



AMITY  
UNIVERSITY



AMITY INSTITUTE OF HOSPITAL ADMINISTRATION  
PRESENTS

# SVAVALAMBAN

NOVEMBER 2022 ● ISSUE 2

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QUATERLY RELEASE

# HEAD OF THE INSTITUTION, AIHA



***Prof (Dr) Ajai Kumar Jain  
MBBS, PGDMLS, MHA, LLB, PhD***

Healthcare around the world is in the midst of massive transformation. We have partially overcome a pandemic, and we believe as a community of health care we should dedicate all our efforts to educating future contributors and leaders for a stronger and healthier nation. From huge data to policy, artificial intelligence significantly is now a part of the health care industry. Machine learning (ML) has also made its place, these two elements together are not just improving health outcomes, but also improving burnout situations. Technology is the future, creating waves of change in the health industry and we motivate our students to be equally active in it. We encourage a nation free of fear and better health care management. We look forward to learning, exploring, and growing together. We can move closer to a healthier nation with knowledge and practice.

Happy reading.

## FACULTY COORDINATOR, AIHA

**Dr. Archana Koul**  
**BDS, MHA**

"We are not "just" teachers, we are the managers of the world's greatest resource: CHILDREN!" -

-Robert John Meehan

MHA being a specialized course brings together a unique combination of skillset and knowledge. The meteoric growth of healthcare unfurls many career opportunities in diverse sectors for better understanding of healthcare space. MHA Course in AIHA, Amity University is well crafted through right blend of academia, co-curricular activities and industry exposure. Wishing all the upcoming hospital administrators a very bright and enriching future!!



## STUDENT COORDINATORS, AIHA



Madeeha Noor



Dr. Abhigya Sharma



Nasir Hussein



*"Insights and intuitions of responsible people unwind the mysteries which are benevolent to mankind."*



*Dr. Das in discussion with zur Hausen in DKFZ Lab, Heidelberg in 1986.*

## **Prof. (Dr.) BC Das**

Prof. Dr. Bhudev Chandra Das obtained his B.Sc (Hons) and B.Ed (Sc) from one of the four NCERT-run Regional Institutes of Education at Bhubaneswar. He did his M.Sc (Zoology) and Ph.D (1982) under the guidance of Prof. T Sharma, FNA, Banaras Hindu University (BHU), Varanasi where he published his first paper in Nature. He joined as research officer at the then Cytology Research Centre (ICMR) at Maulana Azad Medical College & Lok Nayak Hospital, New Delhi in 1982.

Prof. Das joined as a Guest Scientist to work on human papillomavirus (HPV) and cervical cancer with Professor Harald zur Hausen, then Director of German Cancer Research Centre (DKFZ) Heidelberg, Germany in June 1986. Dr Das retired as Chief of Division of Molecular oncology and Director of Institute of Cytology and Preventive Oncology, now named as National Institute of Cancer Prevention & Research (NICPR), (ICMR) on 31st July, 2008 and very next day, on 1st August, 2008 he joined as Director of Ambedkar Center for Biomedical Research, University of Delhi (North Campus).

While at ICPO, Das created a new Division of Molecular Oncology at Maulana Azad Medical College Campus, New Delhi where he pioneered the work on Human Papillomavirus (HPV) after returning from Germany and is known as Father of HPV in India and worked on cervical cancer, breast oral and other cancers. His other areas of Research interest at present are transcriptional regulation of viral oncogene expression, miRNA expression and cancer stem cell regulation. Dr Das has published more than 250 research papers in high impact journals including Nature, Lancet, Nucleic Acid Research, Oncogene, etc., has two US Patents, and mentored 37 PhD and 78 MD/MS/DM/DNB students.

Awards and Achievements: Dr Das is recipient of highest medical award, Dr BC Roy National Award of Medical Council of India; and Sandoz Oration Award of ICMR, Ranbaxy Research Award, ICMR's Dr PN Wahi Award; Ramniklal J Kinarivala Cancer Research Award of Gujarat Cancer Research Institute. Das has also received JC Bose National Fellowship of DST. He is currently serving as Dean of Health & Allied Sciences and also as Distinguished Scientist, Hargobind Khorana Chair Professor, Chairman-AIMMSCR and Chairman, University Research Council at Amity University, Noida.

*Nobel Prize for 2008 in Medicine to Prof. Harald zur Hausen for discovering HPV as a causative agent of cervical cancer.*





# Industry Expert Series



## PROF. (DR.) BHUDEV CHANDRA DAS

PhD,  
FNASc, FASc, FAMS,  
FNA & J.C. Bose  
National Fellow.

In frame Dr. Abhigya Sharma, Nasir Hussein, Prof. (Dr.) Ajai Kumar Jain, Prof. (Dr.) B.C. Das, Dr. Archana Koul, Madeeha Noor (Left to right)

We had an honor to conduct an interview of Prof. Dr B C Das. The Q/A session we conducted is as under;

### Q: Sir, how did your journey start?

A: From school, I was highly interested in biology and genetics. Since, Radiation genetics was the area of core concentration in my PhD, I was ever curious to study DNA and the effects of its damage/alterations in human health and healthcare industry. Being student of genetics and molecular biology, I did my research on central dogma where genetic information flows only in one direction – DNA to RNA to Protein or RNA translates into protein or reverse transcribes to DNA. This helped me in understanding the cancer causing mechanism(s) of Human Papillomavirus, a DNA tumour virus which is considered as a principal causative agent responsible for inducing deadly cervical cancer in women. While going to Germany I took many tumour tissue samples from India for research purpose. Cervical Cancer was growing at a rapid rate and it was the most predominant cancer in India and Southeast Asia. It was first time shown by him that almost 99% cervical cancers are positive for high risk HPV types.

### Q: Whom will you give credit to this astounding journey?

A: My nerves of intellect were nourished when I got a chance to visit Germany and work under my Guru Professor Harald zur Hausen who was the then Director of German Cancer Research Centre. I am also thankful to

Govt. of India which permitted me to go on deputation for two years where I had gained extensive knowledge about various types of cancers and their mechanism(s) of carcinogenesis which was still a mystery for all. While I had learned a lot about various types of cancers and cutting-edge molecular biology techniques and tools and was aspiring to come up with some interesting findings, my two-year deputation almost came to an end, and I was called back by Govt. of India. However, I bought huge amount of research materials, fine chemicals and reagents from Germany and immediately started one of the first Cancer Research labs, "Molecular Oncology" in India. But my research collaboration with Prof. zur Hausen continued for more than two decades till he got the Nobel prize in 2008 for discovering HPV as the causative agent for cervical cancer.

### Q: What technological developments are you most excited about in medical oncology?

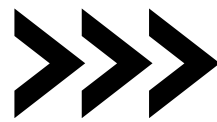
A. Molecular oncology is something which is challenging to humanity. Not much is known about how to provide satisfactory remedy and/or effective treatment to several deadly cancers. Health is the most neglected sector in India.

We need better infrastructure – sophisticated labs that are of western standard and state-of-the-art facilities. This is possible when we have conducive budget allocation to health and education sector.



As I mentioned earlier that I bought many chemicals from Germany worth several lakhs while returning from Germany as we had no such things available in India. Certainly, with passage of time DST, CSIR, ICMR, DBT and other funding agencies began gearing up, providing facilities to scientists. I started my journey in Maulana Azad Medical College campus where I was fully devoted to my cancer research with my team and I requested my Director to relieve me from all administrative responsibilities. Later the Institute moved to its new campus at Noida where I was finally selected as first regular Director of NICPR in 2004. During the last five decades of my journey several discoveries have been





been translated from laboratory to clinics for the benefit of humanity and society. The most exciting of them is the discovery of reliable biomarkers/methods/tools that detect cancer early and the therapeutic targets that allow effective treatment and possible relapse-free survival of cancer patients.

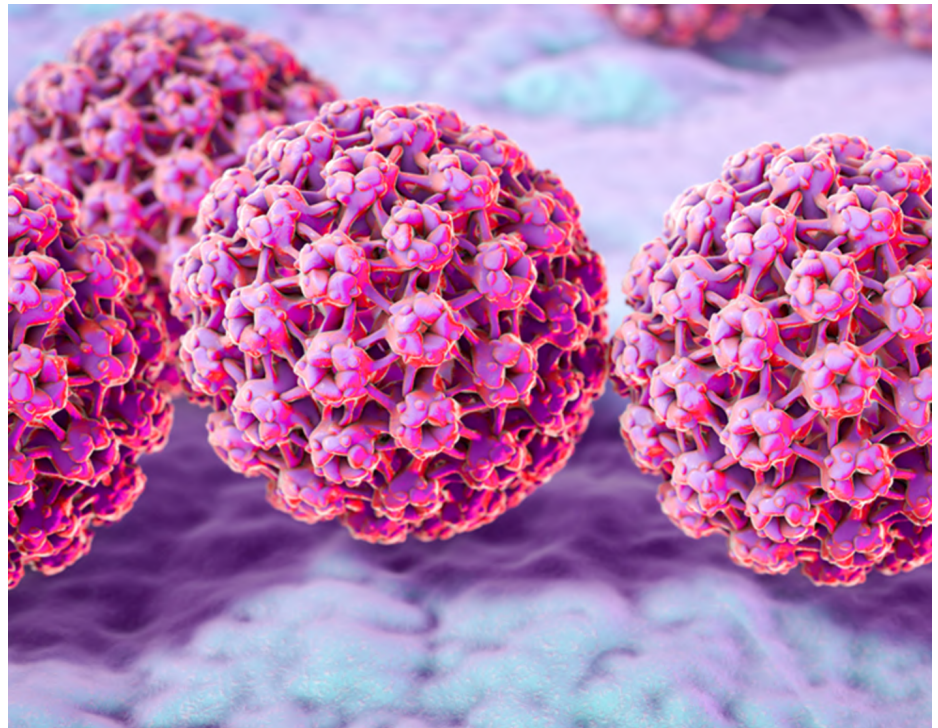
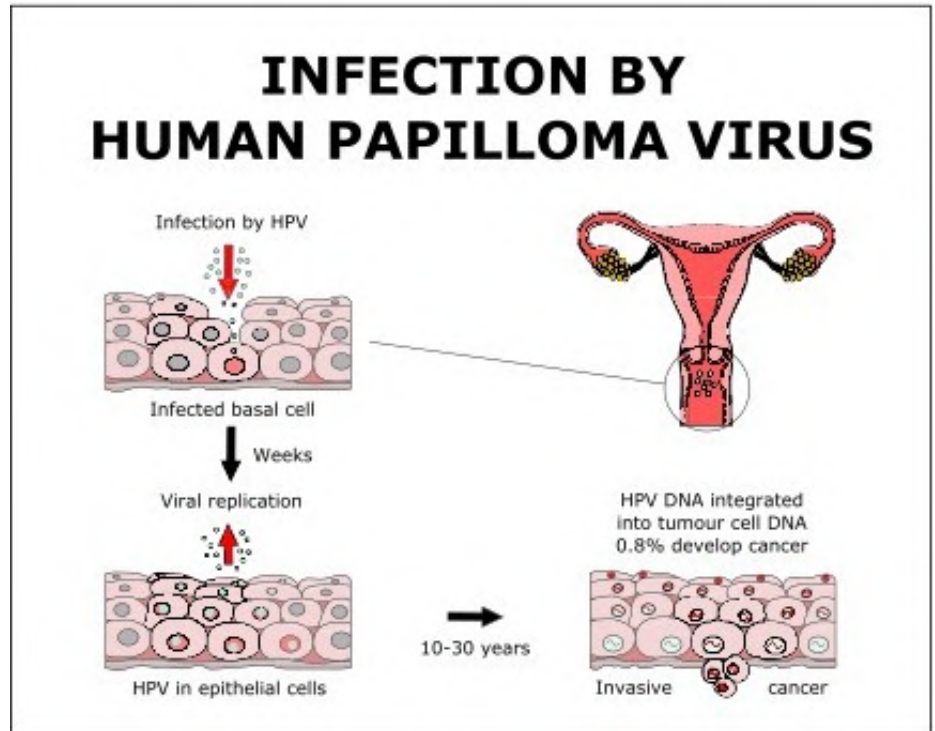
### Q: How effective is HPV CERVAVAC?

Fortunately, Indian made new vaccine, Cervavac against HPV has now been approved by DCGI and I do believe it will be highly immunogenic like other 3-vaccines. But timely and early detection of cervical cancer is equally very important. Firstly, we must cajole people to get vaccinated as there are lack of awareness and have many myths – socio- cultural, religious are associated with vaccinating young girls of 9-19 years. It's very unfortunate that even educated people including even doctors are reluctant to get their daughters vaccinated.

Initially, when we were conducting immunogenicity trials in India with Gardasil vaccine in 2008, we vaccinated hundreds of school girls of 10-14 years in Khammam district of Andhra Pradesh and Vadodara district of Gujarat and there were 6 deaths. When we analyzed the cause of their death, we came to know that they already had some co- morbidities and one had snake bite which were the causes of death, and certainly, vaccine was not the actual cause of deaths. Also, it was a point of hot debate that why tribal girls were chosen for vaccine trials. The Parliamentary Standing Committee of Govt. has been investigating this matter since 2010. For successful control of CaCx, screening should be done at least twice, once when women reach 35 years of age and second time at 40 years of age. 9-19 years is a suitable time to take vaccines as antibody titer is found to be very high at an early adolescent age. There are several other remedies discovered by Dr. Das's group are indigenous to India.

Neem cream called 'Praneem', turmeric (curcumin), Polyherbal cream, 'Basant' are effective as these herbal formulations help in eliminating more than 80% of virus infection when self-applied intra-vaginally.

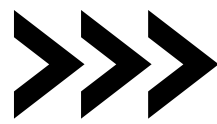
Also, a simple urine testing developed could help in early detection of HPV infection. Another easy method to collect cervical smears on filter paper and a small piece (1-2 mm) of it can be used for PCR detection of HPV in an hour's time.



Picture: Human Papillomavirus

**"DETECT CANCER EARLY,  
SAVE LIFE".**

**-Prof. (Dr.) BC Das**



# Industry Expert Series



## **Q: How will the vaccine help in Health diplomacy?**

A. The prevalence of cervical cancer is highly abundant in Southeast Asia. The three existing vaccines cost around Rs.12000 for 3 doses. But, India's single dose cost-effective (Rs 200-400) vaccine can be a boon to India and other low and middle income countries (LMICs) such as Sri Lanka, Myanmar, Bangladesh, Nepal, Pakistan, Bhutan and Afghanistan. This Indian vaccine will have an assertive impact on our foreign policy. India has ever had a soft policy towards the authentic ingenuity of its neighbours while providing modern health care assistance to them. Global elimination of cervical cancer will be incomplete if it is not successful in South East Asia which needs it the most.

## **Q: What would you like to give as a life and career advice to the young Researchers and Hospital Administrators.**

A. The prevalence of cervical cancer is highly abundant in Southeast Asia. The three existing vaccines cost around Rs.12000 for 3 doses.

But, India's single dose HPV Vaccine, CERVAVAC is highly cost-effective (Rs 200-400 only) and can be a boon to low and middle income countries (LMICs). The vaccine will also have an assertive impact on our foreign policy. You must be professional to whatever work is assigned to you in any healthcare set up or organization.

Success belongs to those who work hard and abide by the principles of professional and work ethics. We all are human beings, but 'being human' is something we must learn. We all must have collective approach to tackle the catastrophies and hardships that we may face particularly in the healthcare system as it is amply clear from the recent disastrous pandemic of Covid-19.

Hospital administrators are important assets who ensure smooth, ethical and effective functioning of a hospital. While physicians prescribe medicines, do medical procedures but its hospital administrators are entirely responsible for patient's well-being and providing excellent healthcare while admitted as inpatient or otherwise.



# HAR GHAR TIRANGA

75  
Azadi Ka  
Amrit Mahotsav



August 15, 2022

On July 22, 2022, Prime Minister Narendra Modi requested that people participate in the initiative of hoisting the national flag in their houses. From August 13 to 15, 2022, we saw a huge number of residents hoisting the flag on the balcony or terrace of their houses. This initiative aimed to instill patriotism among Indians and create awareness behind the Indian National flag.

“

“I believe that in the history of the world, there has not been a more genuinely democratic struggle for freedom than ours.”

—MAHATMA GANDHI

India marked its 75th year of independence on 15th August 2022. Azadi Ka Amrit Mahotsav organized a campaign Har Ghar Tiranga to encourage people to hoist the Tiranga to honor India's 75th year of independence. The Government of India launched this initiative, which was approved by Union Home Minister Amit Shah.



## At Amity

With utmost pride, Amity University took part in this initiative. Bringing the flag to our institution, not only symbolized a personal connection to the Tiranga, but also our commitment to our nation. Each department gathered to hoist the Indian national flag, followed by several

events by the students in the name of our nation, led by our faculty.

To us, the campaign brought a high level of patriotism through every individual's participation, increasing the knowledge about the significance and awareness of the national flag.





# Departmental Activities











# Breaking barriers in Patient Care with Digital Technology by Utilizing Telemedicine and Virtual Care

Digital technology has remoulded the practice of patient care and diagnosis by improving the overall operational efficiency with respect to standardized care and effectiveness. Artificial intelligence based on machine learning and natural language processing has revolutionised healthcare domain. The use of Telemedicine has played a significant role in aiding patient care via teleconsultations by more user-friendly means for example video conferencing which not only is cost effective but aims at providing emergency assistance to various health ailments. Various specialisations of patient care are addressed via Telehealth for example counselling provided by psychiatrists to the patients who are unable to make it to clinic physically. Thus, these sorts of telecommunications are not only

confined to patient care but also proved beneficial for training healthcare workers residing in remote areas. With the advent of Teleconsultations patient care has enhanced to multiple folds. Digital technology has also accelerated interoperability of data thus aiming in uniformity and ease of retrieval. Also, the use of intranet, internet has allowed healthcare professionals to share medical information with one another thus resulting in better care outcome of patients. Another technological leverage is Electronic Health Records (EHR) that has resulted in centralised storage of all patient data with ease of access and improved health outcomes. Also, this digital revolution has led to emergence of many health care apps that have enabled people and healthcare workers to monitor their health outcomes thus reflecting a sense of health

seeking behaviours among people. Thus, technology has witnessed the agility and power to transform the healthcare in terms of better patient care.



**By Dr Archana Koul**  
Faculty, AIHA

# MEDICAL DIPLOMACY

**M**edical Diplomacy can be defined as an emerging field that addresses the dual goals of "improving global health and bettering international relations", or "winning hearts and minds of people in poor countries by exporting medical care, expertise and personnel to help those who need it most" to a more technical, "multi-level, multi-actor negotiation processes that shape and manage the global policy environment for health". In particular, Fidler and Nick Drager stated that, "it is the increasing frequency of crisis situations with profound health impacts and high economic costs which involves immunisation against major diseases along with providing proper food and drinkable water and health facilities to conflict and remote and less developed areas, along with

meeting the challenge of countering diseases that travels beyond borders, such as polio, anthrax, SARS, HIV/AIDS and pandemic flu that have made health a key pillar of the foreign policy agenda".

India being the global hub of medical tourism has attracted millions towards its advanced, traditional and cost effective health care facilities. It has emerged as a huge market. Without India, a discussion on monopolies and how they impact the availability, supply, and access of medicines, vaccines, and other essential medical products rarely happens. The country, a key manufacturer and actor in global supply chains, plays a pivotal role in international negotiations at the World Health Assembly and the World Trade Organization.

India supplied essential drugs, including paracetamol and Hydroxychloroquine to countries which were badly affected

by novel coronavirus, including countries in neighbourhood, thus ensuring India's important role in global medical diplomacy. India lifted ban on export of HCQ (anti-malarial drug), supplied it to 97 countries on grant and commercial basis. HCQ has been declared as treatment for COVID-19 by US Food and Drug Administration. It is pertinent to note that 70% of HCQ is manufactured in India. During financial year 2019, India exported HCQ worth 51 million USD. There has been online training organised for health care professionals in South Asia and other neighbouring countries on COVID-19 management strategies and related aspects. As part of India's reach out to Africa, the External Affairs Ministry had signed an agreement with the Telecommunications Consultants India limited in 2018 to establish a pan - Africa e -network between the two nations. This network aims at providing quality tele-education and telemedicine facility by linking select Indian universities, institutions and Super Speciality Hospitals to African educational institutions and hospitals.



## FACTORS DRIVING INDIA'S MEDICAL DIPLOMACY

- 1. Global Presence** - Indian pharmaceuticals are present across the globe.
- 2. Drug Exports** - The size of medicine and medical devices is worth 41 billion dollars in which India exports 20 billion.
- 3. Traditional medicine** - Such as Ayurveda and yoga.
- 4. Vaccine Manufacturing** - Cost-effective vaccine production, increasing accessibility and availability.

**Large-scale immigration, failure of state machineries, and regional conflicts** also pose a major challenge to health care. Health is on the radar of foreign policy because it has become integral to three global agendas:

- 1. Security** — driven by the fear of global pandemics or the intentional spread of pathogens and an increase in humanitarian conflicts, natural disasters, and emergencies;
- 2. Economic** — concerned not only with the economic effect of poor health on development or of pandemic outbreaks on the global marketplace but also the gain from the growing global market in health goods and services;
- 3. Social justice** — reinforcing health as a social value and human right, supporting the United Nations millennium development goals, advocating for access to medicines and primary health care, and calling for high-income countries to invest in a broad range of global health initiatives.

## CHALLENGES OF INDIA'S MEDICAL DIPLOMACY

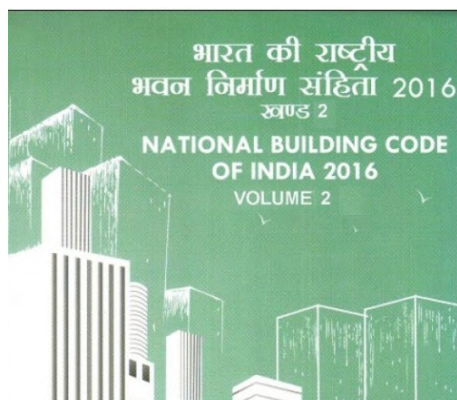
- 1. Foreign regulations** – Such US FDA regulations are tough to acquire.
- 2. Intellectual Property Rights.**
- 3. Active Pharmaceutical Ingredients** which are 70% imported from china.
- 4. Lack of support and infrastructure,** India has only 3.5% GDP investment on health sector.

## WAY FORWARD

India must be feasible to its soft power doctrine and reach out to different countries via medical diplomacy and boost 'Make In India' campaign, increase the production of local API so that imports from china will be reduced. Indian diaspora can also help in promoting India as health care destination. They can effectively contribute in the expansion and growth of pharmaceutical industry. India needs to invest phenomenally high amount in API manufacturing so that the buyers of Chinese APIs move towards India. The challenge like Covid-19 provide India an opportunity to showcase its humanitarian angle by providing drugs such as HCQ. It can also provide an opportunity for India to promote traditional wellness techniques such as Yoga during the lockdowns around the world.



# QUINTESSENTIAL HEALTH INSIGHTS



## **NATIONAL BUILDING CODE OF INDIA 2016 (NBC 2016)**

Ministry of Consumer Affairs released handbook on Safety in Electrical installations and Guide for using NBS, 2016. NBC, 2016 is a technical document which covered all provisions relating to planning, design, construction, operation and maintenance of buildings. Implementation of these provisions ensures minimum required level for safety, health, amenity, accessibility and sustainability of buildings. It is designed by Bureau of Indian Standards (BIS).

## **PORTUGAL HEALTH MINISTER RESIGNS AFTER PREGNANT INDIAN TOURIST DIES**

Portugal's health minister Marta Temido resigned after the widespread criticism of her decision to temporarily close emergency obstetric services and forcibly transfer an Indian pregnant woman between hospitals. Temido in a statement said that she no longer has the conditions to exercise the position, which the prime minister accepted, Portugal's National Public broadcaster, RTP reported.



## **NATIONAL LIST OF ESSENTIAL MEDICINES**

Health Minister Mansukh Mandaviya recently released the revised National List of Essential Medicines (NLEM) 2022. NLEM 2022 has deleted 26 drugs, which include common gastrointestinal medicines ranitidine and sucralfate. 384 drugs are currently part of the National List of Essential Medicines 2022.

## **COMMITTEE FOR PHARMA MARKETING PRACTICES**

The Govt. has set up a five-member committee chaired by Dr VK Paul, NITI Aayog member (health) to create a legal mechanism to address the issue of legal pharmaceutical companies giving incentives to promote their drugs and products. This committee will examine the Uniform Code of Pharmaceutical Marketing Practices (UCPMP). Indian Medical Council Regulations, 2022 and CBDT rules, which are involved in the regulations of marketing practices of pharma companies. The CBDT rules require pharma companies to file details on how much they spend to promote their products. The Supreme Court had held that gifts to medical practitioners by pharmaceutical companies is not allowable expenditure under the Income Tax Act, 1961.

## INSIGHTFUL MODI GEARS UP PROLIFIC STRATEGY TO MAKE INDIA TB FREE BY 2025.



PM Modi has often accentuated the important role of people's participation in solving tortuous problems and building a prosperous nation. According to him, "when 130 crore countrymen take one step ahead with a set goal and the commitment to resolve the problems and predicaments, India moves 130 steps forward" PM Modi has set the ambitious goal of making India TB-free by 2025, five years ahead of the global target for eliminating this disease. The Ni-Kshay Poshan Yojana under the aegis of National TB Elimination Program (NTEP) to support the nutritional needs of TB patients. Under this scheme, over 62 lakh TB patients have received financial support. Any individual can register as Ni-Kshay Mitra on the NiKshay 2.0 portal to support people affected by the disease. When Lord Rama was building a bridge to Lanka, a squirrel came forward to help. Lord Rama appreciated even the smallest of contributions. The squirrel can be an inspiration to all of us. We can contribute to the Pradhan Mantri TB-Mukt

Bharat Abhiyan. Encouraged by PM Modi's mantra of Sabka saath sab ka vikas, sabka Vishwas Aur Sabka Prayas, each one of us can come together and join the Jan Andolan to make India TB-free by 2025.



## WORLD PATIENT SAFETY DAY OBSERVED ON SEPTEMBER 17, 2022

The objective of the World Patient Safety Day is to raise global awareness about different safety measures that need to be taken to ensure patient safety. The World Patient Safety Day came as the result of the 72nd World Health Assembly's adoption of a resolution on "Global Action on Patient Safety" in 2019. Its aim was to strengthen global healthcare system. The theme of this year is 'Medication Safety', with the slogan being 'medication without harm'.

## MINISTRY OF HEALTH AND FAMILY WELFARE (MOH &FW) RELEASED NATIONAL HEALTH ACCOUNT (NHA) ESTIMATES, 2018- 19

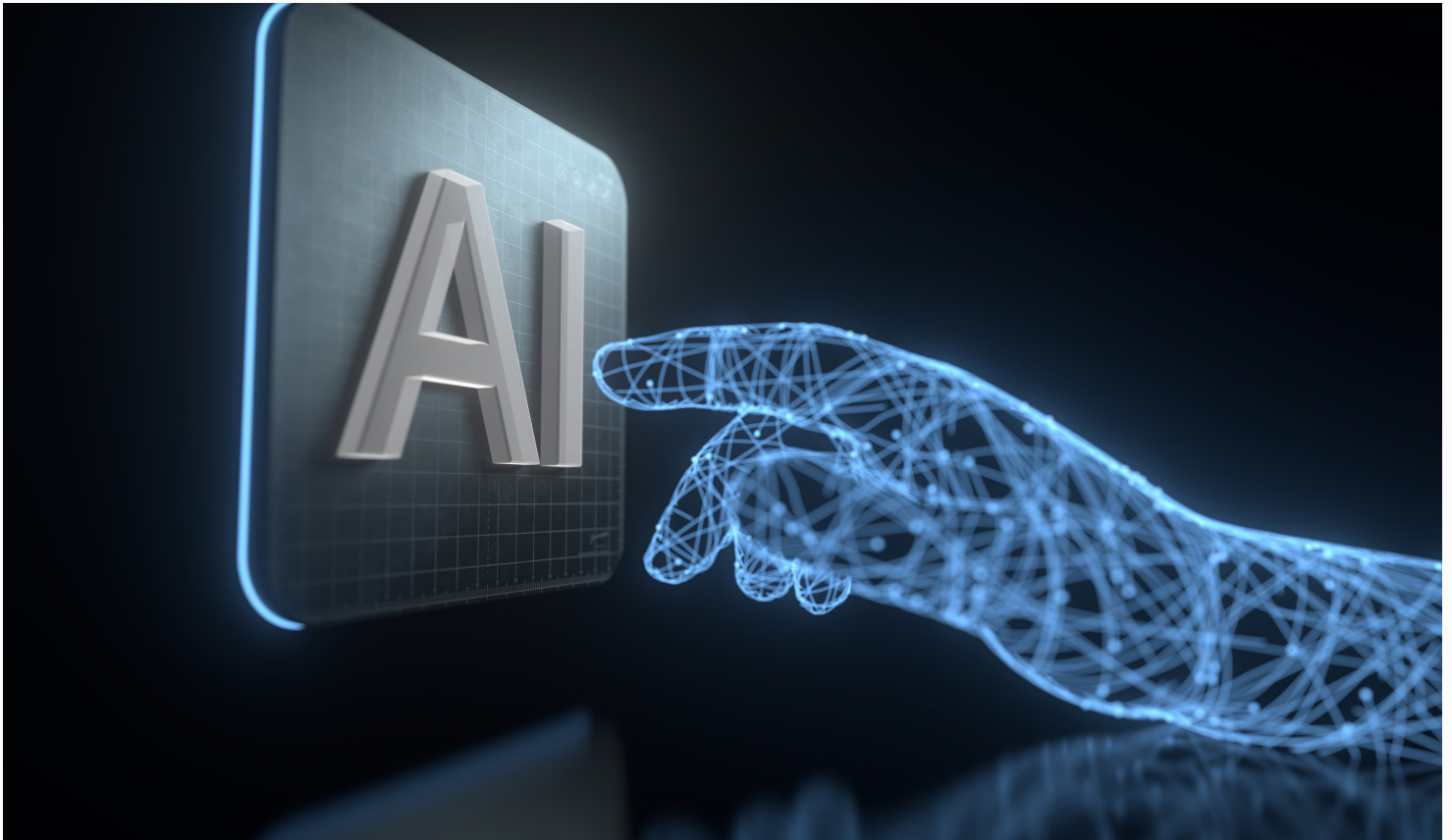
NHA estimates 2018-19 is 6th consecutive NHA estimates report

prepared by National Health Systems Resource Centre (NHSRC), designated by as NHA technical secretariat (NHATS) in 2014 by MoH &FW. It is based on framework of System of health accounts, 2011 developed by WHO. These estimates enable the policymakers to monitor the progress in different health financing indicators of country. Total Health Expenditure (THE) as a percent of GDP and per capita: This constitutes current and capital expenditure incurred by govt. and private resources, including external funds. It indicates health spending relative to country's economic development. It also indicates health expenditure per person in country. THE as a percentage of GDP fell to 3.16% in 2018-19 from 4% in 2013-14. THE per capita increased to Rs. 4,470 in 2018-19 from Rs. 3,638 in 2013-14. Current Health Expenditure (CHE) as percent of THE: CHE constitutes only recurrent expenditure for healthcare purposes net all capital expenditures. It decreased to 90.6% in 2018-19 from 93% in 2013-14.





# AI MEETS HEALTHCARE



**Ms. Jigyasa Rathore, PhD scholar (AIHA)**



Artificial Intelligence is a term we're all familiar with some a little more than others. It basically in layman terms means a machine working at par with human intelligence while using "Logic" and using Deep learning & Natural language processing. The term was coined by John McCarthy one of the founding fathers of AI in 1955.

Healthcare Sector encountered Artificial Intelligence in early 1970s, so they crossed paths a long while ago; and MYCIN was developed using LISp which itself was a new

language to determine blood infections & treatment. Now MYCIN was arguably way ahead of its time and it paved way for the world to indulge and explore Artificial Intelligence in Healthcare delivery as well as research. Throughout 1980s & 1990s AI research pertaining to Healthcare was on the rise and now four decades later we can find AI in all facets of Healthcare sector.

This advanced technology that some even consider larger than life & maybe a little intimidating has grown leaps & bounds beyond just a Computer Lab or Biological Sciences.

It can now be seen across various verticals in healthcare: Radiology, Laboratory, Disease Diagnosis, Surgery, Psychiatry, Primary Care, Telemedicine & Management.


### ***The way forward:***

Artificial Intelligence is now everywhere & this novel technology is only going forward, what we're looking towards now with its help is a brighter future of Healthcare with:

Connected Care, Better AI Powered predictive Care & Improved Patient as well as Staff experiences.

***So my question is – Are you ready for this fierce development?***

# RESURGENCE IN MEDICAL TRENDS



The pandemic has turned out to be a boon for India's transformational technology. It has not just put enormous pressure on IT companies to improve their technology, but it has also paved its way towards health care industry. Majorly, the population in India, with access, turned to telemedicine during the period of COVID-19. But being the second largest populous country in the world, we have larger number of patients with limited resources. To climb up the ladder and reach at a decent position in terms of healthcare, below are the five developments related to Indian healthcare –



## 1) Care management and coordination

We can see distrust between healthcare personnel and patients due to lack of transparency in information given to them and accountability of care. If we adapt a better pathway towards care management and bring about transparency, for example, technological innovations have improved the quality of patient care by giving patients broader access to their medical records, adapting medical care according to patient's schedule, developing safer medical procedures, tests. Walking the patient through each information, will help increase the management and coordination.

## 2) Personalization of care

Introducing AI/ML (application of machine learning) models will bring about change in the care given to patient. Personalized healthcare considers each patient's genetic and biological profiles before developing treatment plans, healthcare technology tools, such as wearable devices and DNA sequencing which help doctors identify which disease they are prone to, early diagnosis is done.

## 3) Transforming healthcare providers

Hospitals are working to improve their revenue by providing more healthcare services to larger number of patients. However, with shortage in staff, patients are experiencing poor services. We can adapt a better way for maximizing the revenue without increasing the capacity by categorizing patients based on risk, i.e. high, moderate and low. In the future, patients at lower end of risk can be provided with home services and tele- video consultations. This way hospitals can manage the high risk patients effectively without compromising the services.

## 4) Whole patient approach

There should be a whole patient approach to a patient's health that takes under consideration the social determinants related to health. This approach extends far beyond traditional healthcare services as it considers social determinants to health for low-income communities, including poor nutrition, lack of safe and stable housing, i

incarceration, and unemployment. These factors and current services should work together to create an overarching network of care.

## 5) Continuous Education and awareness

Patient attitude towards health care is important. According to the Joint Commission, patients must receive "sufficient information to make decisions and to take responsibility for self- management activities related to their needs" the goal of patient education is to improve health outcomes by promoting healthy behavior as lifestyle changes keep adverse outcomes at bay



# LET'S KNOW INDIA'S FIRST



## First modern hospital in India

Rajiv Gandhi Government General Hospital is situated in Chennai, Tamil Nadu. Founded in 1664 by the British East India Company.

## First to pass the examination of the Indian Medical Service (IMS)

Surjo Kumar Chakraborty in 1855



## First Indian to get Nobel Prize for Physiology or Medicine

Har Gobind Khorana won the prize in 1968 shared with Marshall W. Nirenberg and Robert W. Holley for their interpretation of the genetic code and its function in protein synthesis.

## India's first successful kidney transplant

A team of Christian Medical College (CMC), Vellore (Dr. Mohan Rao, Dr. Johny, Dr. Martin Isaac, Dr. HS Bhat) performed the first successful kidney transplant on 2nd February 1971.



## First Corporate hospital in India

Apollo Hospital was established in 1983 by Dr. Prathap C Reddy, as the nation's first corporate hospital, Apollo Hospital is acclaimed for pioneering the private healthcare revolution in the country.

## Father of modern neurosurgery in India

Jacob Chandy (23rd January 1910 – 23rd June 2007) was an Indian neurosurgeon and teacher of medical sciences.



The first state in India to introduce MBBS course in Hindi Madhya Pradesh, 28th March 2022

# A L U M N I



Studying at Amity is great experience in itself you get lot of exposure especially additional subjects which brings out the best in you.

It was a great time in AIHA!  
Always miss the time spent with colleagues, Faculty.

*Dr. Suhail Hassan*

Assistant Administrative Officer  
Healthcare



Amity has some of the most talented and dedicated thought leaders in the country who come from the best institutions worldwide. Not only are they academically and professionally amongst the best, but they have high standards of moral and ethical values so that they can be accurate role models i.e why I choose AIHA and students should follow the footprints of the same to groom their careers. Administrative and management skills gained from AIHA proved to be useful after the completion of the degree. AIHA Groomed me as a motivational as well as an attractive speaker which resulted in my well-being as well as being beneficial for others. All the faculty members of AIHA are an inspiration for students to achieve their goals.

*Dr Khalid Bashir Shah*

DEIC Manager  
District hospital Bandipora, Jammu and Kashmir

# R E F E R E N C E



# Pairing up with us?



## COLLABORATE *With us*

We would like to welcome new generative ideas to build a stronger family.

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**MAIL US AT**  
**[newsletter.aiha@gmail.com](mailto:newsletter.aiha@gmail.com)**

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We would love to hear your feedback and will always be open to reviews.

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To catch up on the latest news and trends of the healthcare industry, be on a ride with us in the garland of career prospects, see the hospital industry through the eyes of eminent personalities, and a lot more to uncover worth read, stay connected to our quarterly newsletter.