IIHMR organises workshop on ‘Up-Skilling of Orthopaedicians’

Our Bureau, Bangalore
Tuesday, January 30, 2018, 16:50 hrs. [IST]

The Institute of Health Management Research, Bangalore (IIHMR) in order to create a platform for Competency Enhancements among various healthcare providers, organised its first annual international workshop on ‘Up-skilling of Orthopaedicians for Enhancement of Competencies’. The 4-day event from January 25-29, 2018 held at its campus, was a hands-on workshop on the domain of up-skilling training and experiential learning in the field of orthopaedics.

According to the organisers, the event was the first of its kind in India; where over a 100 medical professionals from six countries participated. The 8 sessions saw 85 senior teaching faculty from 17 states of India share knowledge.

Orthopaedic surgical skill is traditionally acquired during training in an apprenticeship model that has been largely unchanged for nearly 100 years. Efforts must be made to learn from the experiences of developed nations and a very few open fora are organized in the developing countries for the dissemination of research findings of the developed nations in relation to skill development of clinicians, stated the organisers.

According to Dr. Usha Manjunath, Director IIHMR Bangalore, though we are not directly associated with the field of orthopaedics, being a premier healthcare institute, we wanted to provide a platform for various medical stakeholders. Orthopaedics is one of the key verticals in Indian healthcare due to growing number of total injuries that occur in accidents. So, we opted to mobilise our resources to contribute to upskill the orthopaedicians to deliver quality service.

Commenting on the need for the workshop Dr. Anil Sood, organizing chairman of the conference said, that the prime idea behind the conference is to build skills among our medical fraternity. With the sprawling number of tools and techniques in the orthopaedic field, this forum aims to aid practitioners to make the right choice of evidence based models for diagnosis. In fact, each session conducted here has key points to offer which can be incorporated in the medical practice.

‘It’s great to see a good number of orthopaedicians gathered together to seek knowledge. Even though medical industry has been incorporating varied technologies to serve better, it’s not complete without application of right skills to ace it. This effort by IIHMR is a good initiative taken in that line,’ said Takashi Maid, Director of Sakai World Hospital Bangalore.

“The theme of the workshop to upskill the orthopaedicians is very relevant to current day. When I entered medical field as general orthopaedician, all knowledge that I had came from an academic training and had no access to additional sources like workshops. Today the medical industry has advanced so much that, it is imperative for orthopaedicians to focus on sub-speciality and be upskilled. This conference which is uniquely organised by self-financing, is an admirable act trying to fill the gap of upskilling in the industry”, said Dr. K.S. Manjunath, Director, Bowing Institute of Medical Science.
IIHMR to Hold International Workshop on Up-Skilling of Orthopaedicians

The workshop will be first of its kind to be held in India; over hundred medical professionals from six countries are expected to participate.

The Bengaluru-based Institute of Health Management and Research (IIHMR) will be organising its first annual international workshop on ‘Up-skilling of Orthopaedicians for Enhancement of Competencies’ from January 25 to 28 to help clinicians enhance their skills in alignment with new advancements in the field of orthopaedics.

The first of its kind event in India will see participation of over a hundred medical professionals from six countries. The three-day event will have eight sessions and 65 senior teaching faculty from 17 states of India.

“Upskilling is a need of today and its equally important for all the verticals be it in healthcare, education, hospitality, technology, banking, etc. This workshop will enhance the existing skills of all the orthopaedicians attending the three day workshop and discuss best practices,” said Dr Usha Manjunath, Director, IIHMR Bengaluru.
IIHMR to hold its first annual international workshop on “Up-Skilling of Orthopaedicians”

Bangalore, January 25, 2018: Institute of Health Management and Research, Bangalore (IIHMR) is creating a platform for Competency Enhancements among various healthcare providers and organizing its first annual international workshop on “Up-skilling of Orthopaedicians for Enhancement of Competence” for four days from 25th January to 28th January 2018. This event is the first of its kind in India, where over a hundred medical professionals from six countries will be coming to participate. The three-day event will have eight sessions and sixty-five senior teaching faculty from seventeen states of India.

Orthopaedic surgical skill is traditionally acquired during training in an apprenticeship model that has been largely unchanged for nearly 100 years. Efforts must be made to learn from the experiences of developed nations and a very few open fora are organized in the developing countries for the dissemination of research findings of the developed nations in relation to skill development of clinicians. In this context, IIHMR is organizing the workshop for the benefit of Orthopaedicians and organizations to enhance the skills and broaden the prospects.
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IIHMR concludes 1st annual international workshop on “Up-Skilling of Orthopaedicians”

Bangalore 19 January 2018: Institute of Health Management and Research, Bangalore (IIHMR) in order to create a platform for Competency Enhancements among various healthcare providers, organised its first annual international workshop on “Up-skilling of Orthopaedicians for Enhancement of Competencies” for four days from 26th January to 29th January 2018 in the campus.
## IIHMR to Hold International Workshop on Up-Skilling of Orthopaedicians

**Headline**  
IIHMR to Hold International Workshop on Up-Skilling of Orthopaedicians  

**Link**  
http://modernmedihealth.com/2018/01/24/iihmr-to-hold-international-workshop-on-up-skilling-of-orthopaedicians/

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**G P Media**

**IIHMR to hold 1st annual international workshop on “Up-Skilling of Orthopaedicians”**

**Posted on January 26, 2018 by mediatoch540**

Bangalore January 25, 2018: Institute of Health Management and Research, Bangalore (IIHMR) is creating a ‘platform for Competency Enhancements’ among various healthcare providers and organising its first annual international workshop on, “Up-skilling of Orthopaedicians for Enhancement of Competencies” for four days from 25th January to 28th January 2018. This event is the first of its kind in India, where over a hundred medical professionals from six countries will be coming to participate. The three-day event will have eight sessions and sixty-five senior teaching faculty from seventeen states of India.

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Dr Usha Manjunath, Director, IIHMR Bangalore, said, ‘Upskilling is a need of today and its equally important for all the verticals be it in healthcare, education, hospitality, technology, banking etc. This workshop will enhance the existing skills of all the Orthopaedicians attending the three day workshop and discuss best practices.’
Union govt’s announcement of Universal Healthcare Coverage should be backed by concrete strategies: Experts

Hansita Vijey, Bangalore
Saturday, February 10, 2016 00:00:45 [IST]

The Central government’s announcement of Universal Healthcare Coverage in the budget should be backed by concrete strategies. This is because the country’s healthcare, unlike any other system such as the one in UK or US, has a lot of pitfalls. It is due to various reasons such as urban and rural divide, high out of pocket expenditure, under-developed medical device sector and many more, stated experts from the Indian Institute of Healthcare Management and the TIFAC Management Institute.

Indian budgetary system, which has always been vehemently criticised for its poor support towards healthcare, has made a historic move this time. One of its initiatives is the world’s largest government-funded healthcare scheme, The National Health Protection Scheme, under which health coverage of up to Rs. 5 lakh per family for secondary and tertiary hospitalisation has been offered. This was indeed an admirable act by government; Universal Health Coverage has been the concern of our country for many years now. Many people having no access to primary medical facilities have been devasting, they said.

According to Dr. Usha Manjunath, director of IIMR Bangalore, the move towards provision of a more comprehensive primary care by converting 1.5 lakh sub centres in Indian villages to health and wellness centres is a positive development given the lifestyle and chronic disease burden in the country.

The foremost menace that has been hovering around the healthcare system has been a lack of medical practitioners. In a bid to overcome this, 24 new government medical colleges are expected to be set up and upgrade the existing district hospitals in the country. Furthermore, announcing at least one medical college for three parliamentary constituencies is praiseworthy. But the government will need to pay heed to allocation of funds for Post Graduation, he added.

Although the overall budget is good; there is still a need to address few issues. Pointing out on low spend on healthcare Proff Dayashankar Mauliya, representing Health Management, TAPMI said that a higher allocation to health sector is much-needed. National Health Protection Scheme brings more resources and more families to healthcare system, however given the problems observed in similar government sponsored health insurance programs and apprehensions expressed by various reports, design and implementation will be crucial.

According to Dr. Manjunath, the most remarkable move by the government was throwing tight on burden of TB in India. According to WHO report of 2016, approximately 2.79 million suffer from TB in India. So budget’s move to allocate ₹500 per month for an individual’s treatment is a benefit.
HEALTHCARE GETS HEALTHIER

Deloitte Touche Tohmatsu India estimates that with increased digital adoption, the Indian healthcare market, which is worth around US$ 100 billion, will register a CAGR of 23% and reach US$ 380 billion by 2020. A number of factors have been adding vibrancy to the industry:

- The country boasts a good percentage of knowledgeable and experienced healthcare professionals.
- Since treatment proves to be more cost-effective in India in comparison to Western/European countries, medical tourism has received a big boost. India is experiencing 22-23% growth in medical tourism and the industry is expected to double in size from US$ 3 billion (April 2017) to US$ 6 billion by 2018.
- Healthcare services provided by private organizations can claim to be among the best in the world—diagnostics equipment and methods, use of telemedicine, and adoption of hospitality-like treatment by hospitals being a few examples.
- The Ministry of AYUSH aims to evolve India as the global epicentre for traditional medicine. While a total of 3,296 hospitals and 29,723 dispensaries offer AYUSH treatment, the All India Institute of Ayurveda (AIA) was established in October 2017.

FROM 'BEWARE!' TO AWARE

In a complex world, improved healthcare services are helping people lead a better lifestyle, even as the ever-increasing population makes an effort to seek enhanced medical facilities. This has primarily been facilitated by the increasing ability of people to afford better treatment as well as accessible insurance.

Investment in Healthcare Sector in India, a June 2016 paper by Nishal Desai Associates, states, “The domestic health insurance business at ₹12,606 crore (US$ 201 billion) accounts for about a quarter of the total non-life insurance business in the country. An increase in people opting for health insurance has been witnessed over a period of time. New products that also cover certain ailments not covered earlier are being more buyers of such insurance policies.”

But there is more to this cycle. Lifestyle being the keyword here, it also includes the population’s sedentary routine with little or no exercise and an erratic sleep schedule, along with an unhealthy diet and cigarette and alcohol consumption. In September 2017, World Health Organization (WHO) launched the NCDs (Non-Communicable Diseases) Progress Monitor, and stated that NCDs—primarily cardiovascular and chronic respiratory diseases, cancers and diabetes—are the world’s biggest killer, and claim the lives of 15

Dr Usha Manjunath, Director, IIHMR, Bengaluru.
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Why Indian patients spend more on out of pocket expenditure than others?

Dr Usha Manjunath   posted a day ago

Healthcare in India has not always been known for all the right things. Even though there has been a substantial growth in the field over the years, the prominent flaws facing it were never addressed. In fact, even after decades of independence, the centre’s mission to provide healthcare for all never succeeded successfully.
Mr Jaitley, show us the money

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Allocate more funds, increase expenditure: Health experts

PTI | Jan 21, 2018, 05:50 PM IST

With the Union Budget around the corner, two health experts have urged the government to allocate more funds to sectors such as family planning and non-communicable diseases, increase expenditure and make health insurance more inclusive.

Observing that the Centre had acknowledged that socio-economic development goals could only be achieved on the foundation of a healthy population, Poonam Muttreja, the executive director of the Population Foundation of India, said this belief was reflected in the National Health Policy.

National Health Policy 2017 promises to increase public health spending to 2.5 per cent of GDP in a time-bound manner and guarantees health care services to all Indian citizens, specifically to the underprivileged.
Allocate more funds, increase expenditure: Health experts

Health experts have pitched for more fund allocation in sectors such as family planning and non-communicable diseases.

Budget 2018 | Press Trust of India | Updated: January 24, 2018 13:30 IST

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The government had said it would increase spending on health from 1.15 per cent to 2.5 per cent of the GDP by 2025, she said, adding that it had also renewed its pledge on family planning by committing three billion dollars towards stabilising the population at a conference last year.

"However, during the last financial year (2016-17), only 60.7 per cent of the funds for family planning were spent," she said.
Union Budget 2018: Allocate more funds, increase expenditure, say health experts

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By: PTI | New Delhi | Updated: January 22, 2018 2:18 PM
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This year, she added, the health sector hoped to see an increase in budgetary allocation and expenditure.
Allocate more funds, increase expenditure: Health experts

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**Website Name** - Bullfax.com

**Headline**  
Allocate more funds, increase expenditure: Health experts

**Circulation**  
1355

**Link**  
http://www.bullfax.com/?q=node-allocate-more-funds-increase-expenditure-health-experts

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With the Union Budget around the corner, two health experts have urged the government to allocate more funds to sectors such as family planning and non-communicable diseases, increase expenditure and make health insurance more inclusive. Observing that the Centre had acknowledged that socio-economic development goals could only be achieved on the foundation of a healthy population, Poornima Vishwanath, the executive director of the Population Foundation of India, said this belief was reflected in the National Health Policy. The government had said it would increase spending on health from 1.15 per cent to 2.5 per cent of the GDP by 2025, she said, adding that it had also renewed its pledge on family planning by committing three billion dollars towards stabilising the population at a conference last year. However, during the last financial year (2016-17), only 60.7 per cent of the funds for family planning were spent, she said. This year, she added, the health sector hoped to see an increase in budgetary allocation and expenditure. “Along with an increase in budgetary allocation, we hope to see an increase in expenditure and strengthening of the health systems that would enable better utilisation of the family planning budgets, thereby facilitating the government to translate their vision into action,” she said. Dr Usha Manjunath, director of the Institute of Health Management & Research, Bengaluru, said the government had set short-term and medium-term targets for key health indicators and sought to bring down the Maternal Mortality Rate to 100.
Healthcare experts welcome Union Budget 2018

Our Bureau, Mumbai
Friday, February 2, 2018
16:19 Hrs. [IST]

The healthcare experts have welcomed the Union Budget 2018 presented in Parliament by Finance minister Arun Jaitley.

Welcoming the budget, CIIHMH president A. Veeriah said: “We applaud the Finance Minister’s call for a Swastha Bharat Smridha Bharat (Healthy India Progressive India) and focus on healthcare delivery and access. The National Health Protection Scheme (NHPS) and enhancing the cover to Rs. 5 lakhs from Rs. 30,000 to cover 100 million families per year for secondary and tertiary care hospitalization, is a step in the right direction. Further, we are encouraged by the path-breaking intervention on healthcare access through an allocation of Rs. 1,200 crore for the flagship Ayushman Bharat programme under which 1.5 lakh health and wellness centres will provide free essential drugs and services. The announcement of upgrading district medical colleges to twenty four (24) new government medical college & hospitals translating to one medical college per three (3) parliamentary constituencies will also improve access.”

Welcoming the budget, Dr Usha Manjunath, director, Indian Institute of Health Management Research (IIHMR), Bengaluru, said: “All of the provisions in Budget 2018 with respect to healthcare are related to need areas. Investment for health and wellness centers are very welcome given the lifestyle and chronic disease burden in the country. Another welcome move is the increase of National Health Protection schemes coverage to Rs. 5 lakh for poor families. Nutrition for TB is also accepted well. However, the hope is that the operational issues in disbursement get worked out fast enough to make an impact.”

Prof. Dnyansinhrao Meunra, Professor- Healthcare Management at TAPMI, said: “Given low public spending on healthcare, higher allocations to health sector is much needed and welcome step. National Health Protection Scheme brings more resources and more families to healthcare system, however the problems observed in similar government sponsored health insurance programs and apprehensions expressed by various reports, design and implementation will be crucial.”
Malnutrition stalks city kids

ABILASH MARISWAMY | DC
BENGALURU, FEB. 10

With Bengaluru’s population spiraling it is hardly surprising that it is ranked among India’s 10 most populous cities by a recent IndiaSpend report. But here’s the shocker: The report says the IT City is not able to feed its children adequately with one in four being malnourished. The data shows that children under five in the city are more prone to being stunted or underweight.

The national survey found that almost 30 per cent of children in the city were stunted, 26 per cent were acutely malnourished, 11 per cent below five were severely malnourished and 28 per cent were underweight.

Besides Bengaluru, the survey covered Mumbai, Delhi, Hyderabad, Ahmedabad, Chennai, Kolkata, Surat, Pune and Jaipur. Combined, these cities make up 53 per cent of India’s population and 4.1 per cent of the child population aged 0 to 70 months.

“Nutrition and protein deficiency is the main reason. There should be 60 per cent of carbohydrate and 30 per cent of protein intake among children,” explains Dr Purmina, a paediatrician of a city hospital.

The survey was carried out to collect the nutrition status of children aged 0-59 months living in the ten most populous cities of the nation. Over 12,000 mothers were interviewed and heights and weights of over 14,000 children were measured.
Karnataka reported 68K new TB cases last year

ABILASH MARISWAMY | DC
BENGALURU, MARCH 24

The World Tuberculosis Day is observed on March 24 to create awareness on the global epidemic and steps to eliminate the disease. This year’s theme, “Wanted: Leaders for a TBB-free World”, focuses on building commitment to end TB.

A recent study revealed that there is an increase in active TB cases, with Karnataka reporting 68,000 cases last year.

Dr Vivek Anand Padegal, director, Pulmonology Fortis Hospital, said, “Multi-Drug Resistant Tuberculosis (MDR-TB) has now become a major public health concern which health authorities are struggling to cope with. Tuberculosis is one of the biggest communicable diseases troubling the authorities today.” He said that MDR-TB does not respond to even the most powerful anti-TB drugs.

Reports highlight the struggle in identifying TB cases. India TB report 2018, released by the central government, states that reaching to the patients was the key priority. "Identifying TB is becoming difficult because many patients stop their medication half-way due to depression and some isolate themselves,” said Dr Sudarshan K.S., assistant consultant, Pulmonology Fortis Hospital.

According to the World Health Organisation, India reported the world’s highest number of TB cases, of which at least half are treated in the private sector and their diagnoses and treatment are not noted in government records.

The Revised National Tuberculosis Control Programme (RNTCP) does not have the accurate numbers on TB detection, treatment and cure rates in the private sector.

To deal with cases that are not notified, the Union health ministry recently issued a notification, announcing that all the doctors, laboratories and chemists – including those in the public sector - can face a jail term of between six months and two years under Section 289 (negligent act likely to spread infection of disease dangerous to life) of the IPC, if they fail to report cases.

The rule has left many activists and doctors unhappy in the city. “Criminal punishment of private doctors and chemists appears to be harsh and not in the right spirit of a healthy collaborative partnership to fight TB. All proceedings for criminal punishment will also divert resources of the government, which is futile for fight TB on the ground,” said Dr Usba Manjunath, director, IIHMR.

Dr Sudarshan said it’s a welcome move and will help to incentivise medical practitioners for notifying TB cases.

A senior health department official said, “Even after TB becoming notifiable disease in 2012, not all private practitioners are reporting cases to our department. Through the active case finding (ACF) campaign across Karnataka, we are trying to create more awareness and reach out to remote areas.”
Most infants in city undernourished: Survey

ABILASH MARISWAMY | DC
BENGALURU, MARCH 25

Bengaluru may have a reputation as a progressive city, but it doesn't fare very well when it comes to the health of its children.

Going by the National Family Health Survey (NFHS-4), only 18.9 per cent of infants between six and 23-months old in the city receive an adequate diet. The figure is only slightly better at 8.2 per cent for the state as a whole.

City doctors, however, don't seem very surprised at this state of affairs. "Lack of knowledge about the various schemes is one of the reasons. Also, a lot of mothers are not even aware of what kind of nutritious food their children need," says Dr Purnima, a paediatrician in a city hospital, pointing out that it is important for mothers to breastfeed for up to six months.

Dr Usha Manjunath, director, Institute of Health Management Research, observes that "slum children, and children of poverty-ridden migrant workers and urban poor struggle for the minimum nutrition required.

"Food practices and poverty affect the diet. Most mothers feed children whatever they cook at home. For instance, many mothers feed them only rice, which only helps them gain carbohydrates," says Dr Usha. "It's a serious problem as the United Nations Children's Fund (UNICEF) emphasises that 0 to 6 years is crucial for the brain development of a child and it can be hindered by a lack of adequate nutrition."

The organisation warns that lack of nutrition is particularly harmful during childhood, which is a period of rapid growth.

But defending the government's role in the matter, a senior official of the Department of Women and Child Welfare says there are many services under the Integrated Child Development Services Scheme (ICDS) that provide supplementary nutrition, nutrition and health education for women and also regular health check-ups.

"All these are delivered through anganwadis across the state. Information assistance too is available for mothers to help them give their children the right food," he adds.
The functioning of many palliative care cells in the city has been badly hit due to lack of funds and staff, Dr M.A. Balashankaramaya, CEO of the Swami Vivekananda Youth Movement, a health and education development organization said. “These palliative care cells are monitored under the supervision of the state government. However, many of these cells are understaffed and have issues with funds and are therefore failing to serve their purpose.”

The state government had introduced the palliative care policy in August 2015 to reach out to terminally ill patients regardless of social and economic status. Karnataka was the third state in the country to adopt this policy after Maharashtra and Kerala.

Dr Y.B. Manjunath, Director of Institute of Health Management Research (IIMR), said, “At the onset, palliative care cells being recently implemented are understaffed and receive suboptimal funding.”

There are more than 60% deaths in the country due to morbidity and moribundity from non-communicable diseases, according to the World Health Organisation (WHO).

It also stated that there are around 20,000 patients in every district around the world who are in need of palliative care, but only 1% receive it. Experts said that palliative care should be introduced early so that patients receive holistic care. Patients, doctors and other care providers have to understand that not only cancer patients, but those afflicted by tuberculosis and HIV will also benefit from it.

“No lack of funds”

However, Dr P.V. Ramnamani, coordinator of the palliative care policy, refuted the allegations against the department. “There was no issue with funds at initial stages when the policy was introduced. Sometimes there is a slight delay because the funds need to be transferred into NIM (National Institute of Medical Sciences) under which the palliative policy is made.”

She also said that palliative care cells will soon be introduced in five districts (Bangalore rural, Mysuru, Davangere, Hassan, and Mandya) in a couple of months. “It’s also necessary to incorporate palliative care in the curriculum of medical, nursing and paramedical courses at graduation level itself,” Dr Ramnamani added.