



# 71<sup>st</sup> TB SEAL CAMPAIGN 2020

## टी. बी. और कोविड से बचाव PREVENTION FROM TB & COVID

₹ 5 क्षय रोग दूर करें HELP FIGHT TB & COVID



2020 TB ASSOCIATION OF INDIA

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2020 TB ASSOCIATION OF INDIA

**THE TUBERCULOSIS ASSOCIATION OF INDIA**  
3, Red Cross Road, New Delhi-110 001

**71<sup>st</sup>**  
**TB SEAL CAMPAIGN 2020**  
**SOUVENIR**



We express our profound gratitude to all the dignitaries who have send their valued MESSAGES published in the following pages. The MESSAGES will cause deeper impact in mobilizing public opinion and means to fulfil our obligations towards service to humanity and in alleviating human suffering





**Shri Ram Nath Kovind**  
**OUR PATRON**



सत्यमेव जयते

राष्ट्रपति

भारत गणतंत्र

**PRESIDENT**

**REPUBLIC OF INDIA**

**MESSAGE**

I am happy to learn that the Tuberculosis Association of India is launching the 71st TB Seal Campaign on 2nd October 2020. There can be no bigger tribute to our Father of the Nation than to start this campaign to combat TB on the birth anniversary of Mahatma Gandhi.

Tuberculosis is a major public health problem in India. Government of India has launched National Tuberculosis Elimination Programme (NTEP), which is the largest campaign in the world for detection, treatment, control and prevention of TB. Under this programme, India has set the target of TB elimination in India by 2025, five years ahead of Global Targets.

The annual TB Seal Campaign was initiated in the year 1950 by the Tuberculosis Association of India. It has served as a powerful impetus to combat TB through the State TB Association spread across India. The Campaign has helped in raising funds, promoting voluntary TB combating work and encouraging participation in implementation of the National Tuberculosis Programme of the Government. TB Seal Campaign also conveys the message that TB is preventable and its patients, if receive timely and adequate treatment, can lead a normal life. Advocacy and dissemination of information about TB can lead to its cure and prevention.

On this occasion, I extend my greetings and felicitations to all those associated with the TB Seal Campaign and compliment the Tuberculosis Association of India on the commendable work in the field of TB control.

New Delhi  
September 22, 2020

  
(Ram Nath Kovind)

डि. प्रशांत कुमार रेड्डी, भा.प्रशा.से.  
D. Prasanth Kumar Reddy, IAS



भारत के उप-राष्ट्रपति के निजी सचिव  
PRIVATE SECRETARY  
TO THE VICE-PRESIDENT OF INDIA  
नई दिल्ली/NEW DELHI - 110011  
TEL.: 23016344 / 23016422 FAX : 23018124

### MESSAGE

The Hon'ble Vice President of India is happy to know that the Tuberculosis Association of India, New Delhi, is launching the 71<sup>st</sup> TB Seal Campaign – 2020 on 2<sup>nd</sup> October, 2020.

The Hon'ble Vice President extends his greetings and congratulations to all the members and office bearers of the Tuberculosis Association of India and wishes the event all success.

*ba 08/4/2020*  
(D. Prasanth Kumar Reddy)

New Delhi  
04<sup>th</sup> August, 2020.

उपराज्यपाल  
दिल्ली  
LIEUTENANT GOVERNOR  
DELHI




राज निवास  
दिल्ली-११००५४  
RAJ NIWAS  
DELHI-110054

### **MESSAGE**

I am pleased to learn that the Tuberculosis Association of India is launching its 71<sup>st</sup> TB Seal Campaign on 02<sup>nd</sup> October, 2020.

Focussed advocacy, communication and social mobilization can together play a pivotal role in the eradication of this disease. It gives me immense pleasure to know that the Tuberculosis Association of India is playing an important role in generating public awareness with the objective of prevention, control, treatment of and relief from tuberculosis. The TB Seal Campaign has been instrumental in raising funds for promoting voluntary effort to eradicate tuberculosis from our country. It provides a unique opportunity for contributing to the fight against this disease.

I appreciate the efforts of the Tuberculosis Association of India and appeal to all to generously contribute to this noble cause. I wish the 71<sup>st</sup> TB Seal Campaign my very best.

  
(Anil Bajjal) 26/8





## THE TUBERCULOSIS ASSOCIATION OF INDIA

3, Red Cross Road, New Delhi-110 001

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President : DR. V. M. KATOCH

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### MESSAGE

Tuberculosis has been a major health problem in India. To detect, treat and prevent TB, National Tuberculosis Control Programme was launched by the Govt. of India in 1962. The programme shifted the emphasis from open air sanatorium and isolation of TB patients to domicile treatment with potent anti-TB drugs and detection through X-ray. In 1997 Revised National TB Control Programme was adopted with emphasis on Directly Observed Treatment and diagnosis through sputum examination. The Millennium Development Goal of reversing the TB epidemic of TB was achieved in 2015 and now steadily moving to achieve the Sustainable Development Goal by 2025 i.e. 5 years ahead of the target.

The incidence of TB in the Country is now showing a declining trend. At block level increased availability of rapid molecular diagnostics for TB detection and determination of drug resistance has resulted in momentum in rural areas. Further, house to house search for TB cases among vulnerable populations is being carried out as part of Active Case Finding Campaign.

Since its inception, the TB Association of India has been playing an important role in prevention of TB through its various activities. I wish all the success to 71<sup>st</sup> TB Seal Campaign in spreading the desired TB awareness in the Community.

**(Dr. V.M. Katoch)**  
President, TAI

DONATIONS TO THIS ASSOCIATION  
ARE EXEMPT FROM INCOME TAX

STOP TB  
CURE IT WITH DOTS

प्रो.(डॉ.) सुनील कुमार

एम.बी.बी.एस एवं एम.एस.(एस)

**PROF. (Dr.) SUNIL KUMAR**

MBBS & MS (AIIMS)

स्वास्थ्य सेवा महानिदेशक

DIRECTOR GENERAL OF HEALTH SERVICES



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स्वास्थ्य सेवा महानिदेशालय

Government of India

Ministry of Health & Family Welfare

Directorate General of Health Services



## MESSAGE

It is a proud moment for all of us that the Hon'ble President of India will inaugurate the 71<sup>st</sup> TB Seal Campaign of the Tuberculosis Association of India.

The National Tuberculosis Elimination Programme is one of the largest and fastest expanding TB control programme in the world and has been recognized universally for its industrious efforts at improving quality of treatment and for creating comprehensive support systems for TB patients through a plethora of new initiatives like the NIKSHAY Poshan Yojana, private sector engagement, expansion of diagnostics network, newer drugs and regimens, digital interventions etc.

It is remarkable how the programme has comprehensively moved closer to near-complete online notification of all TB cases in the country, with more than 24 lakh patients notified last year alone. Innovative models for private sector engagement have resulted in bridging the gap of the "missing million" reducing it to less than 3 lakhs. The programme has also expanded both the laboratory network as well as rapid molecular diagnostic facilities to cover the entire country. Over 700 DR-TB Centres are now treating Drug Resistant TB patients. TB Forums have been established in all States and Districts across the country to provide a multi-sectoral and community led response to addressing the challenge of TB.

With such relentless efforts, I am confident that the programme will lead us to success and realize our determination of eliminating TB from this country by 2025.

I look forward to the continued support of Tuberculosis Association of India in this endeavour and extend my heartiest congratulations to them on this historic occasion.

**TB Harega Desh Jeetega !**

(Sunil Kumar)



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### MESSAGE

Tuberculosis is a major health problem in India. To control this menace, National TB Control Program was started by Govt. of India in 1962, which was revised in 1997 adopting Directly Observed Treatment Short-course (DOTS) as its strategy and renamed as National TB Elimination Program (NTEP) in 2019.

The National Strategic Plan (NSP) 2017-25, is being implemented under NTEP to achieve the goal of ending TB in the country by 2025, five years ahead of global target of 2030 set under the Sustainable Development Goals of United Nations. Private sector engagement is one of the key priorities to reaching the missing cases.

The Tuberculosis Association of India since its establishment in 1939 has been consistently supporting and supplementing the Government efforts of TB Control. The Association through its multifarious activities such as Annual National Conference on TB & Chest Diseases (NATCON), publication of Indian Journal of Tuberculosis (IJT) and the TB Seal Campaigns among others has been spreading awareness about TB and the services being provided under NTEP among masses and health care providers both in public and private sector.

TB Seal Campaign is an annual activity of Tuberculosis Association of India as its information dissemination activity in prevention and control of Tuberculosis

I wish the 71<sup>st</sup> TB Seal Campaign a grand success.

**(L.S. CHAUHAN)**  
**VICE-CHAIRMAN**

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President : DR. V. M. KATOCH

Chairman : DR. SUNIL KUMAR

*Director-General of Health Services  
Government of India*

Vice-Chairman

*Hony. Treasurer  
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### MESSAGE

India is one of the highest TB burden countries with an estimated 2.8 million new cases and more than 0.4 million deaths annually. Recognizing this huge public health challenge, RNTCP is being implemented in the country which aims to end TB by 2025 which is 5 years ahead of global targets set under sustainable development goals (SDG's) of the United Nations.

The TB Seal Campaign is an annual activity of the Tuberculosis Association of India and is part of its many fold information dissemination activities in prevention and control of Tuberculosis.

Active case finding provides a promising addition to the passive case finding approach of DOTS. Active case finding approaches include screening high risk groups and contact tracing to increase the rate of TB case identification. Finding and screening case-contacts may be a very effective method of increasing case detection rates. The goal of contact tracing is to reduce the time required to detect and treat a case and hence reduce the ability of infectious patients to transmit the disease. While contact tracing has been used extensively as a control strategy for TB in the developed world (typically low prevalence settings) it is uncommon in developing countries with high prevalence.

Community involvement, civil society engagement, involvement of private providers patient empowerment and counseling etc. are among the measures being adopted to reach the unreached for detection and cure of TB patients.

The COVID-19 pandemic in India is part of the worldwide pandemic of Corona Virus disease 2019 (COVID-19) caused by severe acute respiratory syndrome, Corona Virus 2 (SARS-CoV-2). The first case of COVID-19 in India, which originated from China, was reported on 30<sup>th</sup> January 2020. Covid-19 and Tuberculosis both diseases are airborne and are attached with stigma therefore, jointly the steps can be taken for creating awareness about the diseases so that stigma can be minimised.

I am sure the 71<sup>st</sup> TB Seal Campaign will be a grand success in spreading the desired TB awareness in the community.

I wish the campaign all success.

  
(Dr. V.K. Arora)

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**Dr. K S SACHDEVA**

*Dy. Director General  
Head, Central TB Division  
Project Director, RNTCP*



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Government of India

स्वास्थ्य एवं परिवार कल्याण मंत्रालय  
Ministry of Health & Family Welfare  
निर्माण भवन, नई दिल्ली-110108  
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DO Z-28015/193/2020-TB  
Date: 11th August, 2020

### MESSAGE

On occasion of the launch of the 71<sup>st</sup> TB Seal Campaign by the Honorable President of India, I on behalf of the Central TB Division, take this opportunity to congratulate the Tuberculosis Association of India and continue to solicit your continued support to achieve our Prime Minister's vision of a TB free India.

The Millennium Development Goal of halting and reversing the epidemic of TB was achieved in 2015 and we are progressing steadily towards achieving the Sustainable Development Goals by 2025, five years ahead of the target. The sustained efforts of the Government of India towards TB control have led to an unprecedented increase in TB notifications and improvements in time to diagnosis, adherence, and treatment outcomes. It is an encouraging sign and reflects that the programme now has better access to TB patients and can provide them with free treatment in both public and private sectors.

The overall TB incidence in India is on the decline. TB control is rapidly gaining momentum in rural areas because of the increasing availability of rapid molecular diagnostics at block levels for TB detection. Huge thrust is also being given on transportation of samples. A special Active Case Finding campaign of house to house search for TB cases is being carried out among vulnerable populations. To ensure that the social determinants of TB are addressed, we are working closely with the line ministries to address the issues of urban housing, poverty, malnutrition etc.

Going forward, the Central TB Division is committed to sustaining the gains made in case finding and case management and addressing Latent TB Infection by mapping the population at risk to enable targeted interventions and expansion of Latent TB Infection management by testing and providing prophylactic treatment for eligible priority population. The programme will keep emphasizing on (a) Reaching every TB patient in the private sector (b) Treating all TB cases with high quality anti-TB drugs (c) Prevent the emergence of TB in susceptible populations and (d) Build and strengthen supportive systems including enabling policies, empowered institutions and human resources with enhanced capacities.

**TB Harega Desh Jeetega!**

(Dr. K. S. Sachdeva)



लेफ्टिनेन्ट जनरल अनूप बनर्जी, एस एम, पी एच एस  
महानिदेशक सशस्त्र सेना चिकित्सा सेवा  
एवं वरिष्ठ कर्नल कमान्डेन्ट

*Lt Gen Anup Banerji, S.M., P.H.S.*

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Directorate General of  
Armed Forces Medical Services  
Ministry of Defence  
'M' Block, New Delhi-110001



## MESSAGE

1. Despite more than half a century of control efforts, Tuberculosis (TB) remains an ongoing global pandemic and the biggest scourge for the mankind in the modern world. Around 10 million people worldwide suffer from TB every year and almost 30% remain undiagnosed. Almost a quarter of these patients live in India. Almost 2.8% of new cases and 14% of previously treated TB cases in India have multi-drug resistant TB, which causes a high burden of morbidity, mortality and health care resources utilization.
2. The National Strategic Plan 2012 - 2017 had the aim of achieving universal access to quality diagnosis and treatment. Significant improvements were seen during this period in TB control activities like increased geographic coverage, notification rates, implementation of "Nikshay" system, and many more such achievements. Encouraged by the results, the Government of India has now renamed the Revised National Tuberculosis Control Program (RNTCP) as the National Tuberculosis Elimination Program (NTEP), emphasising the commitment to achieve the sustainable development goal of ending TB by 2025.
3. This year, another communicable pandemic, COVID-19, has surfaced disturbing the socio-economic fabric of the world. Both TB and COVID-19 have predominantly respiratory symptoms and spread by close contact with infected persons. BCG vaccine, which is used for TB is being explored for its efficacy in preventing COVID-19. CB-NAAT that is commonly used for diagnosis of TB is now being increasingly used for detecting COVID-19. The restrictions imposed for control of COVID-19 have definitely disrupted the delivery of TB healthcare services to a certain extent. However, the lessons of social distancing, cough etiquettes, use of mask and infection control practices in hospitals, that this new pandemic has taught the world may have a long-lasting role in our efforts to control TB.
4. The Tuberculosis Association of India has been at the forefront in the country's battle against TB since the beginning. As the prestigious association prepares to launch the 71<sup>st</sup> TB Seal Campaign, I wish the association and all the citizens of the country the very best, to fulfill the country's dream of attaining a "TB-Free" nation in next 5 years. This shall be achieved by education, creating awareness and committed execution of healthcare policies.
5. I wish the campaign success in all its endeavors.

'Jai Hind!'

Station: New Delhi

Date : 21 Aug 2020

  
(Anup Banerji)  
Lt Gen  
DGAFMS



भारत सरकार  
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RAIL BHAVAN, NEW DELHI-110001

### MESSAGE

It is matter of great pride that the Honourable President of India will inaugurate the launch of 71<sup>st</sup> T.B. seal campaign of Tuberculosis Association of India on 2<sup>nd</sup> October 2020.

TB Seal Campaign was the brainchild of a Dutch Postman named Einer Holboell. Today it has become an internationally acclaimed philanthropic activity in support of the great humanitarian efforts to stop this disease. Every year TB Seal Campaign makes available a significant amount of money to various National TB Associations for undertaking various activities in the field of prevention, diagnosis, treatment and control of Tuberculosis.

Indian Railways with its vast network of Health Care institutions consisting of 128 hospitals, with around 14,000 hospital beds, and 586 Health Units, forms an important link in the chain of efforts for prevention, treatment and control of tuberculosis in the Nation. Indian Railways shall continue to work in closer association with Tuberculosis Association of India towards this national objective.

I wish the campaign success in all its endeavours.

*Bishnu*  
07/09/2020

(Dr. Bishnu Prasad Nanda)  
Director General  
(Railway Health Services)  
Railway Board



**World Health  
Organization**

REGIONAL OFFICE FOR **South-East Asia**

Metropolitan Hotel, Bangla Sahib Road, Connaught Place, New Delhi-110001, Tel: 91-11-23370804, Fax: 91-11- 23370197,  
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## **Message from the Regional Director, WHO South-East Asia Region, for the Seventy-first TB Seal Campaign – 2 October 2020**



I convey my best wishes to the Tuberculosis Association of India on the occasion of the launch of the seventy-first TB Seal Campaign, to be inaugurated by His Excellency the President of India on 2 October, the birth anniversary of Mahatma Gandhi.

TB remains a major public health challenge in India, the South-East Asia Region and globally. The Region is home to 26% of the world's population, but accounts for over 44% of the global burden of TB incidence. In 2018 estimated TB incidence in the Region was over 4.3 million and about 658000 people died of the disease. Ending TB in the Region is critical to ending the global TB epidemic.

India continues to make bold progress towards eliminating TB. In 2019 around 2.4 million TB cases were notified, of which about 0.6 million were from the private sector – an 11% increase compared with the previous year. First-line standard treatment was initiated for 2.2 million (94.4%) of notified drug-sensitive TB cases. The NIKSHAY online portal has expanded the provision of Direct Benefit Transfers (DBT) schemes, including for nutritional support, cash transfer and travel support in tribal areas.

Notably, India's network of TB laboratories has significantly expanded, and now includes over 20 000 microscopy centres, 6 national reference laboratories, 31 intermediate reference laboratories, 50 certified laboratories for liquid culture and drug susceptibility testing services and 64 certified laboratories for line-probe assay. I congratulate the Ministry of Health and Family Welfare, Government of India, and the National TB Elimination Programme on these achievements.

The emergence and spread of COVID-19 provides substantial challenges that threaten to undermine the progress made against TB in India, the Region and globally. With concerted action, however, India's TB Programme can demonstrate the resilience needed to withstand the pandemic and drive ongoing progress against TB. WHO stands fully committed to supporting India's TB control programme throughout the pandemic and beyond so that together we can achieve our common goal of a TB-free world.

I wish the national TB Seal Campaign all success.

Dr Poonam Khetrpal Singh  
Regional Director  
WHO South-East Asia Region



**THE TUBERCULOSIS ASSOCIATION OF INDIA**  
**PATRON**  
**SHRI RAM NATH KOVIND**

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Section Editor (TOPD)  
Section Editor (Genital TB)  
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International Adviser



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|--------------------------|-----------------------|
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| Seiya Kato, Japan        | International Adviser |
| Madhukar Pai, Canada     | International Adviser |
| Sreenivas A Nair, Geneva | International Adviser |
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| The Vice Chairman, TAI (Ex-officio)                                 | Chairman |
| The Honorary Treasurer, TAI (Ex-officio)                            |          |
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| Joint Secretary (TB), Ministry of Health & Family Welfare, GOI      |          |
| DHS, Delhi Administration or his nominee                            |          |
| DHS, NDMC or his nominee  |          |
| The representative of the Delhi TB Association                      |          |
| Director, NITRD, New Delhi  |          |
| Dr. Amitava Dutta, Indian Railways                                  |          |
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## **TAI TEAM**

Shri Subhash Chand Khatri

Shri Sachin Srivastava

Shri P.S. Chauhan

Mrs. Rita Masson

Shri Sushil Kumar

Shri Jagdamba Prasad

Shri Rajinder Kumar

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The Tuberculosis Association of India is grateful and indebted to the honourable President of India for his patronage, guidance and blessings.

We are grateful to our advertisers, donors, contributors and well wishers who have contributed meaningful, educative and useful articles incorporating their views as well, in this Souvenir.

The Association also places on record its sincere thanks to all who have helped, assisted and contributed to the success of this Special Souvenir released on the occasion last year.

*The contents of this Souvenir mainly comprise of Messages from dignitaries and material on Health Education and Scientific articles and in which the views expressed are those of the contributors*



**THE DOUBLE-BARRED CROSS  
INTERNATIONAL EMBLEM OF THE CAMPAIGN AGAINST  
TUBERCULOSIS**

At the time of crusades, Godefroy de Bouillon, Duke of Lorraine, had placed the double Red Cross on his standard when he took possession of Jerusalem in 1099, and after his return of France, it became the emblem of the House of Lorraine.

The Double Red Cross, was considered singularly appropriate in the rallying sign for the crusade against the most deadly Scourge Tuberculosis - which afflicts mankind. Proposal for its adoption as the International Emblem of the campaign against tuberculosis was moved by Dr. Serson on October 23, 1902, at the International Tuberculosis Conference in Berlin. The proposition was adopted unanimously.

The Council of the International Union Against Tuberculosis, Paris, in September, 1928, decided the National Associations which are members of the Union should adopt this emblem with a recommendation to the effect that it be legally registered in order to prevent its use for commercial purposes.

In 1957, the Tuberculosis Association of India requested the Ministry of Commerce and Industry, Government of India, to patent the Double Barred Cross in favour of this Association and against fraudulent use of this emblem by others. The Central Government by their notification No. 4(3)-TMT/57 dated 13th July, 1959, included in the section of the Emblem and Names, the Double Barred Cross as the emblem of the Tuberculosis Association of India.



## THE STORY OF TB SEAL

A kind postman named Einer Holboell , while sorting out heavy Christmas mail in 1903, noticed some children limping across the road. He was extremely moved by the sight of these children who were suffering from tuberculosis of the bone. A thought struck him. If we could get people to buy a special Christmas Seal during Christmas, when the spirit of giving is strong it would be wonderful. There are so many letters and packages, and just a penny seal on each one would bring a lot of money to help the sick and needy children. There might even be enough to start a hospital for children. The idea of Einer Holboell was received enthusiastically by the Danish people. The King of Denmark gave his approval. This was how the first Christmas Seal appear in 1904 with the Patronage of King Christian. The sale of Christmas Seals for collecting funds for anti-tuberculosis work was soon taken up by other countries and today almost all National TB Associations are mobilising funds through this Campaign.

### ***TB Seal Campaign in India***

A proposal to introduce the TB Seal to raise funds for anti-tuberculosis work in India was first considered in 1944, but it had to be deferred for because of the war conditions in the country. The post-war days were also found unfavorable for embarking on such a new venture. The Tuberculosis Association of India adopted the proposal in October, 1950. The Government of India permitted the Association to conduct the campaign every year from 1950 onwards.

The annual TB Seal reflect the resolve and determination of the Association to combat tuberculosis. It helps to garner funds and spread awareness about TB.



**Shri Ram Nath Kovind, President of India and Patron, Tuberculosis Association of India, inaugurating the 70<sup>th</sup> TB Seal Campaign on 2<sup>nd</sup> October, 2019 at Rashtrapati Bhavan, New Delhi**



**Group photo taken on the occasion of inauguration of 70<sup>th</sup> TB Seal Campaign at Rashtrapati Bhavan Lawns**



**74<sup>TH</sup> NATCON - 2019 HELD AT CHENNAI  
FROM 20<sup>TH</sup> to 22<sup>ND</sup> DECEMBER, 2019**



Inauguration of 74<sup>th</sup> NATCON 2019 at Chennai



National Anthem during Conference at Hotel Leela Palace, Chennai



Prof. Dr. R. Sridhar, Organising Chairman, welcoming the Delegates  
on 74<sup>th</sup> NATCON at Chennai



Dr. Vijay Kumar Arora addressing the Conference.





Panel Discussion on “End TB Strategy” by Dr. K.K. Chopra as Moderator



Release of Special Issue of Indian Journal of Tuberculosis (IJT) by Dr. Beela Rajesh, IAS, Health Secretary, Govt. of Tamil Nadu.



Group Photograph of Organising team of 74<sup>th</sup> NATCON  
with Dr. Beela Rajesh, IAS, Health Secretary, Govt. of Tamil Nadu



Delegates attending Conference at Hotel Leela Palace, Chennai



Cultural Programme during 74<sup>th</sup> NATCON at Hotel Leela Palace, Chennai



**THE TUBERCULOSIS ASSOCIATION OF ANDHRA PRADESH,  
BARKATPURA, HYDERABAD.**



Inauguration of the 70<sup>th</sup> TB Seal Sale Campaign on 11<sup>th</sup> October, 2019 at Raj Bhavan, Vijayawada by Shri Biswa Bhushan Harichandan, Hon'ble Governor of Andhra Pradesh & President of TB Association of Andhra Pradesh.



The Special Best Institutional Award presented to Dr. Arun Kumar Kanti Mohanty, President & Director, AMG India International, Chilakaluripet & Parton of TB Association of Andhra Pradesh.





Lighting of Lamp at the Inaugural Function of the 37<sup>th</sup> Andhra Pradesh TB & Chest Diseases Conference held on 7<sup>th</sup> and 8<sup>th</sup> December, 2019 at GEMS Medical School & Hospital, Srikakulam.



Honouring Dr.V.K.Arora (Prof.& Vice-Chancellor, Santosh University), Vice-Chairman & 2<sup>nd</sup> Trustee, TB Association of India, New Delhi with a Shawl and Gold Medal who delivered Dr.Robert Koch Memorial Oration at 37<sup>th</sup> APTCCON-2019 held at GEMS Medical School& Hospital,



Orientation session on TB for Para-medical students



Community Level Awareness Campaign on TB



## **THE TUBERCULOSIS ASSOCIATION OF TELANGANA, BARKATPURA, HYDERABAD**



Releasing of Souvenir of the 1<sup>st</sup> Telangana State Tuberculosis and Chest Diseases Conference held on 9<sup>th</sup> and 10<sup>th</sup> February, 2019 at Gandhi Medical College Auditorium, Hyderabad.



Inauguration of the 70<sup>th</sup> TB Seal Sale Campaign at Darbar Hall, Raj Bhavan, Hyderabad by Dr. Tamilisai Soundararajan, Hon'ble Governor of Telangana & President of the Association.





The TB Association of Telangana participated in the Awareness Rally in collaboration with the Joint Director (TB), Government of Telangana, the Rally was conducted on the occasion of World TB Day on 24<sup>th</sup> March, 2019.



Donation of the CR Machine and X-Ray Machine in ACF Mobile Van for screening Symptomatic patients suspected of TB under the control of Joint Director (TB), Government of Telangana held on 13<sup>th</sup> November, 2019.

# **THE TUBERCULOSIS ASSOCIATION OF INDIA OVER THE YEARS**

**V.K. Arora\***

## **HISTORICAL PERSPECTIVE**

We are in covid-19 pandemic and therefore, relationship of COVID-19 and TB in particular is relevant for the public health system in India. Tuberculosis Association of India is committed to take on the challenge of both infections as both diseases are air borne and have high mortality. Also, isolation of cases and contacts for controlling COVID-19 can be problematic in low socioeconomic TB households. Under these circumstances and considering the large burden of active tuberculosis patients in India along with localized, hotspot and community transmission of COVID-19, the TB association of India has further extended its wings for creating awareness about both diseases so that stigma could be minimized in the community.

The Establishment of Tuberculosis Association of India in the year 1939 was a great landmark in the history of Tuberculosis prevention and cure in India. With the prime objective of prevention, control, treatment and relief from Tuberculosis the Association has come a long way in its glorious existence of over 80 years.

The Association has proud tradition of having the blessings of President of India as its Patron. The Director General of Health Services of the Government of India is ex-officio Chairman of the Association. The general management of affairs of the Association invested in and rests with the Central Committee who for purpose of Act XXI of 1960 is taken to be and acts as the Governing Body of the Association. The Central Committee includes among others the nominees of the Patron, Trustees of the Association, Honorary Treasurer, the Members of State TB Association, Members of Parliament, Director General of Armed Forces Medical Services, Director General, Railway Health Services, TB Adviser of the Government of India.

Primarily the main functions of TAI were to act as an Advisory Body on the prevention, control, treatment and relief of TB. It used to be a coordinating agency for standardizing methods for TB control, establishing model

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\*Vice-Chairman (P&R), Honorary Treasurer & 2<sup>nd</sup> Trustee, Tuberculosis Association of India

demonstration centres, undertaking research and investigation on subjects concerning TB and training health workers of the community and professionals. In the pre-chemotherapy era, when no anti TB drugs were available, the emphasis was laid on early diagnosis and prevention of the disease. Use of collapse therapy, nutritional support as the treatment and BCG vaccination for prevention of disease were practiced and advocated. TAI used to propagate these policies through workshops and conferences.

During the Chemotherapy era, it was realized that the traditional approach to the TB problem i.e. the sanatorium was beyond the means of our country with the limited resources and hence worked out the scheme of domiciliary treatment (then known as the Organized Home Treatment - OHT). This was later adopted as domiciliary treatment in National TB Control Programme. To demonstrate OHT, a model clinic, New Delhi TB Clinic was established, where in addition to treatment, patients were given advice regarding sputum hygiene, contact examination and other preventive measures.

Today the TAI has under its umbrella 27 State TB Associations spread almost all over India. The state affiliates of TAI in turn have over 400 district level associations. Over the years, some of the TAI hallmarks are:

### **NEW DELHI TUBERCULOSIS CENTRE**

A Model TB Clinic was established by an agreement between Tuberculosis Association of India and Government of India. This was later known as New Delhi TB Centre (NDTBC) and is a pioneer institute involved in research. In addition to providing quality treatment services, it has to its credit a number of landmark research studies which have guided Government of India in framing and revising TB control program. Important among the studies in past include: Relative merits of various schedules in domiciliary treatment of pulmonary tuberculosis (the study paved the way for concept of domiciliary treatment, at that time known as organized home treatment, as basis of NTP); The place of isolation in treatment and management of tuberculosis patients in India (The study showed that greater emphasis should be given on regular treatment rather than “Isolation”); A study to evaluate the contribution of an additional third drug as an initial supplement in treatment to pulmonary tuberculosis was conducted. It was concluded that the study failed to show any advantage in adding thiacetazone as the third drug to INH & Streptomycin in the initial

stages of treatment in patients with bacilli initially sensitive to all three drugs); prevalence of HIV infection among tuberculosis patients, study on epidemiology of tuberculosis in an urban population of Delhi – report of 30 years follow up, radiological and bacteriological profile of pulmonary tuberculosis in diabetics and many more.

All the studies arrived to conclusions which made an impact on guidelines of management of TB cases under the national program. In recent years, the important studies conducted include nation-wide ARTI estimation surveys, findings of which have been used by Government of India in monitoring the TB Control Programme.

When National TB Control Programme was launched in 1962, New Delhi TB Centre was one of the participating District TB Centres which covered the domiciliary area of old Delhi and provided free diagnosis and treatment facilities to the resident of the area. When Short Course Chemotherapy was introduced, many trials of treatment for evaluating duration and suitable regimen for Indian population were conducted at the Centre and the same incorporated in the program.

The laboratory of the Centre has ever been recognized by the WHO. In July 2009, Centre's laboratory was accredited as Intermediate Reference Laboratory for State of Delhi. The Centre also conducts a TB Health Supervisors' course which has the patronage of the Central TB Division of Government of India.

The TAI has all along played a big role in complementing the Revised National Tuberculosis Control Programme. The activities of the program are pushed and augmented through NDTB Centre. NDTBC is responsible for monitoring and evaluation of the RNTCP in the State of Delhi, analysis of quarterly program management reports, compilation and onward transmission of feedback to Central TB Division, Government of India. Quality assurance of sputum examination, which is the vital area for success of RNTCP, is controlled by NDTBC. With the support of state affiliates, TAI also conducts sensitization programs in Medical Colleges, state branches of Indian Medical Associations and for private practitioners.

### **TB SEAL CAMPAIGN**

The annual TB seal campaign was introduced in India by the TAI in the year



1950. The campaign is generally inaugurated on 2<sup>nd</sup> October, the Gandhi Jayanti Day every year by the President of India and aims at propagating TB awareness among people all over India. It also adds to raising funds to be used for promoting voluntary anti TB work in the country. The TB seal conveys the message that TB is preventable and the victim can be restored to normal life if diagnosed and treated early. The TB Seals printed by the Association have also won the acclaim of the International Union Against Tuberculosis and Lung Diseases, Paris.

### **INDIAN JOURNAL OF TUBERCULOSIS**

TAI is uninterruptedly publishing IJT, the quarterly journal, for over 65 years now. This is the only renowned TB journal published at the national level. Being a highly respected journal among the medical fraternity, it is indexed in Medline of National Library of Medicine USA. The Journal incorporates original research articles on TB and respiratory diseases of international standards. It has, on its editorial board, eminent scholars and researchers and good circulation among TB workers, Institutions in India and worldwide. The journal has been given a new look from the January, 2015 issue which coincides with its publication and marketing being outsourced with M/s. Elseviers.

In addition, TAI is periodically publishing guidelines for Medical Practitioners on current issues of management of TB. Some important guidelines published include Management of Extra-pulmonary Tuberculosis, Management of side effects of anti TB drugs, Role of NGOs in TB control, Management of TB in special situations. These are distributed during conferences and workshops and are also available on TAI's website.

### **NATIONAL CONFERENCE**

The Tuberculosis Association of India organizes a National Conference annually for the different categories of health providers including doctors, social workers, etc. to discuss and deliberate on different aspects of respiratory diseases, primarily tuberculosis. Last conference was held at Chennai in Tamil Nadu from 20<sup>th</sup> to 22<sup>nd</sup> December, 2019. The conference is held every year in association with the State TB Associations and institutions of national importance. The last conference, which was the 74<sup>th</sup>, was jointly organized by the Anti TB Association of Tamil Nadu and Government Hospital of Thoracic Medicine, Tambaram Sanatorium, Chennai, under the aegis of TB Association

of India at Chennai. The National Conference is generally attended by 500 to 600 doctors, researchers, particularly related to TB. The next Conference the 75<sup>th</sup> (Platinum Jubilee) National Conference on TB and Chest Diseases (NATCON -2020) is being organized at Indore from 18<sup>th</sup> to 20<sup>th</sup> December, 2020.

The Scientific Programme of the Conference has participation from all over the country. The Conference is preceded by pre-conference workshops. There is a healthy mix in the Scientific Programme of Tuberculosis and Non Tuberculosis Chest Diseases and free paper sessions along with Poster Presentations. The Civil Society, Central TB Division, DGHS and Senior Tuberculosis Workers support the Conference and participate in the development of the Scientific Programme and also by delivering Guest Lectures on important topics. The Programme generally covers TB Epidemiology, Multi Drug Resistant TB, National TB Control Programme, Paediatric Tuberculosis, Geriatric Tuberculosis, TB Immunology & Lab issues, Newer TB Drugs, Co-morbidities and TB, TB & HIV Co-infection. In non-TB Chest Diseases, there are symposia on Asthma, COPD, Lung Cancer, Critical Care, Radiological Imaging, Biostatistics, New Research areas and Future Vision in Pulmonology.

During the conference, the eminent workers in the field of Tuberculosis and Respiratory Diseases are honored with Orations like Dr. P.K. Sen Gold Medal Oration, TAI Oration, O.A. Sarma Oration, Lupin TAI Oration, S.N. Tripathy Memorial Oration, R.C. Jain Life Time Achievement Award, etc.

The medical fraternity and tuberculosis workers, in particular, immensely benefit from the National Conference.

### **PROPOSED FUTURE ACTIVITIES**

Much has been accomplished but much more has to be done. No national program can succeed without the patronage of institutes like TAI. Community participation plays an important role in its success. TAI proposes to further gear up its research activities. In the last five years, the Association has funded over 100 short term research projects. A Communication Cell will be created which will mainly aim at increasing public awareness about the disease, involve community leaders in the control effort and enlist cooperation of patients and their families in seeking proper diagnosis and to complete treatment till cure. A

Cell dealing with Environment has been established. There is also a proposal to set up TB-HIV cell in TAI complex for disseminating awareness about the co-infection, its prevention and management. Its proposed to strengthen the State Associations by providing some funds.

The Tuberculosis Association of India, which is now eighty years old, has really lived up to the aspirations of its founding fathers. It has played a leading role in the prevention and cure of Tuberculosis and shall continue to do so.

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## PRESIDENTIAL ADDRESS



**Dr.K.K.Chopra\***  
**Director, New Delhi TB Centre**  
**New Delhi**

It is my privilege to deliver presidential address during 74<sup>th</sup> NATCON. I am thankful to TB Association of India and technical committee of NATCON for nominating me as president of this prestigious conference.

TAI is the mother NGO working in the field of tuberculosis as torch bearer and actively supporting national TB program in formulating guidelines for TB control and prevention of TB. The state branches of TAI are very active in implementing policies of national TB programme with great zeast and conduct various programme for spreading awareness about TB and it's preventive measures. This NATCON which is held every year in rotation in each state is an example of this. NATCON usually attracts number of clinicians, academicians, researchers and programme managers to discuss and disseminate their research, rich clinical experience and latest policies of TB program. This platform gives an

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*\*Excepts from the Presidential address delivered at the 74<sup>th</sup> National Conference on Tuberculosis and Respiratory Diseases held at Chennai in December, 2020*

opportunity to young researchers to gain experience from their teachers and mentors. Programme managers also get a chance to discuss their latest policies and get feedback from the workers functioning in the field in implementing these policies and get critical reviews which help them in reviewing their policies.

Indian Journal of Tuberculosis is the only official journal in India focussing on Tuberculosis and respiratory diseases. Recently the journal has been indexed and under able guidance of its executive Editor, **Dr. V.K. Arora** has progressed in leaps and bounds. It's reach has increase to all parts of India and many other countries.

It is publishing original research articles, review articles by eminent personalities in the field of Tuberculosis, interesting case reports by clinicians, status reports by national TB programme and provides a platform for discussion on current topics. It's Editorial board comprise of national experts in different fields as well as international experts of repute.

National TB programme under the able guidance of national manager **Dr K.S. Sachdeva** and his team is at its best and marching towards ambitious goal of TB elimination by 2025, as the target set by Hon'ble Prime Minister of India.

Today with highest political commitment, increased community awareness, rapid molecular diagnostics, wide spread laboratory network, very effective, well tried, shorter treatment regimens, there is a great possibility of achieving the target. If we can introduce effective vaccine, take along private sector, successfully launch management of LTBI and maintain the momentum achieved, our goal is not far off. Other sectors involved in health care, medical college faculty, different medical

associations and ministries are all working together. I hope we have now the best possible platform to achieve the target.

Research in the field of TB is another important aspect in focus. The TB programme with the help of national, zonal and state task forces are very actively working hard to support research financially and create interest among younger doctors in research. Indian Council of Medical Research (ICMR), prestigious medical institute and many international organisations are also working in this direction. Research Consortium of ICMR is providing opportunity for multicentric studies in Indian and international institutes of repute. Research in the field of developing new drugs and rapid diagnostics for point of care are need of the hour. Operational research is another area of focus. Field research in implementing programme policies, new diagnostics, new treatment regimens and patient support system help a lot to the programme in framing newer strategies.

This 74<sup>th</sup> NATCON being organized at Chennai is providing great opportunity to delegates to interact with national and international experts. The scientific committee of NATCON has chalked out a robust programme consisting of various newer topics, panel discussions on current TB programme aspects, symposia on respiratory Diseases contributed by eminent personalities in the field of TB and respiratory diseases. Poster sessions will be helpful to young researchers to share their research and get feedback from delegates. Various the preconference workshop is another regular feature of NATCON. It provides hands-on experience to young Doctors.

Another interesting feature of the conference is editorial board meeting, in which the representative of our publisher Elsevier presents the latest review of the articles published in the journal and

it's impact factor. Efforts to increase reach of the journal is also discussed. Members give suggestions to further improve the content of journal and how to increase it's popularity at international level.

In the end, I wish success to the conference and appreciate sincere hard work by local organizing team, TB Association of India, it's chairman, Vice Chairman, technical Adviser and Secretary General. I hope delegates will get a rich feast of academic knowledge and good time at the conference.

**TB Harega Desh Jeetega**

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## **Covid-19 and social stigma : Role of Scientific Community**

***K.K. Chopra<sup>1</sup>, V.K. Arora<sup>2</sup>***

On 31<sup>st</sup> December 2019, health authorities in Wuhan, a city in Hubei province of China, reported the first few cases of atypical pneumonia which were eventually attributed to a novel coronavirus (2019-nCoV). The World Health Organization (WHO) declared the outbreak of 2019-nCoV as a Public Health Emergency of International Concern (PHEIC) on 30<sup>th</sup> January 2020, and on 11<sup>th</sup> March 2020 it was declared a pandemic.

In less than 6 months, this virus has reached all but a handful of countries spread all around the globe. It has already killed around 5 lac people and infected a total of 1 crore. It has posed major challenges for public health systems, especially in least developed and developing countries. At the same time, it has crippled the economies world-wide, making it difficult for the countries to fight this deadly disease. Because of its wide reach, it has produced much stress and anxiety among the communities leading to fear of the virus and stigma.

### **Social stigma**

According to WHO, in context of health, social stigma means a negative association between a person or group of people who share certain characteristics and a specific disease.<sup>1</sup> In an outbreak, this may mean people are labelled, stereotyped, discriminated against, treated separately, and/or experience loss of status because of a perceived link with a disease. Such treatment can negatively affect those with the disease, as well as their caregivers, family, friends, and communities. People who do not have the disease but share other characteristics with this group may also suffer from stigma<sup>2</sup>.

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1. Director, New Delhi Tuberculosis Centre, New Delhi and Associate Executive Editor, Indian Journal of Tuberculosis.

2. Vice Chairman (P&R), TB Association of India and Executive Editor, Indian Journal of Tuberculosis.

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Stigma carries serious consequences including fuelling fear, anger, and intolerance directed at other people. People who are subjected to stigma are more likely to experience reluctance to seek out treatment, leading to delayed treatment, which increases morbidity and mortality. They also experience worse psychological well-being, harassment, violence, or bullying, poor quality of life and disability, and increased socioeconomic burden and increased feelings of shame and self-doubt.

### **Stigma in Covid-19**

COVID-19 has led to stigma and discrimination among various groups of people in different populations. Healthcare workers caring for those affected by COVID-19<sup>3</sup>, people who have recovered from COVID-19,<sup>4</sup> those belonging to lower socio-economic groups, those having particular religious and racial identities have all been at the receiving end of the discrimination. COVID-19 has led to reinforcement of pre-existing stereotypes against various groups. For instance, in Italy, in weeks before the national lockdown started, a state of emergency was declared but everyday life was going on as always, the sentiment toward the Chinese community changed: their restaurants were left empty, more and more parents did not want their children to go to school if they had a Chinese classmate, and a high-profile politician said on TV that 'we have all seen them eat live mice'.<sup>5</sup>

In addition to this, public health response to COVID-19 in itself carries the risk of increasing stigma and causing discrimination. For instance, social distancing norms, essential to contain the spread of the disease, can result in 'Othering' of those affected by it. Enforcement of travel bans, movement restrictions, and quarantines may disproportionately affect already stigmatized persons, including homeless persons, persons who are incarcerated, migrants and refugees, undocumented immigrants, and minorities. COVID-19 travel restrictions may also facilitate stigma and xenophobia by reproducing the social construction of illness as a foreign invasion, in turn reinforcing social hierarchies and power inequities.<sup>6,7</sup> UNAIDS recommends that in lieu of criminalization for breaching COVID-19 public health policies, approaches should focus on empowering and strengthening communities to support persons to protect their own and one other's health.<sup>8</sup>

## **Opinion**

In the setting of a pandemic, stigma and resulting discrimination can pose significant challenges to health of people in general and those vulnerable in particular and can reduce the effectiveness of public health measures implemented to contain the spread of disease. It can result in reduction of social capital through exacerbation of existing social inequities and creating new forms of social divisions and resentments. In this way, it can be detrimental to the social fabric in the long run.

Both Covid 19 and tuberculosis are air borne diseases and in both social cohesion and social isolation is driving people to hide their illness to avoid discrimination and thereby delaying diagnosis and treatment. Stigma can undermine the social matrix of the country and poses barrier for disease control.

Scientific community has a great role to play to allay stigma in society. First and foremost is of course, containing the spread of infection. Second is to assess the level of prevailing stigma, and at what level, society, family, friends, and workplace. Strategies should be developed to tackle at all levels. Treating physicians are best placed to help in this. Whenever managing an individual case, they should discuss this issue also with patients and their family members.

Nowadays most of doctors and scientists are often discussing COVID-19 on electronic and social media about its occurrence, management, prevention, vaccination, other challenges etc. They forget to mention social stigma. It is urgent and need of the hour also, that social stigma issue should be important part in all such discussion.

## **Conclusion**

Preventing the rise of discrimination requires a multi-pronged strategy. First, containing the spread of disinformation and misinformation by widespread dissemination of authentic information as well as conducting fact-checks on the prevalent misinformation. Second, educating the public about the ill-effects of consuming and sharing false information. Third, being



conscious of issues of inequities and pre-existing stereotypes in order to guard against them.

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## **CALENDAR OF TUBERCULOSIS WORKERS' CONFERENCE**

- 1st     The First Conference of Tuberculosis was organised in New Delhi in November, 1934 by the King George Thanks-giving (Anti-Tuberculosis) Fund. Twenty-four delegates attended this three- day conference. Under the auspices of the Tuberculosis Association of India, the First All India Tuberculosis Workers' Conference was held in New Delhi in November, 1939. Fifty delegates attended it.
- 2nd     The Second Conference was held in New Delhi in November, 1940. This was attended by ninety delegates.
- 3rd     The Third Conference was held in New Delhi in March, 1945. Seventy delegates attended. Sir Joseph Bhore presided.
- 4th     The Fourth Conference was held in New Delhi in November, 1946 and was attended by 110 delegates.
- 5th     The Fifth Conference was held in January, 1948 at Madras. Over hundred delegates attended it. His Excellency, Sir Archibald Nye, Governor of Madras, inaugurated the conference.
- 6th     The Sixth Conference was held in Calcutta in December, 1948. Dr. R. B. Billimoria was its President. Dr. B. C. Roy, Premier of West Bengal, inaugurated the Conference. 130 delegates attended.
- 7th     The Seventh Conference was held in Bombay in November, 1949. Its President was Dr. A. C. Ukil. Rajkumari Amrit Kaur, Minister of Health, Government of India, and President of the Tuberculosis Association of India, inaugurated the conference. 130 delegates attended.
- 8th     The Eighth Conference was held in Hyderabad in February, 1951. Dr. K. Vasudeva Rao was its President. Over 150 delegates attended. It was inaugurated by Dr. K.C.K.E. Raja, Director-General of Health Services and Chairman, Tuberculosis Association of India.
- 9th     The Ninth Conference was held in February, 1952 in Lucknow. Dr. P. V. Benjamin was its president. Over 170 delegates attended. It was inaugurated by Dr. K.C.K.E. Raja, D.G.H.S. and Chairman, Tuberculosis Association of India.
- 10th    The Tenth Conference met in Mysore in February. 1953. Dr. K.L. Wig presided in the absence of Late R.B. Lal, the President-elect. It was inaugurated by Rajkumari Amrit Kaur, Union Health Minister and President of the Tuberculosis Association of India.
- 11th    The Eleventh Conference was held in Nagpur in February, 1954. Dr. K. L. Wig was its President. About 130 delegates attended. Dr. Pattabhi Sitaramayya, Governor of Madhya Pradesh, inaugurated it.

- 12th The Twelfth Conference was held in Amritsar in February, 1955 with Dr. B.B. Yodh as the President. About 175 delegates attended. Shri C.P.N. Singh Governor of Punjab, inaugurated the Conference.
- 13th The Thirteenth Conference was held in Trivandrum in January 1956. Dr. T.J. Joseph was its President. About 150 delegates attended. His Highness the Rajpramukh of Travancore inaugurated it.
- 14th The Fourteenth Conference was held in Madras in January, 1958. Dr K.S. Sanjivi was its President. About 200 delegates attended. It was inaugurated by Shri Bishnuram Medhi, Governor of Madras.
- 15th The Fifteenth Conference was held in Jaipur, 1959. It was inaugurated by Dr. D.P. Karmakar, Union Health Minister. Over 200 delegates attended. Dr. B.K. Sikand was the President of this conference.
- 16th The Sixteenth Conference was held in Poona in January, 1960. Over 250 delegates attended. Dr. P.K. Sen was its President. It was inaugurated by Rajkumari Amrit Kaur, Union Health Minister and President, Tuberculosis Association of India.
- 17th The Seventeenth Conference was held in Cuttack in January-February, 1961. It was inaugurated by Shri Y.N. Sukthankar, Governor of Orissa. Over 200 delegates attended. A new feature of the conference was that Dr. A.S. Modi attended as the Guest Speaker From Hong Kong. Dr. J. Frimodt-Moller was its President.
- 18th The Eighteenth Conference was held in Bangalore in January, 1962. Dr. R.N. Tandon was its President. Over 300 Delegates attended. The conference was inaugurated by the Maharaja, Shri Jayachamaraja Wadiyar Bahadur, Governor of Mysore.
- 19th The Nineteenth Conference was held in Delhi in April, 1964. Dr. L.R. Dongrey was its President. Over 400 delegates attended. The conference was inaugurated by Dr. Sushila Nayar, Union Minister for Health.
- 20th The Twentieth Conference was held in Ahmedabad in February, 1965, and was presided over by Dr. M.D. Deshmukh. The conference was inaugurated by Nawab Mehdi Nawaz Jung, Governor of Gujarat. About 300 delegates attended it.
- 21st The Twenty-first Conference was held in Calcutta in February, 1966. Dr K.N. Rao, Director- General of Health Services and Chairman, TB Association of India, was its President. About 350 delegates attended. The Conference was inaugurated by Smt. Padmaja Naidu, Governor of West Bengal.
- 22nd The Twenty-second Conference was held in Hyderabad in February, 1967. Major (Dr.) Khushdeva Singh of Patiala was the President of the Conference.

It was inaugurated by Shri Pattom Thanu Pillai, Governor of Andhra Pradesh. Over 250 delegates attended.

- 23rd The Twenty-third Conference was held in Bombay in January, 1968. Dr. R. Viswanathan was its President. It was inaugurated by Dr. P.V. Cherian, Governor of Maharashtra, Over 300 delegates attended.
- 24th The Twenty-fourth Conference was held in Trivandrum in January, 1969. The President of the Conference was Dr. N.L. Bordia. It was inaugurated by Shri V.Viswanathan, Governor of Kerala. Over 300 delegates attended.
- 25th The Twenty-Fifth National Conference was held in Patiala, Punjab, in January, 1970. Dr. M. Umesh Rao was the President of the Conference. It was inaugurated by Dr. E.C. Pavate, Governor of Punjab. About 250 delegates attended.
- 26th The Twenty-Sixth Conference was held in Bangalore in January, 1971. Dr. K. Somayya was its President. Shri Dharma Vir. Governor of Karnataka, inaugurated the Conference. About 300 delegates attended.
- 27th The Twenty-seventh Conference was held in Patna in November, 1972, Dr. K.N. De of Calcutta was its President. Shri Dev Kant Barooah, Governor of Bihar, inaugurated the Conference. About 250 delegates attended.
- 28th The Twenty-eighth National Conference was held in Madras, in January 1974. Dr. S.P. Pamra was its President. Shri K.K.Shah, Governor of Madras, inaugurated the conference. Over 300 delegates attended
- 29th The Twenty-ninth Conference was held in New Delhi in November, 1974. This was combined with the IXth Conference of the Eastern Region of the I.U.A.T. Due to the absence of Dr. M.S. Chadha, Shri S. Ranganathan, President of the Association, Presided over the Conference. The Conference was inaugurated by Shri Fakhruddin Ali Ahmed, President of India and addressed by Dr. Karan Singh, Union Minister for Health and Family Planning. Over 400 delegates attended the Conference.
- 30th The Thirtieth Conference was held in Hyderabad in November, 1975. Dr. H.B. Dingley was its President. Over 200 delegates attended the Conference. It was inaugurated by Shri S. Obul Reddy, Governor of Andhra Pradesh.
- 31st The Thirty-first Conference was held in Lucknow in November, 1976. Dr. Tahir Mirza was its President. Over 300 delegates attended the conference. It was inaugurated by Shri M. Chenna Reddy, Governor of Uttar Pradesh.
- 32nd The Thirty-second Conference was held in Trivandrum in November, 1977. Dr.K.V. Krishnaswami was its President. About 400 delegates attended the conference. Smt. Jyoti Venkatachallam, Governor of Kerala, inaugurated the Conference.

- 33rd The Thirty-third Conference was held in Bhopal in November, 1978. Dr. J.L. Bhatia was its President. The Conference was inaugurated by Shri C.M. Poonacha, Governor of Madhya Pradesh. About 300 delegates attended.
- 34th The Thirty-fourth Conference was held in Jaipur in October, 1979. Dr. M.L. Mehrotra was its President. Shri Bhairon Singh Shekawat, Chief Minister of Rajasthan, inaugurated the Conference. About 300 delegates attended.
- 35th The Thirty-fifth Conference was held in Bombay in November, 1980. Dr. M.M. Singh was its President. Dr. Bali Ram Hira, State Health Minister, Maharashtra, Inaugurated the conference. About 500 delegates attended.
- 36th The Thirty-sixth Conference was held in Baroda in November, 1981. Dr. G.D. Gothi was its President. Smt. Sharda Mudherjee, Governor of Gujarat, inaugurated the Conference. About 500 delegates attended.
- 37th The Thirty-seventh Conference was held in New Delhi in November 1982. Dr. Jaswant Singh was its President. Shri M. Hidayatullah, Vice-President of India, inaugurated the Conference. About 600 delegates attended.
- 38th The Thirty-eighth Conference was held in Panaji in October, 1983. Dr. S. Sivaraman was its President. Shri K.T. Satarawala, Lt. Governor of Goa, Daman Diu, inaugurated the Conference. About 700 delegates attended.
- 39th The Thirty-ninth Conference was held in Cuttack in January, 1985. Dr. A.G. Patel was its President. Shri B.N. Pandey, Governor of Orissa, inaugurated the Conference. About 500 delegates attended.
- 40th The Fortieth Conference was held in Shillong in November, 1985. Dr. D. Umapathy Rao was its President. Smt Mohsina Kidwai, Union Minister for Health and Family Welfare, inaugurated the Conference. About 400 delegates attended.
- 41st The Forty-first Conference was held in Hyderabad in October, 1986. Dr. S.P. Gupta was its President. Smt Kumudben Mani Shankar Joshi, Governor of Andhra Pradesh, inaugurated the Conference. About 500 delegates attended.
- 42nd The Forty-second Conference was held in Lucknow in December 1987. Dr. P.A. Deshmukh was its President. Shri Lokpathi Tripathi, Minister for Health and F.W., U.P. inaugurated the Conference. About 500 delegates attended.
- 43rd The Forty- third Conference was held in Calcutta in December 1988. Dr.S.P. Tripathy was its President Prof. S. Nural Hasan, Governor of West Bengal inaugurated the Conference. About 450 delegates attended.
- 44th The 44th National Conference on Tuberculosis and Chest Diseases was held in Madras in December, 1989. In the absence of Dr. S.C. Kapoor, President



of Conference, Dr. K. Jagannath presided over the Conference. Dr. K. Deivasnamani, Minister for Health & Family Welfare, Government of Tamil Nadu, inaugurated the Conference. About 600 delegates attended.

- 45th The 45th National Conference on Tuberculosis and Chest Diseases was held in Rohtak (Haryana) in January 1991. Prof. K.C. Mohanty was its President. Shri Dhanik Lal Mandai, Governor of Haryana, inaugurated the Conference. About 400 delegates attended.
- 46th The 46th National Conference on Tuberculosis and Chest diseases was held in New Delhi on November 1991. Dr. S.B. Trivedi was its President. Dr. M.S. Chadha, President, Tuberculosis Association of India, inaugurated the Conference. About 450 delegates attended.
- 47th The 47th National Conference on Tuberculosis and Chest Diseases was held in Bombay in November 1992. Dr D. P. Verma was its President. Shri C. Subramaniam, Governor of Maharashtra, inaugurated the Conference. About 600 delegates attended.
- 48th The 48th National Conference on Tuberculosis and Chest Diseases was held in Bhopal (Madhya Pradesh) in December 1993. Dr. M.M.S. Siddhu was its President. Shri Mohammed Shafi Qureshi, Governor of Madhya Pradesh, inaugurated the Conference. About 450 delegates attended.
- 49th The 49th National Conference on Tuberculosis and Chest Diseases was held in Pondicherry in October 1994. Dr. R.C. Jain was its President. Shri Paban Singh Ghatowar, Union Dy. Minister for Health and Family Welfare inaugurated the Conference. About 500 delegates attended.
- 50th The Golden Jubilee National Conference on TB & Chest Diseases was held in Trivandrum in December 1995. Dr. C. Srinivasa Rao was its President. Shri P. Shiv Shankar, Governor of Kerala, inaugurated the Conference. About 550 delegates attended.
- 51st The 51st National Conference on TB & Chest Diseases was held in Bangalore (Karnataka) in November 1996. Dr. Hoimi Basu was its President. His Excellency Shri Khursheed Alam Khan, Governor of Karnataka, inaugurated the Conference. About 600 delegates attended.
- 52nd The 52nd National Conference on TB & Chest Diseases was held in Ahmedabad (Gujarat) in December 1997. Dr. R.P Bhagi was its President. Shri Dilipbhai Parikh, Hon'ble Chief Minister of Gujarat, inaugurated the Conference. About 600 delegates attended.
- 53rd The 53rd National Conference on TB & Chest Diseases was held at Bhubaneswar (Orissa) from 27th to 30th December, 1998. Dr. I. Ranga Rao



was the President of the 53rd National Conference. Shri Jagannath Rout, the Hon'ble Minister of Urban Development, Orissa, inaugurated the Conference which was attended by about 400 delegates.

- 54th The 54th National Conference on Tuberculosis and Chest Diseases was held at L. N. Mishra Institute Auditorium, Bailey Road, Patna (Bihar), from 26th to 29th December, 1999. Dr. M.S. Agnihotri was the President of this 54th National Conference, which was attended by about 400 delegates.
- 55th The 55th National Conference on TB & Chest Diseases was held at Taj Bengal, Calcutta from 7th to 10th December, 2000. Dr. D. Bhounsule was the President of the Conference, which was attended by about 500 delegates.
- 56th The 56th National Conference on Tuberculosis and Chest Diseases was held at Hotel Le Royal Meridien, Chennai from 9th to 12th October, 2001. Dr. M. Pradhan was the President of the Conference, which was attended by about 550 delegates.
- 57th The 57th National Conference on Tuberculosis and Chest Diseases was held at Kala Academy, Panaji, Goa from 26th to 29th September, 2002. Dr. S.N. Tripathy was the President of the Conference, which was attended by about 500 delegates.
- 58th The 58th National Conference on Tuberculosis and Chest Diseases was held at Taj Lands Ends, Mumbai from 2nd to 4th January, 2004. Dr. P. Jagota was the President of the Conference, which was attended by about 600 delegates.
- 59th The 59th National Conference on Tuberculosis and Chest Diseases was held at LRS Instt. of TB and Respiratory Diseases, New Delhi from 3rd to 6th February, 2005. Dr. V.K. Arora was the President of the Conference, which was attended by about 600 delegates.
- 60th The 60th National Conference on Tuberculosis and Chest Diseases was held at K.G. Medical University, Lucknow, from 23rd to 26th February, 2006. Dr. P.R. Narayanan was the President of the Conference, which was attended by 500 delegates.
- 61st The 61st National Conference on Tuberculosis and Chest Diseases was held at RNT Medical College, Udaipur (Rajasthan) from 23rd to 25th February, 2007. Lt. General Dr. R. Jayaswal was the President of Conference, which was attended by about 500 delegates.
- 62nd The 62nd National Conference on Tuberculosis and Chest Diseases was held at New Delhi TB Centre, New Delhi from 14th to 16th December, 2007. Dr. S.K. Katiyar was the President of the Conference. Dr. Ambumani Ramadoss, Hon'ble Minister for Health & Family Welfare, Govt. of India, inaugurated the Conference, which was attended by about 400 delegates.

- 63rd The 63rd National Conference on Tuberculosis & Chest Diseases and First International Conference of South Asia Region (The Union) was held in New Delhi from 8th to 10 September 2008. Dr. R.K. Srivastava, Chairman, TAI and Director General of Health Services with the President of the Conference. About 550 delegates attended the Conference.
- 64th The 64th National Conference on Tuberculosis & Chest Diseases was held at Science City Auditorium, Kolkata, from 27th to 29th December, 2009. Dr. Manish Pradhan was the President of the Conference. About 350 delegates attended the Conference.
- 65th The 65th National Conference on Tuberculosis & Chest Diseases was held at Bangalore, from 9th to 11th January, 2011. Dr. Prahlad Kumar was the President of the Conference. About 450 delegates attended the Conference.
- 66th The 66th national Conference on Tuberculosis & Chest Diseases was held at Dehradun, Uttrakhand from 19th to 20th November, 2011. Dr. D. Behera was the President of the Conference. About 350 delegates attended the Conference.
- 67th The 67th National Conference on Tuberculosis & Chest Diseases was held at Patna, Bihar from 8th to 10th February 2013. Dr. Rajendra Prasad was the President of the Conference. About 450 delegates attended the Conference.
- 68th The 68th National Conference on Tuberculosis and Chest Diseases was held at New Delhi from 23rd to 26th Feb 2014 and was inaugurated by the Hon'ble President of India. Dr. L.S. Chauhan was the President of the conference. The conference was organised under auspices of the National Institute of Tuberculosis and Respiratory Diseases, New Delhi (Eastwhile LRS Institute of TB and Respiratory Diseases).  
over 600 delegates attended the conference.
- 69th The 69th National Conference on Tuberculosis and Chest Diseases was held at Mumbai from 5th to 7th Feb 2015. Dr. Rohit Sarin was the President of the Conference. The Conference was organised in association with the Anti TB Association of Maharashtra. Over 350 delegates attended the conference.
- 70th The 70th National Conference on Tuberculosis and chest Diseases was held at convention center, King George Medical University, Lucknow (U.P.) in Feb.-2016. Dr. Jai Kishan was the President the conference. The Conference was organised in association with the TB Association of U.P. and the Deptt. of Pulmonary, King George University Lucknow. Over 650 delegates attended the conference.

- 71st The 71<sup>st</sup> National Conference on Tuberculosis and Chest Diseases was held at PGI Chandigarh from 16<sup>th</sup> to 18<sup>th</sup> December, 2016. Dr. K.B. Gupta was President of the Conference. The Conference was inaugurated by Dr. Soumya Swaminathan, Director General, ICMR and Secretary, Department of Health Research, Ministry of health and Family Welfare, Government of India, New Delhi. Over 650 delegates attended the Conference.
- 72nd The 72<sup>nd</sup> National Conference on Tuberculosis and Chest Diseases was held at Konaseema Institute of Medical Sciences & Research Foundation, Amalapuram and Hotel River Bay, Rajamundry, Andhra Pradesh, from 15<sup>th</sup> to 17<sup>th</sup> December, 2017. Dr. Bamin Tada was President of the Conference, Dr. C.V. Rao, Vice-Chancellor, NTR University of Health Sciences, Andhra Pradesh, inaugurated the conference. Over 450 delegates attended the conference.
- 73rd The 73rd Conference on Tuberculosis and Chest Diseases was held at Nagpur, Maharashtra, from 4th to 6th January, 2019. The conference was organised jointly by the Department of Respiratory Medicine, Indira Gandhi Government Medical College, Nagpur, Vidarbha Chest Association and the Maharashtra State Anti-TB Association, Mumbai, under aegis of the Tuberculosis Association of India. Dr. Sunil Khaparde was the President of the Conference. Over 500 delegates attended the conference.
- 74th The 74<sup>th</sup> Conference on Tuberculosis and Chest Diseases was held at Chennai, Tamil Nadu, from 20<sup>th</sup> to 22<sup>nd</sup> December, 2019. The conference was organised jointly by the Government Hospital of Thoracic, Tambaram Sanatorium, Chennai and the Anti-TB Association of Tamil Nadu, Chennai, under aegis of the Tuberculosis Association of India. Dr. K.K. Chopra was the President of the Conference. Over 700 delegates attended the conference.
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## List of State Tuberculosis Association

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—JCP 2010; 21 (2): 81–86.

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# THE TUBERCULOSIS ASSOCIATION OF INDIA



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