

FOGSI

CONNECT



THE FOGSI NEWSLETTER

February 2025





FOGSI NORTH ZONAL CONFERENCE WITH YUVA 2025

ORGANISED BY: KHORA MAKANPUR OBSTETRIC &
GYNAECOLOGICAL SOCIETY (KMOGS)

VENUE: DR AMBEDKAR INTERNATIONAL CENTRE, NEW DELHI

Theme: "Dimple to Wrinkle - Story of Self-love"

15 ICOG
POINTS



21st-23rd
February
2025

Conference Brochure



Dear FOGSIAN's,

As I step into this journey as the President of FOGSI, I am humbled by the incredible support and enthusiasm of our fraternity. We began this auspicious journey with divine blessings—on 5th January, we visited Gagangiri Maharaj's Khopoli Ashram, and on 7th January, we sought the blessings of Lord Ganesha at the Siddhivinayak Temple. With this spiritual strength, my installation on the 9th of January marked the beginning of a new chapter—one dedicated to strengthening women's health across the nation.

We officially launched our Aarogya Yog Yatra at Tirupati on 21st Jan 2025, a unique initiative to integrate spirituality into medical practice. Following this, we successfully hosted our First Presidential Conference in the Andaman Islands and the Second Presidential Conference in Nagar, bringing together brilliant minds to discuss the future of women's healthcare. Flag Hosting on 26th Jan, on Land of freedom fighter was most memorable event.

Our flagship social projects, Sampoorna (Swastha Janma Abhiyan) and Know Your Numbers, are making remarkable strides across the country. Many FOGSIans are actively conducting camps and filling out Google Forms, helping us gather invaluable health data. The Sampoorna initiative is focused on pre-conceptional health and planned pregnancies, ensuring every woman is equipped for a healthy motherhood journey.

Parallel to these initiatives, we are strengthening awareness on the importance of vaccination in women. With the support of GSK, we are rolling out 100 Continuing Medical Education (CME) sessions to educate gynecologists on this crucial aspect of preventive care.

A significant Milestone achieved on 4th February - World Cancer Day, as we launch 'Do Teeke Zindagi Ke', our nationwide campaign on cervical cancer awareness and elimination. This program is a call to action for every FOGSIan to take the lead in ensuring HPV vaccination and screening become a priority in women's health.

FOGSI's academic and social programs continue to grow, and I urge each one of you to actively participate, stay engaged, and visit our FOGSI website for updates. Please scan the available QR codes for easy access to various initiatives, including the Evidence-Based Recommendations (EEBR), now accessible to every FOGSIan.

Together, let us make 2025 a year of impact, progress, and transformation for women's healthcare in India.

Har Ghar FOGSIan!

Warm regards,
Dr. Sunita Tandulwadkar
President, FOGSI, 2025

“

Our flagship social projects, Sampoorna (Swastha Janma Abhiyan), Do Teeke Zindagi Ke and Know Your Numbers, are making remarkable strides across the country. Many FOGSIans are actively conducting camps and filling out Google Forms, helping us gather invaluable health data.

”



“

Under her inspiring leadership, FOGSI has undertaken a journey that seamlessly combines academics, social responsibility, and spirituality, creating a profound impact across the country.

”

Dear FOGSIAN's,

‘समग्रता हि नेतृत्वस्य आत्मा भवति।’

“Comprehensiveness is the very soul of leadership”.

It is with great joy and pride that I welcome you to the **February 2025 edition of FOGSI CONNECT**, a newsletter that embodies the dynamic spirit of the FOGSI family and showcases the incredible vision and initiatives of our President, **Dr. Sunita Tandulwadkar**.

Under her inspiring leadership, FOGSI has undertaken a journey that seamlessly combines academics, social responsibility, and spirituality, creating a profound impact across the country. This issue celebrates her visionary endeavors, including the **Arogya Yog Yatra**, a remarkable initiative launched at Tirupati with darshan and a spiritually enriching CME, as well as the unveiling of the anthem that resonates with the essence of healing through spirituality.

We also shine a light on **Sampoorna - The Preconceptional Project**, an ambitious program aimed at empowering women with essential knowledge and care even before conception. From her grand installation at the JIO convention Centre, Mumbai, seeking blessings from Khopoli Ashram and the trailblazing EAGLE Project, Dr. Tandulwadkar's presidency has truly set the stage for transformative change in women's health. This edition features two thought-provoking invited articles: one by **Dr. Manju Puri on Preconceptional Care**, and the other by **Dr. Syed Ali on HPV Vaccination**, both addressing critical aspects of preventive and proactive healthcare and echoing the essence of presidential flagship programs.

In addition, we present detailed reports from the **Clinical Research Committee, Adolescent Committee, Public Awareness Committee, and Family Welfare Committee of FOGSI**, alongside state reports from **Maharashtra (AMOGS) and Karnataka (KSOGA)**, reflecting the incredible work happening across regions.

FOGSI CONNECT is more than just a newsletter; it is a testament to our collective achievements and shared vision for the future. It reflects our commitment to progress, innovation, and the holistic advancement of women's health.

I hope this issue inspires each of you to actively participate in these initiatives and join hands in creating meaningful change. Together, let us continue to grow, evolve, and uplift one another as we advance our shared mission.

Happy reading!

Warm regards,
Prof. Dr. Surekha Tayade
Editor, FOGSI Connect, February 2025

A Spiritual Beginning at the Khopoli Ashram...



On January 9th, at 5:30 PM, Dr. Sunita Tandulwadkar proudly assumed the prestigious role of the 63rd President of FOGSI, marking a significant milestone within the Federation. Ahead of this remarkable occasion, Dr. Tandulwadkar, along with Team FOGSI and her family, visited the revered Shri Gagangiri Maharaj Ashram in Khopoli on 5th January 2025 to seek blessings for her journey ahead.

The visit was a deeply spiritual experience, featuring a Homa, Havan, Pooja, and Aarti, as they humbly sought Maharaj's divine guidance. This sacred ceremony signified the commencement of the Arogyayog Yatra, reflecting Dr. Tandulwadkar's dedication to advancing women's health, maternal care, and academic excellence under FOGSI.

Dr. Tandulwadkar was accompanied by her committed team members, including Dr. Ashwini Kale, Dr. Pooja Lodha, Dr. Arti Nimkar, Dr. Chaitanya Gunpule, Dr. Poonam Goyal, Dr. Jayam Kanan, Sudeep Mukherjee, Chandra, and others, who joined her in this momentous beginning. Maharaj's blessings, which have been a source of inspiration for Dr. Tandulwadkar since childhood, reinforced her strength and resolve to lead with purpose and humility.

The sacred visit not only marked the start of her tenure but also emphasized the unity and shared vision of her team. Together, they aim to transform the landscape of



women's health and maternal care across the country, while ensuring that academic advancements remain a cornerstone of FOGSI's mission. This spiritual beginning set the tone for a presidency rooted in compassion, dedication, and a relentless pursuit of excellence. With gratitude in her heart and a clear vision for the future, Dr. Tandulwadkar has embarked on a transformative journey, inspiring hope and progress for the FOGSI community.

The auspicious start of her tenure serves as a beacon of inspiration, symbolizing her unwavering commitment to creating a meaningful and lasting impact in gynecology and obstetrics, while uniting the FOGSI fraternity in a shared mission of progress and innovation.



Siddhivinayak Aarogya Yoga Yatra: The journey begins...

On the auspicious occasion of assuming office as the 63rd President of the Federation of Obstetric and Gynaecological Societies of India (FOGSI), Dr. Sunita Tandulwadkar visited the revered Siddhivinayak Temple in Mumbai. With devotion and gratitude, she sought the blessings of Lord Ganesha to guide her leadership journey and inspire her initiatives for the year ahead. Dressed in red and white she was accompanied by Dr Hrishikesh Pai, Dr Rishma Dhillon Pai, Dr Nandita Palshetkar, her team members Dr Ashwini Kale, Dr Pooja Lodha, Vice Presidents of FOGSI Dr Varsha Baste, Dr Abha Singh, Dr Shyamal Seth, Dr Komal Chavan, Dr Pallaniappan and several committee

chairpersons.

Dr. Tandulwadkar's visit symbolizes her commitment to inclusivity, progress, and excellence in advancing women's healthcare. As she embarks on this prestigious role, she brings with her a vision that combines academic rigor, innovative programs, and impactful community outreach, all with a compassionate approach to women's health. The FOGSI family joins in extending heartfelt congratulations and best wishes to Dr. Tandulwadkar as she begins this remarkable journey. May her leadership continue to illuminate the path toward a healthier future for women across India!



67th All India Congress of Obstetrics & Gynaecology

AICOG 2025

MUMBAI

8 - 12 January, 2025 | Jio World Convention Centre



Dr. Nandita Palshetkar
Organizing Chairperson



Dr. Hrishikesh Pai
Chairperson, Scientific Committee



Dr. Niranjana Chavan
Organizing Secretary

INSTALLATION OF DR. SUNITA TANDULWADKAR: Ushering in a New Era as the 63rd President of FOGSI



PANTS | 1,000+ FACULTIES | 20 HALLS | 5 DAYS

2025 X/aicog2025 | Email: info@aicogmumbai2025.com | Registration Helpline No. : +91 8929763008 (Mon - Fri : 11 am - 6 pm)



In a momentous event held during the 67th All India Congress of Obstetrics and Gynaecology (AICOG 2025) at the Jio World Convention Centre, Dr. Sunita Tandulwadkar, an internationally acclaimed infertility specialist, endoscopic surgeon, and gynecologist, was formally installed as the 63rd President of the Federation of Obstetric and Gynaecological Societies of India (FOGSI) on 9th January 2025, 5.30 pm, amidst a packed hall full of FOGSIANS, national and international Dignitaries. Dr. Tandulwadkar assumes this prestigious position with a steadfast dedication to addressing critical challenges in women's health, improving healthcare accessibility, and promoting preventive care and education across the nation. The installation ceremony was graced by eminent national and international dignitaries, including Dr. Anne Beatrice Kihara, Dr. Jaydeep Tank, Dr. Madhuri Patel, Dr. Nandita Palshetkar, Dr. Niranjana Chavan, Dr. Suvarna Khadilkar, Dr. Hrishikesh Pai, and Bollywood celebrities Lara Dutta and Kartik Aaryan, adding grandeur to the historic occasion. "It is both an honor and a responsibility to lead an organization as influential as FOGSI, which represents over 46,000 obstetricians and gynecologists across 277 societies in India," shared Dr. Tandulwadkar. "This presidency provides an

unparalleled opportunity to launch initiatives that empower women with knowledge and resources, ensuring healthier lives and stronger communities." The event was preceded by the 75th anniversary of FOGSI, marking the Diamond Jubilee of this esteemed organization on 6th January 2025. Adding to the grandeur of the historic day, Dr. Tandulwadkar's dear friends, Dr. Hrishikesh Pai and Dr. Nandita Palshetkar, welcomed her with an extraordinary and heartfelt gesture. In a surprise that symbolized their deep camaraderie and mutual admiration, they organized a spectacular chopper ride for her from Pune to Mumbai. This soaring tribute celebrated her remarkable achievement and exemplified the unity and friendship that define FOGSI. The warmth of the occasion, filled with joy and celebration, left a lasting impression on all present and set a jubilant tone for the Diamond Jubilee celebrations. During the installation ceremony, Dr. Tandulwadkar shared her vision for addressing critical challenges in women's health and advancing healthcare accessibility, education, and preventive care across India.

VISIONARY INITIATIVES FOR LASTING IMPACT
Dr. Tandulwadkar has announced three flagship



programs to directly address these challenges and drive transformative change:

1. Sampoorna: Swastha Janma Abhiyan

This nationwide initiative focuses on pre-conceptional care to improve pregnancy outcomes and reduce maternal and neonatal mortality.

- Health camps and educational drives will benefit over 1 million women, with targeted efforts to raise awareness about managing five key health indicators. Participating regions are expected to see a 20% reduction in maternal mortality rates.

2. Know Your Numbers

A pioneering health data collection program aimed at empowering women to monitor and manage their health by gathering key metrics such as weight, blood pressure, hemoglobin, and HbA1C levels.

- Early detection of chronic diseases is projected to

prevent complications in 10 lakh women annually, while the data will enable tailored healthcare interventions nationwide.

3. Do Teeke Zindagi Ke

A large-scale project to combat cervical cancer through increased awareness of HPV vaccination and screening.

- With plans to reach 5 million women and girls, the initiative aims to boost HPV vaccination rates by 30% in priority regions and significantly lower cervical cancer incidence nationwide.

Dr Sunita gave an overview of her many projects including Arogya yog yatra, Anubandh , Arogya Sakhi app, project EAGLE, Gyan Prawah, Gyan Vistar etc. She announced plans to collaborate with government agencies to reduce maternal mortality rates in India. She also announced collaborations with international agencies like UNITAID, UNICEF, GATES foundation, JHPIEGO etc.

As one of the largest organizations representing women's health specialists, FOGSI remains dedicated to advocacy, education, and research. AICOG 2025 serves as a crucial platform for sharing knowledge, fostering collaborations, and discussing advancements in obstetrics and gynecology, furthering FOGSI's mission under Dr. Tandulwadkar's dynamic leadership.

A VISION FOR THE FUTURE

Dr. Tandulwadkar's presidency marks the beginning of an inspiring chapter in FOGSI's history. With her visionary leadership and unwavering commitment, she is set to address pressing healthcare challenges and empower women across the nation. Her initiatives promise to bring lasting change, ensuring a healthier, more inclusive future for generations to come.

A visionary leader and a pioneer in women's healthcare, Dr. Tandulwadkar brings unparalleled expertise and dedication to advancing obstetrics and gynecology. She is committed to integrating cutting-edge technology with holistic care to improve healthcare outcomes across the nation. Under her dynamic leadership, we look forward to transforming women's health and well-being across the nation.



Know your Secretary General



Prof. Suvarna Satish Khadilkar is a distinguished leader in Obstetrics and Gynaecology, recognized nationally and internationally for her contributions to the field. Born on September 6, 1961, into the prestigious Waman Hari Pethe Jewellers family, she inherits a legacy of excellence from her maternal ancestor Dr. Nanasaheb Deshmukh, one of Mumbai's first MD graduates, and Lokhitwadi Shri Gopal Ganesh Deshmukh, a renowned freedom fighter. Throughout her illustrious career, Dr. Khadilkar has held leadership roles in 15 prestigious organizations such as MMS, IMS, AMWI. The noteworthy position being the National President of Indian Menopause Society. Her association with FOGSI over a span of 38 years where she recently got installed as Secretary General of FOGSI after having managing committee over 12 years in various capacities. As the Secretary General apart from streamlining administrative work, her motto is to support, strengthen, stabilise and sustain FOGSI as well as Women's Health. She served as a managing committee member of Mumbai Obstetrics and Gynaecology Society (MOGS) since 2002 and its office bearer since 2016. She currently serves as President of MOGS since April 2024.

Given her expertise in Menopausal Medicine, she was appointed as the Chairperson of Menopause Committee of FIGO in July 2024 and her profound editorial experience conferred her appointment as Deputy Editor-In-Chief of IJGO, an official Journal of FIGO in August 2024. Her wealth of editorial knowledge paved the way for her appointment as IJGO Editor."

In the academic sphere, she has made significant contributions, started serving the Journal of Obstetrics and Gynaecology of India (JOGI) since 1998 and escalated as Editor-in-Chief of JOGI in 2021 and was honoured with the position of Editor Emeritus. A prolific writer and scholar, Dr Khadilkar has edited 12 books and authored over 100 publications, with over 600 citations. She has received more than 30 local, National, and International awards for her exceptional work in the field.

A sought-after speaker, Dr. Khadilkar has delivered

numerous orations, keynote addresses, invited lectures at prestigious platforms worldwide, including UK, Dubai, London, Brazil, Rome, Venice, Vancouver, and Paris. She has been actively involved in international committees and editorial boards, including the FIGO Committee on Well Women's Healthcare and the Asia and Oceania Federation of Obstetrics and Gynaecology's editorial board. Recently, she was appointed to the Clinical Research Committee of the South Asian Federation of Obstetrics and Gynaecology. Her commitment to education extends beyond India. She is a recognized teacher in endocrinology at the University of South Wales, UK, earning her diploma with distinction at the age of 53. She currently serves as Head of the Department of OBGYN at Bombay Hospital Institute of Medical Research Centre, mentoring students who have secured top merit positions, including a gold medal at MUHS.

Dr. Khadilkar has made original and innovative contributions to her field, including establishing Indian normative data for the Amniotic Fluid Index (AFI), devising a new system for measuring blood loss using the clot conversion factor, proposing a new classification for PCOS, developing a novel risk stratification system for oophorectomy. Beyond her professional achievements, Dr. Khadilkar is deeply passionate about music, dance, and literature. She has cleared classical singing and Kathak dance exams, performed in MOGS and FOGSI musical programs, and has over 1000 Bollywood song renditions online. Additionally, she has authored over 40 poems in Hindi, English, and Marathi, winning several awards. Her hobbies also include cooking, badminton, painting, and pencil drawing. Her excellence has been recognized beyond the medical field. She was crowned Miss GMC at Grant Medical College in 1978 and was honoured as MOGS Personality of the Year in 2024.

Despite her demanding career, she has maintained a remarkable work-life balance. Her husband is a renowned neurologist and Dean at The Bombay Hospital Institute of Medical Research Center, while her children have excelled in their respective fields. Her daughter, a gold medalist, is a pediatric dentist, and her son-in-law is a prosthodontist and implantologist. Her son and daughter-in-law, based in California, work at leading tech companies, PayPal and Amazon.

In 2024, she took over leadership from the Hyderabad AICOG team and, as Vice-Chairperson and MOGS President hosted FOGSI's biggest annual event, AICOG 2025, during her presidential tenure at MOGS.

Dr. Suvarna Khadilkar's extraordinary achievements, contributions, and passion for medicine, education, and the arts make her an influential and respected figure in Obstetrics and Gynaecology globally..

SOCIAL PROJECTS



“Know Your Numbers (KYN)” : A Transformative Health Initiative Launched at AICOG 2025

On 10th January 2025, during the 67th All India Congress of Obstetrics and Gynecology (AICOG 2025) at the Jio World Convention Centre in Mumbai, Dr. Sunita Tandulwadkar, the newly installed President of FOGSI, launched an ambitious health initiative, “Know Your Numbers”. This groundbreaking project aims to revolutionize women's health in India by fostering a culture of proactive health management and empowering women with the knowledge and tools needed to lead healthier, longer lives.

THE MISSION BEHIND “KNOW YOUR NUMBERS”

The initiative focuses on gathering vital health data from women across India, including:

- Weight
- Blood Pressure
- Blood Sugar Levels and HbA1C
- Hemoglobin Levels

By tracking these key health indicators, “Know Your Numbers” seeks to:

1. Foster a Culture of Proactive Health Management:

Encouraging women to take charge of their health by regularly monitoring vital health parameters.

2. Identify Health Issues Early: Leveraging the collected data to detect prevalent health problems such as diabetes, hypertension, and anemia in their early stages.

3. Promote Timely Interventions: Facilitating appropriate and timely medical interventions to address chronic diseases effectively.

4. Empower Women: Providing women with the knowledge and resources to make informed decisions about their health and well-being.

5. Reduce the Incidence of Chronic Diseases:

Advocating regular health checkups to lower the burden of preventable diseases.

WHY “KNOW YOUR NUMBERS” MATTERS

Chronic diseases such as hypertension, diabetes, and anemia are leading health concerns among Indian women, often resulting from late detection and inadequate healthcare access. By emphasizing the importance of regular monitoring and proactive management, this initiative seeks to bridge the gap in women's health and ensure a healthier future.

NATIONWIDE IMPACT

The data collected through this initiative will not only provide insights into the health status of women across diverse demographics but also help policymakers and healthcare professionals design targeted interventions.

This large-scale project is expected to create widespread awareness about the importance of routine health checks, ultimately contributing to a significant reduction in preventable health complications.

LAUNCH AT AICOG 2025

The official launch of “Know Your Numbers” was a key highlight of AICOG 2025. The launch featured an enthusiastic rally with FOGSIANS dressed in attire belonging to various states of India and playing *lazim*, a traditional dance form of Maharashtra. A skit was performed by a team of FOGSI enthusiasts which conveyed the message of health awareness and importance of knowing your health numbers. During the launch, Dr. Sunita Tandulwadkar emphasized the critical role of this initiative in addressing women's health challenges and creating a culture of prevention rather than cure. She shared her vision of empowering women through knowledge and early interventions, paving the way for a healthier nation.

A CALL TO ACTION

“Know Your Numbers” is not just an initiative—it's a movement. FOGSI invites healthcare professionals, policymakers, and communities across India to join hands in making this vision a reality. By working together, we can ensure that every woman in India has access to the tools, knowledge, and resources needed to lead a healthier and more fulfilling life.

As FOGSI celebrates its 75th anniversary, this transformative project stands as a testament to its unwavering commitment to improving women's health. With initiatives like “Know Your Numbers,” the organization continues to lead the way in creating impactful change for generations to come.



Know Your Numbers Report

PROJECT: Know Your Numbers

Vision:

*This project seeks to gather vital health data—weight, blood pressure, Blood Sugar Level with HbA1C and hemoglobin level—from women across India.

*The data collected will be instrumental in identifying prevalent health issues early and promoting interventions that can significantly reduce the incidence of chronic diseases.

*This initiative not only emphasizes the importance of regular health monitoring but also strives to empower women with the knowledge and tools needed to take charge of their health, ensuring they lead longer, healthier lives.

Mission:

“To empower women across India to proactively manage

their health by making vital health metrics accessible and actionable, thereby reducing the prevalence and impact of chronic diseases and promoting a healthier future.”



KNOW YOUR NUMBER

How can i contribute?

You can contribute too! Click the google form to start filling data!! Be a proud FOGSIAN!

https://docs.google.com/forms/d/e/1FAIpQLSfJKcU5_-LGrEVKyYANzJ0iRP8wJQ3NgitedZnxJzsH6AeXDQ/viewform?usp=sf_link

Know Your Numbers Camps Conducted by FOGSIANS Across India

FOGSIANS across India successfully organized "Know Your Numbers" camps, promoting awareness of key health parameters such as blood pressure, blood sugar, BMI, and hemoglobin levels. These camps aimed to empower women with early detection and prevention of lifestyle diseases, reinforcing FOGSI's commitment to women's health and well-being. With enthusiastic participation from healthcare professionals and the community, the initiative received an overwhelming response, emphasizing the need for regular health monitoring. Dr Sunita Tandulwadkar invites, "I urge all FOGSIANS to organize Know Your Numbers camps in their respective regions. Together, we can create widespread awareness and encourage women to take

charge of their health. Let's make this initiative a nationwide movement for preventive healthcare!" Events were reported from Tirupati, Rewari, Bhagalpur, Dhanbad, Amravati, Delhi, Hyderabad, Darjeeling, Chennai, Ranchi, Patna, and various cities across India conducted physically by esteemed FOGSIANS Dr Jayam Kanan, Dr Mitra Saxena, Dr Pratibha Singh, Dr Jeyarani Kamaraj, Dr Kiranmai Devineni, Dr Surekha Tayade, Dr Poonam Goyal, Dr Supriya Jaiswal, Dr Apurba Dutta, Dr Kavita Barnwal, Dr Santavana Sharan. Our top 10 data compilers are Dr Manisha Ghate, Dr Santvana Sharan , dr Priya Gupta, Dr Ruby Bhatia, Dr Sunita Tandulwadkar, Dr Vinita Singh, Dr Nibha Mohan, Dr Rashmi Kahar, Dr Kiranmai Devineni and Dr Pratibha Baldwa.

Data Collection Till Date	37548
Date : 01/02/2025	
TOP 10 -DATA COLLECTION DONE BY	
Dr.Manisha Ghate	6824
Dr Santvana sharan No to Vaw committee FOGSI	3057
Dr Priya Gupta	2660
Dr Ruby Bhatia	2578
Dr. Sunita Tandulwadkar	2521
Dr Vinita singh	2445
Dr Nibha Mohan	2277
Dr Rashmi Kahar	1669
Dr.Kiranmai Devineni	1388
Dr Pratibha Baldwa	1189





Sampoorna Project - Swastha Janm Abhiyan launched at Jio Convention Centre, AICOG 2025



The Federation of Obstetric and Gynecological Societies of India (FOGSI) proudly launched the Sampoorna Project - Swastha Janm Abhiyan on 10th January 2025 at the grand AICOG 2025 event held at the Jio Convention Center, Mumbai. The project embodies the vision of ensuring healthier pregnancies and empowering women with the knowledge and tools to optimize their health before conception, laying the foundation for safer motherhood and healthier babies.

VISION STATEMENT

*Our vision is to nurture healthy pregnancies by ensuring that every woman is fully prepared before conception.
 *We focus on optimizing vital health parameters, including weight, nutrition, hemoglobin levels, blood sugar, and thyroid function, while promoting the importance of pre-conceptional folic acid and maintaining a healthy BMI.
 *Through this comprehensive approach, we aim to increase awareness of pre-conceptional care and the importance of planning pregnancies.

MISSION STATEMENT:

To create a future where every pregnancy is pre-planned and safe, and every baby is born healthy by empowering women with comprehensive pre-conceptional care, which may help reduce maternal and neonatal mortality rates across India.
 The event was marked by vibrant celebrations, with team members dressed in colorful attire, walking in a grand procession to the energetic beats of traditional lezim and abhang. This cultural spectacle created a festive atmosphere, symbolizing the unity and enthusiasm behind the initiative.
 The project was officially launched by the esteemed President of FOGSI, Dr. Sunita Tandulwadkar. In her address, she highlighted the importance of preconception care in reducing maternal and neonatal mortality across India. Dr. Tandulwadkar emphasized the project's core

message:

- Every pregnancy should be a planned pregnancy.
- Women should focus on optimizing vital health parameters, including weight, hemoglobin levels, blood sugar, thyroid function, and maintaining a healthy BMI.
- The importance of contraception, preconceptional folic acid supplementation for three months before pregnancy, and normalizing health parameters was underlined as key components of this initiative.

The Sampoorna Project aligns with FOGSI's vision to raise awareness about preconceptional care and its vital role in ensuring healthy pregnancies and safe deliveries. With its mission to empower women, the project aspires to create a future where every pregnancy is planned and every baby is born healthy, contributing significantly to reducing maternal and neonatal mortality in the country. The launch of this initiative was not just a milestone for FOGSI but a call to action for the entire medical community to prioritize preconceptional care and make it an integral part of women's health. The Sampoorna Project - Swastha Janm Abhiyan is a step forward in fostering a culture of health preparedness and ensuring the well-being of mothers and babies across India.
Together, let us embrace and propagate this mission for a healthier and brighter future!



Sampoorna CMEs

PROJECT: SAMPOORNA

Swastha Janm Abhiyan Empowering Women Through Pre-conceptional Care...

Vision:

Sampoorna aims to establish pre-conceptional care as a national priority, optimizing pregnancy outcomes and ensuring the birth of healthy babies to healthy mothers.

Mission:

The primary objective of Sampoorna is to raise awareness about the importance of pre-conceptional

care. It seeks to bridge the existing knowledge gap by providing critical health information to women of all ages and sectors, emphasizing the need to optimize pregnancy outcomes. Every woman in India should be aware of the importance of managing five critical health components—weight, blood pressure, hemoglobin levels, blood sugar levels, and thyroid hormones—before embarking on the challenging yet rewarding journey of pregnancy. She also understands the importance of preconceptions intake of Folic Acid. The goal is to ensure that she can hold a healthy baby in her healthy hands after nine months.

Sampoorna CME Conducted at Hapur

The inaugural Sampoorna CME, hosted by Hapur Obstetrics and Gynaecology Society (HOGS), was held with great enthusiasm on January 30, 2025. Padma Shri Dr. Usha Sharma graced the occasion as Chief Guest and applauded Dr. Sunita Tandulwadkar's dedication and initiatives. Dr. Kirti Dubey, Guest of Honour, highlighted the importance of nutrition education and proposed its integration into the MBBS curriculum. The CME featured insightful sessions by Dr Poonam Goyal, Dr. Neha Kapoor, Dr Deepa pta and Dr. Sanchita Dubey.



Sampoorna CME at Ranchi

The Sampoorna CME was successfully organized in Ranchi on 1st February 2025, in collaboration with Ranchi OBGYN Society. The event witnessed an enthusiastic gathering of 50-60 active members, who engaged in clinically enriching discussions. The scientific sessions featured Dr. Anjana Jha, Dr. Archana Kumari, Dr. Sashibala Singh and Dr. Suman Sinha as speakers.



Sampoorna CME at Bhagalpur

Bhagalpur OBGYN Society successfully organized the Sampoorna CME on February 1st, 2025. Dr. Pratibha Singh, Dr. Kavita Barnwal, Dr. Varsha Sinha, and Dr. Anju Turior spoke on important topics pertaining to pre-conceptional care.



Academic Grant Support by - Meyer Vitabiotics

“Do Teeke Zindagi Ke” Campaign Pan India on World Cancer Day 4th February, 2025

The Campaign was launched in Pune & Mumbai by President FOGSI and activities conducted by FOGSI Gynecological Oncology Committee in association with many Committees. Awareness sessions in Schools, Colleges, public areas, OPDs-conducted in Nasik, Delhi, Gurgaon, Srinagar, Jammu, Ferozpur, Amritsar, Ludhiana, Kotkapura, Jamnagar, Himmatnagar, Khedbrahma, Bhilodas, Jaipur, Rishikesh, Hapur, Ghaziabad, Lucknow, Gorakhpur, Jhansi, Kolkata, Manipur, Guwahati, Silchar, Cuttack, Muzaffarpur, Patna, Katihar, Sitamarhi, Dhanbad, Ranchi, Bhopal, Ratlam, Udgir, Latur, Pune, Amaravati, Vizag, Nalgonda, Madurai, Kerala, Coimbatore, Nalgonda,



Hyderabad, Kakinada, Patna, Bhagalpur, Kanpur, Raipur, Namakkal, Wanaparty, Vijayawada, Berhampur, Manipal, Karimnagar, Parathwada Walkathons, Rallies were organized in Jaipur, Himmatnagar, Bhilodas, Khedbrahma, Guwahati Media Campaigns were done in Delhi, Gwalior, Gorakhpur, Jaipur Vaccination Camps: Organized in Delhi, Jaipur, Manipur, Nalgonda, Udgir, Silchar, Cuttack, Jamnagar, Gorakhpur Screening Camps were held in Delhi, Jaipur, Vizag, CME, Workshops on Screening & Colposcopy organized in Delhi, Jaipur, Manipur, Cuttack.



Launch of Arogya Yog Yatra Song with Shoonyam



The Jio World Convention Center in Mumbai became a haven of stillness and self-discovery on January 10, 2025, as it hosted Shoonyam, a transformative spiritual experience organized during AICOG 2025 under the leadership of Dr. Sunita Tandulwadkar, FOGSI President. This unique event offered an immersive journey into the depths of inner harmony and self-realization, where music and silence merged to inspire a profound connection with the limitless within. The Ekam Spiritual Concert brought together inspiring voices and soulful melodies. Rohit Arora, Founder & CEO of TransGanization, captivated the audience with thought-provoking talks on transformation and spiritual alignment. Abhishek Ray, celebrated Bollywood Music Director, infused the evening with his heartfelt rhythms, creating an atmosphere of oneness and peace. A significant moment of Shoonyam was the release of the soulful anthem of the Arogya Yog Yatra, a musical expression of health, wellness, and the journey toward harmony



and balance. Shoonyam left a lasting impression, resonating deeply with every participant and standing as a beacon of spiritual enrichment, harmony, and unity. This event was not just a celebration but a profound journey toward completeness and self-discovery.

YouTube Link:
https://youtu.be/DRCgTCs8VFw?si=l3E0JD1lp__t_h4UF

The divine Balaji blessings - Arogya Yoga Yatra Tirupati Report

The mission of FOGSI to promote women's health took a significant step forward with the launch of the Arogya Yog Yatra (AYY) program at the sacred city of Tirupati.

This unique initiative, spearheaded by FOGSI President Dr. Sunita Tandulwadkar, embraces the mantra -

"Ek Rashtra Ek Mission, Swastha Nari, Samruddha Vatan."

Dr. Tandulwadkar has envisioned this program as a transformative journey towards the holistic health of women. The initiative transcends prescriptions and surgeries, delving deep into consciousness and awakening the spiritual dimensions of life for both patients and doctors. The Arogya Yog Yatra is built on three pillars:

1. KNOW YOUR NUMBERS

A medical camp was organized to assess four critical health indicators for women: weight, hemoglobin, blood pressure, and blood sugar. Held at SVMC Medical College, Tirupati, the camp was coordinated by:

- Dr. Jayam Kannan (National Coordinator)
- Dr. Parthasarathy (President, Tirupati ObGyn Society)
- Dr. G. Pameela Devi (HOD, SVMC)
- Dr. Kiranmayi (Chair, VAW Committee, FOGSI)
- Dr. Chinmayee Ratha and Dr. Shailaja (Vijayawada)

The camp witnessed an overwhelming response, screening 250 women.

2. CME FOR DOCTORS

In the evening, a Continuing Medical Education (CME) session was conducted, focusing on preconception care and addressing medical challenges. The session emphasized the importance of a humane approach in medical practice and the pivotal role of communication with patients.

Dr. Tandulwadkar introduced the concept of integrating spirituality into medicine, highlighting that:

"Medicine Cures, but Spirituality Heals."

This session demonstrated how spirituality, distinct



from religion, benefits patients and provides solace to doctors. It also addressed the need to restore the dignity of the medical profession through spiritual awareness.

3. SPIRITUAL VISITS

A key feature of the Arogya Yog Yatra is visiting spiritually significant shrines to strengthen the spiritual connection of doctors with the Almighty.



This reinforces the idea that spirituality, independent of religion, brings responsibility and purpose to medical practice.

Dr. Tandulwadkar's vision is to conduct the Arogya Yog Yatra across the country, with Tirupati as the starting point, honoring the land of Sri Venkateshwara

HIGHLIGHTS OF THE CME AT TIRUPATI

The CME began with an auspicious inauguration presided over by Dr. Cipai Subramanyam, Tirupati MLC.

He commended the concept of reviving spirituality in medicine and suggested that this FOGSI initiative be shared with other medical organizations.

Launch of the AYY Theme Song

Dr. Sunita Tandulwadkar officially launched the AYY theme song, "Madhyam" composed and sung by Rohit Arora and Abhishek Ray. The song beautifully portrays obstetricians as the "Madhyam" (medium) through which divine work is carried out. Speaking on this occasion, Dr. Tandulwadkar said: "We are not God, but the medium to do God's work

in this world."

UNICEF Representative's Insights

Dr. Syed Hubbe Ali, UNICEF representative, presented significant statistics on perinatal mental health and praised FOGSI's efforts to promote holistic wellness, focusing on physical, mental, and social well-being.

Guest of Honour's Remarks

Dr. Chandrashekharan, Principal of SVMC, shared valuable insights on the erosion of human values in the doctor-patient relationship. He expressed hope that AYY would help restore the dignity of the medical profession in society.

Panel Discussions

The evening featured two insightful panel discussions on fertility issues and dispelling myths and misconceptions in obstetrics and gynecology. Visit to Tirumala Devasthanam.

On January 21st, the FOGSI delegation, comprising 25 members from across India, visited the Tirumala Devasthanam for a divine darshan of Lord Balaji.

This spiritually enriching experience left the group inspired and rejuvenated.

A Promising Start

With this impactful beginning at Tirupati, the Arogya Yog Yatra has taken its first step toward its national mission. Guided by the scriptures: "Sarve Bhavantu Sukhinah, Sarve Santu Niramayah" (May all be happy, may all be free from illness), the audience resonated with the FOGSI 2025 slogan: "Ek Rashtra Ek Mission, Swastha Nari, Samruddha Vatan – Har Ghar FOGSIAN."

As the FOGSI team departed from Tirupati, they carried with them blessings and cherished memories, ready to spread the spirit of AYY across the nation.



CONFERENCES & MONTHLY ACTIVITIES

Presidential Conference at Andaman



A groundbreaking moment during the conference was the launch of the Sampoorna Passport for ANC (Antenatal Care) patients. This innovative initiative, spearheaded by Dr. Rohan Palshetkar and the YTP Committee, aims to empower expectant mothers with essential health information and tracking tools. Delegates applauded the creativity and foresight behind this project. Participants received QR codes to download the Sampoorna Passport, ensuring widespread accessibility.



FOGSI Galacon 2025 not only set a benchmark in terms of academic rigor but also fostered a sense of camaraderie and inspiration. The conference will undoubtedly remain etched in the memories of all who attended, as a perfect blend of knowledge, patriotism, and celebration.



The First Presidential Conference, FOGSI Galacon, held from 24th to 27th January at the picturesque Andaman Islands, was a resounding success. This unique event blended academic brilliance with the natural serenity of the islands, creating an unforgettable experience for all attendees.

Meticulously planned, the conference under the leadership of Dr Sunita Tandulwalkar, President FOGSI, was led by an exceptional organizing team. Dr. Sampath Kumari served as the Organizing Chairperson, Dr. Subhash Mallya as the Organizing Secretary, Dr. Rohan Palshetkar as the YTP Committee Chairperson, and Dr. Supriya Jaiswal as the Adolescent Health Chairperson. Their dedication ensured the event's smooth execution and wide-reaching impact.

One of the highlights was the well-curated academic sessions, where esteemed experts delivered cutting-edge insights into various aspects of obstetrics and gynecology. Delegates also had the opportunity to explore the stunning Andaman Islands, immersing themselves in the tranquility and natural beauty of the locale.

Adding a patriotic touch, Republic Day on 26th January was celebrated with fervor. The historic significance of the Andaman Islands, home to the Cellular Jail and memories of India's freedom struggle, made the celebration even more special. It was a heartfelt tribute to our freedom fighters, blending the spirit of national pride with academic excellence.

FROM THE DESK OF ORGANIZING CHAIRPERSON GALACON

After seeking the blessings of Lord Balaji at Tirupati, Team Dr. Sunita, President FOGSI 2025, embarked on the Arogya Yoga Yatra on 21st January. The journey continued with the Grand Galacon at the Andamans on 24th January, marking the launch of a year filled with academic and celebratory events.

The FOGSI Conference on Adolescent Health from 24th–26th January covered a wide range of topics, from adolescent nutrition to sexual health. A School Counselling Program was conducted, along with a scientific session on the 25th and a flag hoisting ceremony on the 26th. The 'Sampoorna Program', focusing on Pre-Conception Counselling, HPV Vaccination, and Menstrual & Mental Health, was also introduced. The 'Know Your Numbers' initiative at Port Blair Government Hospital added to the impact.

The event was not just about academics but also camaraderie—snorkeling, seabed walking, dolphin encounters, kayaking, and capturing memories at the Cellular Jail. Doctors, spouses, and seniors vibed with juniors, making it truly special. A proud moment was Dr. Sunita hoisting the Tiranga on Republic Day, followed by a meeting with Lieutenant Governor Admiral Devendra Kumar Joshi, where we received memorabilia marking the occasion.

A heartfelt thanks to Dr. Sunita for this golden opportunity and to Subash, Rejeesh, Noby Verghese, Selvapriya Saravanan, Ramani madam, and my colleagues from Muthukumaran. This was indeed a spectacular start to 2025!



Obstetrics Frontiers 2025: A Unique Blend of Knowledge & Spirituality in Shirdi

Under the dynamic Leadership of Dr Sunita Tandulwadkar, President FOGSI, the Presidential Conference Obstetrics Frontiers 2025 was held on 1st & 2nd February 2025 in the holy city of Shirdi, focusing on the theme "High-Risk Obstetrics - Inside OT & Court." Organized by Ahmednagar OBGY Society, the conference was supported by Ethics and Medicolegal Committee, Medical Disorders Committee, Practical Obstetrics Committee & Environmental Health Committee of FOGSI. The event was meticulously planned by Organizing Chairperson Dr. Ganesh Bade, Org. Secretaries Dr. Amit Karade and Dr. Sonali Vahadane, with Scientific Chairperson Dr. Pankaj Mate ensuring a robust academic agenda. A key highlight was the oration by FOGSI President Dr. Sunita Tandulwadkar, who shared her invaluable insights on "Litigation-Free Endoscopy for 34 Years - The Magic Mantra." Another major attraction was the Moot Court: "Doctor Hajir Ho!", an engaging dramatization of courtroom proceedings that educated doctors on essential legal aspects like drafting, consent, documentation, and expert opinions. The FOGSI Environmental Health Committee organized an impactful awareness rally on environmental conservation, emphasizing the role of sustainable healthcare practices. The conference seamlessly combined academic excellence with spiritual



enrichment, offering delegates the opportunity for Sai Baba Darshan, making it a truly memorable experience.

FROM THE DESK OF ORGANIZING CHAIRPERSON OBSTETRICS FRONTIERS

It was a matter of immense pride for all of us at Ahmednagar OBGYN Society to host the FOGSI Presidential Conference 2025—Obstetrics Frontiers: High-Risk Obstetrics & Inside OT and Court. The conference showcased a rich array of academic sessions, including inspiring orations, a thought-provoking moot court, and a proactive environmental health rally, among other engaging activities that broadened our perspectives and deepened our knowledge in obstetrics. To commemorate this prestigious event, we designed an exclusive Souvenir as an academic memoir with invited articles from distinguished experts featured in our scientific program. Visually appealing, academically enriching, and functionally informative, this souvenir truly serves as a cherished Memento.



As the Organizing Chairperson, I extend my heartfelt gratitude to all the team members for their unwavering support over the past months. I also take this opportunity to congratulate Dr. Sunita Tandulwadkar on a successful start to her FOGSI year. A special note of appreciation goes to all our faculty and delegates for their active participation, which contributed immensely to the success of the event. We gave our best to make this conference a memorable and academically fulfilling experience, and we hope all attendees had a wonderful time with us at Shirdi.

Dr. Ganesh Bade, President, AOGS
Organizing Chairperson, Obstetric Frontiers



EAGLE Project Report



Dr Sunita Tandulwadkar
President, FOGSI



Dr Atul Ganatra
President, IAGE



Dr Subhash Mallya
FOGSI-IAGE Convener



Dr Sejal Naik
FOGSI-IAGE Convener



In today's medical landscape, gynecological endoscopy has become an indispensable part of routine practice. However, many medical colleges still lack a comprehensive curriculum to teach this essential skill. As a result, numerous postgraduate students, eager to pursue the exciting field of laparoscopy, often find themselves without proper guidance or structured training. To bridge this gap, the EAGLE Project (Every Aspiring Gynecologist Learns Endoscopy) was launched in 2018 by Dr. Sunita Tandulwadkar, the current president of FOGSI, during her tenure as the president of IAGE. This groundbreaking initiative has transformed endoscopic training by bringing high-quality sensitization program directly to postgraduate students in their own medical institutions. The EAGLE project has been launched with great enthusiasm in 2025, spearheaded by the visionary leader and founder, Dr. Sunita Tandulwadkar (President, FOGSI), It has been expertly coordinated by the Endoscopy Committee of FOGSI, led by Dr.



Sejal Naik (Chairperson, FOGSI Endoscopy Committee), along with Dr. Subhash Mallya (FOGSI EAGLE Project Convener), and in collaboration with IAGE (Indian Association of Gynecological Endoscopists). Their combined efforts ensure the project's continued success and expansion. The EAGLE project has made significant strides, reaching five medical colleges across diverse regions of the country in just few days of its launch. True to its mission of "Reaching the Unreachable," the project has been successfully conducted in remote locations such as Ambikapur (Chhattisgarh), Ratlam (Madhya Pradesh), Muzaffarnagar (Uttar Pradesh), Madurai (Tamil Nadu), and Bhopal (Madhya Pradesh). A total of 150 postgraduate students have participated in the initiative and have been sensitized about the essential aspects of Gynecological endoscopy. The program included didactic lectures on the fundamentals of Hystero-laparoscopy, complemented by hands-on training using pelvi-trainers. Participants also had the unique opportunity to observe and assist in live

surgeries, including Total Laparoscopic Hysterectomies, Laparoscopic Myomectomies, and various Hysteroscopies, further enhancing their practical knowledge and skills. A total of 22

surgeries have been performed. A total of 12 faculties have taught the nuances of endoscopy to the post graduate students and their teaching faculties.

Sr. No.	Medical College, City and State	No. of Participants	No. of Surgeries
1	GMC, Ambikapur Chhattisgarh	22	4
2	Gandhi Medical College, Bhopal, MP	38	4
3	Ratlam Medical College, Madhya Pradesh	13	3
4	Muzaffarnagar Medical College, Uttar Pradesh	32	6
5	Madurai Medical College, Tamil Nadu	45	5

A special acknowledgment goes to the Heads of Department at the respective colleges for their unwavering academic commitment, as well as to the project coordinators for their diligent efforts in ensuring the smooth execution of the event. The project's success was also made possible by the generous support of various companies that provided the necessary equipment and instruments, even in remote locations. Their

contributions played a crucial role in facilitating the training sessions. We encourage everyone to participate in this unique academic initiative and contribute to its ongoing success. Here are the upcoming projects for February: Our next projects are as below for the month of February.

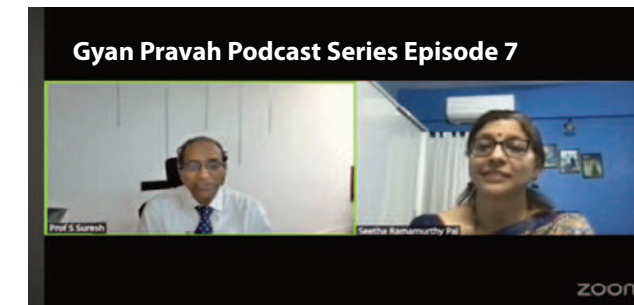
Sr. No.	Medical College, City and State	Date
1	Dindigul Medical College, Tamil Nadu	1 st Feb 2025
2	Apollo hospital, Bilaspur, Chhattisgarh	2 nd Feb 2025
3	RAMA Medical College, Hapur, Uttar Pradesh	13 th Feb 2025
4	AIIMS, Raipur, Chhattisgarh	13 th -14 th Feb 2025
5	Vivekanand Institute of Medical Sciences, Lucknow, Uttar Pradesh	13 th -14 th Feb 2025
6	SGRR Medical College Dehradun, Uttarakhand	19 th Feb 2025
7	St Jhon's Medical College, Bangalore, Karnataka	19 th -20 th Feb 2025
8	Pushpa Giri Institute Of Medical Sciences and Research Centre ,Tiruvalla, Kerala	22 nd Feb 2025
9	Bhavnagar Medical college, Bhavnagar, Gujarat	22 nd Feb 2025
10	Hind medical college Barabanki, Lucknow, Uttar Pradesh	27 th Feb 2025
11	GRMC (Gajra Raja Medical College) Gwalior, Madhya Pradesh	28 th Feb 2025



Gyan Pravah Podcast Series

Gyan Pravah Podcast series started with a bang from 30th January 2025. Every day a Committee Chairperson interviews an eminent speaker at 8 pm. Viewers can join the podcast by clicking on the link <https://sunitatandulwadkarfogsi.soloclinicvf.com>, every day at 8 pm.

- The links for the recorded podcasts are given below
- 1) <https://www.youtube.com/live/Uk5afta2Jjs>
 - 2) <https://www.youtube.com/live/a6pGVNb5eTk>
 - 3) <https://youtube.com/live/Wt5EAMN3Frk>
 - 4) <https://youtube.com/live/H9IKZcBWLCl>
 - 5) <https://youtube.com/live/AeCThFclOlw>
 - 6) https://www.youtube.com/live/S_rH1zgTz8
 - 7) <https://youtu.be/K1esqrdCZeo?si=lvC9KSYlw0G0jopC>
 - 8) https://youtu.be/_N4Y7LxcRil



Clinical Research Committee Report

FOGSI COMMITTEE CHAIRPERSON REPORTS



Prof. Surekha Tayade was installed as Chairperson of the Clinical Research Committee, FOGSI, on 22nd September 2021 during the Femtek Conference, Mumbai. Under her leadership, the committee has spearheaded several impactful initiatives. The HPV Safe Project coordinated the FOGSI-UNICEF collaboration, developing resources for HPV vaccination awareness and conducting 50 TOTs for teachers and students across India. The Optimizing Cesarean Section Project is an ongoing cesarean audit at 50 sites, with UNICEF-funded national consultations held in November 2023 & 2024 and a TOT in September 2023. The FertiHope & ReSCuE Studies are nationwide studies on determinants of infertility and quality improvement in C-section practices across 50 sites. The committee also coordinated data collection and analysis from 21 cities in 2023 under Nari Swasthya Janandolan Abhiyan. Dr Surekha Tayade was convenor of The Pratibandh Initiative, under leadership of Dr Hrishikesh Pai and coordinated cervical cancer screening camps across 62 FOGSI societies, including Pap smears, VIA, colposcopy, and clinical breast exams.

The committee developed 25 Good Clinical Practice Guidelines under FOGSI President Dr. Hrishikesh Pai (2023) and published books including FOGSI FOCUS on Anemia in Pregnancy, Postpartum Hemorrhage, Obstetric Critical Care, and Cardio-Obstetrics. It conducted 79 'Pearls in Gynecology' Workshops, Code Blue emergency obstetrics

training, and a journal club series with OGSSI and KSOGA. Hands-on workshops in robotics, cosmetic gynecology, fertility, and managing medical emergencies in obstetrics were organized in collaboration with leading institutions. The E³ Webinar Series (12 episodes) & Swasthya Sangini (Lifestyle Management) were launched in 2024. The Women's Health Research Award, celebrating International Women's Day, recognized original research, with 68 abstracts in 2023 and 72 in 2024, honoring six winners across junior and senior categories. Prof. Tayade's leadership has been instrumental in advancing clinical research, evidence-based practice, and knowledge dissemination across the nation.



Family Welfare Committee Report

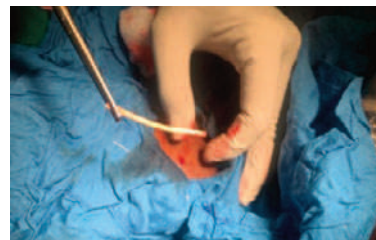
OUR INSTALLATION OF FAMILY WELFARE COMMITTEE @AICOG –Kolkata 2023
 Book on 'Modern Approach to Contraception' & FOGSI FOCUS on 'Long-Acting Reversible Contraception (LARC)'



Family Welfare Committee is the first committee to launch an AI app in its specialized field, on World Population Day 11/07/2023 with Dr. Aparna Sridhar (Chair



- Contraception Committee, FIGO) and Dr. Pragati Singh (National Professional Officer, SRHR, WHO India).
 ADVOCACY ASSOCIATION WITH KENYA FOR IMPLANTS (4th to 7th Sept 2023)



FP2030 Accelerating Access to Postpartum and Post-abortion Family Planning Workshop at Kathmandu, Nepal (by USAID and FP2030) from Oct 31 to Nov 3, 2023

Community- Sensitization- in TN districts, Implants trainings in Orissa
 Gujarat ,TN, Rajasthan; Sub cut DMPA trainings in Gujarat Delhi Orissa TN.

FOGSI FAMILY WELFARE COMMITTEE has successfully accomplished the celebration of "WORLD CONTRACEPTION DAY , *26th September" highlighting the ' *POWER OF OPTIONS' with our combined "GOONJ"(Voice) to raise awareness of the crucial role contraceptive choices play in empowering women. 29 physical activities in different parts of India by esteemed



Public forum educational/ awareness activities

members of Committee and 3 on Virtual platform including our National Webinar has created a massive impact & awareness about the ' Power of Options.'



PUBLICATION RELEASE

Committee Chair online meeting with MoHFW- 11th JULY 2024

Day started with representation of FOGSI by our committee chair Dr Ashish Kale in a meeting with the cabinet Ministry under leadership of honorable Mr. JP Naddaji , Minister of Health and Family Welfare , India ,regarding the World Population Day. He appreciated the efforts of all the public and private organizations in contributing to the reduction in TFR to 2.1 in 31 states across country , 4-7% reduction in birth rate with the increase prevalence rate of use of modern contraceptives to 56.5% which is remarkably higher than before. Gratitude to our President FOGSI Dr Jaydeep Tank for giving the opportunity to be the part of this meeting with the Ministry of Health & Family Welfare , India.



Adolescent Health Committee Report

- Dr Supriya Jaiswal took charge in FEMTEK-1, Mumbai (Oct 2022) and initiated several impactful programs.
- Organized 46 Advocacy/Health Programs, 94 CPD/Awareness Sessions, and 8 Training Programs to enhance adolescent health awareness.
- Spearheaded FOGSI NAHCON 2024, a major National Adolescent Health Conference in Patna, featuring public forums, workshops, and academic discussions.
- Released FOGSI GCPR on Menstrual Hygiene (Sept 2023) and FOGSI-FOCUS on Adolescent Health Issues (Nov 2023), with the FOGSI Textbook on Adolescent Gynecology set for release at AICOG 2024, Hyderabad.
- Coordinated with 16 FOGSI Committees, fostering multi-disciplinary collaborations.
- Led Presidential KARYASHALA EVOLVE in Mumbai & Patna, empowering professionals with evidence-based knowledge.
- Conducted awareness campaigns, school programs, competitions, and webinars, including Pink Wave in Adolescents, SAMANTA on Gender Equality, PUKAAR Series, and Join to Learn Webinars.
- Organized key health initiatives such as the MeSakhi Contest for Sustainable Menstruation, FOGSI Sexual Health Day Rally, and various free health camps in Hilsa Jail, rural areas, and hospitals.
- Bihar became the 1st state to launch HPV vaccination under Mukhya Mantri Balika Cancer Pratirakshan Yojna (Oct 2024), a significant milestone.
- Hosted the ADHUNA Workshop in Patna, East Zonal Conference at Siliguri, and a Media Interface on Adolescent Health Challenges with key stakeholders.
- Led impactful collaborations with NGOs and state health bodies, ensuring sustainable adolescent health programs.
- Received the Adhuna Appreciation Award at AICOG 2025, Mumbai, recognizing outstanding contributions



Public Awareness Committee Report

Chairperson: Dr Priyankur Roy

President: Dr Hrishkesh Pai

Dr Jaydeep Tank

Dr Sunita Tandulwadkar

VP In charge: Dr Alka Pandey

Dr Ajay Mane

ACTIVITIES DONE:

- 1) Flagship Program: Preserve The Uterus
Physical CME: 101 Plus
Medical Colleges Covered: 200 Plus
Number Of Women Benefited: 60000 Plus
- 2) You Tube Channel of PAC FOGSI Launched in Na Na Anaemia Yatra
- 3) Pac Mirror Released in April 2023
- 4) Pac Times X 3 Editions till Now
- 5) 4 Books Published Under Aegis of Fogsii:
 - NCD In Pregnancy and Beyond
 - Fogsii Focus on Aub
 - ICOG Contraception Manual
 - AICOG Manual Preserve the Uterus
- 6) Anaemia Mukta Nari Campaign Across India in 2023 With More Than One Lakh Women
- 7) Tested, Limca Book of Record Received
- 8) Tejasvi Project For BMD Camp In 2024 More Than One Lakh 14000 Women Tested
- 9) Zonal Webinars Conducted Every Fortnightly with Respected Zones Total: 30
- 10) Tree Plantation Drives In Both Years On Environment Days
- 11) Release Of School Health Card by Dr Vandan Gandhi
- 12) First Ever Focussed Gyan Jyoti Physical Conference by Delhi Dec 2022 Related To Only Public Awareness Activities
- 13) AICOG Hyderabad Badlav Poster Competition and Public Forum
- 14) Release Of Jagriti Newsletter by Mp Society
- 15) Breast Feeding Week in Both Years in Association with Breast Committee
- 16) Population Day in Association with Family Welfare Both Years
- 17) Sexual Health Day in Association with Sexual Medicine Committee
- 18) Downs Awareness in Association with Fetal Medicine

- 19) Safe Motherhood Day with Practical Obstetrics Committee
- 20) 16 Days Activism with No to VAW Committee
- 21) ICOG Contraception Certificate Course
- 22) ICOG Course on Environment and Women's Health
- 23) Patna Book Fair
- 24) She Guide App Launched
- 25) Valentine's Day With YTP Committee
- 26) PAC With WATOG and FIGO On PPH Webinars
- 27) Medicolegal Awareness Webinars for Doctors
- 28) Launch Of ANC Yatra With Corona Remedies
- 29) Pukaar Series with Adolescent Health Committee
- 30) Endometriosis Committee Competitions
- 31) PAC Health Camps
- 32) HIV AIDS Awareness
- 33) Awareness Walk in EZYF
- 34) Release Of Campaign for Army Personnel
- 35) Various Competitions Essay, Poster, Slogans, Kid Drawings, Video Drills Throughout the Year



STATE
PRESIDENTIAL
REPORTS

State President's Column - AMOGS



The Association of Maharashtra Obstetrics and Gynaecological societies (AMOGS) was founded in 1987. Today we have about 43 member societies affiliated to AMOGS, with total membership of more than 10,000.

This year Dr Kiran Kurtkoti took cover as a President, AMOGS along with Dr Bipin Pandit as Secretary and Dr. Nilesh Balkawade as Jt. secretary.

This year AMOGS saw the launch of 2 very big initiatives by Dr. Kiran Kurtkoti :

- a. Formation of Maharashtra College of Obstetrics and Gynaecology (MCOG)
 - b. Formation of AMOGS Teachers Associations (ATA)
- These two academic wings of AMOGS will go a long way in education, research and training of AMOGSIANS & FOGSIANS.

Few flagship programs this year are as follows :

1. Anybody can do IVF (ABCD I) - we all know that infertility management has grown leaps and bounds. Keeping this in mind AMOGS has launched the ABCD I program where in over 100 online teaching hours along with 4 days hands on training in IVF labs is given to all the participants .This has never been done in the history of any organisation before and at such a manageable cost .Till date over 225 FOGSIANS not only from Maharashtra but outside Maharashtra have benefited from this particular program .
2. Mission dissection - Lateral pelvic wall dissection on cadaver followed by dissection laparoscopic on live patient this was taught to delegates.
3. Medicolegal Mondays- a Public Awareness Committee program made all aware of all the

medical issues in gynecology & Obstetrics. A coffee table book will be released in AMOGS 2025.

4. Khana khazana- AMOGSIANS are fantastic cooks. This was proved in the cooking competition which was held on the 9 days of Navratri . Over 74

AMOGSIANS participated in the same. A small book on all recipes will be released at AMOGS 2025.

5. AMOGS Smile Train- this effort of AMOGSIANS to raise awareness of cleft lip and cleft palate. Early diagnosis and the different perspectives of from the point of view of orthodontist, lactation consultants, sonologist , plastic surgeons was brought out by this particular series .

6. AMOGS Wari- held the program between Akhuj Pandharpur taking camps at different locations so this benefited many people along the route of wari.

7. AMOGS Akashwani- AMOGS held radio talks on various aspects of womens health from antenatal care to vaccination cancer care.

In the pipeline are many other programs of AMOGS. To name a few:

- Online course for all on first trimester sonography
- online course on medicolegal issues
- online course on Aesthetic gynecology

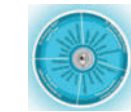


President, AMOGS
Dr Kiran Kurtkoti



Secretary, AMOGS
Dr Bipin Pandit

State President's Column - KSOGA



KSOGA was founded in 1983 under the President Prof. Emeritus Dr.A.Padmarao and founder secretary Dr.M.G.Hiremath. Dr.M.G.Hiremath is our Chief Patron and Patron Dr Nagaraj.H.

Under their guidance our Executive Committee of 11 Members. All members of KSOGA relentlessly work together for Women's health and updating knowledge among our members.

The theme for year 2024-25 was **"Promote wellness, Prevent illness"**.

KSOGA is a well-known association with 23 societies and 3400 members. We also have the ancillary wing Karnataka College of OBG, started 3 years back. we also have 21 committees which range from Adolescent health, Preventive oncology, Menopause committee, Safe motherhood, Sexual medicine, Ethics and Medicolegal committee, KSOGA, conducts regular CME and webinars throughout Karnataka every month KCOG, we conduct the CPAP-Continuous Professional Advancement Program, Skill Transfer live workshop, KCOG International webinars with international speakers. We conducted KSOGA Gyaan sangam webinars involving societies and faculty from all zones of India.

The individual committees conducted physical programs on committee specific topics as well as live workshops and CME's. Postgraduate programmes every year we conduct Jnanaharsha three-day CME for our exam going postgraduate, which help them in preparation for their written, practical and viva exams.

we also have Gurukul masterclasses for postgraduates an online case presentation discussion every month. we also have Quiz programs monthly KSOGA conducts the Yuva KSOGA conference in April and the Annual conference is held annually around September-November.

KSOGA has a mission to:

- 1) Awareness program for women of Karnataka.
- 2) Update program for our consultants and postgraduate.
- 3) KCOG is our Academic wing, with skill transfer, CME and we have an annual convocation for our fellows at the Annual conference.
- 4) KSOGA participate in all FOGSI programs.

"KSOGA mission-Every life matters".



Preconception Care: Building the Foundation for a Healthy Pregnancy



Dr Manju Puri
MD Obstetrics and Gynecology
FRCOG (Hon Causa)
Director Professor
Department of Obstetrics and Gynecology, Lady Hardinge Medical College.



Dr Prachi Dixit
MS Obstetrics and Gynecology
Assistant Professor
Department of Obstetrics and Gynecology, AIIMS, Nagpur

Preconception care is the provision of behavioural, social, and biological health interventions to women and couples before conception. It is a strategic intervention for modifiable risk factors, that helps women enter into pregnancy with optimal health, decreasing maternal and fetal morbidity. As most pregnancies are unplanned, the overall health of all women in their reproductive years can ensure effective preconception health. Couples embarking on pregnancy well aware of their health status and guarded well against preventable diseases reflect the preventive impact of maternity health care services and the knowledge, attitude, and behaviour of men and women in society. Understanding that preconception care is an important but neglected aspect, this article aims to assess the components of preconception care and outlines the practical evidence-based approach to build the foundation for a healthy pregnancy.

Objectives of preconception care^{1,2}:

To provide information, education and communication to couples about the importance of preconceptional health.

1. Evidence based health promotion, screening and appropriate interventions to allow women entering in pregnancy with optimal health
2. Reduce adverse outcomes by prepregnancy interventions.

Components of preconception care-

General Considerations:

1. Screening for risk factors:

A thorough history of couple and family and good clinical examinations with certain investigations should be done. Parental age should be noted. Adolescent pregnancies and those in higher age groups will require special care.

History: Any complaints about general health, sexual health, menstrual cycles, health conditions like malnutrition, diabetes, hypertension, heart disease, jaundice, thyroid disorders, epilepsy, thromboembolism, SLE or other autoimmune disorders, or asthma

should be optimized.

History of recurrent pregnancy loss, preterm labor

Family history in the form of consanguinity, and pedigree charting suggestive of hereditary diseases will require genetic counselling

History of intake of any medications, that might be teratogenic and may require alteration.

Examination: To look for body mass index, general nutrition, anaemia, asymptomatic heart disease, thyroid swelling, lymphadenopathy, sexually transmitted diseases etc.

Investigations: Screening for Blood group and Rh typing, anaemia, subclinical hypothyroidism, pregestational diabetes, HIV, HBs antigen, genetic screening for prevalent disorders like Sickle cell disease and thalassaemia, or targeted screening for familial disorders.

2. Nutritional health-

Optimization of nutrition should be done preconceptionally.

- Optimizing iron deficiency anemia, treating other causes of anemia.
- Vitamin D deficiency should be corrected and calcium supplementation may be needed for good bone health of mother and fetus.
- Folic acid and B12 supplementation for treating macrocytic anemia and preventing neural tube defects, Zinc supplementation for good immunity.
- Balanced diet with adequate proteins, omega 3 fatty acids and complex carbohydrates.
- Optimizing body weight in case of obesity

3. Addressing addictions: Stopping the use of alcohol, smoking and recreational drugs before conception, and guidance towards deaddiction support centres where indicated. Partners should also stop smoking to prevent maternal passive smoking as well as improve sperm quality.

4. Addressing Mental health: Stress management and other mental health disorders like anxiety, depression or bipolar disorder need to be identified and optimized

**THE
KNOWLEDGE HUB**

before planning pregnancy. Premature birth, birth weight, breastfeeding establishment, and the cognitive and emotional development of newborns and young children are all negatively impacted by maternal depression and anxiety. Domestic violence is also an important factor that can affect the mental health of the woman.

5. Immunization: In India as per guidelines of the Ministry of Health and Family Welfare, by the time girls reach the reproductive age group they should have completed vaccines for Tuberculosis, Polio, Hepatitis B, Diphtheria, Pertussis, Tetanus, H Influenzae B, Influenza, Rotavirus, Typhoid, Measles, Mumps, Rubella, Hepatitis A, Varicella and Human Papilloma virus³. When women present for preconceptional counselling, their immunisation status should be confirmed, recorded and completed. Apart from these, pneumococcal vaccination in special situations like immunocompromised women, splenectomised women or women susceptible to infective endocarditis needs to be considered.

Preconception care in specific conditions: Diabetes Mellitus:

• **Preconceptional assessment:** Diabetes is a known condition for which preconceptional counselling is beneficial. Duration of Diabetes, levels of sugar control, diabetic nephropathy, proliferative retinopathy, and autonomic neuropathy should be screened and couple should be guided about maternal risks on going ahead with pregnancy. Blood sugar monitoring, HBA1C levels, Renal function, lipid profile, urine routine for sugar, proteins and casts, Electrocardiogram, Fundus examination and endocrinologist consultation should be done.

• **Counselling:** Couples should be informed that timely intervention and providing an euglycemic environment to the embryo and fetus decreases chances of congenital anomalies, and sudden fetal demise and also has positive impact on the health of this fetus in adulthood.

• **Intervention:** Insulin is the only FDA-approved medication for treating hyperglycemia during pregnancy. Metformin and Glyburide are also FDA category B drugs which can be considered with information to patient that insulin is the drug of choice.

Chronic hypertension:

• **Preconceptional assessment:** In reproductive-aged women, the prevalence of hypertension is on a rising trend. One should enquire about duration, blood pressure control, and current therapy. General health, daily activities, and dietary habits are assessed. Screen for signs of hypertensive cardiomyopathy, retinopathy, and deranged renal function. Complete blood count, renal function test, oral glucose tolerance test, lipid profile, electrocardiogram, fundus examination should be done.

• **Counselling:** Patient counselling should disclose maternal and fetal risks. Women who require multiple medications for control or who have poorly controlled pressures carry greater risk for adverse pregnancy outcomes. Women with

evidence of organ dysfunction or those with prior adverse events such as a stroke, myocardial infarction, arrhythmias, or ventricular failure carry markedly higher risks.

• **Intervention:** Physician opinion should be taken for assessment and optimization of blood pressure. Frequent use of teratogenic angiotensin-converting enzyme inhibitors in this population calls change of medication

Thyroid disorders in pregnancy:

• **Preconceptional assessment:** Thyroid disorders are common in young women and frequently encountered in pregnancy. Routine screening should be done with serum TSH levels to detect clinical or subclinical hypo/hyperthyroidism. For euthyroidism in pregnancy, the desired serum TSH level is 2.5 mU/L.

• **Counselling:** Maternal and fetal thyroid function are intimately related, and drugs that affect the maternal thyroid affect the fetal gland. Presence of thyroid autoantibodies are associated with increased rates of early pregnancy wastage. Uncontrolled thyrotoxicosis and untreated hypothyroidism, both are associated with adverse pregnancy outcomes.

Clinical and subclinical hypothyroidism can be associated with preeclampsia, placental abruption, cardiac dysfunction, Low birth weight, stillbirths, increased NICU admission and Low IQ. Women need to be explained that they will require four weekly tests of TSH levels and more frequent dose adjustments.

Clinical hyperthyroidism can be associated with preeclampsia, heart failure, preterm delivery, stillbirth. Subclinical hyperthyroidism is not related to maternal and fetal adverse effects.

• **Intervention:** In hypothyroidism, levothyroxine dose is adjusted by 25- to 50-µg increments until TSH values approximate 2.5 mU/L. Higher dose requirements begin as early as 5 weeks of gestation. Significant hypothyroidism may develop early in women without thyroid reserve, such as those with a previous thyroidectomy, those with prior radioiodine ablation.

Thyrotoxicosis during pregnancy can be controlled by propylthiouracil (PTU), which is preferred because it partially inhibits the conversion of T4 to T3 and crosses the placenta less readily than methimazole. Methimazole can be associated with methimazole embryopathy characterised by esophageal or choanal atresia and aplasia cutis.

Obesity:

• **Preconceptional assessment:** There is a substantial increase in obesity complicating pregnancy. For the Asian population revised guidelines categorize overweight as a BMI of 23.0–24.9 and obesity as a BMI \geq 25.4,⁵

• **Counselling:** Obese women have difficulty in achieving pregnancy, early and recurrent pregnancy loss, preterm delivery, and several obstetrical, medical, and surgical complications with pregnancy, labor, delivery, and the puerperium. Increased chances of preeclampsia,

peripartum cardiomyopathy, and gestational diabetes.

• **Intervention:** Weight loss should be encouraged in couples of reproductive age group. It may require behavioural, pharmacological or surgical intervention. Women with Morbid obesity can opt for bariatric surgery which has been shown to improve pregnancy outcomes. Women with bariatric surgery need additional nutritional support during pregnancy in the form of vitamins B12 and D, folic acid, and calcium supplementation. Vitamin A deficiency should also be screened pre-pregnancy. Women with a gastric band should be monitored by their bariatric team during pregnancy because band adjustments may be necessary. Last, special vigilance for signs of internal herniation with intestinal obstruction is encouraged.

Cardiovascular diseases:

• **Preconceptional assessment:** In a woman with preexisting heart disease morbidity and mortality rates correlate directly with functional classification. Hence, optimizing cardiac function to decrease complications during pregnancy is aimed. An initial evaluation with cardiologist with 2 D ECHO should be done.

• **Counselling:** Many congenital heart lesions are inherited as polygenic inheritance, women need to be counselled about screening for congenital heart disease during pregnancy.

Women with Heart disease with the functional classification of NYHA III or IV, pulmonary hypertension, and Eisenmengers syndrome if choose pregnancy, must understand the risks and are encouraged to be compliant with planned care. The need for prolonged hospitalization or bed rest is to be explained.

• **Intervention:** Women with heart disease require good preconceptional care. A multidisciplinary approach with Cardiologist and obstetrician should be consulted. Women with valvular heart lesions are at high risk of Infective endocarditis. Prevention from exposure should be advised and Pneumococcal vaccination needs to be given. Women with life-threatening surgically correctible cardiac abnormalities like severe Mitral valve stenosis, aortic stenosis etc. should undergo corrective surgery, so that subsequent pregnancy becomes less dangerous. In women with mechanical valves on warfarin which is teratogenic, it needs to be replaced with heparin.

Venous thromboembolism :

• **Preconceptional assessment:** In women with history of venous thromboembolism(VTE) special considerations are needed for screening for thrombophilia and thromboprophylaxis.

Screening for thrombophilia is recommended in women with (1) personal history of venous thromboembolism. (2) First-degree relative with a history of VTE / high-risk inherited thrombophilia.

• **Counselling:** Continuous surveillance of these women throughout pregnancy and postpartum for any new VTE

episode or thrombocytopenia.

• **Intervention:** Thromboprophylaxis may be needed during pregnancy and the postpartum period. Indications of thromboprophylaxis in pregnancy include(1) Prior single episode of Deep vein thrombosis with or without thrombophilia. (2) Prior two episodes of VTE (3) Diagnosed high-risk thrombophilia (4) positive family history of VTE (5) positive for antiphospholipid antibody. 6,7 There is no need of anti-Xa monitoring for patients on low molecular weight heparin.

Epilepsy:

• **Preconceptional assessment:** Women should be asked about any history of convulsions, if a known case then duration of epilepsy, type of convulsions, last seizure episode and medications. Again a multidisciplinary approach with a neurologist's opinion should be followed.

• **Counselling:** Mothers with epilepsy have an increased risk of structural anomalies to the neonate and the need for screening should be explained.

• **Intervention:** Medications are adjusted preconceptionally to minimize seizure frequency. Polytherapy is associated with a higher malformation risk compared with monotherapy. Treatment goals attempt to control seizure frequency with monotherapy and with medications considered less teratogenic. These women should be advised to take a daily 4-mg oral folic acid supplementation.

Pregnancy after organ transplant:

• **Preconceptional assessment:** The general well-being of the woman who has undergone transplantation should be good before attempting pregnancy. The organ function test results should be stable. There should be no evidence of graft rejection. Women should not be on any teratogenic drugs like mycophenolate.

• **Counselling:** Women with organ transplants have higher rates of preeclampsia, gestational diabetes, preterm delivery and severe maternal morbidity.⁸ The need for strict surveillance for maternal and fetal well-being needs to be explained. If the patient is found unfit for pregnancy good contraceptive counselling should be done.

• **Intervention:** Waiting for the recipient to attain stable organ function and opting for pregnancy with an understanding of organ dysfunction, need for immunosuppressive therapy and opportunistic infections during pregnancy.

Genetic counselling:

• **Preconceptional assessment:** Preconceptional genetic counselling can be of two types genetic screening (in asymptomatic couples) or Diagnostic testing(in couples with positive family history/ past history) Genetic screening is indicated in couples who belong to high-risk ethnic groups, especially for autosomal recessive genetic conditions like Beta Thalassemia, Sickle cell disease, Spinal Muscular Atrophy, Tay-Sachs disease, cystic fibrosis,

phenylketonuria (PKU).

Carrier state can be diagnosed and appropriate decisions can be taken based on results.

Diagnostic Genetic testing is recommended in a positive family history/ or history of recurrent pregnancy loss.

• **Counselling:** Post-test counselling is a sensitive step that should be done considering the social, medical and behavioural background of the couple. The need of Prenatal diagnostic testing, amniocentesis/ chorionic villous biopsy or termination of pregnancy should be explained

• **Intervention:** Confidentiality and privacy need to be maintained while discussing the test reports. Further management will depend on the partner's report and will depend on the specific condition detected. While planning management couple's reproductive rights and shared decision-making should be kept in mind.

Specific considerations in special Obstetric conditions:

Women with any high-risk pregnancy conditions like previous caesarean delivery, bad obstetric history, Rh negative pregnancy need to be counselled regarding the need of special investigations and regular follow-up during pregnancy.

If HIV or HBs antigen is incidentally detected, a woman needs to be emphasised about partner screening, and specialist opinion for their health status and stage of disease. Antiretroviral therapy needs to be initiated for all HIV-positive women irrespective of CD4 count. The need for immunoprophylaxis and neonatal therapy for preventing mother-to-child transmission needs to be explained.

Preconceptional counselling implementation strategies:

• All health care providers especially gynaecologists, paediatricians and general practitioners should guide, suitable women about preconceptional health. Post abortion and postpartum care can also be clubbed with preconception counselling.

• Preconception counselling should be based on the couple's need and principles of counselling that is Greet, Ask, Tell, Help, Explain and Return (GATHER approach) should be followed.

• In remote areas preconception care can be made accessible with the help of ASHA workers, Anganwadi workers and integration with RMNCH +A services.

• Social media and technology-based apps can be used to facilitate preconception counselling.

Challenges in Preconception Care

Despite its proven benefits, the challenges in the adoption of preconception care are limited awareness in society, time constraints in busy clinical settings, access to health care and overcoming social taboos and cultural beliefs.

To maximize the benefits of preconception care, healthcare providers should focus on bringing up policy changes and systematic training to streamline preconception counselling as an essential healthcare service.

Conclusion

Preconception care is an important component of reproductive health that lays the foundation for a healthy pregnancy. By addressing medical, nutritional, and psychosocial factors before conception, healthcare providers can significantly improve maternal and fetal outcomes. Despite existing challenges, innovative strategies and collaborative efforts can enhance the reach and effectiveness of preconception care. As awareness grows, more women will have the opportunity to embark on their pregnancy journey with a strong foundation of health and well-being.

References:

1. American College of Obstetricians and Gynecologists: Interpregnancy care. Obstetric Care Consensus Number 8, January 2019b
2. Society for Maternal-Fetal Medicine, Kaimal A, Norton ME: Society for Maternal-Fetal Medicine consult series #55: counseling women at increased risk of maternal morbidity and mortality. Am J Obstet Gynecol 224(4):B16, 2021
3. National immunisation schedule. https://nhm.gov.in/New_Updates_2018/NHM_Components/Immunization/report/National_%20Immunization_Schedule
4. Misra A, Chowbey P, Makkar BM, Vikram NK, Wasir JS, Chadha D, et al. Consensus Statement for Diagnosis of Obesity, Abdominal Obesity and the Metabolic Syndrome for Asian Indians and Recommendations for Physical Activity, Medical and Surgical Management. J Assoc Physicians India. 2009;57:163-70.
5. Lim JU, Lee JH, Kim JS, Hwang YI, Kim TH, Lim SY, et al. Comparison of World Health Organization and Asia-Pacific body mass index classifications in COPD patients. Int J Chron Obstruct Pulmon Dis. 2017;12:2465-75.
6. American College of Obstetricians and Gynecologists: Inherited thrombophilias in pregnancy. Practice Bulletin No. 197, June 2018. Reaffirmed 2020a
7. American College of Obstetricians and Gynecologists: Thromboembolism in pregnancy. Practice Bulletin No. 196, June 2018. Reaffirmed 2020b
8. Sabr Y, Lisonkova S, Skoll A, et al: Severe maternal morbidity among women with solid organ transplants: a population-based study. Abstract. No. 612. Am J Obstet Gynecol 220:S405, 2019

HPV Vaccination: Preventing Cervical Cancer, Protecting Woman



Dr Syed Hubbe Ali
Health Specialist
UNICEF ICO



Dr Aman Chugh
National Consultant
RMNCHA
UNICEF ICO

"It's important for us to look after ourselves. If we don't get checked on time for this kind of cancer, then we will not be here for our family when they need us. It's a matter of life and death."

-Lakshmi, cervical cancer survivor

With 660,000 new cases in 2022, Cervical cancer ranked fourth most prevalent cancer among women globally. Out of 350,000 cervical cancer fatalities, approximately 94% took place in low- and middle-income nations. WHO anticipated that the number of cervical cancer fatalities would rise from 311 000 to 400 000, while the number of new cases will rise from 570 000 to 700 000 annually, between 2018 and 2030.

In 2020, India alone was responsible for almost one-fourth of cervical cancer fatalities and around one-fifth of new cases globally, making it a significant contributor to the global cervical cancer burden. With a population of 511.4 million women aged 15 years and older at risk, cervical cancer kills 79906 women annually.

Cervical cancer, a malignant neoplasm arising from cells originating in the cervix uteri, primarily caused by persistent infection with high-risk human papillomavirus (HPV) types. Despite being largely preventable, cervical cancer remains a significant public health challenge.

A mix of biological, environmental, and behavioural variables affect the risk factors for cervical cancer. Studies suggest multiple sexual partners, initiating sex at early age, early childbearing, high-risk sexual partners with sexually transmitted diseases (STDs) or a history of HPV infection, smoking and alcohol use, receptive anal sex, individuals on immunosuppressive treatments, a family history of cervical cancer and low socio-economic conditions heightens the risk of developing cervical cancer.

According to recent estimates, HPV infection is responsible with about 4.8% (610000 cases) of all human cancers worldwide. Human papillomaviruses (HPV) are small, non-enveloped particles with diameter of

52-55nm which infects mucosal membranes and skin. The virus is composed of protein capsid made up of 72 pentameric capsomeres which encapsulates a single double-stranded DNA of roughly 8000 base pairs; the genome of HPV is categorized into three functional regions namely a) E- region that encodes proteins (E1-E7) essential for viral replication, b) the late (L) region that encodes the structural proteins (L1-L2) needed for virion assembly; and c) long control region (LCR), a non-coding segment which regulates the replication and transcription of viral DNA. Given that each type of HPV differs from the others by at least 10% in the highly conserved L1 gene, more than 200 varieties of HPV have been identified based on the similarity in genomic sequence. Because of these similarities, HPVs are classified into five genera: α , β , γ , μ , and ν . The majority of HPV types that infect epithelial mucosa are found in α -papillomaviruses. Based on epidemiological association with cervical cancer, HPV is categorized in following 3 groups i.e., high-risk HPV (HR-HPV) genotypes (types 16, 18, 31, 33, 35, 39, 45, 51, 52, 56, 58, 59, 68, 73, and 82) associated with various cancers, including cervical, anal and oropharyngeal cancers, putative high-risk HPV (pHR-HPV) genotypes (types 26, 53, and 66), and low-risk HPV (LR-HPV) genotypes (types 6, 11, 40, 42, 43, 44, and 70) associated with benign conditions such as warts and respiratory papillomatosis.

The clinical progression of HPV infection involves several stages, from initial infection to potential cancer development. Transmission typically occurs through unprotected sexual contact, with the virus entering epithelial cells at the site of contact. Most infections are asymptomatic and resolve spontaneously within a few months to two years. In the early stage, HPV replicates in the basal epithelial layer, with E6 and E7 proteins causing cellular changes over months to years. Clinical manifestations include benign warts caused by low-risk HPV types or precancerous lesions (CIN 1-3) caused by high-risk types, progressing over several

years. Untreated CIN lesions may develop into invasive cervical cancer within 5–10 years, while similar timelines apply to HPV-related cancers in other sites like the anus or oropharynx. Cervical cancer is preventable through early detection of precancerous changes. Screening significantly reduces morbidity and mortality by enabling timely intervention. Cervical cancer screening encompasses various modalities aimed at early detection and prevention. Cytologic methods include the conventional Pap smear and liquid-based cytology (LBC), both of which involve microscopic examination of cervical cells to identify abnormalities. HPV testing focuses on detecting high-risk human papillomavirus strains, either as a standalone test or in conjunction with cytology (co-testing). Visual inspection techniques, such as Visual Inspection with Acetic Acid (VIA) or Lugol's Iodine (VILI), involve applying a solution to the cervix and examining it for abnormal changes, either with the naked eye or using magnification tools like a colposcope. Molecular methods, including nucleic acid amplification tests (NAAT) and the detection of specific protein biomarkers, are also employed to identify high-risk HPV infections and associated cellular changes. These diverse screening strategies enhance the detection of precancerous conditions, thereby contributing to the prevention and early treatment of cervical cancer. It is suggested that individuals aged 21–29, Pap testing should begin at age 21 and can be repeated every three years if results are normal. For those aged 30–65, screening options include primary HPV testing every five years if normal, co-testing with HPV and Pap every five years if both results are normal, or Pap testing alone every three years if normal. Screening may no longer be necessary after age 65 if there is no history of cervical precancer and at least three normal Pap tests or two negative HPV tests have been conducted in the past ten years. Additionally, screening is not required if the cervix was removed during a total hysterectomy for non-cancerous reasons. Vaccination against HPV has become a vital preventive measure, significantly reducing the burden of diseases. These HPV vaccines consist of virus-like particles (VLPs) which prevent infections and cancers associated with HPV by stimulating the immune system to develop antibodies.

VLPs closely resemble natural virus and are highly immunogenic. The vaccine is administered in a 0.5ml dose via intramuscular injection into the deltoid region, and is given in a course of two or three doses, based on the age at which the HPV vaccination was first received. Preteens (11 or 12 years (can be initiated at 9 years)) and young adults are usually advised to receive the immunisations before to exposure. Currently, Bivalent (CERVARIX by GSK), Quadrivalent (Gardasil by Merck Sharp & Dohme LLC), Non-valent (Gardasil 9 by Merck Sharp & Dohme LLC) and Quadrivalent (Cervavac by SIIIL) are marketed in India. The vaccines are highly efficient with no reporting of serious adverse events, common side effects include local pain at administration site, swelling and fever. Limited knowledge and awareness, decision making by fathers and family for young girls, influence of school administrators, teachers, community health workers in uptake of HPV vaccine, concerns about efficacy of vaccine along with links between STI and cancer, high cost of vaccine, misinformation and limited access and availability of vaccines in rural or marginalized areas act as key barriers in accessing HPV vaccines. Acknowledging the need to prevent cervical cancer, National Technical Advisory Group on immunization (NTAGI) recommended “the introduction of HPV vaccine in the Universal Immunization Programme (UIP) with a one-time catch-up for 9–14-year-old adolescent girls followed with routine introduction at 9 years of age”. Girls enrolled in school will be prioritised for vaccination with grade-based approach (5th to 10th). Additionally, community outreach programs shall be organized and mobile teams will be deputed to target out of school girls. Furthering, to register, record and monitor the vaccinations a digital application namely U-WIN will be used. In addition, various initiatives have been introduced to accelerate the process of HPV vaccine introduction in India, a recent partnership of UNICEF-FOGSI developed technical modules for healthcare providers (HCP) as well as teachers & students. Additionally, they organized capacity building workshops for HCP and awareness drives in schools for promoting HPV vaccinations. World Health Organization (WHO) calls for 'A World Free of Cervical Cancer'. The Global Strategy for the Elimination of Cervical Cancer, spearheaded by the WHO presents a comprehensive framework to eradicate cervical cancer as a public health issue. The strategy emphasizes the need for widespread HPV vaccination, aiming to immunize 90% of girls aged 9-14 years by 2030. It also targets screening 70% of women aged 35-45 years with high-performance tests and ensuring that 90% of women with invasive cervical cancer receive effective treatment. Cervical cancer can be largely prevented through the combined efforts of vaccination, screening, and education. Integration of HPV vaccination within National Immunization Programs, scaling up HPV vaccination and screening initiatives, fostering collaboration with donors and partners for promoting HPV

vaccination, especially in high-burden regions like India, is critical for achieving the WHO's goal of eliminating cervical cancer as a public health problem by 2030. By addressing barriers to prevention and fostering public awareness, we can significantly reduce the burden of this disease and improve women's health worldwide.

References:

Lakshmi: Prevention Is Better Than Shame; Together for Health; Available from: <https://togetherforhealth.org/lakshmi-prevention-is-better-than-shame/>
 WHO. Cervical Cancer [Internet]. World Health Organization. World Health Organization; 2024. Available from: <https://www.who.int/news-room/fact-sheets/detail/cervical-cancer>
 Global strategy to accelerate the elimination of cervical cancer as a public health problem; WHO; <https://iris.who.int/bitstream/handle/10665/336583/9789240014107-eng.pdf?sequence=1>
 Ramamoorthy, T., Kulothungan, V., Sathishkumar, K. et al. Burden of cervical cancer in India: estimates of years of life lost, years lived with disability and disability adjusted life years at national and subnational levels using the National Cancer Registry Programme data. *Reprod Health* 21, 111 (2024). <https://doi.org/10.1186/s12978-024-01837-7>
 N. Bhatla, G. Albero, L. Bruni (January 2024). India. Human Papillomavirus and Related Cancers, Fact Sheet. www.HPVWorld.com, 257
 Burmeister CA, Khan SF, Schäfer G, Mbatani N, Adams T, Moodley J, Prince S. Cervical cancer therapies: Current challenges and future perspectives. *Tumour Virus Res.* 2022 Jun;13:200238. doi: 10.1016/j.tvr.2022.200238. Epub 2022 Apr 20. PMID: 35460940; PMID: PMC9062473.
 Mekonnen AG, Mittiku YM. Early-onset of sexual activity as a potential risk of cervical cancer in Africa: A review of literature. *PLOS Glob Public Health.* 2023 Mar 22;3(3):e0000941. doi: 10.1371/journal.pgph.0000941. PMID: 36962975; PMID: PMC10032528.
 Comparison of risk factors for invasive squamous cell carcinoma and adenocarcinoma of the cervix: Collaborative reanalysis of individual data on 8,097 women with squamous cell carcinoma and 1,374 women with adenocarcinoma from 12 epidemiological studies. *International Journal of Cancer.* 2006 Nov 27;120(4):885–91
 Bucchi D, Stracci F, Buonora N, Masanotti G. Human papillomavirus and gastrointestinal cancer: A review. *World J Gastroenterol.* 2016 Sep 7;22(33):7415-30. doi: 10.3748/wjg.v22.i33.7415. PMID: 27672265; PMID: PMC5011658.
 IARC Working Group on the Evaluation of Carcinogenic Risks to Humans. Human Papillomaviruses. Lyon (FR): International Agency for Research on Cancer; 2007. (IARC Monographs on the Evaluation of Carcinogenic Risks to Humans, No. 90.) 1, Human Papillomavirus (HPV) Infection. Available from: <https://www.ncbi.nlm.nih.gov/books/NBK321770/>
 Muñoz-Bello, J. O., Carrillo-García, A., & Lizano, M. (2022). Epidemiology and Molecular Biology of HPV Variants in Cervical Cancer: The State of the Art in Mexico. *International Journal of Molecular Sciences*, 23(15), 8566. <https://doi.org/10.3390/ijms23158566>

Moeinzadeh M, Kheirkhah B, Amini K, Pouryasini A. Classification and identification of human papillomavirus based on its prevalence and development of cervical lesion among Iranian women. *Bioimpacts.* 2020;10(4):235-242. doi: 10.34172/bi.2020.30. Epub 2020 Mar 24. PMID: 32983939; PMID: PMC7502904.
 Sheila V. Graham; The human papillomavirus replication cycle, and its links to cancer progression: a comprehensive review. *Clin Sci (Lond)* 1 September 2017; 131 (17): 2201–2221. doi: <https://doi.org/10.1042/CS20160786>
 Cervical Cancer Screening; National Cancer Institute; https://www.cancer.gov/types/cervical/screening?utm_source=chatgpt.com
 Screening Tests for Cervical Cancer; American Cancer Society; https://www.cancer.org/cancer/types/cervical-cancer/detection-diagnosis-staging/screening-tests.html?utm_source=chatgpt.com
 Banerjee D, Mittal S, Mandal R, Basu P. Screening technologies for cervical cancer: Overview. *Cytojournal.* 2022 Mar 29;19:23. doi: 10.25259/CMAS_03_04_2021. PMID: 35510117; PMID: PMC9063504.
 Screening tests; Centre for Disease Control; <https://www.cdc.gov/cervical-cancer/screening/index.html>
 About HPV Vaccines, Vaccines & Immunizations; CDC; <https://www.cdc.gov/vaccines/vpd/hpv/hcp/vaccines.html#:~:text=Vaccine%20Composition,45%2C%2052%2C%20and%2058.>
 Human Papillomavirus (HPV) Vaccines, National Cancer Institute; [https://www.cancer.gov/about-cancer/causes-prevention/risk/infectious-agents/hpv-vaccine-fact-sheet#:~:text=lasts%20\(20\).-,%20How%20do%20HPV%20vaccines%20work?,infections%20or%20HPV%2Dcaused%20disease.](https://www.cancer.gov/about-cancer/causes-prevention/risk/infectious-agents/hpv-vaccine-fact-sheet#:~:text=lasts%20(20).-,%20How%20do%20HPV%20vaccines%20work?,infections%20or%20HPV%2Dcaused%20disease.)
 Web Page; Margot L. Savoy; 2024; Human Papillomavirus (HPV) Vaccine; MSD Manual Professional Edition; MSD Manual; 2024; 2024/04; Human Papillomavirus (HPV) Vaccine; HPV immunization, HPV2, HPV4, HPV9, Gardasil; <https://www.msdmanuals.com/professional/infectious-diseases/immunization/human-papillomavirus-hpv-vaccine>
 Kaarthigeyan K. Cervical cancer in India and HPV vaccination. *Indian J Med Paediatr Oncol.* 2012 Jan;33(1):7-12. doi: 10.4103/0971-5851.96961. PMID: 22754202; PMID: PMC3385284.
 Web page; HPV Vaccination in India : New Progress and the way forward; <https://www.rgcirc.org/blog/hpv-vaccination-in-india-new-progress-and-the-way-forward/>
 Shah P, Shetty V, Ganesh M, Shetty AK. Challenges to Human Papillomavirus Vaccine Acceptability among Women in South India: An Exploratory Study. *Am J Trop Med Hyg.* 2021 Aug 9;105(4):966-973. doi: 10.4269/ajtmh.20-1650. PMID: 34370698; PMID: PMC8592141.
 Press release; Release ID: 1885597; Centre urges States to create awareness and take steps for prevention of cervical cancer among girl students; Ministry of education; Posted On: 22 DEC 2022 9:24AM by PIB Delhi; https://pib.gov.in/PressReleasePage.aspx?PRID=1885597#:~:text=Key%20Highlights:%20*%20National%20Technical%20Advisory%20Group,conducted%20through%20Community%20Outreach%20and%20Mobile%20teams.
 Web-page, Cervical Cancer Elimination Initiative, WHO; <https://www.who.int/initiatives/cervical-cancer-elimination-initiative>

FOGSI HPV vaccine recommendations from FOGSI ICOG GCPR : Prevention and Management of Cervical Cancer, 2023

	Schedule	Evidence level and grade of recommendation
Manufacturer's Schedule	<ul style="list-style-type: none"> Two doses 9–14 years at least 6 months apart Three doses above 15–45 years (0, 1–2 months, 6 months) 	Level I, Grade A
Reduced dose A. Two doses of WHO SAGE recommendation B. Alternative single dose (Off label)	<ul style="list-style-type: none"> One or two doses for 9–14 years One or two doses for 15–20 years Two doses for 21 years & above Single dose schedule can be used for girls and boys aged 9–20 years 	Level II, Grade B
Males (Gardasil 9, Cervavac)	Males can be vaccinated from 9–45 years <ul style="list-style-type: none"> 9–14 years two doses 0, 6 months 15–45 years three doses 0, 2, 6 months 	Level II, Grade C

PROJECT: EEBR



ETHICAL EVIDENCE-BASED RECOMMENDATIONS EEBR SERIES 2025 by FOGSI



Under the dynamic stewardship of Dr Sunita Tandulwadkar as the President FOGSI 2025, one of the most magnanimous academic projects is the Ethical & Evidence Based Recommendation (EEBR).

Ten such EEBRs have been drafted on the most useful and clinically challenging subjects. Each EEBR has been carefully drafted following a consensus between esteemed FOGSI experts and stakeholders and are based on the scientific evidence available at the time of preparation.

EEBRs aim to serve as a ready reckoner in day-to-day clinical practice and will definitely enhance patient counselling and decision - making in various topics of Obstetrics & Gynecology.

The wait is finally over! Click the QR code to access all 10 EEBRs - Ethical Evidence Based Recommendations Or click <https://eebr.ejaypee.com/index.html>

ENGAGE LEARN REFLECT
EEBR 2.0 is in the making..STAY TUNED!

Editor-in-Chief



Dr Sunita Tandulwadkar
MD (Obs and Gyne)
FICS (Gyne-Endoscopy) FICOG
President, FOGSI (2025-2026)
Gynecological Endoscopist and ART & IVF Specialist,
High Risk Obstetrician, Regenerative Medicine Specialist

Unlock the EEBR Series eBooks in 3 Easy Steps



- 1. Scan the QR Code**
Use your device to scan the QR code.
- 2. Click the 'Skip to Login' Button**
After scanning, tap the "Skip to Login" button at the bottom right of the screen.
- 3. Enter Your FOGSI Credentials**
Log in with your FOGSI registered email address and password to unlock the EEBR eBooks.

PUBLICATIONS



PROJECT: PUBLICATIONS

“As I travelled across the country for the elections, I discovered that few FOGSIANS feel disconnected, as though FOGSI doesn’t belong to them. However, I also observed an incredible wealth of talent and eagerness among many to contribute to FOGSI. And that’s why we are launching the project so as to bridge the gap and foster a sense of belonging.”

Health Map of India Women & Adolescents

“Our mission is to meticulously map the prevalence of key health conditions among women across India, focusing on diverse socioeconomic and geographical segments. By studying a minimum of 1 lakh to 50 Lakh women in each category, we aim to build a comprehensive database that will not only highlight regional health disparities if any but also position FOGSI as a global leader in understanding and addressing women’s health challenges.”

7 PUBLICATIONS

1. Study to Assess the prevalence of hypertension, diabetes and thyroid disorders during pregnancy.

AIMS & OBJECTIVES:

- To determine the prevalence of these three conditions in India:
- Hypertensive Disorders in pregnancy
- Hyperglycemia in pregnancy
- Thyroid Dysfunction in pregnancy
- To determine the gestational ages when these are first identified/ diagnosed
- Analyze the prevalence difference between rural & urban, different Socioeconomic groups, parity and age .



High risk conditions In Pregnancy

2. Study of prevalence and severity of anaemia among pregnant women in India

AIM & OBJECTIVES

- To assess the prevalence of anaemia in pregnant women
- To determine the degree of anaemia
- To determine the demographic distribution of anaemia in our country
- To determine party-wise anemia prevalence.



Anemia in Pregnancy

3. Study on prevalence of depression in perimenopausal women across India.

AIMS & OBJECTIVES:

- To determine the prevalence of depression in perimenopausal women across India.
- To compute the mean age of menopause in India.



Depression in Perimenopausal Women

4. Study of Prevalence and etiology of Post Menopausal bleeding.

AIM & OBJECTIVES:

- To determine the prevalence of Postmenopausal bleeding in women across the country.
- To identify common risk factors associated with PMB.
- To assess the health outcomes related to PMB in this population.



Postmenopausal Bleeding

5. Study on Prevalence of Obesity in Adolescence.

AIMS & OBJECTIVE:

- To determine the prevalence of obesity among adolescents in different geographic regions.
- To identify common risk factors associated with obesity in adolescence.
- To assess the health outcomes related to obesity in this population.
- To compare the prevalence and risk factors across different centers.



Obesity In Adolescent

6. Study to evaluate the prevalence of complications in the postpartum period.

AIM & OBJECTIVES:

- Study on Prevalence of Depression, Anxiety Disorder, Dyspareunia, Tokophobic & Continence Disorders following Childbirth.
- To determine the prevalence of depression, anxiety disorders, dyspareunia, perineal pain, tokophobia & continence disorders following vaginal birth in new mothers.
- To compare the prevalence in rural versus urban settings.
- To compare the prevalence with mode of delivery.
- To compare the prevalence in booked versus unbooked status



Postpartum Disorders

7. Study on understanding the acceptance and usage patterns of various contraceptive methods among women in India.

AIMS & OBJECTIVES:

- To determine the prevalence of usage and type of contraceptives in various age groups across different demographic regions in India.
- To identify whether contraception is used or not.
- To identify most commonly used contraception in men and women across India.



Contraception



10th FOGSI-ICOG Annual Conference



UP²DATE in OBGYN ...Fundamentals to Advanced

1st & 2nd March 2025

Hotel Sheraton Grand, Pune

ICOG Points &
MMC Credit Hours Applied

Email:
fogsi.icog.conference2025@gmail.com

For more information: www.pogs.in



FOGSI FUNFRENCE ACADEMIC UPDATES & FELLOWSHIP

2nd - 6th April, 2025 | Srinagar, India

Kashmir: A Journey of
Elegance, Heritage & Growth

an exclusive retreat for medical professionals

**'Gar firdaus bar-rue zamin ast,
hami asto, hamin asto, hamin ast'**



ACADEMIC CALENDAR AT A GLANCE- 2025

Date	Conference	Place	In Charge
8th -12th January	AICOG	Mumbai	Dr. Nandita Palshetkar & team
20th - 21st January	Aarogya Yog Yatra	Tirupati	Tirupati society
24th - 26th January	Presidential conference	Andaman	Dr.Sampath Kumari
1st - 2nd February	Presidential Conference	Ahmadnagar	Dr.Ganesh Bade
7th- 9th February	ISAR Annual	Lucknow	Dr. Rajul Tyagi,Dr. Ameet Patki
14th - 16th February	AMOGS	Chandrapur	Dr.Manisha Ghate & Dr. Kiran Kurtkoti
19th -20th February	Aarogya Yog Yatra	Rishikesh	Dr.Jaya Chaturvedi/Dr.Neena Malhotra/Deheradun society
21st - 23rd February	North Zone Yuva	Delhi	Team Khora makanpur
1st- 2nd March	ICOG	Pune	Dr. Parag Biniwale
14th - 16th March	IAGE AAGL Annual	Pune	Dr. Sunita Tandulwadkar/Dr. Shailesh Puntambekar/Dr. Ashish Kale
18th -19th March	Aarogya Yog Yatra	Puri	Dr.PC Mahapatra & Team Bhubaneswar
20th March	Aarogya Yog Yatra	Varanasi	Dr.Ritu Khanna
2nd - 6th April	Funference	Srinagar	Dr.Narendra Malhotra/Dr.Sudhir Shah/Dr.Deepak Bagade
10th April	South South South Concla	Delhi	Dr.Hrishikesh Pai
11th April	FOGSI cell meeting	Delhi	Delhi Society/FOGSI
12th- 13th April	FOGSI MCM	Delhi	Delhi Society
18th-20th April	VP conference	Kolkata	VP Dr. Shyamal Sett
26th-29th April	IFFS	Japan	Dr. Rishma Pai
1st- 4th May	ASPIRE	Singapore	Dr. Ameet Patki
10th - 11th May	VP conference	Noida	VP Dr.Abha Singh / Dr Rakhi Singh
17th - 18th May	Presidential Conference	Vishakhapatnam	Vishakhapatnam Society
18th - 24th May	FOGSI Overseas Conferen	Baku-Azerbaijan	Respective Committee Chairpersons
5th- 8th June	EBCOG	Frankfurt	
7th - 8th June	Presidential conference	Bangalore	Bangalore OBGYN Society

11th-12th June	Aarogya Yog Yatra	Dwarka & Somnath	Dr. Mahesh Gupta/Jamnagar society/Gandhi nagar society
13th -15th June	West Zone Yuva	Rajkot	Dr. Nitin Lal,Dr. Jigna Ganatra,Dr.Niraj Jadav/Rajkot obgyn Society
20th - 21st June	South Zone Yuva	Ooty	Dr Chandrakala Maran / Coimbatore OBGYN Society
25th - 28th June	ESHRE	Paris	
5th-6th July	Critical Care Conference	Patna	Dr.Vinita Singh
10th July	Aarogya Yog Yatra	Ajmer & Pushkar	Ajmer and Udaipur Society
11-13th July	VP conference	Udaipur	VP Dr.Komal Chavan
13th July	Aarogya Yog Yatra	Shrinathji	Udaipur OBGYN society
25th - 27th July	VP conference	Kanyakumari	VP Dr.Palaniappan & respective team presidents
28-Jul	Aarogya Yog Yatra	Rameshwaram	Madurai OBGYN Society
1st- 3rd August	FOGSI FIGO	Mumbai	Dr. Hrishikesh Pai
22rd-23rd August	RCOG & BFS	London	Dr.Ameet Patki & Dr.Anu Chawla
5th- 7th September	PPH	Ahmedabad	Dr.Mahesh Gupta
10th-11th September	Aarogya Yog Yatra	Mathura and Govardhar	Mathura OBGYN Society
13th - 14th September	Presidential Conference	Kanpur & Dibrugarh	Dr. Meera Agnihotri / Dr Pranay Phukan
19th - 21st September	AICC RCOG	Chennai	Dr.Uma Ram
26th September	FOGSI cell meeting	Mumbai	
27th- 28th September	FOGSI MCM	Mumbai	
5th-9th October	FIGO	Cape Town	
18th - 19th October	Presidential Conference	Meerut	Dr.Usha Sharma/Dr.Bharti Maheshwari
25th - 29th October	ASRM	San Antonio-Texas -USA	
7th- 9th November	East Zone Yuva	Shillong	Dr.Shyamal Sett & Shilong OBGYN Society
14 th - 16th November	Presidential conference	Pune	Dr.Sunita Tandulwadkar & Dr.Ashwini Kale POGS
5th - 7th December	VP conference	Nashik	VP Dr.Varsha Baste
10th - 11th December	Aarogya Yog Yatra	Ayodhya	Dr. Pritikumar & Lucknow OBGYN society

AD