

Indian Network for Chronic Respiratory Diseases

Proceedings of the Workshop

March 20, 2009

**Proceedings and Recommendations
(Sponsored by WHO-India)**

Organized by

**Department of Pulmonary Medicine,
Postgraduate Institute of Medical Education and Research,
Chandigarh**

OBJECTIVES AND STRATEGIES FOR NETWORKING

A network is a complex arrangement and a system of inter-connecting or communicating group of people or computers. It is a part of infrastructure for the development of health systems and services. The advantages of medical networking are to promote communication and collaboration, collective learning, inter-personal bonding and to improve clinical judgment as well as evidence based practices. The Indian Network for Chronic Respiratory Disease (indianetred) is similarly proposed as a voluntary alliance of experts in pulmonary and public health services along with other stake holders engaged in promoting respiratory health.

The spectrum of respiratory diseases includes chronic problems such as asthma and chronic obstructive pulmonary disease (COPD), environmental, occupational and interstitial lung diseases. In addition, there is enormous burden of acute and sub-acute condition such as the respiratory infections (tubercular and non-tubercular), lung tumors and respiratory failure. In 1990, world-over and for both sexes combined, lower respiratory tract infections (LRTIs), tuberculosis, COPD and asthma ranked first, seventh, twelfth and thirtieth respectively in terms of disease burden and their effect on disability adjusted life years (DALY). For India, respiratory infections and other respiratory diseases ranked third and seventh respectively.

A significant amount of data on respiratory diseases, in general, is missing. This is especially true for the mortality data related to respiratory diseases since many of them are misclassified as cardiovascular deaths. In India, only around one-fifths of all deaths are medically certified. Even among the medically certified deaths, the cause is often not properly mentioned and leads to the problems of inaccurate coding. This is also attributable to the inadequate formal training of residents and medical students. Chronic respiratory diseases, as per currently available estimates constitute the second most common cause of adult mortality in

India. In fact, chronic obstructive pulmonary disease (COPD) is the only smoking related disease which is projected to increase in terms of absolute mortality.

Goals of the Indian Network in Respiratory Diseases

The main objectives of the IndiaNetRed is to facilitate intra-group and inter-institutional communication and collaboration to enhance capacity for surveillance and research in respiratory diseases, to appropriately utilize the information available from different centers and to develop evidence-based policies for prevention and control of respiratory diseases. The Network will be expanded to a South East Asia Respiratory Disease Network to connect with the other countries of the South East Asia Region in due course of time.

Mission Statement

To strengthen the evidence based integrated strategies for development, implementation and evaluation of prevention and control of respiratory diseases in India.

Objectives

1. Development of consensus on strategy, objectives, scope and methods for sustainable cooperation in pulmonary medicine and allied fields.
2. Facilitating intra and inter-country cooperation in order to enhance technical expertise and encourage sharing of information.
3. Conducting periodical assessment of regional and national capacity in selected spheres.
4. Strengthening regional capacity for diagnosis and management of chronic respiratory diseases through promotion of human resource development and mobilization and sharing of resources.
5. Facilitating a coordinated approach by providing/adapting standardized methodology and tools for systematic collection of core data on epidemiology of chronic respiratory diseases.

6. Contributing to development of regional databases on major chronic respiratory disorders and their risk factors.
7. Improving availability, accessibility, and sharing regional and site-specific data on the role of indoor and outdoor air pollution in causing and worsening chronic respiratory disease.
8. Establishing appropriate communication channels and networking between the members.
9. Developing and periodically reviewing regional and/or country specific evidence-based guidelines and training manuals for diagnosis and management of important chronic respiratory diseases at the primary level of healthcare.
10. Promoting action-oriented strategies and advocacy for prevention and control of major respiratory diseases in the Region.

DESIGN AND OPERATIONAL METHODOLOGY

Design

The Network is designed as a collaboration of group experts for academic and development activities in respiratory sciences. It is designed to promote capacity building, support and research collaboration, and develop evidence-based national consensus. For this process, it would identify and mobilize expert members, groups, institutions and other main agencies.

NETWORK CONTENT

The web Network will function with regular updates and inputs from members. (It was decided that regular meetings and workshops of this regional network would be held to facilitate exchange of information and experiences. Besides these, regular communication would also

continue among the members by various other means (e-mail, fax and teleconference)). This website will serve a platform for access to a whole range of subject specific information as well as for technical assistance and training. This will help to enhance capacity building and strengthening of infrastructure.

The focus areas of the Network include the chronic obstructive lung diseases, environmental / occupational lung diseases, tobacco, and other miscellaneous diseases (respiratory infections, interstitial lung diseases, tumour).

Research: The Network will enable sharing of information (both published and ongoing), building databases and registries, identifying gaps, priority setting and development of uniform protocols. Some of the important topics of interest include the disease burden studies, the risk factor assessment, interventional and other operational research studies.

Health education: The target audience includes the health related manpower (e.g. primary care physicians, public health professionals and non-physician health workers) as well as the general public. Various kinds of approaches which can be used include the case studies, disease information (e.g. guidelines), video clips, medical images and slides. For the general public, information can be uploaded in the form of online documents for patients health education on specific diseases. General health messages such as the anti-tobacco measures will be highlighted.

Network activities: Besides the web based networking, the Network will provide a broader platform for exchange of ideas through discussion forum, meetings, workshops, training programmes and collaborative research. It will undertake mutual activities for individual and institutional participation and progress.

The Network will attempt to improve several different outcomes including the building of databases with reliable information, formulation of guidelines, regular intra-network

communication (e-newsletter or some other form of publication) advocacy and in fluency regional/national policies for improving respiratory health.

The Network will encourage its members to share ideas, data and other resources on mutual trust. This will help to share the success stories and the lessons learnt from these experiences. It should also be possible to share project-reports, publications and technical manuals. The Network will extend all support to the members for a greater reach and expansion.

Issues related to secrecy and copyrights, reports and publications etc. will be duly addressed while sharing or exchanging such information. Similarly, patent rights will not be violated. Apparent and potential conflicts of interest, if any shall be resolved on mutual discussions, decisions and appropriate actions according to the standard, laid-down guidelines and criteria.

FUTURE AGENDA

Subject-wise collation and uploading of data will be regularly uploaded. Projects of national importance would be high on the research agenda.

The Network will also expand its relationship and scope with other similar networks/groups and alliances. In particular, it aims to expand to engage individual member groups/centres from other South East Asian Region countries into the South East Asia Respiratory Disease Network (SEAREDNET). It is also proposed to join the Global Alliance against Chronic Respiratory Diseases (GARD) to contribute to the global activities.

The Network proposes to undertake different projects, programmes and other activities either in partnership or with support and sponsorship of WHO (India), Govt. of India, SEARO-WHO and other national or international agencies.

**DIRECT FINANCIAL COOPERATION BUDGET, SOE and
TECHNICAL REPORT FORMAT**

Allotment No.: SEINDFFB001RB08

AMS Code : 6166833

Name of the activity: Workshop to Develop Network in
India for Chronic Respiratory Diseases,
Chandigarh.

Obligation No. SE/09/203478

Agreement No. IND/09/0027

Budget Item No.	Expenditure Head	Approved Budget (Local Currency – Rs.)	Actual Expenditure* (Local Currency – Rs.)
1.	Personal Secretary – 1	500	500
2.	Per Diem		
a.	Non-Local Participants - 17	17,000	9,000
b.	Local experts – 6	3,000	3,000
3.	Meeting and training		
a.	Venue hiring	-	-
b.	Materials and stationary	3,000	2,970
c.	Refreshments – 30	4,500	4,500
4.	Transportation	160,000	65,763
5.	Office running costs (small supplies & stationery)	-	-
6.	Production, Printing for translation of health advocacy materials into local language	-	-
7.	Miscellaneous (not to exceed 10% of total budget)	10,000	10,741
8.	Bank charges for making the bank draft		254
	Total	198,000	96,728

*The undersigned certifies that expenditures have been incurred in accordance with the purpose for which funding was provided for which

Funding was provided and the approved budget.

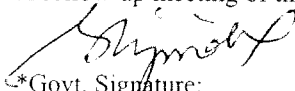
Duration of Activity : one day – 20th March, 2009

Describe what has been achieved, making reference to relevant Work Plan and/or Country Cooperation Strategy agreed between WHO and the Government, and how the activity relates to prior or forthcoming activities (attach additional pages if required)

The Workshop proposed under the activity was held on March 20, 2009. The decisions taken at the Workshop are enclosed (Annexure 2). A website i.e. Indian Network for Respiratory Diseases of the said activity is being hosted (www.indianetred.org).

The detailed Proceedings and Recommendations are also enclosed (Annexure 2).

A follow-up meeting of the participating members is proposed in the next 3-4 months.



*Govt. Signature:

Name: Dr S.K. Jindal

Title: Professor & Head

Date: 21st April, 2009

*Verified by WHO (Signature & date)

NPO.PHA: _____

PA: _____

FIN: _____

P&AO: _____

*To be completed at the conclusion of the activity

Head
Deptt. of Pulmonary Medicine
PGIMER, Chandigarh

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Cluster Focal Point,
 National Professional Officer (NCD & Mental Health),
 WHO India Country Office,
 Room No. 532-534, A-Wing,
 Nirman Bhawan, New Delhi-110011.

Subject:- Agreement for Direct Financial Cooperation (DFC) – Workshop to Develop Network in India for Chronic Respiratory Diseases, March 20, 2009, Chandigarh.

Dear Dr Thakur,

Reference letter SE/09/203478 dated February 18, 2009 on the subject noted above.

Enclosed please find the final report of the meeting and the Statement of expenditure along with the demand draft No. 628639 dated 6.5.2009 for Rs. 101272/-.

Earlier in the SOE the unspent balance was shown as Rs. 101,526/-. (Rs. 254/- has been deducted by the bank as bank charges for making the draft.) Hence, draft for the balance of Rs. 101272/- is enclosed. Kindly acknowledge the receipt.

With regards,

Yours sincerely,

(S.K. Jindal)