Tertiary Care Teaching Hospital O**

**Authors:** Dr. Deepak Dnyandeo Sarkate, Dr. Amit Jogdande, Dr. Prashant

**Affiliation:** Community Medicine

**Study Design:** A Cross Sectional Study

**Background:** Burnout is a work-related psychological condition characterized by emotional exhaustion, depersonalization, and reduced personal accomplishment. Resident doctors are at increased risk because of long hours of work, academic pressures, and the high level of stress in clinical environments. Assessing its prevalence and contributing factors will help in promoting physician well-being and maintaining the quality of patient care.

**Objectives:** The objectives are to estimate the prevalence and severity of burnout among resident doctors in a tertiary care teaching hospital in Eastern Maharashtra and to identify associated sociodemographic and occupational determinants.

**Methods:** A cross-sectional study was undertaken on 104 resident doctors from different clinical and non-clinical departments of a tertiary medical college in Eastern Maharashtra. Assuming 84.1% prevalence for moderate burnout and an absolute error of 7%, the sample size was calculated accordingly. Data collection was done using a pre-tested, semi-structured questionnaire that incorporated the CBI to measure personal, work-related, and client-related burnout. Sociodemographic variables, working hours, and years of experience were noted. Data were analyzed using descriptive and inferential statistics, with  $p < 0.05$  being considered significant.

**Results:** The mean age of the participants was 28 years. Also, 49% of residents worked 41–60 hours per week and 58% had less than 2 years of experience in government service. The overall prevalence of moderate burnout was found to be 84.1%. The burnout scores, particularly personal and work-related, were significantly higher among first-year residents than their senior counterparts ( $p < 0.05$ ). No significant association of burnout was found with gender and marital status.

**Conclusion:** A high prevalence of burnout was noted among resident doctors, especially in the early period of residency. Targeted institutional interventions regarding workload regulation, adequate rest, and psychological support systems are required to reduce burnout and improve physician well-being.

**Keywords:** Burnout, Resident Doctors, Copenhagen Burnout Inventory, Eastern Maharashtra, Medical Education, Men

# **Title: Knowledge, Attitude & Practice On Infant And Young Child Feeding Amongst Mothers Attending A Tertiary Care Hospital In Imphal: A Cross-Sectional Study**

**Authors:** Dr. Anirban Kundu, Dr. Jalina Laishram

**Affiliation:** Community Medicine//Regional Institute Of Medical Sciences

**Study Design:** Analytical cross-sectional study

**Background:** Undernutrition in children, especially newborns and infants, remains a significant global health issue, with India accounting for 20% of under-five deaths worldwide. Appropriate infant and young child feeding (IYCF) practices are crucial for their growth and development.

**Objective:** To assess the knowledge, attitude, and practices of antenatal and postnatal mothers regarding IYCF in a tertiary care hospital in Imphal, Manipur. Materials and

**Methods:** A cross-sectional study was conducted from March to May 2024, at the Obstetrics and Gynaecology Department of RIMS, Imphal. The study population comprised antenatal and postnatal mothers attending the department. Data was collected using a pretested structured questionnaire and analysed using IBM SPSS version 26. Descriptive statistics for categorical variables were expressed in percentages and frequencies while continuous variables were expressed in mean and standard deviation. Chi-squared test was employed for the association between outcome and independent variables of interest. P-value  $\leq 0.05$  was considered statistically significant.

**Results:** The study included 314 participants. The mean age of the participants was  $28.22 \pm 5.77$ . A significant proportion of mothers (88.20%) correctly acknowledged that infants should receive only breast milk until 6 months, while around 85% knew complementary food should be introduced at 6 months. Mothers with graduate degrees and above (32.50%) demonstrated a higher percentage of correct answers to knowledge-based questions compared to mothers with lower education, potentially indicating an association between higher education and improved IYCF knowledge. Factors such as religion, mother's and father's education, and counselling during antenatal and postnatal visits were associated with good knowledge.

**Conclusion:** Despite a generally favourable attitude, there is a significant gap in knowledge and practice among mothers regarding IYCF. The study highlights the need for enhanced counselling and education during antenatal and postnatal care to improve IYCF practices.

**Keywords:** Knowledge, Attitude, Practice (KAP), Infant and Young Child Feeding, Mothers attending tertiary care

**Title: Impact of Internet Addiction on Academic Performance and Attendance Among Medical Students in Eastern**

**Authors:** Dr. Vishalsing Dilipsing Thakur, Dr. Pawanmeshran

**Affiliation:** Community Medicine

**Study Design:** A Cross Sectional Study

**Background:** Internet addiction has become a growing concern among medical students due to their extensive use of digital platforms for learning and social interaction. Excessive use can impair concentration, sleep, and academic performance. Yoga, as a mind–body discipline, may help reduce stress, enhance attention, and promote healthy technology use.

**Objectives:** To assess the prevalence of internet addiction and its impact on academic performance among medical students in Eastern Maharashtra, and to explore the potential role of yoga as a mitigating factor.

**Methods:** A cross-sectional study was conducted among 206 undergraduate medical students from selected medical colleges in Eastern Maharashtra. Data were collected using a pretested, semi-structured questionnaire, including Young's Internet Addiction Test (IAT) and self-reported academic indicators such as examination results and attendance. Information on yoga practice and lifestyle habits was also obtained. Descriptive statistics and chi-square tests were applied to assess associations between internet addiction, academic performance, and attendance.

**Results:** Out of 206 participants, 82.5% were addicted to the internet, while 17.5% had normal usage. 62.1% of students achieved good results in their first professional examination, whereas 37.9% had poor results. Regarding attendance, 83.5% maintained good attendance, and 16.5% had poor attendance. The association between the level of internet addiction and both academic performance and class attendance was highly significant ( $p < 0.001$ ). Students who practiced yoga regularly demonstrated lower addiction scores and better concentration.

**Conclusion:** Internet addiction is highly prevalent among medical students in Eastern Maharashtra and is significantly associated with poorer academic performance and attendance. Regular yoga practice may serve as an effective strategy to reduce internet dependency and improve academic outcomes

**Keywords:** Internet addiction, academic performance, medical students, yoga, Eastern Maharashtra

**Title: Smartphone Addiction and its impact on Occupational Balance and Sleep Quality among medical and health profession students in Goa, India: A Cross-sectional study**

**Authors:** Charmaine Almeida, Dr. Colin Braganza, Dr. Vivek Vajaratkar

**Affiliation:** KLE Academy of Higher Education and Research, Belgaum

**Study Design:** Observational Cross-sectional design

**Background:** Smartphone addiction is among the most prevalent forms of addictions in younger generations. Occupational balance is a concept that takes into account an individual's perspective of having the right amount of occupations and activities and the right variation between activities, as well as their satisfaction with how their time is balanced between various activities. Smartphone use has, arguably, the potential to interfere with our everyday life with smartphone overuse leading to loss of control, preoccupation with the smartphone, and negative effects on our daily lives. Moreover, smartphone use can affect the sleep-arousal system, which might cause sleep disruption.

**Objectives:** To assess Smartphone Addiction and its impact on Occupational Balance and Sleep quality among medical and health profession students

**Methods:** 387 students belonging to medical and health professions courses viz. MBBS, BOT and BPT courses at Goa Medical College were assessed using Smartphone Addiction Scale (SAS-SV), Pittsburgh Sleep Quality Index (PSQI) and Occupational Balance Questionnaire (OBQ-11).

**Results:** The students spent an average of 5.5 hours per day on their smartphones. Mean scores of SAS, OBQ-11 and PSQI were 47.3/60, 13/33 and 17/21. Smartphone addiction was negatively correlated with occupational balance and sleep quality across all student groups ( $p < 0.05$ ).

**Conclusion:** The findings indicate majority of the students are addicted to their smartphones, having a moderate imbalance between different activities of daily life (work, study, household tasks, leisure, rest and sleep) and poor sleep quality.

**Keywords:** Occupational Balance, Smartphone addiction, Sleep quality

**Title: Resilience and associated factors among Healthcare Workers working in public health facilities of Bhopal District**

**Authors:** Dr. Kapil Prajapat, Dr. Anindo Majumdar

**Affiliation:** AIIMS Bhopal

**Study Design:** Mixed-method

**Background:** Healthcare workers (HCWs) frequently experience high occupational stress due to heavy workloads, emotional demands, and limited institutional support, which adversely affect their mental well-being and performance. Resilience—the ability to adapt positively and recover from stress—plays a crucial role in maintaining psychological stability and efficiency. Understanding factors associated with resilience can help design interventions to strengthen coping and prevent burnout. However, limited evidence exists from public health facilities in India, particularly at primary and secondary care levels. Therefore, this study aimed to assess resilience among HCWs in Bhopal district and identify factors influencing it.

**Objectives:** To assess resilience among HCWs working in public health facilities of Bhopal district and to identify factors associated with resilience scores.

**Materials and Methods:** This mixed-method study was conducted among HCWs in the Bhopal district. For the quantitative component, quota sampling was used, and for the qualitative component, participants were selected through purposive sampling. A total of 200 participants were enrolled—50 each from (i) Primary Health Centres (PHCs) and Community Health Centres (CHCs) combined, (ii) Civil Hospitals (CHs) and the District Hospital (DH) combined, (iii) a Medical College & Hospital, and (iv) other hospitals or dispensaries under public sector undertakings. Resilience was assessed using the validated Hindi and English versions of the Connor–Davidson Resilience Scale (CD-RISC 10). Associations were examined using univariate linear regression, followed by multivariate regression for variables with  $p < 0.25$ .

**Results:** The median age was 33 years (IQR = 12.3); 69 were males and 131 females. Higher age, working fewer than 48 hours per week, being a nurse, and belonging to a socioeconomic class other than the upper class were associated with higher resilience scores. After adjustment, age and shorter working hours remained independent predictors. However, Qualitative findings revealed that Faith-based motivation and emotional self-regulation enabled them to maintain performance despite personal and occupational stressors.

**Conclusion:** The study highlights that resilience among healthcare workers is influenced by both individual and occupational factors. Qualitative insights emphasised the role of spirituality, emotional regulation, and social support in coping with stress. Strengthening workplace well-being initiatives and promoting faith-based and mindfulness practices may enhance resilience and mental health among healthcare professionals.

**Keywords:** Resilience, HCWs, Public Health Facilities, CD-RISC 10



**Title: Knowledge and Attitude of Rashtriya Kishor Swasthya Karyakram (RKSK) among adolescents in Bishnupur**

**Authors:** Dr. Roshnee Heigrujam, Dr. Soubam Christina

**Affiliation:** Community Medicine//Regional Institute Of Medical Sciences

**Study Design:** Cross-sectional study

**Background:** Adolescence is a key transitional phase. In Bishnupur district, Manipur, health issues like anaemia, mental health disorders, tobacco and drug use are prevalent. The RKSK program, initiated in 2021, seeks to improve adolescent health, but gaps in awareness and attitudes persist.

**Methods:** A cross-sectional survey was conducted during March–April 2025 among adolescents in government and private schools in Bishnupur. Stratified cluster sampling was used to select participants; consent was obtained and anonymity maintained. A structured questionnaire that assessed knowledge, attitude, and feedback. Statistical analyses included descriptive statistics and chi-square tests (IBM SPSS 26).

**Results:** Of 684 participants (mean age  $14.65 \pm 1.07$ , 49% female), only 22.1% possessed adequate knowledge of RKSK, while 85.7% displayed a favourable attitude. Adequate knowledge was significantly associated with female gender, family members in healthcare, and prior attendance at adolescent health awareness programs ( $p < 0.05$ ). Favourable attitude correlated strongly with higher knowledge, female gender, and health care relatives. Main knowledge gaps related to mental health, sexual and reproductive health, and adolescent-friendly clinics.

**Conclusion:** Though attitudes towards RKSK were mostly favourable, only one in five adolescents had adequate program knowledge, underscoring the need for enhanced educational interventions, IEC material distribution, and improved access to adolescent-friendly health services.

**Keywords:** Adolescents, RKSK, Bishnupur, Knowledge, Attitude, School Health, Manipur, India

**Title:** Junk at the school Gate: A mixed methods study on the prevalence, Determinants and perceptions of HFSS

**Authors:** Dr. Sahithi Mandava, Dr. Allenki Vineesh

**Affiliation:** Department of Community Medicine

**Study Design:** Mixed method study design

**Background:** India is undergoing a nutrition transition with the coexistence of undernutrition and rising obesity. High Fat, Sugar, and Salt (HFSS) foods, commonly known as junk foods, are major contributors, particularly among adolescents. While there are few studies in urban areas, studies in rural areas remain very limited.

**Objectives:** To estimate the prevalence and determinants of HFSS food consumption among rural adolescents in Gummadidala village near Hyderabad, Telangana, To explore perceptions through qualitative inquiry.

**Materials and Methods:** An explanatory sequential mixed-methods study was conducted among 220 adolescents aged 13–19 years in government and private schools. A structured questionnaire assessed sociodemographics, dietary frequency, and contextual factors. Anthropometry and blood pressure were measured. Logistic regression identified predictors of high HFSS consumption. Qualitative data were collected via focus group discussions with adolescents, parents, and teachers, and key informant interviews with shopkeepers, followed by thematic analysis.

**Results:** as the study is still going on , we would like to disclose the results at the time of conference.

**Conclusion:** HFSS consumption is highly prevalent among rural adolescents, shaped by environmental and structural factors beyond individual choice. Multi-level interventions, including HFSS-free zones near schools, healthy canteen reforms, parental guidance, and stricter regulation of food marketing, are essential to curb the rising NCD burden in rural India.

**Keywords:** HFSS foods, Rural adolescents, NCDs

**Title: Medical Students Perception on Sexual Violence and its Determinants in the Society, a Qualitative Study**

**Authors:** Dr. Sushil Shinde, Dr. Sarita Wadhva

**Affiliation:** Government medical College Nagpur

**Study Design:** Qualitative

**Background:** Sexual violence against women remains a major public health and human rights concern in India. Despite stronger laws like the Criminal Law (Amendment) Act 2013 and rising awareness, cases continue to increase, compounded by stigma and underreporting. This study explores medical students' perceptions of sexual violence and its societal determinants.

**Objectives:** To explore the perceptions of medical students regarding sexual violence against women and to identify their views on its causes, consequences, and possible preventive measures.. **Methods:** his exploratory qualitative study was conducted among 39 undergraduate medical students of Government Medical College, Nagpur, during the period of September to October 2025, after obtaining approval from the Institutional Ethics Committee. Four focus group discussions were organized using a pretested discussion guide, and all sessions were audio-recorded. Transcripts were prepared verbatim using Microsoft Word and analyzed thematically through an inductive approach to identify emerging themes and subthemes.

**Results:** Participants perceived sexual violence as an act causing both physical and psychological trauma. The patriarchal mindset of society was identified as the most common cause, followed by ignorance, lack of education, and weak law enforcement. Students emphasized that change in societal attitudes, empowerment of women, improved city safety infrastructure, stricter judiciary mechanisms, and inclusion of gender sensitization in educational curricula are essential measures for prevention.

**Conclusion:** Prevention of sexual violence against women requires a comprehensive, multisectoral strategy. Emphasis should be placed on behavioral change communication, women's empowerment, legal reform, and policy-level initiatives to build a safer and more equitable society for women.

**Keywords:** Medical students, perception, qualitative study, sexual violence, gender equality, women's safety

# **Title: Deciphering Deaths Digitally: Automated Verbal and Social Autopsy for Mortality Surveillance**

**Authors:** Rachit Harode, Dipti Chatterjee

**Affiliation:** All India Institute of Hygiene and Public Health

**Study Design:** Narrative Review

**Background:** Verbal autopsy (VA) and social autopsy (SA) are crucial public health methods used to understand circumstances and causes of death. Recently, automated approaches like Computerized Coding of VA (CCVA), which use algorithms and probability models, are increasingly replacing conventional Physician-Certified VA (PCVA). These automated systems support efficient data analysis, improved accuracy, and greater consistency in assigning causes and factors linked to mortality.

**Objectives:** This narrative review aims to synthesize existing literature on the application of automated and digital methods to strengthen verbal and social autopsy in low and middle income countries.

**Methods:** The research was carried out from June 2025 to September 2025. A systemic literature search was performed across PubMed, Google Scholar, Cochrane Library and Epistemonikos using the keywords 'out-of-hospital mortality', 'artificial intelligence', 'verbal autopsy', 'InterVA', 'LMIC' among others. The final selection was limited to peer-reviewed studies published in English between 2000 and 2025. Review articles were excluded. Backward citation searching based on references in selected articles and 'related articles' was done. All retrieved studies were imported to Rayyan.ai, where screening was performed independently by four reviewers. The final set includes 21 validation studies, 13 pilot studies and 2 additional articles. Data was extracted and analyzed using MS Excel.

**Result:** SmartVA, which uses the Tariff 2.0 algorithm, is applied widely and mostly performs as well as or better than Physician-Certified Verbal Autopsy (PCVA). Automated approaches generally show higher accuracy at the population level (CSMF) but only low to modest accuracy at the individual level (CCC/PCCC). Two studies have also examined COMCAT, incorporated in InterVA-5, to capture broader circumstances surrounding deaths. The most significant limitation is the low sensitivity, meaning they struggle to reliably replicate physician assignment for individual COD.

**Conclusion:** Implementing digital VA on a large scale requires sophisticated governance, infrastructure, logistics and IT support, which increases in complexity with scale-up. Further development is needed to improve automated methods, especially using larger datasets of randomly selected unattended deaths to accurately test combinations for different causes.

**Keywords:** Cause of Death; Verbal Autopsy; Computer-Coded Verbal Autopsy; Social Autopsy; Automated Methods; Di

**Title: Adoption of Responsive Feeding Practices Among Mothers of Infants in an Urban Resettlement Colony in Shahdara District of Delhi: Results from a Quasi-experimental Study**

**Authors:** Dr. Niharika, Dr. Pragti Chabbra, Dr. Madhu Kumari Upadhyay

**Affiliation:** University College of Medical Sciences

**Theme:** Maternal and child health

**Study Design:** Quasi-experimental

**Background:** Responsive feeding (RF) is a two-way process where the child's hunger and fullness signals are recognised and interpreted by the caregiver, who then responds appropriately. Interventions focused on training the parents in RF improve the overall feeding environment. RF improves self-regulation, and healthy eating habits, and reduces childhood obesity. RF rates are low in India, while childhood obesity is rising.

**Objectives:** To assess the difference in proportion of mothers adopting various responsive feeding practices as a result of group nutritional counselling between the intervention and control group.

**Methods:** 91 mother-infant dyads, where the infant was aged 3-5 months, were recruited from anganwadis. 48 of these dyads were enrolled in the intervention group, and were given group nutritional counselling on complementary feeding over 2 sessions, 4 weeks apart, with emphasis on responsive feeding. Flipchart, food demonstration and interactive sessions were the tools used. 43 controls were educated on family planning measures. Participants were followed at 9 months of age to assess various RF practices. Data about socio-demographic profile, breastfeeding practices was collected at recruitment, and regarding complementary feeding at 9 months. Intention-to-treat analysis was done after imputing for missing data. Data was analysed using Jamovi.

**Results:** Mothers from the intervention group were significantly more likely to report being in a happy mood during feeding sessions compared to the controls (96% vs 72%, p-value = .002, RR=1.31, 95% CI: 1.06-1.61), even though their perception of child's food intake was not very different from the mothers in control group. Mothers belonging to the intervention group were 0.71 times less likely to rely on television and mobile screens to facilitate feeding (RR=0.29, 95% CI: 0.15-0.58, p-value = .001).

**Conclusion:** Community-based nutritional counselling improves responsive feeding practices, enhancing the quality of mealtime.

**Keywords:** Complementary feeding, responsive feeding, infant nutrition



**Title: Awareness And Satisfaction Regarding Informed Consent Among Post Operative In-Patients Of A Tertiary Care Hospital In Imphal West, Manipur: A Cross-Sectional Study**

**Authors:** Dr. Haobam Sanjay Kumar, Dr. Jalina Laishram,

**Affiliation:** Community Medicine//Regional Institute Of Medical Sciences

**Study Design:** Analytical cross-sectional study

**Background:** Informed consent is a vital process in ensuring patient autonomy and shared decision-making in healthcare. However, knowledge and satisfaction related to the informed consent process among surgical patients remain underexplored, particularly in tertiary care settings.

**Methods:** A cross-sectional study was conducted in the surgery-allied departments of RIMS, Imphal, from January 21 to February 18, 2025. Adult post-operative patients (n=203) admitted across departments were interviewed face-to-face using a semi-structured questionnaire assessing awareness and satisfaction regarding informed consent. Data were analyzed with SPSS v26 using descriptive statistics and Chi-square tests.

**Results:** The mean age of participants was  $37.8 \pm 14$  years. Seventy percent reported satisfaction with the informed consent process; yet 40% found the forms not fully understandable. Patients undergoing elective surgeries and those from urban areas had significantly higher satisfaction levels, while emergency cases showed gaps in communication. Prior awareness of patient rights did not correlate significantly with satisfaction. Six out of ten participants wanted more explanation on associated risks.

**Conclusion:** While the majority of patients expressed satisfaction with the informed consent process, substantial gaps persist, notably in emergencies where time constraints hinder proper communication. Strengthening clear, patient-centered informed consent protocols, even for emergencies, is recommended.

**Keywords:** Informed consent, patient satisfaction, surgery, tertiary care hospital, communication, RIMS Imphal

**Title: Perception of integrated teaching methods among undergraduate medical students:  
A qualitative study**

**Authors:** Dr. Girish J, Dr. Prasanna Mithra P, Mr. Adithya, Harikrishnan, 3. Aradhya

**Affiliation:** Kasturba Medical College, Mangalore

**Study Design:** Qualitative study- Focus Group Discussion

**Background:** Integrated teaching represents an educational approach that links basic and clinical sciences to promote conceptual understanding, critical thinking, and application of knowledge. The introduction of Competency Based Medical Education (CBME) by the National Medical Commission in India emphasizes integration across subjects to make learning more meaningful and practice oriented. However, limited qualitative research has explored undergraduate student's perceptions regarding its implementation and effectiveness in Indian medical institutions.

**Objectives:** To explore undergraduate medical students understanding of integrated teaching methods. To identify perceived facilitators and barriers to the implementation of integrated teaching. To assess the perceived effectiveness of integrated teaching compared with traditional methods.

**Materials and Methods:** A qualitative study was conducted among second year MBBS students of Kasturba Medical College, Mangalore, from April to May 2025. Twenty students were purposively selected and divided into two focus group discussions (FGDs) comprising ten participants each. Data were collected using a validated FGD guide with nine open-ended questions. Discussions were audio recorded, transcribed verbatim, and analysed thematically to derive codes, categories, and overarching themes. Ethical approval was obtained from the Institutional Ethics Committee.

**Results:** Six major themes emerged from the analysis: (1) Foundations of Integrated Teaching, (2) Curriculum Design and Implementation, (3) Learning Experience and Outcomes, (4) Bridging Theory and Practice, (5) Institutional and Technological Support, and (6) Assessment and Improvement. Students reported that integrated teaching enhanced comprehension, retention, and the ability to apply theoretical knowledge to clinical settings. They valued case-based and problem-based learning, small-group sessions, and digital simulations. Challenges identified included inadequate interdepartmental coordination, limited planning, and absence of formal feedback mechanisms.

**Conclusion:** Undergraduate medical students perceived integrated teaching as a superior and engaging approach that connects theoretical and clinical learning. They emphasized that proper coordination, structured scheduling, and the use of educational technology are crucial for its success. Regular evaluation and faculty training were suggested to sustain and strengthen the integration process, ultimately enhancing the competency and clinical readiness of future medical graduates.

**Keywords:** Integrated teaching, Medical education, Qualitative study, Competency-based curriculum

**Title: A Cross-Sectional Study on Assessment of BMI and Food Habits Among Undergraduate medical Students of Osmania Medical College, Hyderabad**

**Authors:** Dr. Mohd Mahmood, Dr. Nirmala Devi borelli, Dr. Maneeza Azeez

**Affiliation:** Osmania Medical College, Community Medicine

**Study Design:** Cross sectional study design

**Background:** Body Mass Index (BMI) is a simple yet reliable indicator to assess nutritional status. Among medical students, academic stress, irregular schedules, and changing lifestyles often contribute to unhealthy eating patterns. Despite awareness of nutrition and health, medical students may still be at risk of malnutrition and lifestyle-related disorders.

**Objectives:** To assess the Body Mass Index (BMI) and analyze the food habits among undergraduate students of Osmania Medical College, Hyderabad.

**Methodology:** A cross-sectional study was conducted among 250 undergraduate medical students of Osmania Medical College, Hyderabad, during 2025. Participants were selected using simple random sampling. Data were collected through a pre-tested, semi-structured questionnaire covering socio-demographic details, dietary habits, frequency of junk food intake, meal regularity, and physical activity. Height and weight were measured using standard procedures, and BMI was calculated using the formula  $\text{weight (kg)}/\text{height (m}^2\text{)}$  and classified according to WHO standards. Data were analyzed using descriptive statistics and Chi-square test to find associations between BMI and food habits.

**Results:** Preliminary observations indicate a mixed distribution of BMI among the study participants. Irregular meal patterns, frequent skipping of breakfast, and increased consumption of junk food and carbonated beverages are commonly reported among students. Those with regular physical activity and balanced diets tend to have BMI within the normal range. Data collection and detailed analysis are ongoing, and complete results will be presented at the time of the conference.

**Conclusion:** The study highlights the dual burden of undernutrition and overweight among medical students, reflecting the coexistence of poor dietary habits and sedentary lifestyle. There is a pressing need for interventions promoting healthy eating practices, regular physical activity, and stress management to ensure optimal health among future healthcare professionals.

**Keywords:** BMI, Food habits, Medical students, Nutrition, Cross-sectional study, Hyderabad

## **Title: Artificial Intelligence in Primary Healthcare**

**Authors:** Namrta jha, Dr. Vineet Kumar Pathak

**Affiliation:** Sunshine by lissun

**Study Design:** Narrative review

**Background:** The global healthcare sector has witnessed a revolution through Artificial Intelligence (AI), with over 700 AI-enabled medical devices receiving FDA approval in 2023. As the foundation of healthcare delivery, primary healthcare particularly benefits from AI innovations, especially in low-resource settings such as India.

**Objective:** With an emphasis on applications in clinical decision support, medical diagnosis, patient evaluation, and administrative optimization, this study explores the use of AI technology in basic healthcare institutions. In order to create strategies for the successful deployment of AI while guaranteeing ethical compliance and operational efficiency, it combines evidence from around the world with findings unique to India.

**Methods:** A systematic review of academic literature and real-world evidence was conducted, emphasizing practical AI applications in primary care. Machine learning-based diagnostic systems, natural language processing (NLP) tools for clinical documentation, and expert system-based decision support models were analyzed. Indian systems such as Qure.ai, Remidio, and Arezzo were compared with international models including the NHS, IDx-DR, and Babylon to evaluate performance and scalability.

**Results:** Demonstrated that AI significantly enhanced diagnostic accuracy, patient referral management, and healthcare workforce efficiency. Tools such as IDx-DR for diabetic retinopathy and Qure.ai's qXR for tuberculosis have extended specialist-level diagnostic capabilities to rural facilities. Decision support systems improved adherence to clinical guidelines, while NLP based tools reduced documentation time. However, India continues to face barriers including inadequate data quality, limited infrastructure, language diversity, and weak regulatory preparedness. Discussion By tackling labor shortages and enhancing the diagnosis of both contagious and non communicable diseases, the application of AI in India's primary healthcare can revolutionize service delivery. Additionally, by enhancing digital health integration, it aids the Ayushman Bharat Digital Mission. To guarantee sustainable implementation, the suggested approach places a strong emphasis on staff training, infrastructure construction, pilot testing, ethical oversight, and ongoing feedback.

**Conclusion:** Collaboration between healthcare professionals, technologists, legislators, and community members is essential for the successful integration of AI in primary healthcare. In order to ensure safety and sustainability within India's primary care system, adherence to WHO endorsed ethical frameworks would encourage transparent, accountable, and inclusive AI use.

**Keywords:** Artificial Intelligence, Primary Healthcare, Digital Health, Telemedicine

**Title: Work-related Musculoskeletal Disorders among the Construction Workers of Mangalore, Karnataka: A Community-based cross-sectional study**

**Authors:** Dr. Rajath Rao, Dr. Jithin Surendran

**Affiliation:** Department of Community Medicine, Kasturba Medical College Mangalore, Manipal Academy of Higher Education, Manipal, India

**Study Design:** Cross sectional study

**Background:** Musculoskeletal disorders (MSDs) are major emerging occupational diseases, especially in the construction industry. MSDs reduce the quality of life and productivity of the workforce. Construction workers are often neglected and form the vulnerable parts of the community. Thus, this study aims to estimate the prevalence of work-related MSDs and to determine the factors affecting work-related MSDs.

**Method:** A cross-sectional study was conducted among the construction workers at the urban wards of Mangalore city in Karnataka. Workers working at least 6 months in the construction industry were included in the study. Data was collected using the standard “The Modified Nordic Musculoskeletal Disorder Questionnaire (mNMQ)” along with anthropometric and basic biochemical readings. Data were analyzed using descriptive statistics as proportions with 95% CI, and factors associated with MSDs were reported using multivariate analysis with adjusted odds ratios and 95% CI.

**Result:** Out of 170 participants, the one-year prevalence of MSD was 37.1% (n=63) [95% CI: 30.1-44.5%], and the one-month prevalence was 47.6% (95% CI: 40.3-55.4%) (n=81). Lower back pain was reported at maximum among 26.5% (n=45, 95% CI: 20.4-33.6%) of participants. More than 10 years of employment, use of painkillers, and tobacco use were found to be significantly associated with MSDs (p-value < 0.05).

**Conclusion:** The study finds the high prevalence of MSDs (1 in 3) among construction workers with back pain as the major contributor. The high prevalence highlights the need to approach the vulnerable population to reduce and prevent the MSDs with tailor-made interventions at their level to improve the overall quality of life and improve the disability-adjusted life years.

**Keywords:** Musculoskeletal Disorders, construction workers, Low back ache, pain, Nordic Musculoskeletal Disorders



**Title: Knowledge Regarding Neonatal Danger Signs Among Mothers Of Infants Residing In An Urban Area – A Cross Sectional Study**

**Authors:** Dr. Amrit Varsha, Dr. Girija J Mahantshetti

**Affiliation:** Jawahar Lal Nehru Medical College, Belagavi, Karnataka

**Study Design:** Cross-sectional study

**Background:** Neonatal mortality remains a major public health concern globally, with an infant mortality rate of 29 deaths per 1000 live births and approximately 4 million infant deaths annually. India, being one of the most populous countries, contributes to 20% of global births and has a significant infant mortality rate of 26 per 1000 live births as of 2023. Early recognition of neonatal danger signs by mothers is crucial for timely medical intervention and improved neonatal outcomes. Hence, the current research aimed at assessing knowledge regarding neonatal danger signs among mothers of infants residing in an urban area.

**Methodology:** A cross-sectional survey was conducted at Urban Health Care Centre, Belagavi, Karnataka among mothers of children less than one year of age from April 2024 to March 2025. A structured questionnaire assessed the demographic characteristics, knowledge of mothers regarding danger signs.

**Results:** Awaited

**Keywords:** Neonatal danger signs, Maternal knowledge, Infant health, Newborn care, Infant mortality

**DIGITALISATION, DATA AND DECISIONS**

*Youth at the Forefront of Health Tech.*

# **Title: Assessment Of Health Seeking Behaviour Among Clinical Rabies Cases In 3 Years In Ganjam, Odisha Using Qgis**

**Authors:** Dr. Suchismita Mahala, Dr. Durga Madhab Satapathy

**Affiliation:** Department of community medicine

**Study Design:** Cross sectional

**Background:** Rabies is a disease of irony. It is 100% preventable yet a major cause of mortality. It is a neglected tropical disease, in spite of having a case fatality rate of 100%. Rabies claimed almost 20,000 lives last year in India. In most cases the post exposure prophylaxis is delayed or ignored inspite of ample availability of vaccinations and immunoglobulins.

**Objectives-** 1. To assess the socio-demographic and clinical profile of reported rabies cases at the ARC of a tertiary care hospital.  
2. To assess the health seeking behaviour among the victims.

**Methodology:** Study Design- Cross-sectional study Study Period- 3 years – December 2022-December 2025 Study Population- All clinical rabies cases reported in ARC of a tertiary care centre. Study tool- Record review Sampling- Convenient sampling Sample size- 9 Data analysis- compiled and analysed in MS excel and QGIS 3.40.9

**Results:** 67% of the cases were males and 4 out of the 6 of them were between 30-50 years. Most of the cases were bitten and resided within 10 km radius of a health facility which had post exposure prophylaxis available. Only 2 victims got prophylaxis on the same day or next day of bite, while 4 were never vaccinated. 3 out of the 9 got symptoms within a month.

**Conclusion:** Rabies continues to be a fatal yet preventable public health concern, reflecting gaps in awareness and timely health-seeking behaviour. In this study, despite the availability of nearby health facilities and prophylaxis, a majority of victims did not receive post-exposure vaccination promptly, leading to fatal outcomes. The predominance of middle-aged male victims highlights possible occupational or behavioural risk factors. Strengthening community awareness, ensuring immediate post-bite management, and improving access to rabies immunoprophylaxis at peripheral levels are crucial steps toward achieving the goal of “Zero Rabies Deaths by 2030.”

**Keywords:** RABIES, HEALTH SEEKING BEHAVIOUR, QGIS



# **Abstracts for Poster Presentation**





## **Title: Mapping Digital Health Maturity Models and Accreditation-Linked standards: A Scoping Review to position the NABH Digital Health Standards**

**Authors:** Dr. Sanjay Kini B, Dr. Urvish Joshi, Associate Professor, Department of Community Medicine, Narendra Modi Medical College

**Affiliation:** Kasturba Medical College, Manipal, Manipal Academy of Higher Education, Manipal

**Study Design:** Scoping Review

**Background:** Digital transformation in healthcare has led to the development of digital health maturity models and accreditation standards. In India, the National Accreditation Board for Hospitals & Healthcare Providers (NABH) recently introduced Digital Health Standards for Hospitals (2023) and a draft for HIS/EMR Systems (2024). However, their positioning within the global landscape is unclear.

**Objectives:** To map prominent international digital health maturity models and accreditation-linked standards; and to compare the NABH Digital Health Standards with these frameworks to identify alignments, divergences and gaps.

**Materials & Methods:** Peer-reviewed and grey literature describing national or international digital health maturity models and accreditation standards were included. Charting & synthesis methods: Data were charted using a customised extraction form. A narrative synthesis grouped models by scope/structure. A conceptual cross-walk matrix compared domains of the international models against the eight chapters of the NABH standards.

**Results:** Key frameworks include HIMSS EMRAM, NHS England's 'What Good Looks Like' (WGLL) and the WHO-PAHO IS4H model. NABH standards are comprehensive in clinical and administrative domains but show emerging gaps vis-a-vis global best practice: explicit AI governance, advanced cybersecurity (e.g., alignment with recognised frameworks), granular interoperability maturity assessment, and a dedicated health-equity lens.

**Conclusions & implications:** NABH Digital Health Standards provide a strong foundation. Future revisions can be strengthened by explicit requirements for AI governance, cybersecurity maturity, interoperability measurement, and equity. For hospitals and vendors, the review offers a guide to align national compliance with global trajectories.

**Keywords:** Digital Health, Accreditation, NABH, Scoping Review

**Title: Prevalence and exposure pattern of oral precancerous lesion among tobacco chewers of rural Bareilly, Uttar Pradesh**

**Authors:** Dr. Ravi Dangi, Col. (Prof.) Dr. V. K. Agrawal, Dr. Rakesh Kumar

**Affiliation:** Rajshree Medical Research Institute, Bareilly, Uttar Pradesh

**Study Design:** Cross sectional

**Background:** Tobacco chewing is one of the major concerns of public health especially in rural areas of Bareilly. It is considered as one of the risk factors for OPLs. Because of lack of awareness and easy availability of products prevalence of OPLs are increasing and its conversion to oral carcinomas are also in increasing trends. Objectives: To evaluate prevalence of OPLs among rural areas of Bareilly and determine behavioural and sociodemographic correlations.

**Methods:** A cross-sectional study done among 403 participants aged  $\geq 18$  years who are habitual of smokeless tobacco chewing. Participants were selected by simple random sampling method. Data related to socio-demographic like gender, educational status, occupation, SES Class and data regarding taking of smokeless tobacco like duration, frequency were collected by using structured interviews. Oral visual examination was done according to criteria as per WHO to look for OPLs.

**Result:** As per this study prevalence of OPLs was 37.5%, out of 403 participants 151 founded positives for OPLs. Most common lesions were founded, oral submucous fibrosis 15.9% and leukoplakia 12.4%. Prevalence was founded as males 40.1% vs females 32.0%, farmers 42.7% vs other occupations 34.2%, illiterates 44.5% vs literates 28.8%. Population consuming tobacco for longer duration and higher frequency were associated with greater risk  $p < 0.01$ .

**Conclusion:** Prevalence of OPLs was higher among males, illiterates and farmers in rural population of Bareilly. Preventive strategy like awareness regarding healthy habits, counselling for cessation of tobacco consumption, screening for lesions should be deployed immediately for betterment of rural population.

**Keywords:** Oral health, Oral precancerous lesions, Tobacco chewers, Smokeless tobacco, Socioeconomic status.

**Title: Assessment of Quality of Life in Diabetic Population in Rural Bareilly, Uttar Pradesh: A Cross-Sectional Study**

**Authors:** Dr. Divyendra Kumar, Dr. Rakesh Kumar

**Affiliation:** Rajshree Medical Research Institute, Bareilly, U. P, India

**Study Design:** Cross-Sectional Study

**Background:** Diabetes mellitus (DM) is one of the rapidly advancing non-communicable disease. Its impact on one's well-being can be understood by assessing quality of life (QoL). QoL has four domains physical, psychological, environmental and social. Assessment of QoL helps to develop good diabetes care especially in rural populations where disparities are present at socio-economic level.

**Objectives:** To evaluate the QoL among DM patients in rural Bareilly and to assess socio-demographic and clinical factors which are associated with poor QoL. **Methods:** A cross-sectional study with 168 participants of type 2 DM aged  $\geq 30$  years, residing in rural Bareilly were taken. Simple random sampling method was used. A structured questionnaire used to collect socio-demographic data and clinical history. WHOQOL-BREF questionnaire was used to assess QoL. Descriptive statistics and Chi-square test done to see association.

**Results:** 41% reported good QoL. Female were 29.8% (n=50) and male were 70.2% (n=118). Majority, aged 40-49 and 50-59 years (both 26.8%), 35.7% were illiterates, 35.7% were doing clerical/shop-owners/farmers work, most belong to BG Prasad class III (41.7%). 41.6% had diabetes for 5-10 years, complications among 24.4%. Occupation, education, SES, diabetes duration, complications were significantly associated with QoL ( $p < 0.05$ ). WHOQOL scores lowest in physical health domain  $52.3 \pm 12.5$ .

**Conclusion:** Majority reported poor QoL. Study demonstrated QoL lowest in physical health domain. Unskilled occupation, lower education, lower SES, longer diabetes duration, presence of complications leads to poor QoL. Strengthening healthcare infrastructure, socio-economic support, education for self-care, screening for complication can improve QoL.

**Keywords:** Quality of Life, Diabetes mellitus, WHOQOL-BREF, Rural, Bareilly

**Title: Delay in diagnosis and treatment among breast and oral cancer patients seeking treatment in a cancer**

**Authors:** Dr. Anirudh Singh, Dr. Khan Amir Maroof, Dr. Sk Bhasi, Dr. Pragya Shukla

**Affiliation:** UCMS and GTBH

**Study Design:** Cross-sectional study

**Background:** Cancer is a leading cause of death worldwide, with every sixth death was due to cancer. Delays in Cancer diagnosis and treatment is highly relevant especially in Indian settings where cancer is often detected in late stages. Advance stages if cancer are not only difficult to treat owing to the spread of tumour but also pose a huge economic burden. The two most common cancers in India namely breast and oral cancer can be easily suspected at the primary health-care level because of the nature of symptoms they present with namely Breast lump in breast cancer and non-healing ulcers in oral cancer.

**Objective:** To estimate the prevalence of delay in diagnosis and treatment among breast and oral cancer patients seeking treatment in a cancer institute of Delhi. **Methods:** It was a hospital based cross-sectional study done in Delhi State Cancer Institute (DSCI). A total of 171 patients of either breast cancer and/or oral cancer were interviewed in the out-patient department of the hospital using a semi-structured self-prepared questionnaire. A time interval of more than 1 month from symptom onset to diagnosis was considered as diagnostic delay, where as a time interval of more than 3 months from symptom onset to treatment initiation as treatment delay.

**Result:** A total of 81.6 percent of the patients had diagnostic delay while at least 83.8 percent of the patients had total treatment delay. Diagnostic delays were significantly more in patients (90%) who took treatment from alternative and complementary sources of medicine. 38 percent of the study participants either consulted alternative forms of treatment or consulted unregistered medical Practitioners and they have significantly more diagnostic delay and treatment delay. 22.8 percent of the patients were not aware of their own cancer diagnosis.

**Conclusion:** The prevalence of diagnostic and treatment delay was found to be high among breast and oral cancer patients. The main reasons behind patient delay were taking treatment from unregistered medical practitioners, taking alternative forms of treatment, poor financial conditions, lack of awareness of cancer, psychological stress and denial.

**Keywords:** Cancer, Oral Cancer, Breast Cancer, Delay, Diagnostic Delay, Treatment Delay

## **Title: Community-Based Evaluation of Cardiovascular Risk using QRISK®3 in Type 2 Diabetes Mellitus Population in Gujarat, India**

**Authors:** Dr. Jay Nagda, Dr. Yogesh M

**Affiliation:** Department of Community Medicine, Shri. M. P. Shah Government Medical College, Jamnagar

**Study Design:** Cross-sectional study

**Introduction:** Cardiovascular disease (CVD) rates are rising rapidly among Indians with type 2 diabetes mellitus (T2DM). Accurate risk stratification is essential for early intervention and prevention. Several risk assessment tools exist, but their applicability and concordance in the Indian population require evaluation.

**Objectives:** This study aimed to compare two cardiovascular risk assessment tools—QRISK®3 and Lipid Association of India (LAI) risk scores—in classifying cardiovascular risk among T2DM patients in Gujarat, India, and to assess the predictors emphasized by each scoring system.

**Materials and Methods:** A cross-sectional study was conducted among 600 T2DM patients aged 25–84 years recruited from urban and rural areas of Jamnagar district using stratified random sampling. Sociodemographic details, anthropometric measurements, and fasting blood tests were recorded. QRISK®3 and LAI risk scores were calculated for each participant. Risk categories were defined as moderate (10–19%), high (20–30%), and very high risk (>30%) for both systems. Agreement between the two scoring systems was assessed using Cohen's kappa statistics. Multiple linear regression analyses were performed to identify and compare predictors contributing to both risk scores.

**Results:** The mean age of participants was  $55 \pm 8.5$  years, and 60% were male. Using QRISK®3, 42% were classified as moderate risk, 14.7% as high risk, and 43.3% as very high risk. LAI classified 40%, 15%, and 45% in these categories, respectively. Agreement between the two scoring systems was substantial (weighted  $\kappa = 0.83$ , 95% CI: 0.79–0.87). Concordance improved with age, ranging from moderate agreement in younger adults ( $\kappa = 0.75$  for 25–44 years) to strong agreement in older adults ( $\kappa = 0.87$  for  $\geq 65$  years). Among individuals aged <50 years, LAI identified more high-risk patients compared to QRISK®3 (16.6% vs. 11.3%,  $p = 0.03$ ). Linear regression analysis revealed that LAI placed greater emphasis on smoking ( $\beta = 6.85$  vs.  $\beta = 5.63$ ), family history ( $\beta = 5.28$  vs.  $\beta = 3.12$ ), and obesity ( $\beta = 3.27$  vs.  $\beta = 2.43$ ) than QRISK®3.

**Conclusion:** Both QRISK®3 and LAI risk scores demonstrated substantial agreement in risk classification, with better concordance in older age groups. LAI identified more younger patients as high-risk and weighted smoking and family history more heavily than QRISK®3. These findings highlight the potential complementary roles of both scoring systems in comprehensive cardiovascular risk assessment among Indian T2DM patients, particularly for younger individuals.



**Keywords:** Cardiovascular Risk Assessment, Type 2 Diabetes Mellitus, QRISK®3, Risk Stratification



**Title: Masculinity in Transition: Exploring Identity Formation, Expression, and Behavioural Patterns Among Senior Secondary Male Students in Delhi NCR**

**Authors:** Sqn Ldr (Dr.) Ajinkya Nimbalkar , Maj (Dr.) Abhinav Kumar Singh

**Affiliation:** Armed Forces Medical College Pune

**Study Design:** Cross-sectional

**Background:** Adolescent masculinity attitudes significantly influence psychological development and mental health outcomes. Understanding these attitudes in the Indian educational context is crucial for developing targeted interventions that promote healthy masculine identity formation while respecting cultural values. Objective: To assess knowledge, attitudes, and practices related to healthy masculinity among senior secondary male students in Delhi National Capital Region (NCR) schools.

**Methods:** A cross-sectional survey was conducted among 328 male students from grades 11-12 across schools in Delhi NCR between June to August 2025. A culturally adapted questionnaire assessed role model preferences, emotional expression patterns, help-seeking behaviours, peer relationships, and social pressures related to masculine identity.

**Results:** Participants (mean age 16.4 years) demonstrated complex masculinity attitudes combining traditional and progressive elements. Family members were the predominant role models (65.2%), while “respect for others” (70.7%) and “helping others” (47.6%) were the most valued masculine qualities. Traditional attitudes included high discomfort with public crying (95.7%), belief that real men don’t back down from fights (70.1%), and preference for solving problems alone (62.8%). Progressive attitudes included rejection of help-seeking as weakness (80.5%) and alpha dominance behaviours (75.0%). Most students (40.9%) kept feelings to themselves, with only 9.8% expressing emotions easily.

**Conclusions:** Delhi NCR students exhibit selective adoption of masculine norms, retaining prosocial traditional values while rejecting harmful dominance behaviours. The findings suggest need for educational interventions that strengthen emotional literacy while building on existing positive masculine values.

**Keywords:** healthy masculinity, adolescents, Delhi, emotional expression, help-seeking behaviour, gender roles

**Title: Prevalence of Tobacco and alcohol consumption and its association with Sociodemographic factors among adult population in a rural area**

**Authors:** Dr. Kamran Sayyad, Dr. Mohini S. Jogdand, Dr. Rajesh C. Sambutwad

**Affiliation:** Department of Community Medicine, SRTR GMC Ambajogai Dist. Beed (MH)

**Study Design:** Cross-sectional study

**Background:** Tobacco and alcohol consumption are among the leading preventable causes of death and disability worldwide, contributing significantly to the global burden of non-communicable diseases (NCDs). This public health threat is particularly critical in rural areas, which often face unique challenges related to healthcare access, low awareness, and specific social norms that may influence substance use patterns. Despite the high-risk environment, current, localised data on the prevalence and the sociodemographic factors driving this consumption among the adult population in this specific rural area are lacking. This study protocol is therefore designed to estimate the prevalence of tobacco and alcohol consumption and determine its association with key sociodemographic variables among adults in the target rural community to inform local prevention strategies.

**Objectives:**

1. To determine the prevalence of tobacco consumption among adult population in a rural area
2. To determine the prevalence of alcohol consumption among adult population in a rural area
3. To describe the association of tobacco and alcohol consumption based on sociodemographic factors among adult population of a rural area.

**MATERIAL AND METHODS:** A community-based, cross-sectional study was conducted in a rural area of Chanai village of Ambajogai taluka Dist Beed among the adult population. The sample size was 385 assuming estimated prevalence of tobacco consumption 50% Data was collected regarding Sociodemographic factors, Tobacco and Alcohol Consumption Ethical Considerations Informed consent was obtained from all participants. The study protocol was approved by the Institutional Ethics Committee (IEC). Data Analysis The collected data was entered and analysed using statistical software JAMOV. Descriptive statistics were used to report the prevalence of tobacco and alcohol consumption.

**RESULTS:** The study revealed prevalence of tobacco consumption 58.18% and alcohol consumption 30% with patterns varying across gender, education levels, and socioeconomic groups.

**CONCLUSION:** The study highlights a high burden of tobacco and alcohol use among adults in rural areas, strongly influenced by sociodemographic factors. These findings underscore the need for community-based health education and targeted behavioural interventions to address substance use in vulnerable populations.

**Keywords:** Tobacco use, Alcohol use, Sociodemographic factors, Rural population

**Title: Healing the Healers: Assessment of Second Victim Experiences and Institutional Support among Heal Healthcare Professionals in a Tertiary Care Hospital in Delhi-NCR: A Cross-sectional Study Using the SVEST-R Tool**

**Authors:** Dr. Sakshi Sharma, Brig Kunal Chatterjee, Col Chetna Arora

**Affiliation:** AFMC Pune

**Study Design:** Cross Sectional Study

**Background:** The second victim phenomenon and moral injury are acknowledged entities of psychological harm for healthcare providers. Healthcare professionals are frequently exposed to adverse events involving patients. These incidents can lead to emotional, psychological, and professional distress, a phenomenon termed the “second victim experience.” It refers to the emotional and psychological impact experienced by healthcare providers involved in Patient Safety Incidents (PSIs), manifesting as guilt, anxiety, depression, burnout, or even leading to exit from the profession. Despite growing awareness of patient safety in healthcare organisations, remedial actions often focus only on the first victim, the patient.

**Objectives:** To assess the prevalence of SVE among healthcare professionals using the Second Victim Experience and Support Tool-Revised (SVEST-R) and to identify the types of support received post-event. The secondary objective was to examine the associations between SVE and demographic or professional factors, evaluating institutional support mechanisms, and assessing the impact on professional self-efficacy.

**Methods:** A quantitative, analytical, cross-sectional study was conducted among healthcare professionals in a tertiary care hospital in Delhi-NCR. Using stratified random sampling, 422 participants were enrolled. Data were collected using the pre-validated SVEST-R questionnaire, covering domains such as psychological and physical distress, professional self-efficacy, and perceived peer, supervisor, and institutional support.

**Results:** 48% of participants reported experiencing at least one second victim event in the preceding year. Psychological distress (mean domain score  $3.7 \pm 0.8$ ) and reduced professional self-efficacy ( $3.4 \pm 0.7$ ) were commonly reported. Only 31% of respondents perceived adequate institutional support, with peer support being the most frequently utilised (52%). Female gender, longer service duration, and working in critical care units were significantly associated with higher SVE scores ( $p < 0.05$ ). Logistic regression revealed that inadequate supervisor support (AOR = 2.1, 95% CI: 1.3–3.4) and previous exposure to adverse events (AOR = 1.8, 95% CI: 1.1–2.9) were independent predictors of high SVE.

**Conclusion:** Nearly half of healthcare professionals surveyed reported significant SVEs, with substantial psychological and professional impacts. Institutional support structures remain inadequate, underscoring the urgent need for structured peer-support and debriefing systems to enhance resilience and promote a culture of empathy and safety in healthcare.

**Keywords:** Healthcare Professionals, Second Victim Experience, SVEST-R, Institutional Support, Patient Safety

**Title:** A comparative Cross-sectional Study of Refractive Error associated with Dietary pattern and Screen time among School Students of Urban and Rural areas in Raigarh, Chhattisgarh

**Authors:** Dr. Sagorika Chowdhury, Dr. Sofia Noor, Dr. Roshan Kumar Agrawal

**Affiliation:** Community Medicine, Late Shri. Lakhiram Agrawal Memorial Government Medical College, Raigarh (C.G.)

**Study Design:** Cross-sectional Study

**Background:** WHO estimates that approximately 19 million children worldwide are visually impaired of which 1.6 million children in India are visually impaired due to uncorrected refractive error. It occurs when eye cannot clearly focus the images from the outside world resulting in blurred, hazy vision which is sometimes so severe that it causes visual impairment (WHO). This survey will help us to identify risk factors that influence the eye problems in school students.

**Objectives:** To know the dietary pattern of school students, duration of screen-time in school students and its association with refractive error.

**Methodology:** This is a cross-sectional questionnaire-based study in both urban and rural schools. List of schools in urban and rural field practice area were collected. Every 5th school was selected using lottery method. Data was collected from 400+ students each from urban and rural areas meeting a total sample of 400. Students from std VI to X were included in this study aged 10-16 yrs.

**Results:** Analysis is being done and results will be presented in the conference.

**Conclusion:** A higher prevalence of refractive error is being seen in urban areas. Nutritional habits were found better in rural areas and screen-time plays an important role in use of spectacles among school students. Health education is must for eye care from early ages itself.

**Keywords:** School students, Urban, Rural, Diet, Screen-time, Refractive Error



**Title:** Feasibility of drone-based sputum sample and medicine transport for tuberculosis diagnosis in Yadadri bhuvanagiri district of Telangana: A qualitative study.

**Authors:** Dr. Bhushan Kamble, Kuldeep Nigam, Sumit Aggarwal, Meely Panda

**Affiliation:** Community and Family Medicine

**Study Design:** Qualitative Study

**Background:** Delays in transporting sputum samples and medicines from peripheral health centres to diagnostic laboratories are a persistent barrier to timely tuberculosis (TB) diagnosis in rural India. Conventional transport methods are often constrained by poor road connectivity, long travel times, and logistical inefficiencies. Unmanned aerial vehicles (UAVs)/drones have shown promise in bridging such gaps in other low-resource and rural areas, yet there is limited evidence on their feasibility, acceptability, and integration within India's National TB Elimination Programme. Thus, this study aimed to explore the operational feasibility of drone use under programmatic conditions of NTEP in Yadadri-Bhuvanagiri district of Telangana.

**Methods:** In the present qualitative study, 28 in-depth interviews and 12 focus group discussions with 99 purposively selected stakeholders were conducted to understand the feasibility across the five components: acceptability, demand, practicality, implementation, and integration. Data were thematically analysed using a feasibility framework. Ethical approval was obtained from the Institutional Ethics Committee (IEC No: AIIMS/BBN/IEC/JULY/2022/164), and written and verbal informed consent was obtained from all participants.

**Results:** Participants highlighted that drones improved acceptability, demand, and integration by reducing travel, enabling timely sputum and medicine delivery, and building community trust. Practicality and implementation were supported by coordination and district authority support, and while stigma, limited payload, weather disruptions, and training gaps were noted, they were viewed as improvable. Peripheral workers were central to community uptake and routine adoption.

**Conclusion:** Drone-based sputum and medicine transport is operationally feasible and acceptable in rural Indian settings, and participants viewed drones as a promising way to reduce sample transport times and improve access to diagnostics, particularly in hard-to-reach areas. Addressing awareness gaps, stigma, operational barriers, and regulatory delays, while embedding drones into existing health systems, could enable sustainable scale-up and strengthen rural diagnostic networks.

**Keywords:** Tuberculosis; Unmanned Aerial Vehicles; Specimen Handling; Drug Delivery Systems; Rural Health Services

**Title: Effectiveness of a One-Day Interactive Training on Knowledge regarding Vector-Borne Diseases among Primary Healthcare Workers of Deoghar, Jharkhand**

**Authors:** Bijit Biswas, G. Jahnavi

**Affiliation:** All India Institute of Medical Sciences, Deoghar, Jharkhand, India

**Study Design:** Quasi-experimental single-group pre-test/post-test

**Background:** Vector-borne diseases (VBDs) such as malaria, dengue, chikungunya, filariasis, and Japanese encephalitis continue to pose major public-health challenges in India, particularly in endemic tribal districts like Deoghar, Jharkhand. Primary healthcare workers (PHCWs) play a crucial role in VBD prevention, surveillance, and community education, yet their knowledge often remains suboptimal.

**Objectives:** To assess baseline knowledge, conduct a one-day interactive audiovisual training on VBDs, and evaluate its effectiveness through pre- and post-test assessment among PHCWs. **Methods:** A quasi-experimental single-group pre-test/post-test study was conducted at the Civil Surgeon-cum-Chief Medical Officer's Office, Sadar Hospital, Deoghar, during September–October 2025. A total of 77 PHCWs (Community Health Officers, Auxiliary Nurse Midwives, and Multipurpose Workers) completed both assessments. The training, approved by the Civil Surgeon and requested by NCVBDC, Ranchi, comprised PowerPoint-based lectures, educational videos, demonstrations, and group discussions delivered in Hindi. Knowledge scores were analyzed using the Wilcoxon signed-rank test, with significance set at  $p < 0.05$ .

**Results:** Participants had a median (IQR) age of 32 (26–44) years and median experience of 5 (1–12) years. The median knowledge score increased significantly from 9 (pre-test) to 15 (post-test) ( $p < 0.001$ ), indicating substantial improvement following the audiovisual intervention.

**Conclusion:** The one-day interactive audiovisual training proved effective in enhancing VBD-related knowledge among PHCWs. Incorporating participatory, context-specific audiovisual methods in periodic capacity-building initiatives can strengthen vector-control practices and community engagement at the primary-care level.

**Keywords:** Vector-borne diseases, Primary healthcare workers, Audiovisual training, Jharkhand, Capacity building

**Title: Prevalence, Patterns, and Factors Associated with Multimorbidity Among Adults Aged 45 Years and Above in Rural Hooghly District, West Bengal: A Community-Based Cross-Sectional Study**

**Authors:** Kishore Eswaramoorthi, Dr. Bobby Paul, Dr. Arpita Das

**Affiliation:** AIIMS Mangalagiri

**Study Design:** Cross-sectional

**Background:** Multimorbidity, the coexistence of two or more chronic conditions, poses a growing challenge in aging populations due to epidemiological transition particularly in India. This study aimed to estimate the prevalence, describe patterns, and identify factors associated with multimorbidity among adults aged 45 years and above in a rural setting.

**Methods:** A community-based cross-sectional study was conducted from April 2023 to March 2024 among 300 adults aged  $\geq 45$  years in 64 villages of Singur block, Hooghly district, West Bengal, using multistage cluster sampling with probability proportional to size (PPS). Data were collected via face-to-face interviews using a pretested semi-structured schedule, including the Multimorbidity Assessment Questionnaire-Primary Care (MAQ-PC) tool for chronic conditions. Multimorbidity was defined as  $\geq 2$  chronic conditions. Descriptive statistics and multinomial logistic regression were performed using SPSS version 16.0 ( $p < 0.05$  significant).

**Results:** The prevalence of multimorbidity was 31% ( $n=93$ ). Common dyads included hypertension + diabetes (18.75%) and osteoarthritis knee + hypertension (10.41%). Triads were led by diabetes + hypothyroidism + hypertension (13.8%,  $n=4/29$ ). In multinomial regression (no morbidity as reference), older age ( $uOR=1.03$ , 95% CI: 1.01-1.06) and physical inactivity ( $uOR=4.37$ , 95% CI: 1.73-11.02) were significantly associated with multimorbidity. Lower socioeconomic status and financial dependency showed trends toward higher odds.

**Conclusion:** Multimorbidity affects nearly one-third of rural adults  $\geq 45$  years, with cardiometabolic and musculoskeletal patterns predominant. Targeted interventions focusing on physical activity and socioeconomic support are essential for prevention.

**Keywords:** Multimorbidity, Multiple Long Term Conditions (MLTCs), Healthy Aging, Epidemiological Transition, HRQ

## **Title: Mapping the Evidence on eHealth Literacy in India and Brazil: A Scoping Review**

**Authors:** Dr. Shilpa Nasreen, Dr. Bitty Mary George

**Affiliation:** All India institute of hygiene and public health

**Study Design:** Scoping Review

**Background:** eHealth literacy (eHL)—the ability to seek, understand, and use electronic health information—is a crucial determinant of digital-health equity. With the rapid expansion of telemedicine and digital-health platforms, understanding population-level eHL is vital for effectively implementing national digital-health strategies such as India's Ayushman Bharat Digital Mission (ABDM) and Brazil's Conecte SUS. However, evidence from both countries remains fragmented and diverse in methodology and population focus.

**Objectives:**

1. To map quantitative evidence on eHealth literacy in India and Brazil (2015–2025) by study design, population, and measurement tools.
2. To compare eHealth literacy levels using standardized instruments (eHEALS, DHLI).
3. To identify key determinants of eHL such as education, age, digital access, and socioeconomic status.

**Materials & Methods:** This scoping review followed the Arksey & O'Malley and Joanna Briggs Institute frameworks, guided by the Population–Concept–Context (PCC) model. Literature searches were conducted across PubMed, Scopus, Web of Science, Embase, and Google Scholar (Aug 2015–Jul 2025). Quantitative studies measuring eHL using validated instruments (eHEALS, DHLI, eHLQ) in India or Brazil were included. Data were extracted independently by two reviewers and charted using a standardized template.

**Results:** Twenty-three quantitative studies (India = 11, Brazil = 12) were analyzed. Mean eHEALS scores were 27–30 (India) and 26–28 (Brazil), indicating moderate literacy. Low eHL (25–60%) was common among older, rural, and low-income groups. Education ( $r = 0.40–0.65$ ), age ( $r = -0.35$  to  $-0.60$ ), and digital access predicted eHL; Brazil highlighted policy integration and older adults, India emphasized behavioral determinants.

**Conclusion:** eHealth literacy levels in both India and Brazil are moderate, primarily influenced by disparities in education and digital access. Enhancing digital inclusion, validating culturally adapted measurement tools, and integrating eHealth literacy promotion into national digital-health programs are essential to ensure equitable and sustainable digital transformation.

**Keywords:** eHealth literacy, Digital health, eHEALS, DHLI, India, Brazil

**Title: Prevalence of Attention Deficit Hyperactivity Disorder (ADHD) and its determinants among college students in delhi**

**Authors:** Dr. Prachi Goswami, Dr. Rahul Sharma,

**Affiliation:** Department of Community Medicine, University College of Medical Sciences

**Study Design:** Cross sectional

**Background:** Attention Deficit Hyperactivity Disorder (ADHD) is a neuro developmental disorder of childhood which often persists into adulthood. It impairs academic outcomes, emotional regulation, quality of life and is comorbid with many other psychiatric conditions. College students, being emerging adults, face a unique set of challenges that can unmask previously hidden ADHD symptoms. Research on its burden in Indian, as well as other lower-middle income countries' youth remains inadequate, emphasising the need for localised data on ADHD and its determinants to guide interventions.

**Objectives:** To estimate the proportion of ADHD among college students in Delhi and to explore its determinants.

**Methods:** This cross-sectional study was carried out in five undergraduate colleges across Delhi from May 2024 to August 2025. A total of 619 participants, between 18 and 24 years of age, were included. ADHD was measured using the World Health Organization's Adult ADHD Self-Report Scale (ASRS-v1.1). Data was also collected on various sociodemographic and other putative factors of interest. Data was analysed using descriptive statistics along with chi-square and Spearman's correlation tests to identify associations.

**Results:** The proportion of students screening positive for ADHD was 24.2%, with 18.7% classified as low positive and 5.5% as high positive on the ASRS. No significant association was found between ADHD and gender, college year, study major (stream), and family income. The proportion of ADHD was significantly higher in those whose fathers had an college degree or higher compared to those whose fathers were less than college graduates (chi square statistic 4.61,  $p = .032$ ), while this was not found to be true for mothers' education. Though we found no significant association between screentime and ADHD, those with ADHD used artificial intelligence (AI) significantly more frequently than those without ADHD (chi square statistic 4.75,  $p = .029$ ).

**Conclusion:** A little less than one in four college students in Delhi demonstrated symptoms suggestive of ADHD, reflecting a substantial prevalence in this population which remains underdiagnosed. ADHD was significantly associated with fathers' education and use of artificial intelligence. These findings highlight the need for early screening and psychological support services in higher education settings and further studies to determine the risk factors of ADHD. It also underscores the potential of artificial intelligence tools for management of ADHD.

**Keywords:** ADHD, college students, prevalence, determinants, Delhi, ASRS, artificial intelligence



**Title: A Cross-Sectional Study to Assess the Need for Palliative Care Services and Caregiver Strain in an Urban area of Anand District, Gujrat**

**Authors:** Dr. Nidha Patel, Dr. Uday Shankar Singh

**Affiliation:** PSM Department, Pramukh Swami Medical College, Karamsad

**Study Design:** Cross Sectional Study

**Background and Objectives:** Palliative care enhances quality of life for individuals with serious or life-limiting illnesses by addressing physical, psychological, social, and spiritual needs. Despite its importance, patients with multimorbidity or non-malignant conditions often lack access. This study aims to estimate the need for palliative care in Petlad, Anand district, assess symptom burden using ESAS, and evaluate caregiver strain using the Modified Caregiver Strain Index.

**Methodology:** A cross-sectional survey is being conducted in Petlad (population: 55,330) following IEC approval from Bhaikaka University. Trained medical social workers (MSWs) from the Urban Health Training Centre (UHTC) are conducting house-to-house screening using three validated questions from the Indian Journal of Palliative Care. Informants are adults ( $\geq 18$  years), preferably household heads or the most educated members. Locked households on two visits are excluded. Patients identified are assessed using the Barthel Index; scores  $\leq 60$  indicate marked dependence and need for palliative care. Written consent is obtained from patients and caregivers. Further assessment includes ESAS and Modified Caregiver Strain Index, both translated and validated in Gujarati. Data will be analyzed using SPSS version 19 with descriptive statistics.

**Results:** Data collection is ongoing in Petlad. Preliminary findings will be analyzed after survey completion in November 2025. Final results, including the proportion of individuals needing palliative care and caregiver strain levels, will be presented at the conference.

**Conclusion:** This study will provide insights into the community-level need for palliative care and caregiver burden. Findings are expected to guide future planning, improve service delivery, and support integration of palliative assessments into routine health systems.

**Keywords:** Palliative care, Community-based survey, Barthel Index, Caregiver strain, Edmonton Symptom Assessment Scale (ESAS).

**Title: Does Digital Literacy Buffer the Cognitive Decline Among Older Adults in India? Evidence from the Longitudinal Aging Study in India (LASI).**

**Authors:** Dr. Paramveer Singh, Dr. Frederick vaz, Dr. Amit Dias

**Affiliation:** Department of Community Medicine, Goa Medical College

**Study Design:** Cross sectional

**Background:** India's rapidly aging population faces a rising burden of cognitive decline. Digital literacy has emerged globally as a potential enabler of cognitive health in older adults through mechanisms like social engagement and mental stimulation. However, evidence from low- and middle-income settings remains sparse.

**Objective:** To investigate the association between digital literacy and cognitive function among older adults in India and assess whether digital literacy moderates the age-related cognitive decline.

**Methods:** We analyzed cross-sectional data from LASI Wave 1 (2017–18), focusing on adults aged 60 and above ( $N \approx 30,000$ ). Cognitive performance was measured using a composite of immediate word recall, verbal fluency, and orientation scores. Digital literacy was defined as use of mobile phones or the internet for social interaction or information. Multivariable linear regression models examined associations between digital literacy and cognitive scores, adjusting for age, sex, education, and residence. An interaction term (age  $\times$  digital literacy) was included to test moderation effects.

**Results:** Digitally literate individuals had significantly higher cognitive scores ( $19.4 \pm 5.7$ ) than those without digital literacy ( $17.5 \pm 5.8$ ;  $p < 0.001$ ). Regression analysis showed that digital literacy was independently associated with higher cognitive performance ( $\beta = 0.68$ , 95% CI: 0.43–0.93,  $p < 0.001$ ). However, the interaction term was not statistically significant, indicating that while digital literacy elevates baseline cognition, it does not significantly buffer the rate of cognitive decline with age.

**Conclusion:** Digital literacy is positively associated with cognitive function in older Indian adults, though it does not alter the trajectory of age-related cognitive decline. These findings highlight the value of digital inclusion strategies as part of active aging policies, aligning with data-driven decision-making for elder care in the digital age.

**Keywords:** Digital Literacy

## **Title: Assessment of Physical Health Changes Following a 10-Day Jain Fasting Practice Among Young Adults**

**Authors:** Dr. Ayushi Manya Jain, Dr. Grishma Chauhan, Dr. Niraj Pandit

**Affiliation:** Community Medicine

**Study Design:** Cross-sectional observational study

**Background:** Jainism, one of the most ancient religions, emphasizing non-violence, truth, and self-restraint. During the Paryushan Parv, followers practice various forms of fasting and spiritual reflection aimed at self-purification. The physiological effects of fasting—especially among young adults—remain under explored. This study aimed to assess the holistic effects—physiological and spiritual aspect of 10-day religious fasting during Paryushan Parv among Jain youth.

**Objective:** To evaluate the physical changes associated with fasting, including Anthropometric measurements (BMI, etc.), Vital parameters (BP, Pulse, etc.), and Biochemical markers (Blood sugar, Hb, Lipid profile, etc).

**Methodology:** A community-based cross-sectional observational study was conducted among 41 Jain college students aged 18–30 years from Sumandeep Vidyapeeth, Piparia, Vadodara, Gujarat. A purposive sampling method was used, including participants practicing various fasting forms over a period of 22 days (16th August to 7th September 7), including Shwetamber and Digambar practitioners. Data were collected through a self-structured questionnaire recording daily fasting experiences and perceived body changes, along with biochemical tests conducted before and after fasting.

**Results:** The mean age of participants was  $24.29 \pm 3.02$  years (male: 24; female: 17). The mean BMI decreased from  $25.21 \pm 3.25$  to  $24.39 \pm 3.28$  post-fasting, stating the p value as 0.0007. Pre and Post fasting changes in mean of Hemoglobin  $14.29 \pm 1.81$  and  $13.84 \pm 2$ , respectively. And pre- and post-fasting changes in fasting blood sugar were  $99.39 \pm 13.55$  and  $101.19 \pm 19.14$ , respectively. Significant improvements were observed in lipid profile: total cholesterol ( $p=0.018$ ), LDL ( $p=0.014$ ), VLDL ( $p=0.002$ ), and triglycerides ( $p=0.003$ ). Even though there was no significant change in the HDL levels and HDL/LDL ratio, overall improvement in the total cholesterol signifies the effect of fasting.

**Conclusion:** The findings of this study highlight that the 10-day religious fasting practiced during Paryushan Parv among Jain youth has significant beneficial effects on physical health parameters, particularly in improving lipid metabolism and reducing body mass index (BMI). These results reflect improvement in cardiovascular health profiles post-fasting. These results indicate that Jain fasting practices, when performed with adequate hydration and self-regulation, may confer metabolic advantages similar to those reported in intermittent fasting studies. Furthermore, beyond physiological benefits, such fasting is deeply rooted in spiritual discipline, promoting mindfulness, self-control, and inner purification — all of which may contribute to psychological well-being.

**Keywords:** Jainism, Paryushan Parv, fasting, metabolic health, physiological well-being, lipid profiles



## **Title: e-Sanjeevani: From Clinics to Clicks — Understanding the Digital Divide Across Age Groups in Pune**

**Authors:** Surg Lt Cdr (Dr.) Abhilasha Kumari, Col (Dr.) Harpreet Singh

**Affiliation:** Armed Forces Medical College

**Study Design:** Cross sectional study

**Background:** The eSanjeevani portal, India's national telemedicine platform, has expanded rapidly, especially during the COVID-19 pandemic. Understanding public perception across age groups is essential for equitable digital health adoption. Objective: To assess the awareness, usage patterns, satisfaction, and barriers to eSanjeevani among adult residents in an urban area in western Maharashtra using Telehealth usability questionnaire (TUQ).

**Methods:** A cross-sectional survey of 420 residents (aged 19–70 years) was conducted using stratified random sampling to ensure representation across age groups (19–30, 31–45, 46–60, 61–70). Data on demographics, awareness, usage, satisfaction, perceived usefulness, ease of use, trust, and barriers were analysed using chi-square tests, Kruskal–Wallis tests, and correlation analyses.

**Results:** Awareness was 62.6% overall, decreasing from 76.3% in the 19–30 age group to 34.7% in the 61–70 group ( $\chi^2 = 88.319$ ,  $p < 0.001$ ). Among aware participants, 34.6% had used the portal, with younger adults reporting higher satisfaction (mean  $4.09 \pm 0.72$ ) compared to older adults ( $2.80 \pm 0.84$ ,  $p < 0.001$ ). Major barriers were preference for in-person consultations (44%), technical challenges (32.6%), and internet connectivity issues (28.3%).

**Conclusions:** Significant age-related disparities exist in awareness and satisfaction. Tailored interventions focusing on older adults, simplified user interfaces, and trust-building measures are required for inclusive digital health access.

**Keywords:** e Sanjeevani, Urban society, Pune, Cross sectional study,



**Title:** Study on determinants and adoption of farmers' biosecurity strategy related to avian influenza among poultry farmers in a selected district of West Bengal.

**Authors:** Dr. Nibedita Bala, Dr. Dibyendu Halder, Dr. Rivu Basu

**Affiliation:** AIIH & PH, Kolkata

**Study Design:** Mixed method, Community-based

**Background:** Avian influenza (AI) is a major zoonotic threat causing significant morbidity and mortality among poultry and posing risks to human health. In India, backyard and small-scale poultry farms form the backbone of rural livelihoods but often lack adequate biosecurity measures. Understanding the determinants of biosecurity adoption is essential to design effective prevention strategies.

**Methods:** This community-based, explanatory sequential mixed-method (QUAN → qual) cross-sectional study was conducted among small-scale poultry farmers in the Hooghly district of West Bengal. Quantitative data were collected from 120 farm owners/workers, and qualitative data involved in-depth interviews (IDIs) with participants with poor practices. Associations were tested using chi-square analysis.

**Study Objectives:**

1. To assess the level of adoption of preventive biosecurity measures.
2. To find the determinants of farmers' biosecurity practices.
3. To explore the barriers to biosecurity strategy adoption.

**Results:** Only 21.7% of farmers demonstrated good biosecurity practices, with 43.3% falling into the poor practice category. A significant knowledge deficit was observed, with 40.0% of participants scoring 50% or less on the biosecurity knowledge assessment. Significant positive determinants ( $p \leq 0.001$ ) for good adoption included having poultry farming as a primary occupation, higher educational status, and better knowledge scores. Paradoxically, receiving formal training and farmers with  $\geq 3$  years of farming experience were significantly associated with poor practices. Qualitative findings revealed critical barriers: major financial constraints for proper caging/fencing, lack of time/knowledge for consistent personal hygiene, poor accessibility to veterinary health facilities, and the practice of consuming sick or deceased birds instead of proper disposal.

**Conclusion:** The adoption of essential biosecurity measures among small-scale poultry farmers in this highly vulnerable region is critically low. The low adoption rate is driven by systemic issues related to low knowledge, weak perceived severity of the disease, and significant financial and structural barriers. Urgent, targeted public health interventions focusing on low-cost hygiene alternatives, subsidized materials for bird isolation, and decentralized veterinary support services are essential to improve biosecurity compliance and mitigate AI transmission risk.

**Keywords:** Avian Influenza, Biosecurity, Small-scale Poultry, West Bengal

**Title: Experience of Bal Vikas and Poshan Clinic under Primary Health Centre Sarojini Nagar, Kings George Medical College, Lucknow**

**Authors:** Dr. Pratiksha Kanojia, Dr. Monika Agarwal

**Affiliation:** Department of Community Medicine and Public Health, KGMU

**Study Design:** Cross Sectional Study

**Background:** Malnutrition in children under five years remains a serious public health issue in India and contributes significantly to morbidity and mortality. Regular growth monitoring, proper nutrition counselling, and timely referral to higher centers are essential for early identification and management of malnutrition. The Bal Vikas and Poshan Clinic at the Primary Health Centre has been established to bring together preventive, promotive, and curative nutrition services at the community level.

**Objectives:**

- To describe the organizational structure and functioning of the Bal Vikas and Poshan Clinic under the Primary Health Centre.
- To evaluate the results of growth monitoring and nutrition counselling activities carried out through the clinic.
- To highlight the key experiences and challenges faced during implementation.

**Methods:** A cross sectional study was carried out at the Bal Vikas and Poshan Clinic linked to a Primary Health Centre Sarojini Nagar, KGMU, Lucknow, Uttar Pradesh between October 2024 and October 2025. Data were obtained from clinic registers, growth monitoring charts, and counselling records. Key indicator including the number of children screened, diagnosed with malnutrition, counselled, and referred to Nutrition Rehabilitation Centre's (NRCs) were analyzed. In addition, qualitative feedback from mothers and frontline health workers was collected to assess the clinic's acceptability and identify operational challenges.

**Results:** Awaited

**Conclusion:** The Bal Vikas and Poshan Clinic under the PHC provides an effective framework for the integrated management of childhood malnutrition by combining regular screening, caregiver counselling, and referral services. Strengthening these clinics with adequate human resources, regular monitoring, and community engagement can enhance the nutritional status of under-five children at the primary care level.

**Keywords:** Childhood Malnutrition, Growth Monitoring, Nutrition Counselling, Primary Health Centre (PHC), Bal Vikas

**Title: Development and Implementation of Life Skills Education Intervention among Secondary School Students in Singur.**

**Authors:** Dr. Dibyendu Halder, Dr. Rivu Basu, Dr. Bobby Paul

**Affiliation:** All India Institute of Hygiene and Public Health

**Study Design:** Quasi-experimental Study (pre-test post-test design)

**Background:** Introduction: Adolescence is a pivotal stage for developing psychosocial competencies, often referred to as life skills, which are crucial for adaptive behaviour and mitigating risk behaviours. Despite strong policy support for Life Skills Education (LSE) in India, there is limited context-specific research evaluating the impact of targeted interventions, particularly in rural settings like Singur, West Bengal.

**Objectives:** This study aimed to (1) assess the baseline life skills competency among secondary school students in Singur, (2) design and implement a targeted LSE intervention module based on identified needs, and (3) evaluate the impact of this intervention three months post-implementation.

**Materials and Methods:** A quasi-experimental study utilizing a pre-test post-test design was conducted with forty (n=40) Class 9 students from a selected high school in Singur. Baseline assessment, using the standardized Life Skills Assessment Scale (LSMT-S), revealed competencies were lowest in Self-awareness (25% emerging), Critical-Thinking (37.5% emerging), Decision-Making (27.5% emerging), and Problem Solving (15% emerging). A targeted intervention module was developed focusing on these four domains based on the WHO life skills module and the CBSE teacher training manual for class IX. The intervention consisted of two one-hour interactive sessions incorporating lectures, group activities, and discussions. The impact was evaluated through a post-test conducted three months following the intervention. Paired sample t-tests were used for statistical analysis.

**Results:** The mean total life Skills score significantly increased from  $158.63 \pm 16.65$  (pre-test) to  $163.6 \pm 16.70$  (post-test), demonstrating a statistically significant improvement ( $p < 0.001$ ). Statistically significant improvements were specifically observed in all four targeted domains: Self-awareness ( $p < 0.001$ ), Decision Making ( $p < 0.001$ ), Problem Solving ( $p < 0.001$ ), and Critical Thinking ( $p < 0.001$ ). Significant improvement was also noted in Creativity ( $p = 0.002$ ).

**Conclusion:** The context-specific life skills intervention effectively enhanced psychosocial competencies among secondary school students, particularly in the critical areas of Self-awareness, Critical Thinking, Decision Making, and Problem Solving. The statistically significant improvements observed three months post-intervention underscore the potential for school-based LSE programs to be integrated into the regular curriculum to foster healthy adolescent development.

**Keywords:** Life Skills Education, Adolescent Health, Quasi-experimental, Intervention.

**Title: Prevalence And Predictors of Cognitive Impairment in Older Adults: A Comparative Cross-Sectional Study Between Multimorbid and Non- multimorbid Older Adults in Western Gujrat.**

**Authors:** Dr. Mansi Sakurkar, Dr. Yogesh M

**Affiliation:** Shri. M. P. Shah Medical College

**Study Design:** Cross Sectional Study

**Background:** Cognitive impairment is a major concern among older adults in India, with limited data on its relationship with multimorbidity. This study assessed the prevalence and predictors of cognitive impairment in older adults in Western Gujarat.

**Methods:** In a cross-sectional study of 100 adults aged  $\geq 60$  years, cognitive function was measured using MoCA-India. Multimorbidity status and clusters were carried out. Associations were examined using multivariate logistic analysis.

**Results:** Cognitive impairment (MoCA  $< 24$ ) was found in 40% of participants, rising to 68.1% in those with multimorbidity. Risk of cognitive impairment was markedly higher among those with adverse body composition. Visuospatial, executive, and memory domains were most affected. Chronic disease clusters (diabetes, hypertension, NAFLD/OSA) corresponded with lowest cognitive scores. Conclusions: Cognitive impairment is highly prevalent and strongly linked to high visceral fat, and multimorbidity in elderly Indians. Integrated strategies targeting muscle preservation, reducing adiposity, and addressing chronic diseases are recommended to improve cognitive outcomes in this population

**Keywords:** Cognitive impairment, Multimorbidity, MoCA-India, Body composition

**DIGITALISATION, DATA AND DECISIONS**

*Youth at the Forefront of Health Tech.*

## **Title: Gender Equality in the Healthcare Workforce: Perspectives from Medical and Allied Health Students**

**Authors:** Dr. Ayushi Dubey, Dr. Neeraj Rai, Dr. Preeti Gupta

**Affiliation:** Community Medicine

**Study Design:** Cross-sectional, mixed-methods study

**Background:** Gender equality in healthcare institutions is crucial for ensuring fairness, inclusivity, and optimal professional growth. Despite institutional policies supporting equity, disparities in experiences and opportunities persist. Understanding how different professional groups perceive and experience gender-related issues is essential for promoting a more balanced and respectful work environment.

**Aim:** To explore the experiences and perceptions of gender equality among postgraduate medical students and nursing staff in medical colleges.

**Methods:** A cross-sectional, mixed-methods study was conducted from August to October 2025 among postgraduate medical students and nursing staff at a government medical college in Madhya Pradesh. Data were collected using a pre-tested, semi-structured questionnaire distributed via Google Forms. Quantitative data were analyzed using IBM SPSS version 29.0, applying descriptive and inferential statistics such as Chi-square test, t-test, and ANOVA. Qualitative data obtained from open-ended responses were analyzed thematically using NVivo software.

**Results:** A total of 210 participants (120 postgraduate students and 90 nursing staff) responded. Nearly two-thirds (64.3%) reported having experienced or observed some form of gender-based bias in clinical or academic settings. Female respondents reported significantly higher instances of perceived inequality in leadership opportunities and workload distribution ( $p < 0.05$ ). Nursing staff highlighted greater challenges related to respect and decision-making autonomy. Thematic analysis identified four key domains — perceived inequity in professional growth, differential treatment in workplace interactions, lack of gender-sensitization mechanisms, and recommendations for policy-level changes. Participants emphasized the need for awareness sessions, transparent appraisal systems, and grievance redressal mechanisms.

**Conclusion:** The study revealed persistent perceptions of gender inequity among healthcare professionals, particularly among female and nursing staff participants. Institutional interventions promoting inclusivity, accountability, and gender-sensitivity are essential to ensure an equitable academic and workplace culture.

**Keywords:** Gender equality, workplace bias, healthcare workforce, medical students, nursing staff



**Title:** A study on patient satisfaction level regarding healthcare delivery system

**Authors:** Dr. Arup Kundu, Dr. Rivu Basu, Dr. Bobby Paul

**Affiliation:** All India Institute of Hygiene and Public Health, Kolkata

**Study Design:** Institution based cross-sectional study

**Background:** Patient satisfaction serves as a vital proxy indicator of healthcare quality & efficiency. It reflects the patient perception of the care received, evaluation helps identify strengths and weakness with growing emphasis on quality assurance and accountability, as satisfied patients are more likely to adhere to treatment and utilize health care services effectively and thus contributes to the positive influence on health.

**Objectives-** Primarily to find out level of satisfaction regarding healthcare delivery system across study participants and secondarily to find out various factors those are determining the level of satisfaction.

**Materials and Methods-** An institution based cross-sectional study was conducted among adult patients attending out-patient department of selected Rural Hospital of North 24 Parganas Health District from February 2025 to September 2025. The study was approved by the Institutional Ethics Committee of AIHH&PH, Kolkata. Study participants(n=123) was selected by population census method and data were collected by face-to-face interview using a pre-tested, semi-structured questionnaire covering socio-demographic and perception of health facilities. The satisfaction was assessed with patient satisfaction questionnaire -18 incorporating the other dimension of healthcare delivery- waiting time, communication, facility cleanliness, availability of medicines. The overall satisfaction mean score were computed and association were examined using the chi-square test and considered statistically significant.

**Results-** Among the total participants, the median age was 45(24-66), 52% of the study participants were male. The median of total satisfaction score comes to 45(IQR-37.5-52.5%). 50.4% of the participants reports satisfaction in the upper half while remaining reported in lower half regarding overall healthcare services. Lower satisfaction level was noted in those who perceived non-availability of medicines as well as signages and they were found to have significant statistical relation ( $p<0.05$ ).

**Conclusion** – The overall level of satisfaction with healthcare delivery was found to be satisfactory, though certain areas require improvement. Addressing related to low satisfaction could enhance patient experience and trust in public health services.

**Keywords:** Health care delivery, patient satisfaction questionnaire, non-availability of medicine

## **Title: Facility Evaluation of an Outpatient Opioid Assisted Treatment (OOAT) Clinic in Rural Punjab**

**Authors:** Dr. Udit Singh, Dr. Rakesh Kakkar, Dr. Ramnika Aggarwal, Dr. Madhur Verma, Dr. Lincy Ableen Lakra

**Affiliation:** Department of Community and Family Medicine, AIIMS Bathinda

**Study Design:** Cross sectional mixed method study

**Background:** Substance use disorder poses a major public health challenge, globally as well as in India. The UNODC World Drug Report 2024 reports a 20% increase in global drug use in the last decade. It was estimated that 22,000 opioid related deaths occurred in India in 2017. The National Mental Health Programme has expanded community-based addiction services, including establishment of Outpatient Opioid Assisted Treatment (OOAT) centres to provide medication-assisted therapy (i.e. buprenorphine-naloxone based treatment) to reduce illicit opioid use. While these services mark a promising step towards addressing opioid dependence, their real-world assessment becomes essential.

**Objectives:** The objectives of this study was to assess the infrastructure and physical readiness of OOAT clinic, service delivery and explore staff perspectives on facilitators and challenges in OOAT service delivery.

**Methods:** This was a cross-sectional mixed method study conducted at OOAT clinic of two districts of Punjab. Data sources included an observational checklist assessing the infrastructure, privacy, patient flow and equipment; document reviews of patient register and drug inventory, along with in-depth interviews with key staff (medical officer, nurse, pharmacist, counsellor). Descriptive statistics were used for quantitative data. Qualitative data were audio recorded, transcribed, and thematically analysed. Ethical approval and informed consent were obtained.

**Results:** Infrastructure assessment showed a dedicated clinic space and waiting area. Human resources assessment showed the presence of staff nurse and counsellor, who were adequately trained in terms of medications dispensing, counselling and online data entry. No dedicated medical officer was posted to the clinic. Most of the staff was contractual and suggested a need for permanent appointment. There was no stock-out in the past 6 months. Inventory registers were complete and there was presence of buffer stock, which was also cross verified by CHC staff. In the in-depth interviews, staff shared that every month the patients need to go to civil hospital for verification, which becomes cumbersome for the patients and some become loss to follow-up. This process takes away their time from duty and thus hampers their livelihood. Urine test although is recommended on the portal, it is usually not prescribed in the clinic. The staff perceives that it is to be prescribed by medical officer. Counselling services could be improved as not all patients were counselled periodically. They were mostly counselled at the start of their treatment.

**Conclusion:** The study aimed to assess the ground reality of the working of OOAT clinic. There was adequacy of resources and manpower. Some areas for improvement exist, like periodic

counselling, advising urine testing and streamlining the verification processes, which may improve continuity of care and patient outcomes.

**Keywords:** Facility evaluation, mental health, rural health, opioid dependence, OOAT



**Title: 22 years of COTPA : Tobacco use, pattern and knowledge among adults for policy support**

**Authors:** Maj Abhinav Kumar Singh, Sqn Ldr Ajinkya

**Affiliation:** Department of Community Medicine, AFMC, Pune

**Study Design:** Cross sectional study

**Background:** Tobacco use remains a significant public health challenge globally. Understanding the interplay between tobacco use patterns, health knowledge, attitudes, and policy support is crucial for developing effective interventions. Objective: To examine the relationships between tobacco use status, health knowledge, social attitudes, and support for anti-tobacco policies among adults, with particular focus on stress-related factors and generational differences.

**Methods:** A cross-sectional survey was conducted among 327 adults aged 18-55 years. The structured questionnaire assessed tobacco use history, knowledge of health risks, attitudes toward tobacco use, social perceptions, and policy support. Data were analyzed using descriptive statistics and correlation analyses.

**Results:** Of 327 respondents, 44.3% had never used tobacco, 34.3% had tried tobacco occasionally, and 21.4% were past regular users. Current smoking prevalence was 37.0%. Strong negative correlation was observed between tobacco use and opposition to tobacco ( $r=-0.68$ ,  $p<0.001$ ). Knowledge of secondhand smoke harm strongly correlated with policy support (82% of those acknowledging harm supported strict policies). Stress management was the primary influence on tobacco use (31.5%), followed by habit/addiction (28.4%) and peer pressure (26.9%). Younger adults (18-25) showed the highest never-use rate (52.2%), while the 36-45 age group had the highest past regular use (27.8%).

**Conclusions:** The study reveals significant correlations between health knowledge, tobacco use behavior, and policy support. Stress emerges as the primary driver of tobacco use, suggesting the need for integrated stress management in cessation programs. Strong public support for anti-tobacco policies (82.6%) indicates readiness for comprehensive tobacco control measures.

**Keywords:** Tobacco use, smoking cessation, health knowledge, stress management

**Title: Nutritional Status and Socio-Demographic Correlates of Undernutrition Among Under-Five Children Attending Immunization Clinic of a Tertiary Care Centre in Central India: A Cross-Sectional Study**

**Authors:** Dr. Shravan Ambadkar, Dr. Charuhas Akre, Dr. Uday Narlawar

**Affiliation:** Department of Community Medicine, GMC, Nagpur

**Study Design:** A Cross-Sectional Study

**Background:** Undernutrition continues to be a major public health concern in India, contributing substantially to morbidity and mortality among under-five children. Understanding socio-demographic determinants is crucial for effective planning and intervention.

**Objectives:** To assess the nutritional status and identify socio-demographic correlates of undernutrition among under-five children attending an immunization clinic at a tertiary care centre in Central India.

**Methods:** A hospital-based cross-sectional study was conducted among 250 under-five children attending the immunization clinic from June to September 2025. Convenience sampling technique was used to include eligible children who attended the clinic during the study period and whose caregivers provided consent. Anthropometric measurements (weight, height/length, MUAC) were taken as per WHO guidelines, and nutritional status was assessed using WHO Child Growth Standards (2006). Socio-demographic data were collected through a pretested semi-structured questionnaire. Data were analyzed using SPSS version 26, applying Chi-square test and binary logistic regression, with  $p < 0.05$  considered significant.

**Results:** The prevalence of underweight, stunting, and wasting was 28%, 36%, and 15%, respectively. Undernutrition was significantly associated with low maternal education, lower socioeconomic status, larger family size, partial immunization, and inadequate complementary feeding practices. Children belonging to lower socioeconomic classes had about twice the odds of being underweight (AOR = 2.1; 95% CI: 1.1–4.2) compared to those from higher classes.

**Conclusion:** Undernutrition remains a significant problem among under-five children in Central India. Socio-demographic factors, particularly maternal education and socioeconomic status, play a crucial role. Targeted interventions focusing on maternal education, optimal feeding practices, and socioeconomic upliftment are essential to address this persistent challenge.  
**Keywords:** Undernutrition, Under-five children, Nutritional status, Socio-demographic factors, Central India

**Keywords:** Undernutrition, Under-five children, Nutritional status, Socio-demographic factors, Central India



**Title:** Telemedicine readiness among medical students in a post covid era: A study from a tertiary healthcare centre in Central India.

**Authors:** Dr. Vicky Aade, Dr. Sandeep Bhelkar

**Affiliation:** Department of Community Medicine, GMC, Nagpur

**Study Design:** Cross sectional study

**Background:** The COVID-19 pandemic has revolutionized healthcare delivery through telemedicine, necessitating a critical reassessment of medical education to foster digital literacy among future healthcare providers. This research aims to assess the readiness of medical students to engage with telemedicine, focusing on their technical skills, digital health literacy, and attitudes towards its implementation in clinical practice.

**Objectives:** 1. To evaluate the level of digital health literacy among medical students.  
2. To assess prior exposure to telemedicine and its impact on students' readiness.

**Methods:** A cross-sectional study was conducted using web-based questionnaire administered to medical students in a tertiary healthcare centre of central India, to collect data on various aspects of telemedicine.

**Result:** Awaited

**Conclusion:** Awaited

**Keywords:** Telemedicine, Medical Education, Digital Health Literacy, COVID-19, Medical Students

**DIGITALISATION, DATA AND DECISIONS**

*Youth at the Forefront of Health Tech.*

**Title: Assessment of Type 2 Diabetes Mellitus Risk Using the Indian Diabetes Risk Score Among Rural Adults Attending a Rural Health Training Centre in Central India: A Cross-Sectional Study**

**Authors:** Dr. Bhawane Shubham Sureshkumar, Dr. Sonali Patil

**Affiliation:** Department Of Community Medicine, Government Medical College And Hospital, Nagpur

**Study Design:** A Cross sectional study

**Background:** Type 2 Diabetes Mellitus (T2DM) is a leading non-communicable disease that significantly contributes to morbidity and mortality in India. Early identification of individuals at risk is essential for effective prevention and control. The Indian Diabetes Risk Score (IDRS) is a simple, reliable, and cost-effective tool designed for community-based screening of undiagnosed diabetes.

**Objectives:** To assess the risk of developing Type 2 Diabetes Mellitus (T2DM) among rural adults attending a Rural Health Training Centre (RHTC) in Central India using the Indian Diabetes Risk Score (IDRS) and to identify the distribution of risk levels within the study population.

**Methods:** A cross-sectional study among 236 adults aged  $\geq 30$  years at the RHTC, Nagpur, assessed diabetes risk using the Indian Diabetes Risk Score, which includes age, abdominal obesity, physical activity, and family history; participants were classified as low ( $<30$ ), moderate (30–50), or high ( $\geq 60$ ) risk.

**Results:** Among 236 participants, 166 (70.34%) were aged above 50 years. Of 115 females, 36 (31.30%) had a waist circumference  $\geq 90$  cm, and of 121 males, 37 (30.58%) had a waist circumference  $\geq 100$  cm. A total of 101 (42.97%) participants reported no exercise. Based on IDRS, 46 (19.49%) were classified as low risk, 102 (43.22%) as moderate risk, and 88 (37.29%) as high risk. The mean IDRS was 60.38, indicating a high overall risk of developing T2DM among adults.

**Conclusion:** The Indian Diabetes Risk Score is a simple, cost-effective tool to identify high-risk individuals for Type 2 Diabetes Mellitus in rural areas, enabling early detection and prevention of future disease burden. **Keywords:** Type 2 Diabetes Mellitus, Indian Diabetes Risk Score, Rural Adults, Screening, Non-Communicable Diseases

**Keywords:** Type 2 Diabetes Mellitus, Indian Diabetes Risk Score, Rural Adults, Screening, Non-Communicable Diseases

**Title:** Prevalence and related factors for pre-hypertension and hypertension amongst school going adolescents in a rural area of Central India: A cross-sectional study.

**Authors:** Dr. Chachere Vivekanand Bhadu, Dr. Sandeep Bhelkar, Dr. Uday Narlawar

**Affiliation:** Department Of Community Medicine, Government Medical College And Hospital, Nagpur

**Study Design:** A cross sectional study

**Background:** Adolescence is a crucial period of growth and maturation characterized by numerous physical and metabolic changes during which many adult health problems are established. In India, both undernutrition and excess weight are emerging as major health concerns. Increasing obesity among adolescents has led to more cases of high blood pressure, which may persist into adulthood and raise the risk of heart disease. Early screening and healthy lifestyle practices can help to prevent these problems. Regular monitoring of blood pressure, height and weight is advised. The present study focuses on identifying the prevalence and related factors of pre-hypertension and hypertension among rural school adolescents aged 10–19 years in Central India.

**Objective:** 1) To estimate the prevalence of pre-hypertension and hypertension among rural school adolescents age group.

2) To study some related factors among them.

**Methodology:** A cross-sectional study is being carried out amongst adolescents studying in randomly selected government school in rural area of Central India. Age is being determined from birth date from school registration records. Information of each student is being collected in a pretested questionnaire with details of age, sex, weight, height, blood pressure, class studying, duration of physical activity, dietary habits with junk foods. All eligible adolescents are being included in study by universal sampling method. Results; Study is going on so results awaited.

**Conclusions:** Awaited.

**Keywords:** Adolescents, BMI, Blood pressure, Hypertension, Obesity

**Title: Perception Of Reproductive Health Among School Going Adolescents In Field Practice Area Of Medical College In Western Maharashtra**

**Authors:** Dr. Aishwarya Ohri, Dr. Swati Ghonge

**Affiliation:** Dr. D. Y. Patil Medical College Hospital and Research Centre

**Study Design:** Cross- Sectional

**Background:** Adolescence, a transitional stage between childhood and adulthood, is characterized by significant physiological, psychological, emotional and social transformations. Lack of reproductive health knowledge contributes to early marriages, early childbearing, unsafe abortions hence leading to increased maternal morbidity and mortality.

**Objectives-** Our objective is to assess the knowledge and attitude of reproductive health in school going adolescents in field practice area with a focus on understanding the barriers and taboos related to sex education.

**Methods-** A cross-sectional study was conducted among a total of 150 school going adolescents. The study was done using a semi-structured questionnaire and the data entry was done in Microsoft Excel; statistical analysis were performed using Epi Info software version 7.2.6.0.

**Results-** In the present study comprising 150 participants, females were accounting for 51.4%, while males constituted 48.0% of the study population. Nearly all participants i.e. 98.6% were able to identify the basic reproductive organs of the human body. The majority of participants 94.0% reported being aware of the term “Sexually Transmitted Diseases” while only 6.0% were not aware of it. When participants were asked about their usual sources of information regarding sexual health the majority 38.6% reported obtaining information from friends followed by internet 30%. More than half of the participants 52.6% reported facing barriers in accessing sexual health information, while 47.4% did not encounter any such obstacles.

**Conclusion-** This study highlighted that understanding adolescent perceptions is crucial because it directly impacts behavior. The results suggest that despite growing awareness, significant challenges still exist in obtaining accurate and accessible sexual health information among the participants. Only when educators and policy makers understand the perceptions and needs of adolescents; only then they can design age-appropriate, culturally sensitive and effective reproductive health programme.

**Keywords:** Adolescents, Sex Education, Sexually Transmitted Diseases, Contraceptives

# **Title: Prevalence of Mental Disorders Among Couples with Infertility in India: A Systematic Review and Meta Analysis**

**Authors:** Dr. Vignesh R, Manya soni, Vijay Kumar, Sukhpal Kaur, Bijaya Kumar Padhi

**Affiliation:** PGIMER- Chandigarh

**Study Design:** Systematic Review & Meta analysis

**Background:** Infertility is a widespread global health concern with significant psychosocial consequences. In India, cultural expectations surrounding childbearing intensify emotional distress among infertile couples, particularly women. Despite multiple individual studies, comprehensive national evidence on the prevalence of mental disorders among infertile couples remains limited. This systematic review and meta-analysis aimed to estimate the pooled prevalence (PP) of depression, anxiety, and stress among infertile couples in India.

**Methods:** Following PRISMA 2020 guidelines, four databases including PubMed, Embase, Scopus, and Web of Science were systematically searched for studies reporting the prevalence of mental disorders among infertile couples in India. Eligible studies were cross-sectional, case-control, or cohort in design and used validated assessment tools. Data synthesis was performed using a random-effects model in R software. Heterogeneity was assessed using the  $I^2$  statistic, and publication bias was examined through funnel plots and Egger's test.

**Results:** Ten studies involving 1,698 participants were included. Among women, the PP of depression, anxiety, and stress was 60%, 55%, and 70% respectively. Among men, the prevalence of depression and anxiety was 37% each. Considerable heterogeneity was observed across studies, but no significant publication bias was detected.

**Conclusion:** Infertility in India is strongly associated with high psychological morbidity, particularly among women. Integrating mental health screening and counselling into fertility services, along with culturally sensitive interventions, is essential to enhance the emotional well-being of infertile couples.

**Keywords:** Reproductive Sterility; Infertility; Mental Disorders; Psychiatric Disorders; India.



**Title: A Cross-sectional Study on Musculoskeletal Disorders and its Associated Factors among Cycle Rickshaw Pullers in a Selected Urban Area of West Bengal**

**Authors:** Dr. Trinakusum Das, Dr. Rivu Basu, Dr. Bobby Paul

**Affiliation:** All India Institute of Hygiene and Public Health/Department of Preventive and Social Medicine

**Study Design:** Community based cross-sectional study

**Background:** Musculoskeletal disorders (MSDs) are one of the most common occupational health problems among manual labourers, particularly those engaged in physically demanding occupations such as cycle rickshaw pulling. In India, rickshaw pullers constitute an important segment of the informal workforce, often working under strenuous conditions with limited access to healthcare.

**Objectives:** To assess the prevalence of musculoskeletal disorders and identify associated sociodemographic and occupational factors among cycle rickshaw pullers in a selected urban area of West Bengal. **Methods:** A community-based cross-sectional study was conducted among 130 cycle rickshaw pullers selected through simple random sampling from list obtained from the selected rickshaw stand in the study area. Data were collected using a pre-tested structured questionnaire covering sociodemographic characteristics, work-related factors, and health status. The standardized Nordic Musculoskeletal Questionnaire (NMQ) was used to assess MSD symptoms in different body regions. Data were analysed using descriptive statistics and chi-square tests to identify associations between MSDs and selected variables.

**Results:** The prevalence of musculoskeletal disorders among respondents was found to be 69.6%. The most commonly affected body regions were the lower back (52.0%), knees (45.5%), shoulders (38.0%), and neck (29.5%). A statistically significant association was observed between MSDs and factors such as age ( $p<0.05$ ), duration of occupation ( $p<0.05$ ) and daily working hours ( $p<0.01$ ). Substance use was also contributing to higher MSD prevalence.

**Conclusion:** The study reveals a high burden of musculoskeletal disorders among cycle rickshaw pullers, largely influenced by occupational and lifestyle factors. The results of this study will help to formulate recommendations for ergonomic modifications, periodic health screening, health education on posture and rest, and inclusion of rickshaw pullers in urban occupational health programs will mitigate these risks.

**Keywords:** Musculoskeletal disorders, cycle rickshaw pullers, occupational health, cross-sectional study, West Bengal

**Title: Awareness of breast cancer among women and their willingness to participate in screening: a community-based study**

**Authors:** Dr. Sakshi Sankhla, Dr. Pragti Chhabra

**Affiliation:** University college of medical sciences and GTB Hospital

**Study Design:** Cross-sectional study

**Background:** Breast cancer is the most common cancer and the leading cause of cancer-related deaths among women globally and in India. Although largely preventable and curable with early detection, survival rates in India remain poor compared to high-income countries. Most women present at advanced stages, primarily due to low awareness and the lack of organized screening programs in the country.

**Objectives:** This study was planned to assess the awareness regarding breast cancer among women and their willingness to utilize screening services, in an urbanized village of Delhi.

**Materials & Methods:** A cross-sectional study was conducted among 70 women aged 30-65 years residing in an urbanized village of Delhi. An interviewer-administered questionnaire, adapted from the validated Breast Cancer Awareness Measure (BCAM) tool, was used to collect quantitative data on breast cancer awareness. The data were entered and analyzed using IBM SPSS Statistics version 20.0. Bivariate analysis was performed to assess the association between sociodemographic factors and awareness.

**Results:** Only 21.4% of the participants were aware of breast cancer, as they were able to recall at least one warning sign or symptom, with a lump or thickening in the breast being the most frequently mentioned (17.1%). Only 10.0% of women could recall at least one risk factor, most commonly alcohol consumption (8.6%). None of the participants could spontaneously mention any screening method for breast cancer; however, upon prompting, one in ten correctly identified clinical breast examination (CBE) and breast self-examination (BSE). Nearly one-fourth (24.3%) of women expressed willingness to undergo periodic CBE. Bivariate analysis showed that women with middle school or above education had 5 times higher odds of being aware of breast cancer.

**Conclusion:** The study revealed low awareness of breast cancer among women, with limited knowledge of warning signs and symptoms, risk factors, and screening methods, along with low willingness to undergo periodic screening. These findings suggest the need for targeted, community-based awareness and educational initiatives to promote early detection and improve screening uptake among women.

**Keywords:** Breast cancer, awareness, screening, willingness to participate.

**Title: Online Health-Seeking Behaviour and Digital Health Literacy Among College Students: A Cross-Sectional Study**

**Authors:** Dr. Laxmi Naorem, Dr. Pushpa Lokare

**Affiliation:** Government Medical College Akola

**Study Design:** Cross sectional study

**Background:** The rapid growth of digital technology has transformed how individuals access health information. College students, being highly internet-literate, are among the most active seekers of online health information. However, the accuracy of online sources and the digital health literacy required to critically evaluate them remain variable. Studies in India have shown that younger and more educated individuals frequently turn to the internet for health-related information, but reliability concerns and lack of verification skills lead to misinformation and self-medication risks.

**Objectives:** To assess online health-seeking behavior and digital health literacy among college students from diverse academic streams, and to identify factors influencing trust, utilization patterns, and decision-making based on online health information.

**Methods:** A cross-sectional study conducted among college students in Akola district. A structured, pre-tested questionnaire is used to collect data on sociodemographic characteristics, frequency and type of health information sought online, preferred platforms, verification practices, and digital health literacy using a validated scale, eHEALS. Data will be analysed using descriptive statistics and chi-square tests with significance at  $p < 0.05$ . Expected Outcomes: The study is expected to determine the extent of digital health literacy and highlight common gaps in evaluating online health information among youth. Findings may help guide digital health education initiatives and improve health-seeking decision-making among students.

**Results:** Awaited

**Conclusion:** Awaited

**Keywords:** Digital health literacy, Online health information, eHEALS, College students, Internet use

**Title: Occupational hazards Among Salon Worker in Western Maharashtra: A Cross-Sectional Study**

**Authors:** Dr. Soveli Suvechha Khuntia, Dr. Hetal Rathod

**Affiliation:** Dr. D. Y. PATIL Medical College and Research Center

**Study Design:** Observational study

**Background:** Salon workers face diverse occupational hazards such as chemical exposure, infections, musculoskeletal disorders, and stress. Prolonged standing, poor posture, and inadequate hygiene practices heighten risks, highlighting the urgent need for safety awareness, ergonomic practices, and strict hygiene measures to protect workers' health and well-being.

**Objectives:** To assess the work-related musculoskeletal symptoms among salon workers with a focus on the factors affecting their health.

**Methods:** An observational study was conducted among a total 64 participants, calculated with Winpepi 11.65. The study was done via a pre structured questionnaire and the data entry was done via google forms for salon workers working under PCMC, Pune, Maharashtra, India; statistical analysis was performed using Jamovi version 2.3.28.

**Results:** A total of 64 salon workers participated in the study, comprising 60.9% females and 39.1% males. The majority of participants (86.2%) reported experiencing multiple musculoskeletal disorders (MSDs). Among these, 67.2% reported lower back pain, 64.1% upper back pain, and 53.1% neck pain. Despite the high prevalence of MSDs, 79.7% of participants had never consulted a physician for their work-related musculoskeletal problems. Regarding work posture, 60.9% of salon workers reported maintaining the same posture for prolonged periods "Sometimes," while 29.7% did so "Always." Additionally, 57.8% of participants reported feeling stressed and anxious due to their work "Sometimes".

**Conclusion:** These findings highlight a substantial burden of musculoskeletal discomfort and work-related stress among salon professionals. On the basis of this study, the need for ergonomic interventions and occupational health awareness to prevent further progression of musculoskeletal disorders, reduce work-related stress, and improve overall worker well-being is strongly emphasized.

**Keywords:** Occupational hazards, Musculoskeletal disorders, Ergonomics, Anxious

# **Title: Patterns, Trends and Factors Associated with Labour Room Referrals Among Pregnant Women Admitted at a Secondary Care Hospital: A Retrospective Cohort Study**

**Authors:** Dr. Anishaa A, Dr. Abhisek Mishra, Dr. Swayam Pragyan Parida

**Affiliation:** Department of Community Medicine and Family Medicine, AIIMS, Bhubaneswar

**Study Design:** Retrospective Cohort Study

**Background:** Maternal mortality remains a significant public health concern in India despite improvements in institutional deliveries. Odisha continues to report a higher Maternal Mortality Ratio (153 per 100,000 live births) than the national average. Delays in recognizing complications, arranging transport, and providing timely referrals contribute to preventable maternal and neonatal morbidity.

**Objectives:** Primary: To assess the referral patterns and trends of labour room referrals at Community Health Centre (CHC).

Secondary: To identify the common maternal and foetal indications for referral; to assess maternal and neonatal outcomes following referral; and to evaluate socio-demographic, transport, pre-referral, and staff-related factors influencing referrals.

**Materials and Methods:** A hospital-based retrospective cohort study conducted on 183 pregnant women referred from the labour room of CHC in Eastern Odisha between January and December 2024. Secondary data were collected from the labour room referral register, supplemented by telephonic interviews for outcome data (N=48). Categorical and continuous variables were analysed using SPSS version 23.0, and associations were tested using chi-square analysis, with  $p < 0.05$  considered significant.

**Results:** Out of 1,202 deliveries conducted in 2024, 183 (15.2%) women were referred with the greatest number of referrals in the month of September and November and least in the month of April. Only 27.3% were referred within 30 minutes of admission. The most common indication for referral was Cephalopelvic Disproportion (CPD) (43.2%). The majority (76%) were referred to the District Headquarters Hospital (DHH). Key factors significantly associated with referral delays were using a private vehicle instead of an ambulance ( $p=0.001$ ) [OR=0.31; 95%CI:0.16-0.63] and a lack of pre-referral stabilization measures ( $p<0.000$ ) [OR=0.23; 95%CI:0.11-0.46]. Following referral, the majority (70.8%) of deliveries were by Lower Segment Caesarean Section (LSCS), and the stillbirth rate was 6.2%.

**Conclusion:** This study highlights critical gaps in obstetric referral practices at the secondary-care level. Strengthening pre-referral stabilization, improving transport readiness, and enhancing labour-room staff training are essential for ensuring timely referrals and reducing preventable maternal and neonatal morbidity.

**Keywords:** Obstetric Referral, Maternal Health, Secondary Care, Pre-referral Stabilization, Referral Delays



## **Title: Learning Disaster Management through Dumb Charades: A Game-Based Approach to Enhance Engagement and Retention among Undergraduate Medical Students**

**Authors:** Dr. Prabhati Priyadarshini Behera, Dr. Manish Taywade

**Affiliation:** Dept. of Community Medicine and Family Medicine, AIIMS Bhubaneswar

**Study Design:** Descriptive study

**Background:** Disaster management is an essential component of the MBBS curriculum; however, traditional lecture-based methods often fail to sustain engagement, interaction or translate into practical understanding. Active learning strategies have consistently demonstrated better outcomes in terms of learner motivation, participation, and knowledge retention. Dumb Charades which is a mime-based guessing game offers an innovative, low-cost approach to reinforce theoretical concepts among students and retention for a longer time.

**Objectives:** To enhance undergraduate medical students' understanding of the disaster management cycle using a structured, game-based "Dumb Charades" activity and to evaluate its impact on engagement, participation, and conceptual clarity.

**Materials and Methods:** A cross-sectional educational intervention was conducted among second-year MBBS students (n = 125) at AIIMS Bhubaneswar. Students were divided into four teams, each enacting disaster-themed films or series through silent gestures. After each act, facilitators led reflective discussions on the type of disaster, phases of the disaster cycle (mitigation, preparedness, response, and recovery), and public health actions: post-session feedback and a short quiz assessed learning effectiveness and student perception.

**Results:** Students showed high level of engagement and enthusiasm throughout the activity. The use of this interactive approach improved comprehension and long-term retention of the phases of disaster management. Feedback showed that students felt the session as stimulating, innovative in comparison to conventional didactic methods. Minor challenges like initial stage hesitation among some participants during activity were also observed. Conclusion Integrating the Dumb Charades, a mime-based game, into teaching disaster management for undergraduates effectively promotes active learning, teamwork, and understanding of complex public health concepts. This gamified pedagogical approach not only enhances student participation and knowledge retention but also provides a low cost and adaptable method for teaching-learning across different domains of medical education. Similar interactive strategies and Gamification tools may be incorporated and explored to foster engagement and deepen conceptual understanding among students.

**Keywords:** Gamification; Disaster management; Medical education; Experiential learning; Student engagement.

**Title: Prevalence of use of Complementary and Alternative Medicine (CAM) in diabetes in an Urban area of Goa.**

**Authors:** Dr. Krutika A. Kharbe, Dr. Vishal KK, Dr. Jagadish A. Cacodcar

**Affiliation:** Goa Medical College and Hospital, Bambolim-Goa

**Background:** Introduction: “Complementary” methods are used alongside conventional treatments, while “alternative” approaches are employed instead of mainstream medical practices. According to reports, the prevalence of Complementary and Alternative Medicine (CAM) ranges from 9.8% to 76.0% worldwide. CAM use is at rise in chronic diseases such as diabetes as many patients incorporate it alongside their conventional treatment with the expectations of quick recovery. Diabetes is a chronic debilitating medical condition and is associated with significant morbidity and mortality. Hence, the current study was undertaken to find the prevalence of CAM among diabetic patients.

**Objectives:** The objective is to estimate the prevalence of CAM use among diabetic patients in an Urban are of Goa and to identify the factors associated with it.

**Materials and Methods:** A community based cross-sectional study was conducted in an Urban area of Goa with a calculated sample size of 225. The participants were selected as per the inclusion criteria using cluster sampling. A pre-designed, semi-structured questionnaire was administered to the study participants in a face-to-face interview

**Results:** Among 225 diabetic patients, 16.9% were CAM users. Various CAM modalities are been used by the patients. Out of these, Ayurveda is most commonly used (57.9%), followed by herbal medicines (10.5%), homeopathy (5.3%), and ayurveda, yoga and naturopathy altogether (5.3%). A significant proportion (81%) of CAM users reported no adverse effects, but among those who experienced side effects, hypoglycemia was the most common one (60%), followed by diarrhoea (30%) and hyperglycemia (10%). The level of education and socioeconomic class were significantly associated with CAM use ( $p < 0.05$ ). The most common reason for opting CAM treatment was ease of availability and perceived absence of adverse effects. Friends constituted major source of information.

**Conclusion:** The prevalence of CAM is not very high in our study. However, disclosing the use of CAM to the treating physicians should be encouraged as majority of the patients did not seek any medical advice before initiating the treatment. A collaborative effort is needed by the government and health institutions to enhance the awareness of safe CAM use.

**Keywords:** Complementary and Alternative Medicine, Diabetes, Urban, Ayurveda, Community-based

**Title: Knowledge among Community Health Officers (CHO) on select Digital Health Portals in Ayushman Arogya Mandirs (AAM) across the state of Goa.**

**Authors:** Dr. Shefali Rama Harmalkar, Dr. Vanita G. Pinto da Silva

**Affiliation:** Goa Medical College

**Study Design:** Cross Sectional Study

**Background:** The Ayushman Bharat initiative has transformed Sub-Health Centres and Primary Health Centres into Health and Wellness Centres (HWCs), now rebranded as Ayushman Arogya Mandirs (AAMs). These are staffed by Community Health Officers (CHOs) - B.Sc. in Community Health, a Nurse (GNM or B.SC), or an Ayurveda practitioner, trained and certified through IGNOU/other State Public Health/Medical Universities. A critical dimension of their role is digital health integration. Multiple digital portals such as RCH, U-WIN, e-Sanjeevani, HMIS, ANMOL, and MCTS support maternal-child health, immunization, telemedicine and data management. Effective utilization depends upon CHO knowledge and skills. Despite their pivotal role, there is limited evidence on the knowledge of CHOs in effectively utilizing these digital platforms for service delivery in Goa.

**Objectives:** 1. To assess knowledge of CHOs regarding select digital health portals (RCH, U-WIN, e-Sanjeevani).  
2. To recommend strategies for training and capacity building in digital health for CHOs in Goa.

**Methods:** A cross-sectional study will be conducted across all Ayushman Arogya Mandirs (AAM) across the state of Goa, covering both districts (North Goa and South Goa) and island PHC areas. Approval will be obtained from the institutional ethics committee. Study participants include Community Health Officers (CHOs) currently posted at an HWC/AAM within Goa at the time of data collection. Universal sampling of all 189 CHO (112 BSc Nursing CHO and 77 Ayurveda Practitioner CHO) will be used. Data will be collected using a self-administered, semi-structured questionnaire to capture socio-demographic details and portal-specific knowledge and will be delivered online via Google Forms. Data will be entered in MS Excel and analyzed using SPSS software. Appropriate statistical tests will be applied.

**Results and Conclusion:** Awaited

**Keywords:** Community Health Officers (CHO), Ayushman Arogya Mandir (AAM), Digital Health Portals, RCH, e-Sanjeevani

**Title: Pattern of smartphone usage and its associated addiction behaviour among undergraduate medical students of Goa Medical College**

**Authors:** Dr. Rukmita Naik, Dr. Jagadish Cacodcar

**Affiliation:** Goa Medical College

**Study Design:** Cross sectional study

**Background:** .In recent years, smartphones have become an integral part of our daily lives, with exponential growth in their usage throughout the world including India . Notably, they have evolved beyond mere communication devices, now serving as powerful tool for academic advancement, commonly referred to as m-learning. A systematic review and meta-analysis among undergraduate medical students in India revealed the overall prevalence of smartphone addiction to be 60% The present study was thus conducted to study the patterns of smartphone usage among undergraduate students and to study the addiction behaviour associated with it.

**Objectives:** 1. To study the pattern of smartphone usage among the undergraduate medical students of Goa Medical College.  
2. To study the associated addiction behaviour

**Materials and methods:** This cross-sectional study was conducted among the undergraduate MBBS students of Goa Medical College from March 2025 to August 2025 . 370 students were included in the study. Convenience sampling was used. Data was collected using a semi-structured questionnaire via google forms and addiction behaviour was assessed using the Smartphone addiction scale- Short Version (SAS-SV). Data was analyzed using SPSS software

**Results:** Awaited

**Conclusion:** Awaited

**Keywords:** Smartphone, addiction

**Title: Knowledge and practices related to first aid measures for snakebites among people in Goa: a cross-sectional study**

**Authors:** Dr. Ira Sanjay Sahakari, Dr. Akshaya Sawant, Dr. Dhanya Jose, Dr. Annet Oliviera, Dr. Priyanka Furtado, Dr. Jagadish A Cacodcar

**Affiliation:** Goa Medical College

**Study Design:** Cross Sectional Study

**Background:** Snakebite envenoming is an important public health problem in low- and middle-income tropical countries. Venomous snakebites can cause serious local and systemic symptoms, such as tissue damage, systemic muscular toxicity, systemic bleeding, acute kidney injury, and death. The World Health Organization (WHO) recommends defining snakebite as a neglected environmental and occupational disease. Approximately 7400 people are bitten by snakes every day, resulting in 81,000 to 138,000 deaths per year and 400,000 people with permanent physical or mental disabilities.. The risk of an Indian dying from snakebite before age 70 is about 1 in 250, but notably higher in some areas. As per data by State Directorate Health Services, 3346 cases of snakebite were reported in Goa of which 27 succumbed between the years 2019-21.

**Objectives:** To assess Knowledge and practices related to first aid measures for snakebites among people in Goa.

**Materials and Methods:** This cross sectional study was conducted among 288 Goan people visiting OPDs of Urban Health and Training centre, St Cruz; Rural Health and Training Centre, Mandur; Goa medical College, PHC Cansaulim over a period of 3 months from September 2024 to November 2024 by Convenience sampling was used .Data was collected by using a semi-structured questionnaire and analysed using SPSS software.

**Results:** Among the study population, 87% of the participants correctly mentioned that patient should be taken to a hospital immediately and 43% were aware about the ASV (Anti Snake Venom) as the treatment for snake bite. However, majority of the participants responded incorrectly about application of tight band [Tourniquet] proximal to the bite site (78%), and 58% were unaware of dry bites.

**Conclusion:** Considering these results, it is recommended that steps must be taken to educate the general population. The basic first aid measures, the Do's and Donts' during a snakebite should be incorporated in the curriculum of primary education.

**Keywords:** Snake envenomation, first aid, snakebite, knowledge, practices



**Title: Ultrasound-guided Interscalene Brachial Plexus Block combined with Clavipectoral Fascia Plane Block**

**Authors:** Dr. Naik Vaishnavi Ramesh, Dr. Kunal Chari

**Affiliation:** Department of Anaesthesiology, Goa Medical College Bambolim

**Study Design:** Case Report

**Background:** Anaesthetic management of clavicle surgery is challenging due to dual innervation from Cervical Plexus (C3-C4) and Brachial Plexus (C5-C7).

**Objectives:** To demonstrate the efficacy of Interscalene Brachial Plexus Block (ISBPB) combined with Clavipectoral Fascia Plane Block (CPB) to achieve complete surgical anaesthesia for Open Reduction and Internal Fixation (ORIF) of a displaced midshaft clavicle fracture.

**Materials & Methods:** (Case presentation) A 40-year-old male with a displaced right midshaft clavicle fracture was scheduled for ORIF. Under ultrasound guidance, he received: ISBPB (10 mL of 0.5% Bupivacaine + 2% Lignocaine with Adrenaline) targeting C5-C6 roots, followed by CPB (10 mL of 0.5% Bupivacaine) into the clavipectoral fascial plane.

**Results:** The combined ISBPB and CPB successfully achieved complete surgical anaesthesia. The patient remained comfortable, hemodynamically stable, and required no supplemental general anaesthesia or rescue analgesics intraoperatively.

**Conclusion:** The Interscalene Brachial Plexus Block (ISBPB) combined with Clavipectoral Fascia Plane Block (CPB) approach provides comprehensive intraoperative anaesthesia and superior perioperative analgesia, making it a vital alternative to General Anaesthesia, especially for high-risk trauma patients.

**Keywords:** Clavicle Fracture, Interscalene Block, Clavipectoral Fascia Plane Block, Perioperative Analgesia



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