



BIMA

BULLETIN OF INDIAN MEDICAL ASSOCIATION

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MUMBAI BRANCH



Forthcoming Event :

9th November 2025 : Diabetes Day CME

Dr. Girish Rajadhyaksha
President

Dr. Pragji Vaja
Hon. Secretary

Dr. Rajendra H. Trivedi
Editor - BIMA

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**AAO GAON CHALEN CAMP
AT VILLAGE RANSAY
26TH OCTOBER 2025**



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Editorial

World Diabetes Day (WDD) is the primary global awareness campaign addressing diabetes mellitus. It was launched in 1991 by the International Diabetes Federation (IDF) together with the World Health Organization (WHO) and after sustained advocacy, was recognized by the United Nations in 2006. The date 14th November marks the birthday of Sir Frederick Banting, who with Charles Bestco-discovered insulin in 1922.

Different agencies sometimes emphasize complementary messages. The IDF's World Diabetes Day campaign for 2025 is titled "Diabetes and Well-being," with a campaign focus on "Diabetes and the Workplace" (how employers, colleagues and systems can support people with diabetes). WHO's WDD messaging for 2025 highlights a life-course approach (Diabetes across life stages). Both themes stress access to care, support for self-management and environments that promote physical and mental well-being.

Diabetes is a major and growing cause of morbidity and mortality globally. It drives microvascular complications (retinopathy, nephropathy, neuropathy) and markedly increases cardiovascular risk. Raising awareness improves early detection, treatment access and prevention of complications. Diabetes also affects mental health, workplace performance and socioeconomic well-being; addressing diabetes therefore requires clinical, public health and workplace interventions.

INCIDENCE AND BURDEN—

Global - The IDF's 11th Atlas reports - 589 million adults living with diabetes. (1 in 9 adults) The Atlas projects this will continue to rise markedly. Other survey published recently has suggested even higher numbers (800 + million adults) reflecting different methodologies and broader age ranges.

India - According to IDF country estimates India has 89.8 million adults with diabetes and remains one of the countries with the largest absolute burden. Many Indians develop type 2 diabetes at younger ages and with lower BMI than Western populations which has implications for screening and prevention. So, while screening we can expect large numbers of undiagnosed patients, younger onset in South Asia and a high likelihood of co-existing cardio-vascular and renal disease.

HOW WORLD DIABETE DAY IS CELEBRATED -

- Awareness events - Public talks, screening camps, workplace sessions on diabetes literacy and risk factor modification.
- Clinical outreach - Free or subsidised screening, (FBC/HbA1c), retinopathy screening camps with fundus photography and foot care clinics.
- Policy and advocacy - Pushing for improved access to insulin, glucose-lowering medicines, diagnostics and workplace policies (sick leave, glucose testing at work, refrigeration for insulin).
- Professional education - Updating staff on screening guidelines, technologies and new therapeutics.

TREATMENT - CURRENT STANDARDS AND RECENT DEVELOPMENTS –

1. Individualised glycemic targets (A1c individualised by age, comorbidity, risk of hypoglycemia).
2. Lifestyle therapy - diet quality, weight management, increased physical activity, tobacco cessation and reducing harmful alcohol use.
3. Early cardiovascular/renal risk assessment and treatment.

PHARMACOLOGIC ADVANCES –

- **Metformin** remains the first-line of treatment for most people with type 2 diabetes.
- **SGLT2 inhibitors** (e.g. empagliflozin, dapagliflozin) have moved beyond glucose control to clear, guideline-based indications for cardio-renal protection (heart failure reduction, slowing CKD progression) and are recommended for people with or at high risk of cardiovascular/renal disease.
- **GLP-1 receptor agonists** (e.g., semaglutide, dulaglutide) produce potent A1c lowering plus substantial weight loss and cardiovascular benefit in many trials. Their expanded use for both diabetes and obesity has transformed metabolic care. Combination strategies (GLP-1RA + SGLT2i) are increasingly common when both weight loss and cardiorenal protection are priorities.
- **Dual incretin (GLP-1/GIP) agonists** (e.g., tirzepatide) have shown even greater A/c and weight reduction in trials; guidance documents are integrating these options into treatment algorithms where available and affordable.
- **Guidance updates emphasize** - broader use of GLP-1/GIP and GLP-1 RAs for metabolic control and weight management sometimes and preferring them before insulin when there is no insulin deficiency; continued strong emphasis on SGLT2 inhibitors for cardiorenal benefit.

TECHNOLOGY AND CARE DELIVERY -

- **Continuous glucose monitors (CGM)** are increasingly recommended for many people with type 1 and for selected type 2 patients on intensive therapy. CGM improves time-in-range and reduces hypoglycemia.
- **Insulin delivery** - modern basal insulin analogues, smart pens and pump therapy improve glycaemic stability; combined use with GLP-1 agents can reduce total insulin needs.
- **Service models** - telemedicine, multidisciplinary teams (nutritionists, diabetes educators, podiatrists, eye-care) and integrated care pathways are priorities, especially in resource-limited settings.

PREVENTION -

1. Screening and early detection -targeted screening for adults with risk factors like obesity, family history, hypertension, gestational diabetes history and opportunistic screening in primary care.
2. Intensive lifestyle interventions -structured programmes for diet, weight reduction and physical activity reduce progression from prediabetes to diabetes.
3. Treat and control hypertension and dyslipidaemia, stop tobacco, address social determinants (food environment, urban planning for physical activity).
4. Gestational diabetes management - Identification and postpartum follow-up are essential because of high risk for later type 2 diabetes in mother and increased risk to offspring.
5. Workplace and community policies -healthy cafeteria options, time for activity, accommodations for glucose testing and insulin use, public health taxation or regulation on sugary beverages and ultraprocessed foods.

World Diabetes Day is a reminder that prevention, early diagnosis, evidence based treatment and systems level supports (workplace, public policy, affordable medicines) must work together. Clinicians can lead by screening actively, using the best evidence-based medicines and technologies available, educating patients and communities and advocating for policies that make prevention and care accessible to all.

DR. RAJENDRA H. TRIVEDI

Editor

IMA Mumbai Branch

From the President's Desk

Dear Friends,

I extend my warm greetings to all esteemed members on occasion of Diwali & the New Year.

Diwali is the festival of lights, celebrated with full enthusiasm throughout India & even abroad.

On 12th October our branch organised our 55th Annual Conference; jointly we also organised National West Zone CGPCON and even Maharashtra State CGPCON. The Conference was a grand success because of the record number of lectures and participation from the IMA members.

Scientific program is the soul of any medical conference. We had a superb scientific program which gave a good weightage to advances in cancer management which was highly appreciated by the delegates.

Immunotherapy is coming in a big way in treatment of various cancers. How is it different from the conventional treatment? Immunotherapy uses your own immune system to identify & destroy malignant cells. It makes immune system more effective in doing this work. Different types of immunotherapies are used for different cancers.

Immune checkpoint inhibitors block proteins that normally stop the immune system from attacking cancer cells.

Monoclonal antibodies are designed to bind to specific targets on cancer cells so that the immune system can identify them easily & destroy them.

We are in the era of Precision Oncology in which the cancer treatment is tailored to individual genetic and molecular profile. This is much more specific approach than giving a standard protocol to all patients.

It involves targeted therapies based on molecular profiling of tumors which leads to better outcomes.

All these complex concepts in the field of oncology were nicely explained in a simplified manner by our expert speakers giving good knowledge & satisfaction to all delegates who attended the Conference.

I feel fortunate to have gracious presence of our National President Dr. Dilip Bhanushali (IMA HQ) for the inaugural ceremony, who had also attended my installation ceremony 6 months back at our own IMA House ground. Along with him we had National Vice President Dr. Hozie Kapadia, Hon. Finance Secretary (IMA HQ) Dr. Piyush Jain, Dean IMA CGP HQ Dr. V.S. Prasad, Hony. Secretary IMA CGP HQ Dr. Amutha Karunanidhi, State President Dr. Santosh Kadam and State Secretary Dr. Anil Avhad.

Every aspect of the conference from registration to scientific program to hospitality reflected thoughtful planning and excellent teamwork of the organising committee which worked hard towards the grand success of the conference.

KUDOS TO IMAMUMBAI BRANCH.

Jai Hind !

Jai IMA !



PROF. DR. GIRISH RAJADHYAKSHA
President
IMA Mumbai Branch



INDIAN MEDICAL ASSOCIATION MUMBAI BRANCH ANNOUNCES DIABETES DAY CME

DATE : Sunday, 9th November 2025

TIME : 9.00 am onwards

VENUE : IMA House, IMA Chowk, 16 K. Khadye Marg, Haji Ali, Mumbai - 400034.

TIME	TOPIC	SPEAKER
9.00 am to 10.05 am	Registration & Breakfast	
10.05 am to 10.10 am	Welcome Address	DR. PRAGJI VAJA Hon. Secretary
10.10 am to 10.15 am	Presidential Address	DR. GIRISH RAJADHYAKSHA President
10.15 am to 10.45 am	Recent Advances in Radiation Oncology	DR. UNMESH MUKHERJEE
10.45 am to 11.15 am	To be Announced	DR. NIHAR MEHTA
11.15 am to 11.45 am	To be Announced	DR. P. G. TALWALKAR
11.45 am to 12.15 pm	Advancing shingles prevention strategy in patient with Diabetes challenge and opportunities	DR. HEMANT THACKER
12.15 pm to 12.20 pm	Vote of Thanks	DR. USHA SHAH Jt. Secretary
12.20 pm onward	Lunch	

- 1 MMC Credit Point Applied
- Registration free but compulsory

Dr. Girish Rajadhyaksha
President

DR. Pragji Vaja
Hon. Secretary

IMA Mumbai Branch

Secretary Communicates



Dear Friends,

IMA Mumbai Branch had following activities during the month of October 2025

12th October 2025 – 55th Annual Conference of IMA Mumbai Branch, MAHA CGPCON and National West Zone CGPCON held at ITC Parel.

More than 300 delegates from Mumbai as well as across Maharashtra participated in this conference. Renowned and distinguished speakers expressed their expert opinion in their respective field of specialty. The speakers were:-Dr. Ajay Phadke, Dr. Sewanti Limaye, Dr. Ameet Pispati, Dr. Kanav Kumar, Dr. Vijay Haribhakti, Dr. Viraj Nevrekar, Dr. Roshan Chinoy, Dr. Shailesh Raina, Dr. Akash Shukla, Dr. Alok Sharma, Dr. Avya Bansal, Dr. Parzan Mistry, Dr. Jaydeep Palep, Dr. Prashant Nayak, Dr. Abhishek Mangeshikar, Dr. Tasneem Bharmal, Mr. Rohit Kumar Chawda, Dr. Rohit Pai, Dr. Mangesh Patil and Dr. Ashwini Kalshetty.

The event was truly grand in every sense - meticulously planned, wonderfully executed, and immensely enriching. The line-up of 21 eminent esteemed speakers authority on their topic, each delivering highly informative and valuable presentations on a wide range of General Practice-related topics, made the academic sessions both engaging and educational. The scientific content was practical, insightful, and extremely beneficial for all attending delegates.

In addition to the academic excellence, the conference offered a perfect blend of enjoyment and hospitality. The multiple lucky gifts, the mega lucky draw, attractive delegate kits, useful exhibition stalls, and the sumptuous, mouth-watering food arrangements added great delight to the day.

Conference Inaugural Ceremony was blessed by the graceful presence of National President IMA HQ Dr. Dilip Bhanusali, National Vice President IMA HQ Dr. Hozie Kapadia, Hon. Finance Secretary IMA HQ Dr. Piyush Jain, Dean IMA CGP HQ Dr. V. S. Prasad, Hon. Secretary IMA CGP HQ Dr. Amutha Karunanidhi, IMA Maharashtra State President Dr. Santosh Kadam, Hon. Secretary Dr. Anil Avhad & Dr. Jagdish Ramchandani Director of Studies IMA MS Faculty of CGP and dignitaries from various reputed medical organisations.

An attractive & informative Conference Souvenir was released by the hands of the dignitaries in the presence of Souvenir Chairperson Dr. Rajendra H. Trivedi. Every detail from registration to end and welcome to the hospitality reflected the thoughtful planning and teamwork of the organizing committee.

The entire Conference Organising team especially Conference Organising Chairman Dr. Sujatunnisa Attar IMA Mumbai Branch deserves high praise for maintaining meticulously planned successful Conference. The success of this 55th Annual Conference stands as a testament to team dedication, unity, and commitment of the IMA Mumbai branch.

26th October 2025: “Aao Gaon Chalen”team visited village Ransay near village Kalhe. The team comprised of Dr. Kiran Desai, Dr. Sunita Shanbhag, Dr. Mangala Gomare, Dr. Jotika Kaku and Dr. Sharad Deorukhkar. They reached the village at 10 am and examined patients till 1.30 pm and medicines were dispensed to them for one month. In all they examined 65 patients almost all were tribals from nearby villages. The morbidity pattern was as follows: Body ache and back ache 26, Fever 2, Old case of hemiplegia 2, URTI 10, Menopausal syndrome 2, Tenia 4, Anaemia 3, Weakness 2, Alcoholism 5, BP was checked in 25 patients out of which 5 were found to be Hypertensive, Hemoglobin estimation was done in 12 patients and 3 were found to be anaemic, Blood sugar estimation 9 patients out of which 4 were having hyperglycaemia.

Forthcoming Event :

9th November 2025 : Diabetes Day CME

DR. PRAGJI VAJA
Hon. Secretary
IMA Mumbai Branch



**Report of Family Welfare and Vasectomy Centre Sub Committee
for the month of October 2025.**

It gives me great pleasure to submit the report of our above Centre for the period 01/10/2025 to 31/10/2025.

With the help of all dedicated IMA staff, the Centre is running smoothly and to our satisfaction.

We have performed 30 (Thirty only) vasectomies in the month of October 2025. Total no. of cases done by us till end of October 2025 are 1416.

Regular updates are given to our philanthropic sponsor, President, Secretary and Managing committee of our IMA, Mumbai branch. I, as a Chairman and my sub-committee members thank all for their co-operation.

Dr. Girish Rajadhyaksha
President

Dr. Aspi Raimalwala
Chairman
Family Welfare and Vasectomy Centre

Dr. Pragji Vaja
Hon. Secretary

WHY BECOME A MEMBER OF INDIAN MEDICAL ASSOCIATION (IMA)?

Dear colleagues,

Indian Medical Association (IMA) is the largest and the fastest growing non-government organization (NGO) of over two and half lakhs health care providers. It spans across the country and has over 1800 branches. It attracts a variety of physicians from MBBS doctors, specialists and super specialists from urban, sub-urban and rural India and a wide age span. The primary mission of IMA is to unite the medical fraternity under one banner and ultimately advance the medical science for the betterment of the masses. Simultaneously, it seeks to safeguard the interest of the medical fraternity in this ever changing milieu of medical profession.

In the light of this ever changing field, Medical Council of India (MCI) has recently recognized the importance of continuous medical education (CME). It has now become mandatory that the medical fraternity comply with the CME credit hours regulation to renew their medical registration. IMA is accredited by the MCI to grant credit hour points to doctors and has taken the onus of advancing this complex field by hosting regular conferences, CME's which are very well received.

ACHIEVEMENTS OF IMA

1. There is an increasing threat to the safety of doctors especially the young ones. Because of constant representation of these concerns by IMA to the state government of Maharashtra, there is now a law in place to protect the doctors and its establishments.
2. Similar efforts are being undertaken by the IMA at the central government also.
3. IMA is successful in motivating the Standing Committee in Delhi to summarily reject the NCHRH Bill (National Council for Human Resource in Health).
4. The draconian CEA (Clinical Establishment Act) was strongly opposed by IMA. IMA was successful in drafting a Maharashtra specific CEA which is both doctor and patient friendly.
5. There are stringent rules set forth for renewing licenses for nursing homes, firefighting provision rule, FDA regulations and PCPNDT Act etc. IMA is engaged with the concerned agencies in streamlining the process and create a hassle free environment for medical profession.

BENEFITS AVAILABLE TO IMA MEMBERS

- 1) IMA is accredited by the MCI to grant credit hour points to doctors.
- 2) Medico-legal cell help round the clock for the members.
- 3) Profession Protection Scheme (PPS) (Indemnity – 10 Lakhs) at nominal fees.
- 4) **Airing your views and grievances** through BIMA (Bulletin of IMA)

Social Security Schemes popular as “**Make your Nominee a Millionaire**”, gives benefits to the next of kin of the deceased life member.

Guest room facilities available in IMA branches all over India at highly concessional rates (List Available at IMA office).

50% discount on rent of IMA Hall (renovated) and Lawns.

Discounts on purchases of new car and on car insurance renewals.

Membership is transferable all over India.

The MCI recommends that every graduate be a part of a recognized medical association and IMA fulfils this mission perfectly. IMA is a perfect platform for all the practitioners, particularly for young practitioners who are still learning the nuances of medicine and work of this profession. The best part is that the IMA membership is transferable to any part of India. We welcome you all to share your interest with us.

Increase Membership fees from 6th April 2025

For Single Life Membership Fees - Rs. 19,259/-

For Couple Life Membership Fees - Rs. 28,875/-

For to be Clubbed Membership Fees - Rs. 10,559/-

"Two Cheques to be drawn as shown in the next page."

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President - (M) 9821695349

DR. Pragji Vaja
Hon. Secretary - (M) 9820482375

IMA LIFE MEMBERSHIP CHARGES

Two Cheques to be given separately for IMA Life Membership fees as shown below from 6TH April 2025

FOR SINGLE LIFE MEMBERSHIP FEES

1. Rs. 12,159/- + 2,188/- (18% GST) = **Rs. 14,344/-**
Cheque should be drawn in favour of “**IMA Maharashtra State**”

2. Rs. 4,165/- + 750/- (18% GST) = **Rs. 4,915/-**
Cheque should be drawn in favour of “**Indian Medical Association Mumbai Branch**”

FOR COUPLE LIFE MEMBERSHIP FEES

1. Rs. 18,222/- + 3,280/- (18% GST) = **Rs. 21,502/-**
Cheque should be drawn in favour of “**IMA Maharashtra State**”

2. Rs. 6,248/- + 1,125/- (18% GST) = **Rs. 7,373/-**
Cheque should be drawn in favour of “**Indian Medical Association Mumbai Branch**”

INCLUSION OF SPOUSE OF EXISTING IMA MEMBER (CLUBBED MEMBERSHIP FEES)

1. Rs. 6,858/- + Rs. 1,235/- (18% GST) = **Rs. 8,093/-**
Cheque should be drawn in favour of “**IMA Maharashtra State**”

2. Rs. 2,090/- + Rs. 376/- (18% GST) = **Rs. 2,466/-**
Cheque should be drawn in favour of “**Indian Medical Association Mumbai Branch**”

ATTACHMENT :

2 passport size photos, 2 Xerox copies of MMC Registration Certificate, 2 Xerox copies of degree certificate, Pan Card, Aadhar Card
2 Xerox copies for Couple Members marriage certificate.

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DR. S. G. SHANBHAG

Chairman
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DR. RAJENDRA H. TRIVEDI / DR. MANGALA GOMARE

Co- Chairpersons
Membership Promotion Committee
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The Prevention of Violence against Healthcare Professionals

World Medical Association has most recently defined violence against health personnel “an international emergency that undermines the very foundations of health systems and impacts critically on patient’s health”.

In a detailed study 61.9% of healthcare participants reported exposure to any form of workplace violence. Of these 42.5% reported exposure to non-physical violence, and 24.4% experienced physical violence in a single year. Verbal abuse (57.6%) was the most common form of non-physical violence, followed by threats (33.2%) and sexual harassment (12.4%).

The most common reasons attributed to violence were intolerance to news of patient's death in 26% incidents, alleged delay in treatment in 17% events, poor communication and substance use among caregivers in 9% events each. In-hospital management issues, 6% were due to inadequate specialists and facilities.

The prevalence of violence against HCWs was particularly high in Asian and North American countries, in Psychiatric and Emergency departments, and among nurses and physicians.

The Chinese Medical Doctor Association in 2014 showed that over 70% of physicians never experienced verbal abuse or physical injuries at work .

In Germany, severe aggression or violence has been experienced by 23% of primary care physicians .

In the UK, a Health Service Journal and UNISON research found that 181 NHS Trusts in England reported 56,435 physical assaults on staff in 2016–2017.

In the USA, 70–74% of workplace assaults occur in healthcare settings.

The Indian Medical Association report (2015) says more than 75% of doctors had faced violence at work.

The consequences of violence against HCWs can be very serious: deaths or life-threatening injuries, reduced work interest, job dissatisfaction, decreased retention, more leave days, impaired work functioning, depression, post-traumatic stress disorder, decline of ethical values and increased practice of defensive medicine. Workplace violence is associated directly with higher incidence of burnout, lower patient safety, and more adverse events.

In public hospital/services, insufficient time devoted to patients and therefore insufficient communication between HCWs and patients, long waiting times, and overcrowding in waiting areas, lack of trust in HCWs or in the healthcare system, dissatisfaction with treatment or care provided, degree of staff professionalism, unacceptable comments of staff members, and unrealistic expectations of patients and families over treatment success are thought to contribute towards healthcare violence. Indeed, in public hospitals worldwide, staff shortages prevent front-line HCWs from adequately coping with patients' demands. In private hospitals / services, extended hospital stays, unexpectedly high bills, prescription of expensive and unnecessary investigations are key contributory factors.

Health care is the key aspect of any developing nation and the need for quality, accessible and affordable health care is a necessity. A particularly central role in health care delivery in modern societies is that of the physicians who have a pivotal role to play in the context of ethical behaviour in health care markets.

Healthcare Specialists and Healthcare Institutes are dedicated to excellence within the professional practice of promoting individual, family, organizational and community health. Guided by common goals to improve the human condition, healthcare providers are responsible for upholding the integrity and ethics of the profession as they face the daily challenges of making decisions.

The responsibility of all healthcare specialists is to reach highest possible standards of conduct and to encourage the ethical behaviour of all those with whom they work.

Primary Responsibilities and Duties of Healthcare Providers

Responsibilities of the Healthcare Provider

- 1: Healthcare providers should support the right of individuals to make informed decisions regarding their health, as long as such decisions pose no risk to the health of others.
- 2: Healthcare providers should encourage actions and social policies that promote maximizing health benefits and eliminating or minimizing preventable risks and disparities for all affected parties.
- 3: Healthcare providers should accurately communicate the potential benefits, risks and/or consequences associated with the services and programs that they provide.
- 4: Healthcare providers should accept the responsibility to act on issues that can affect the health of individuals, families, groups and communities.
- 5: Healthcare providers should be truthful about their qualifications and the limitations of their education, expertise and experience in providing services consistent with their respective level of professional competence.
- 6: Healthcare providers should be ethically bound to respect, assure, and protect the privacy, confidentiality, and dignity of individuals.

Duties of the Healthcare Provider

1. Notification of births and deaths
2. Notification of notifiable diseases to the appropriate authorities
3. Reporting of cases of poisoning
4. Reporting of suspected causes of death
5. Reporting of cases covered under the privileged communication
6. Responding to call for emergency services.
7. To treat and to continue to treat and maintain the professional secrets of the patients
8. To obtain consent of the patients for medical examination
9. To obtain informed consent before any procedure
10. To issue medical certificate, fitness certificate, death certificate, vaccination certificate, or certificate of disabilities
11. To conduct post-mortem examination as per the requirement and request from appropriate authority
12. To attend cases of accidents and medical emergencies

What are the Basic Principles of Medical Ethics?

The Code of Ethics is grounded in fundamental ethical principles including: promoting justice, doing good, and avoidance of harm. Bioethicists often refer to the four basic principles of health care ethics when evaluating the merits and difficulties of medical procedures. Ideally, for a medical practice to be considered "ethical", it must respect all four of these principles: autonomy, justice, beneficence, and non-maleficance.

Autonomy

Requires that the patient have autonomy of thought, intention, and action when making decisions regarding health care procedures. Therefore, the decision-making process must be free of coercion or coaxing. In order for a patient to make a fully informed decision, she/he must understand all risks and benefits of the procedure and the likelihood of success.

Justice

The health care provider must consider four main areas when evaluating justice: fair distribution of scarce resources, competing needs, rights and obligations, and potential conflicts with established legislation.

Beneficence

Requires that the procedure be provided with the intent of doing good for the patient involved. Demands that health care providers develop and maintain skills and knowledge, continually update training, consider individual circumstances of all patients, and strive for net benefit.

Non-maleficence

Requires that a procedure does not harm the patient involved or others in society.

Health Professions Education during College Education should emphasis heavily on importance of communication skills, ethical practice, patient's rights, and professionalism throughout their training program.

Practicing professionals should have regular refresher courses to understand the nuances of Good Ethical

NATIONAL WEST ZONE CGPCON, MAHA CGPCON & 55TH ANNUAL CONFERENCE OF IMA MUMBAI BRANCH AT ITC PAREL, MUMBAI - 12TH OCTOBER 2025



Lighting of Lamp by National President Dr. Dilip Bhanushali



Speech by President Dr. Girish Rajadhyaksha



Speech by Hon. Secretary Dr. Pragji Vaja



Speech by Chief Guest Dr. Dilip Bhanushali



Felicitation to Chief Guest Dr. Dilip Bhanushali



Felicitation to Guest of Honour Dr. Hozie Kapadia



Speech by Guest of Honour Dr. Piyush Jain



Felicitation to Guest of Honour Dr. Piyush Jain



Speech by Guest of Honour Dr. V. S. Prasad

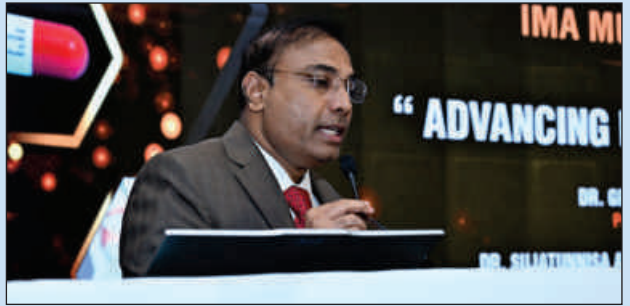


Felicitation to Guest of Honour Dr. V. S. Prasad

**NATIONAL WEST ZONE CGPCON, MAHA CGPCON & 55TH ANNUAL CONFERENCE
OF IMA MUMBAI BRANCH AT ITC PAREL, MUMBAI - 12TH OCTOBER 2025**



Felicitation to Guest of Honour Dr. Amutha Karunanidhi



Speech by Guest of honour Dr. Santosh Kadam



Felicitation to Guest of Honour Dr. Santosh Kadam



Felicitation to Guest of Honour Dr. Anil Avhad



Felicitation to Guest of Honour Dr. Jagdish Ramchandani



Felicitation of Dr. T. Raj Gopal



Launching of Souvenir



Felicitation of Speaker Dr. Ajay Phadke



Felicitation of Speaker Dr. Sewanti Limaye



Felicitation of Speaker Dr. Ameet Pispati

**NATIONAL WEST ZONE CGPCON, MAHA CGPCON & 55TH ANNUAL CONFERENCE
OF IMA MUMBAI BRANCH AT ITC PAREL, MUMBAI - 12TH OCTOBER 2025**



Felicitation of Speaker Dr. Kanav Kumar



Felicitation of Speaker Dr. Sachin Trivedi



Felicitation of Speaker Dr. Vijay Haribhakti



Felicitation of Speaker Dr. Viraj Nevrekar



Felicitation of Speaker Dr. Roshan Chinoy



Felicitation of Speaker Dr. Shailesh Raina



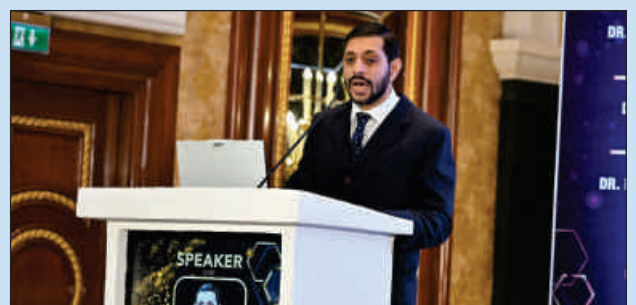
Felicitation of Speaker Dr. Akash Shukla



Felicitation of Speaker Dr. Alok Sharma



Felicitation of Speaker Dr. Avya Bansal



Speaker Dr. Parzan Mistry

**NATIONAL WEST ZONE CGPCON, MAHA CGPCON & 55TH ANNUAL CONFERENCE
OF IMA MUMBAI BRANCH AT ITC PAREL, MUMBAI - 12TH OCTOBER 2025**



Felicitation of Speaker Dr. Jaydeep Palep



Felicitation of Speaker Dr. Prashant Nayak



Felicitation of Speaker Dr. Abhishek Mangeshikar



Felicitation of Speaker Dr. Tasneem Bharmal



Felicitation of Speaker Mr. Rohit kumar Chawda



Felicitation of Speaker Dr. Rohit Pai



Felicitation of Speaker Dr. Mangesh Patil



Felicitation of Speaker Dr. Ashwini Kalshetty



Group Photo



Audience

Practice

- The Medical Councils should
- Notify ideal Consent Forms
- Standardize Prescription formats,
- Encourage medical organizations to prepare Standard Treatment Protocols,
- **Put in place Grievance Redressal Cells in every institute.**

One of the most effective methods of avoiding potential confrontation in a Medical Establishment is to set up an Internal Redressal Committee or similar institutional mechanisms to offer assistance in addressing ethical issues that arise in patient care and facilitate sound decision making that respects patient-care values, concerns, and interests. An Internal Redressal Committee or hospital ethics committee is characterized as a body of persons established by a hospital or health care institution and assigned to consider, debate, study, take action on, or report on ethical issues that arise in patient care

To be effective in providing the intended support and guidance in any of these capacities, Internal Redressal Committees should:

- (a) Serve as advisors and educators rather than decision makers.
- (b) Respect the rights and privacy of all participants and the privacy of committee deliberations and take appropriate steps to protect the confidentiality of information disclosed during the discussions.
- (c) Ensure that all stakeholders have timely access to the committee's services for facilitating decision making
- (d) Be structured, staffed, and supported appropriately to meet the needs of the institution and its patient population
- (e) Uphold the principles to which the institution is committed.
- (f) Make clear to patients, physicians, and other stakeholders that the institution's defining principles will inform the committee's recommendations.

The doctor–patient relationship is one based on mutual trust and respect between the two parties. However, the rapid changes in the medical field and corporatization of health-care system have strained the age-old good relations between the patient and the treating physician/surgeon. The legal, ethical, and moral liabilities of the doctors are enshrined in the Hippocratic Oath that we take when being ordained into the medical fraternity and we should try to uphold them. The relationship between a physician and a patient must be inviolable. Included among the elements of such a relationship of trust are open and honest communication, including disclosure of all information necessary for the patient to be an informed participant in her/his care. This relationship is not to be constrained or adversely affected by any consideration other than what is best for the patient. The existence of other considerations, including financial or contractual concerns, is, and must be, secondary to the fundamental relationship.

The increasing number of medico legal cases filed in the courts and with the medical councils has made it necessary for hospitals and medical administrators to become aware of the medico legal aspects to minimize civil and criminal litigation and ensure quality of medical care.

ETHICS IS KNOWING THE DIFFERENCE BETWEEN WHAT YOU HAVE A RIGHT TO DO AND WHAT IS RIGHT TO DO

Dr. Shivkumar S. Utture
MS. FICS. FMAS.

MASTACON-2025

**at
Solapur Branch**

Date: 14th, 15th & 16th November 2025

State Annual Conference

IMA NATCON - 2025

**(100th National Annual Conference of
Indian Medical Association)**

86th Annual Meeting of Central Council of IMA

Date: 27th & 28th December 2025

Organized by: IMA Ahmedabad.



INDIAN MEDICAL ASSOCIATION, MUMBAI BRANCH

NOTICE

An Ordinary General Body Meeting of Indian Medical Association Mumbai Branch will be held on **Tuesday, 25th November 2025 at 4.30 p.m. at IMA House, 16 K. Khadye Marg, Haji Ali, Mumbai – 400034** to consider the following agenda:

AGENDA

- 1) To pass the Annual Accounts for the year 2024-2025.
(Accounts printed in November 2025 BIMA issue)
- 2) Any other business with the permission of the chair.

DR. PRAGJI VAJA
Hon. Secretary
IMA Mumbai Branch

N. B.

1. The meeting if adjourned due to lack of quorum will be held in the same place after 30 minutes.

The Bombay Public Trusts Act, 1950 SCHEDULE -VI(11) (Vide Rule 17 (f)) INDIAN MEDICAL ASSOCIATION, MUMBAI BRANCH BALANCE SHEET AS AT 31ST MARCH, 2025									
Reg. No. F.-289 (BOM.)									
PREV.YR.	LIABILITIES	AMOUNT	PREV.YR.	Fixed Assets	AMOUNT	Current year	As per Schedule (3)	Investments :-	AMOUNT
	Corpus No.1:-								Current year
6,526,868.18	Balance as per last Balance Sheet	6,667,917.44	673,762.72						603,612.62
449,082.98	Add:- Life Membership Fees	563,588.00							
6,975,951.16		7,231,505.44							
308,033.72	Less :- H. F. C.	405,501.00	82,775,336.44						88,480,014.44
6,667,917.44									
	Corpus No.2:-								
48,494,963.89	Opening Balance	48,494,963.89							
	Add: Contribution during the Year	1,282,100.00	3,492,572.12						5,096,577.60
		49,777,063.89	126,928.00						126,928.00
									5,223,505.60
	Others Funds:-								
19,032.30	Rural Health Project Fund	19,032.30							
6,000.00	Dr. B. S. Pendse Memorial Fund	6,000.00							
1,700.00	Equipment Donation Fund	1,700.00	3,041,876.69						3,140,217.67
15,933.43	I.M.A. President A/c.	15,933.43							
50,000.00	Dr. Mangharml S. Kripalani Award	50,000.00							
15,000.00	Dr. F.P. Antia Award	15,000.00							
30,000.00	Dr. Lalita Rao's Fund	30,000.00							
792,412.00	Disaster Fund	792,412.00							
100,000.00	Dr H.M Shah Life Achivment Award	100,000.00							
20,502.00	Legal Fund	20,502.00							
661,941.00	Drought Relif fund	661,941.00							
80,000.00	Education Fund	80,000.00							
1,792,520.73		1,792,520.73							
183,690.00		171,510.00							
2,417,557.56	DEPOSIT:- As per Schedule No. (8)	2,036,851.00							
	LIABILITIES:- As per Schedule No.(7)								
	Income & Expenditure A/c								
27,693,489.26	As per Last Balance Sheet	30,553,826.35							
(2,092,273.39)	Less Income Tax Assessed of earlier	-							
25,601,215.88		30,553,826.35							
4,952,610.47	Add Surplus during the Year	6,289,573.92	36,843,400.27						
	Total Rs.....	97,447,350.33	93,110,475.97						97,447,350.33
	Total Rs.....								

As per our report of cross date



Ale
A.H. PATIL

Date 24/10/2025
Signature & Seal

Indian Medical Association, Mumbai Branch

TRUSTEE
DR. GIRISH RAJADITYAKASIA
President

Hon. Secretary
DR. PRADIP VAJA

Kajal P. Ahuja
Hon. Treasurer
DR. RAJAL AHUJA

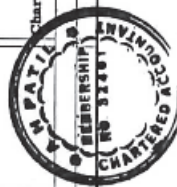


PRESIDENT
IMA, MUMBAI BR.
HON. SECRETARY
IMA, MUMBAI BR.
HON. TREASURER
IMA, MUMBAI BR.

THE Bombay Public Trusts Act, 1950											
SCHEDULE - IX											
Reg. No. F - 288 (BOM.)											
(Vide Rule 17 (i))											
INDIAN MEDICAL ASSOCIATION, MUMBAI BRANCH											
INCOME AND EXPENDITURE ACCOUNT FOR THE YEAR ENDED 31ST MARCH, 2025											
PREVIOUS YR.	EXPENDITURE	AMOUNT Current year	PREVIOUS YR.	INCOME	AMOUNT Current year						
	To Expenditure in respect of properties :										
5,880.00	Property tax	5,880.00	664,855.00	By Rent	906,933.00						
12,729.00	Insurance charges	13,238.00	6,848,882.68	Service Charges	6,388,746.34						
31,000.00	Collector A/c	10,000.00									
49,609.00		29,118.00									
	To Establishment Expenses :			By Interest :-							
	As per Schedule (2)	3,326,066.49	4,573,011.43	On Fixed Deposits	5,856,707.03						
4,175,754.12			99,404.02	On bank Saving a/c	119,428.57						
-			-	On Others	9,236.00						
					5,985,371.60						
70,000.00	To Audit Fees A/c.	70,000.00									
82,000.00	To Donation A/c.	525,000.00	10,025,502.00	By Donation Received	9,160,185.00						
120,065.90	To Depreciation - As per Schedule (3)	111,022.00									
				By Income from other Sources	127,260.00						
43,300.00	To Legal & Professional Charges	46,400.00	623,751.00	As per Schedule (1)							
	To Expenditure on objects of the Trust										
4,120,478.28	Educational... (Schedule 6)	3,828,833.25									
9,221,588.36	Medical Relief	8,342,488.28	12,171,321.53								
4,952,610.47	To Excess of Income over expenditure	6,289,573.92									
	During the year										
22,835,406.13		22,568,501.94	22,835,406.13		22,568,501.94						

As per our report of even date

Date 24/10/2025
Signature & Seal



A.H. PATIL
Chartered Accountants

TRUSTEE

DR. GIRISH RAJADHYAKASHA
President

Hon. Secretary
DR. PRAJOT VAJA

Indian Medical Association, Mumbai Branch

Kajal A. Ahuja
Hon. Treasurer

DR. KAJAL AHUJA
IMA, MUMBAI BR

PRESIDENT

HON. SECRETARY

IMA, MUMBAI BR

IMA, MUMBAI BR



INDIAN MEDICAL ASSOCIATION, MUMBAI BRANCH		
31-03-2025		
SCHEDULE : 1		
INCOME FROM OTHER SOURCES :		
Bima Advertisement	1,260.00	
MMC credit hours	126,000.00	
	127,260.00	
SCHEDULE : 2		
ESTABLISHMENT EXPENSES :		
Service charges	14,000.00	
Bank Charges	9,015.55	
Conveyance	7,305.00	
Electricity Charges	438,321.00	
Laundry Charges	18,510.00	
Office Expenses	160,449.00	
Postage Expenses	4,175.00	
Courier Charges	1,550.00	
Printing and Stationery	97,695.00	
Repairs & Maintenance	157,809.94	
Salary A/c.	2,226,669.00	
Water Charges	160,578.00	
Locker Rent	5,664.00	
Internet Chagres	16,150.00	
web site expenses	8,175.00	
	3,326,066.49	

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IMA, MUMBAI BR.

[Signature]
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IMA, MUMBAI BR.

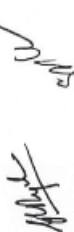
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HON. TREASURER
IMA, MUMBAI BR.



INDIAN MEDICAL ASSOCIATION, MUMBAI BRANCH							
31-03-2025							
SCHEDULE : 3							
FIXED ASSETS :							
PARTICULARS	RATE	BALANCE ON 1.4.2024 W.D.V.	SALE	ADDITION	TOTAL 31.3.2024	DEPRECIATION	W.D.V. 31.3.2025
Office Furniture	10%	44,446.00			44,446.00	4,445.00	40,001.00
Family Planning Centre Furniture	10%	8,683.00			8,683.00	868.00	7,815.00
Family Planning Centre Equipment	15%	1,422.00			1,422.00	213.00	1,209.00
Office Equipment	10%	12,048.00		5,050.00	17,098.00	1,457.00	15,641.00
Sports Equipment	10%	20.00			20.00	2.00	18.00
Black Board	10%	81.00			81.00	8.00	73.00
Construction of Water Tank	5%	46,750.00			46,750.00	2,338.00	44,412.00
Overhead Projector	15%	20,347.00			20,347.00	3,052.00	17,295.00
Franking Machine	15%	93.00			93.00	14.00	79.00
Slide Projector	15%	86.00			86.00	13.00	73.00
Brick Wall	5%	2,952.00			2,952.00	148.00	2,804.00
Water Cooler	15%	334.00			334.00	50.00	284.00
Cordless Phone	15%	703.00			703.00	105.00	598.00
Fax Machine	15%	678.00			678.00	102.00	576.00
Electronic Typewriter	15%	112.00			112.00	17.00	95.00
Microphone	15%	3,792.00		5,627.00	9,419.00	991.00	8,428.00
Air Conditioner	15%	427,727.34			427,727.34	64,159.00	363,568.34
Water Pump	15%	110.00			110.00	17.00	93.00
Computer	40%	10,212.00		14,500.00	24,712.00	9,885.00	14,827.00
V.C.R.	15%	286.00			286.00	114.00	172.00
Refrigerator	15%	14,574.30			14,574.30	2,186.00	12,388.30
Television	15%	5,967.00			5,967.00	895.00	5,072.00
E.P.A.B.X. Systems	15%	145.00			145.00	22.00	123.00
Sound System	15%	2,910.00			2,910.00	437.00	2,473.00
Epson E.B.S-6 Projector	15%	18,965.00			18,965.00	2,845.00	16,120.00
H.P.Lap-Top	40%	13,265.00			13,265.00	5,306.00	7,959.00
Electrical Fan	15%	1,869.00			1,869.00	280.00	1,589.00
Mobile	40%	1,991.08		11,694.90	13,685.98	5,474.00	8,211.98
Camera	15%	33,194.00		4,000.00	37,194.00	5,579.00	31,615.00
		673,762.72		40,871.90	714,634.62	111,022.00	603,612.62



Kajal A. Ahuja
HON. TREASURER
IMA, MUMBAI BR.

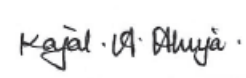

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INDIAN MEDICAL ASSOCIATION, MUMBAI BRANCH		
31.3.2025		
SCHEDULE : 4		
LOANS, ADVANCES & DEPOSITS :		Amount
Deposit with B.E.S.T.		111,238.00
Gas Cylinder		1,825.00
Telephone Deposit		3,010.00
courier Deposit		2,000.00
Income Tax -Tds a/c		2,202,056.65
Ima Tirumala Trust A/c		500,000.00
Family welfare Centre loan		433,000.00
Income Tax 23-24+24-25		269,026.00
sundry debtors		1,104,421.95
Jyoti Kiran Sutar (Advance)		470,000.00
TOTAL		5,096,577.60
SCHEDULE : 5		
CASH & BANK BALANCES :		
BANK BALANCE :		
	A/c No.	Amount
Au Small Finance Bank		28,574.00
Bank of India	11871	133,153.36
Bank of India	17110	999,796.43
Bank of India	22891	35,204.14
Bank of India	28126	863,133.74
Bank of India	9459	2,291.82
Bank of Maharashtra	20000747258	69,539.66
Bank of India (mastacon)	8102	21,983.08
I.D.B.I. Bank	8402	119,657.65
State Bank of India	4597	36,613.40
State Bank of India	4609	43,192.89
State Bank of India	4610	295,915.70
Hdfc Bank	50100333049200	2,939.00
Syndicate Bank	3790	83,509.32
Canara Bank	110083632641	67,922.00
Bank of India Family welfare	00281021000033	336,594.43
	A	3,140,020.62
CASH ON HAND :	B	197.05
TOTAL	A + B	3,140,217.67
SCHEDULE : 6		
EXPENDITURE ON OBJECTS OF THE TRUST		Amount
Educational Objects :		
Annual Conference Expenses		2,090,829.49
Meeting & C.M.E. Workshop		1,014,611.00
Bima Expenses		122,100.00
C.M.E. Programme Expenses		601,292.76
Total		3,828,833.25


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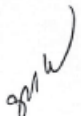

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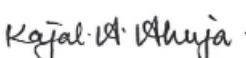

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INDIAN MEDICAL ASSOCIATION, MUMBAI BRANCH	
31-03-2025	
SCHEDULE: 7	
LIABILITIES:	Rupees
Advance trfd. From A/c No.8980	12,099.00
Chief Minister Relief Amount	3,000.00
Earnest Money Deposit	12,600.00
National Social Service scheme	220.00
Salary Payable	163,223.00
Electricity Charges Payable	76,670.00
Cgp.certificate	45,000.00
Sundry Creditors for Expenses	1,572,304.00
Water Charges Payable	32,572.00
Tds Payable	29,941.00
IGST Payable	5,400.00
CGST Payable	41,911.00
SGST Payable	41,911.00
Total	2,036,851.00
SCHEDULE No.8	
Deposit	
Library Deposit	200.00
Hall Deposit	145,160.00
Deposit From Customer	26,150.00
Total	171,510.00


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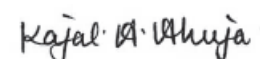

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INDIAN MEDICAL ASSOCIATION, MUMBAI BRANCH	
31.3.2025	
SCHEDULE : 9	
INVESTMENTS :	
Accrued Interest	5,235,482.40
Bank of India	1,985,608.51
Dr. A.D. Daftary oration Award F.D. with Bank of India	25,000.00
Dr. B. S. Pedse Memorial Fund F.D.with B.O.I.	6,000.00
Dr. F. P. Antia Award F.D. with Bank of Maharashtra	63,112.00
Dr. Manghanmal S. Kripalani Awrdr F.D. with B.O.I.	50,000.00
IDBI Bank	27,935,758.09
HDFC Bank	18,488,592.35
AU Small Finance Bank	16,400,000.00
IDFC First Bank	18,050,000.00
President IMA MB Oration Award F.D. with S.B.I.	24,678.00
Rural HEALTH Project Fund F.D. with B.O.I.	7,993.37
Dr.H.M.Shah Achievement Award B.O.I	100,000.00
Dr.Lalita Rao Prize Syndicate Bank	107,789.72
TOTAL	88,480,014.44


PRESIDENT
IMA, MUMBAI BR.


HON. SECRETARY
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**BIMA TARIFF
FOR ADVERTISEMENT IN BIMA
THE BULLETIN OF INDIAN MEDICAL ASSOCIATION, MUMBAI BRANCH**

BIMA, the mouth piece of IMA Mumbai branch reaches 5000 members per month, which includes leading Family Physicians, Consultants, Super Specialists and Hospitals of Mumbai and pan India.

Articles by specialists on current issues and trends in medicine make an interesting reading. BIMA has won the "Best Bulletin Award" for its educative, informative and presentable value from both IMA national and state offices.

The rates of advertisement in BIMA are very attractive. Pharmaceutical Companies, Hospitals, Nursing Homes, Diagnostic Centers, Poly Clinics, Pathology labs, Banks, Manufacturer of Hospital equipment, etc. can use this media for their wide spread publicity amongst the elite.

New reduced advertising rates effective from 1st December 2022

SPACE AND POSITION ONSECUTIVE	SINGLE INSERTION Rs.	6 CONSECUTIVE INSERTIONS Rs.	Rs.12 INSERTIONS Rs.
Ordinary Half Page (B/W)	1,260/-	6,300/-	12,600/-
Ordinary Full Page (B/W)	2,205/-	11,025/-	22,050/-
Special Full Pg. (4 colours)	4,095/-	20,475/-	40,950/-
Inside Cover (4 colours)	4,725/-	23,625/-	47,250/-
Back Cover (4 colours)	5,670/-	28,350/-	56,700/-
Centre Double page (4 colours)	9,450/-	47,250/-	94,500/-
Special Insertion	1,890/-	9,450/-	18,900/-

For Announcement: Birthdays, Marriage Anniversaries / Change of Address etc.

Rs. 630/- up to 35 words and there after Rs. 36/- for every additional word

Subscription: Rs. 630/- Yearly, For Non Members of IMA (Mumbai Branch).

Cheques drawn in favour of **BIMA** should accompany the advertisement matter/ request.

Advertisement material other than typed material, tracings and positives will be charged extra

Rs. 630/- as processing charges.

PRINTING DETAILS OFFSET PRINTING: PRINT AREA 150 MM (W) X 200 MM (H).



MUMBAI DISTRICT AIDS CONTROL SOCIETY



Marching towards an AIDS-free city....

1 HIV PREVENTION

- Advocacy And Awareness Among Youth And General Population
- Targeted Intervention High Risk Groups & Migrants

HIV DIAGNOSTIC SERVICES

Through 234 Counseling and Testing Centers for

- Pregnant Women
- High Risk Groups
- General Population

2

6

U=U

- Undetectable = Untransmittable

3

5

HIV TREATMENT SERVICES

Free lifelong treatment to registered patients through 20 ART centres in Mumbai

- Treat all
- Free drugs and viral load testing
- Counseling and follow-up

4

DIGITAL TECHNOLOGY

Jindagi App
Treatment Literacy Films
Samvaad App-
Enhanced Adherence Counseling

INNOVATION

- MITWAA platform for A / CLHIV
- Virtual Intervention For HIV Screening
- Evening Clinic
- Tele SACEP
- E - Counselling

by
2030

95:95:95

95%

of people living
with HIV know
their HIV status

95%

of people diagnosed
with HIV receive
Antiretroviral Therapy

95%

of people receiving
Antiretroviral Therapy
achieve Viral Suppression

Scan QR CODE For
HIV Case Notification



For any other information/ collaboration, reach us at - cstmdacs@gmail.com

www.mdacs.org.in



: 022 2410 0246/47 , 022 2410 0088 / 89



National AIDS Control Organisation
Partner across against AIDS



Mumbai District
AIDS Control Society

WE
MAKE IT
HAPPEN

HCG-ICS KHUBCHANDANI
CANCER CENTRE

NEVER
RISK WHAT
YOU CAN'T
AFFORD TO
LOSE.

Say YES to Health Screening
Stay Protected Against Cancer.



HCG ICS Khubchandani Cancer Centre, Colaba, is
Here to Support You with a **Special Offer.**

Mammogram

~~₹2500~~ ₹500

CT Scan

~~₹8500~~ ₹3999

Ultrasound Test

~~₹2500~~ ₹1250

PET-CT

~~₹25000~~ ₹12500

Registration Charges Applicable: ₹ 670/-

*Terms & Conditions applied

*Offer Valid Till 31st December 2025.

www.hcgoncology.com | info@hcgel.com

HCG ICS Khubchandani Cancer Centre - Colaba

Maharishi Karve Road, Opp. Cooperage Football
Ground (Near Churchgate Station), Mumbai-400 021

To Book an Appointment



63 58 888 821
93 55 222 346