

IIHMR New Delhi, works with a mission of improving standards of health through better management of healthcare and related programmes, prepare students for managerial positions with a focus on national and international healthcare management



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UPCOMING CONFERENCES

- 1) International Conference & Exhibition on Proteomics & Bioinformatics

Date: 6th - 8th June 2011

Venue: Hyderabad, Andhra Pradesh, India

Website:

<http://www.omicsonline.org/proteomicsbioinformatics2011/>

- 2) GCLP Workshop 2011

Date: 24th - 26th June 2011

Venue: Chennai, Tamil Nadu, India

Website:

<http://yrgcare.org/gclp/index.php>

- 3) Meditec Clinika 2011

Date: 2nd - 4th July 2011

Venue: Bangalore, Karnataka India

Website:

<http://www.hmcindia.in>

SYNAPSE..... Monthly health e-newsletter

HOSPITAL AND HEALTH INSIGHT OF THE MONTH

HEALTH BUDGET MAY GO UP BY 2 PERCENT

Union Health Ministry announced that total allocation for health sector is likely to be 2-3 percent of our GDP during 12th five year plan. According to a lancet study, health services in India's public sector are not adequate, whereas the private sector cater to only a small section because of high cost and zero penetration in rural areas. Number of doctors and nurses are going to be increased to ensure better services. During 2004-05 public spending on health was just 0.94% of GDP, so this badly needs to be taken care of.

MENTAL HEALTH INCLUDED AS NON-COMMUNICABLE DISEASE THROUGH INDIA'S EFFORT

India achieved a major success on the global platform by inclusion of mental health in the list of non-communicable diseases (NCDs) at the first Ministerial Conference on Healthy Lifestyles and Non-communicable Disease Control in Moscow. The principal non-communicable diseases are the leading causes of preventable morbidity and disability. By 2030, the NCDs are estimated to contribute 75 per cent of global deaths. India is also working towards framing a mental health policy based on internationally-accepted guidelines. The evidence-based policy will state the guiding values, principles and objectives of such a policy and identify priority areas for action.

JOINT EFFORT TO COMBAT VECTOR BORNE DISEASES

In view of the recent spate of vector borne diseases in the country, Government of India and civil society have joined hands to come up with an intervention module for the prevention and control of vector borne diseases. A draft module was released on April 6, 2011 at a national convention on vector borne diseases organized by HEAL Foundation in association with the Union Ministry of Health and Family Welfare and Ministry of Urban Development at New Delhi.

TUBERCULOSIS IS KILLING WOMEN SILENTLY

Not widely known but tuberculosis is the third major killer of women aged 15-44 years. It is accounting for approximately 700,000 deaths a year globally and causing illness in millions more. TB is more common during and immediately after pregnancy, possibly due to the changes in immunity that occur during that time. This not only poses a risk to the life of the woman but also increases the chances of death in the newborn baby. TB can cause infertility and chronic infections of the reproductive system. Women living with HIV are 10 times more susceptible to TB than HIV uninfected women. Screening and treatment of common infectious diseases

EVENTS AT IIHMR

1. Online Courses in Healthcare IT launched by IIHMR, New Delhi in collaboration with OTECH –

- Health Imaging and IT standards.
- Introduction to Medical Digital Imaging.
- Introduction to PACS.
- PACS workflow.

For details visit-

<http://www.iihmrdelhi.org/HealthcareIT/index.htm>

2. CIPM

IIHMR, New Delhi launches Online Web based Course of Certificate in Project Management (CIPM) - specialization in Healthcare.

For details visit-

<http://www.cepm-iihmr.org>

3. GSS Practices in Healthcare 2011
Date: 16th July 2011
Venue: United Services Institution of India (USI), Rao Tula Marg, New Delhi.

For details visit -

<http://gsshealth2011.net/>

MDP@IIHMR

Forthcoming MDP's at IIHMR

- Workshop on Business Development Strategies and Skills for Healthcare Executives
23rd June 2011
- Integrated Open Source District Hospital Information System
22nd August - 2nd September 2011
- Database Management using Rational & Object Relational Databases
12th - 17th September 2011

For MDP details contact:

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(TB, HIV and Malaria) should be integrated into key entry points to the health system for women, notably antenatal care, family planning services and child immunization visits.

HARYANA TO PROVIDE QUALITY HEALTH SERVICES BY INTRODUCING DISTRICT HOSPITAL MANAGEMENT SYSTEM

The Haryana Government has decided to introduce a new District Hospital Management System (DHMS). "Through this people will get quality health services and the campaigns of the Health Department will be implemented more effectively", Haryana Health Minister Mr. Narender Singh said. Presiding over a meeting along with Chief Parliamentary Secretary, he directed all the Civil Surgeons to submit the progress report of their respective districts under the DHMS and said the Department would monitor their performance. Mr. Singh told the Civil Surgeons to effectively implement the Pre-Natal Diagnostic Techniques Act and adopt zero-tolerance for sex determination tests. He asked them to ensure availability of doctors in the Out Patient Departments of the hospitals and submit regular reports about those who remained absent so that strict action could be taken against them.

GORY PICS ON TOBACCO PACKS FROM DECEMBER FIRST

Union Health Ministry issued notification to put four gory pictures of oral and lung cancer on packs of tobacco products. India first introduced pictorial health warning on tobacco products on May 31, 2009 but found less effective on consumers of tobacco products. Tobacco consumption cause premature death in most of the tobacco smokers and is responsible for thirteen percent death of people in India and it is estimated that there are about 250 million tobacco products users in the country . Warning will be rotated every two year, aiming to discourage people from consuming tobacco.

GLOBAL NEWS

WHO LAUNCHES CAMPAIGN TO CUT TRAFFIC FATALITIES

Traffic accidents are the ninth - leading cause of death worldwide and are expected to move to fifth place over the next 25 years. This is the leading killer of teenagers and young adults, causing more deaths among that group than AIDS. More than 90 percent of traffic fatality victims are in the developing world, and half are motorcyclists, bicyclists or pedestrians. The need is to create demand for safer roads, stricter laws and better driving practices in countries where the toll of traffic injuries is unusually high. It would provide transportation and public health agencies at these places with a tool kit of interventions like seat belt laws, lowered limits for alcohol-impaired driving, dedicated bike lanes, license restrictions for teenagers, improved ambulance service - that have proved lifesaving elsewhere.

NEW COMMITMENTS TO SAVE WOMEN AND CHILDREN

Sixteen countries announced new commitments to reduce maternal, newborn and child mortality, as part of the Global Strategy for Women and Children Health. The commitments, made with the support of UNAIDS, UNFPA, UNICEF, the World Bank and WHO (collectively known as 'The Health 4+' agencies), focus on measures proven effective in preventing deaths, such as increased contraceptive use, attended childbirth, improved access to emergency obstetric care, prevention of mother to child transmission of HIV, and childhood immunizations."At least ten of the 16 countries making new commitments want to increase the number of midwives. Midwives deliver babies safely, provide family planning, nutrition advice, and

DO YOU KNOW?

1. World Thalassaemia Day was observed on 8th May
2. World No Tobacco Day was observed on 31st May
3. More Than Half a Billion People are Obese: WHO
4. India's Population to peak at 1.7 Billion in 2060: UN Report
5. Endosulfan has chronic adverse effects on humans
6. Headaches are the most common health disorders across the world: WHO
7. Rohtak district announces Rs One Lakh award for sex test tip-offs

services for the prevention of HIV/AIDS," says Dr. Babatunde Osotimehin, the Executive Director of UNFPA.

GLOBAL FUND PROGRAMS SEE BIG EXPANSION IN TREATMENT AND PREVENTION OF THREE DISEASES

The Global Fund to Fight AIDS, Tuberculosis and Malaria disbursed a record US\$ 3 billion in 2010. This helped boost the number of people on antiretroviral therapy in Global Fund-supported programs to an estimated 3 million; increase the number of people treated for multidrug resistant TB by half and contribute to a big expansion in malaria treatment and prevention. These remarkable results are part of "Making a Difference", a new report which shows in detail how the Global Fund has helped to save 6.5 million lives between 2002 and 2010. By 2015, Global Fund-supported programs are expected to provide 6 million people with antiretroviral treatment – doubling the number of people assisted today. In 2010 the Global Fund successfully implemented a new policy which aims to reduce the number of existing grants by consolidating them into single streams of funding. This is intended to simplify management of grants for recipient countries.

RECENT RESEARCHES

BIDI MORE HARMFUL THAN CIGARETTE: STUDY

A study published in the prestigious medical journal "Cancer causes and control" S proved that Bidi and other forms of tobacco are more harmful than cigarettes. The study found that the incidence of oral cancer in Bidi smokers is 42 percent higher than in cigarette smokers. The report showed that Bidi is harder on the lungs than cigarettes. Beside Bidi contains more particulate matter, nicotine and higher amounts of chemicals than cigarette. It is a popular perception that Bidi is natural and hand rolled, so it is less dangerous than cigarettes.

MIDDLE-AGED OBESITY CAN TRIGGER ALZHEIMER'S

Researchers in Sweden concluded that middle-age obesity could lead to memory problems. Study author Weili Xu from Karolinska Institute in Stockholm, said half of adults in European countries such as Britain could be at risk because they were overweight or obese, the journal Neurology reports. The latest evidence shows that maintaining a 'healthy' weight is the best way to avoid an increased risk of mental state in later years. Experts do not know exactly why obesity affects the risk of dementia, although hardening of the arteries and high blood pressure play a role. New dementia treatments could be available in 10 years using six drugs already available for other conditions, says the Alzheimer's Society.

TAI CHI MAY HELP PEOPLE AGE GRACEFULLY

In a paper, published in the British Journal of Sports Medicine, it has been shown that Tai Chi, an ancient Chinese Martial Art helps in fall prevention and improvement of postural balance in older people. It combines deep breathing and relaxation with slow and gentle movements which has some meditative effects for improving psychological health. The researchers, who looked at 35 systematic reviews of Tai Chi published between 2002 and 2010, found "convincingly positive" evidence that Tai Chi helped elderly people improve their sense of balance and psychological wellbeing. However, the ancient exercise is found to be "ineffective" in treating cancer, and rheumatoid arthritis.

CURRENT TOPIC

Bio - Medical Waste (Management and Handling) Rules, 1998

TOPIC IN NEXT ISSUE

64th World Health Assembly Meet

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Email: synapse@iihmrdelhi.orgWeb: www.iihmrdelhi.org**BIOMEDICAL WASTE (MANAGEMENT & HANDLING) RULES 1998 AS AMENDED THEREAFTER**

It came into force on 20th July 1998. In exercise of the powers conferred by Sections 6, 8 & 25 of Environment (Protection) Act, 1986, the Central Govt. notified the rules for the management and Handling of biomedical wastes generated from Hospitals, clinics, other institutions for scientific management of Biomedical Waste. Some of the salient features of these rules are:

1. The rules apply to all persons who generate, collect, receive, store, transport, treat, dispose, or handle bio medical waste in any form. It is the duty of every occupier of an institution generating biomedical waste like hospital, nursing home, clinic, dispensary, veterinary institution, animal house, pathological laboratory, blood bank to take all steps to ensure that such waste is handled without any adverse effect to human health and the environment.
2. The Segregation, Packaging, Transportation and Storage of bio-medical waste shall not be mixed with other wastes. It shall be segregated into containers/bags at the points of generation in accordance with Schedule II. The containers shall be labeled according to Schedule III (Label for biomedical waste containers/bags). No untreated bio-medical waste shall be stored beyond a period of 48 hours. If a container is transported from the premises where biomedical waste is generated to any waste treatment facility outside the premises, the container shall, apart from the label prescribed in Schedule III, also carry information prescribed in Schedule IV (Label for transport of biomedical waste containers/bags).
3. Every occupier of an institution generating, collecting, receiving, storing, transporting, treating and /or handling Biomedical Waste shall apply on Form 1 (Application for Authorization/Renewal of Authorization) for Authorization to the Board.
4. Any person aggrieved by an order made by the DPCC under these rules may within thirty days from date on which the order is communicated to him, prefer an appeal to the Financial Commissioner, Govt. of NCT of Delhi who is appointed as Appellate Authority under the rules. For violating the provisions of these Rules, the Board can file a complaint under section 15 of EP Act which provide for imprisonment which may extend upto 5 years with fine. The Board can also have directions for closure of any defaulting hospital/clinic/institution under section 5 of EP Act as per powers delegated by the Central Govt.

COLOUR CODING AND TYPE OF CONTAINER FOR DISPOSAL OF BIOMEDICAL WASTES (SCHEDULE II)

Colour Coding	Type of Container -I Waste Category	Treatment options as Per Schedule I
Yellow	Plastic bag Cat. 1, Cat. 2, and Cat. 3, Cat. 6.	Incineration/deep burial
Red	Disinfected container/ plastic bag Cat. 3 Cat. 6, Cat.7.	Autoclaving/Microwaving/Chemical Treatment
Blue/White Translucent	Plastic bag/puncture proof Cat. 4, Cat. 7. Container	Autoclaving/Microwaving/Chemical Treatment and destruction/shredding
Black	Plastic bag Cat. 5 and Cat. 9 and Cat. 10. (solid)	Disposal in secured Landfill

References:

http://www.dpcc.delhigovt.nic.in/act_bmw.htm<http://hspcb.gov.in/BMW%20Rules.pdf><http://envfor.nic.in/legis/hsm/biomed.html>

NOTE: The newsletter is open for inclusion of any information or advertisement; however selection of information will be governed by the SYNAPSE Team, IIHMR, New Delhi

IF YOU DO NOT WISH TO RECEIVE FURTHER ISSUES, KINDLY MAIL US.