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(Environmental Management System)



# Lokmanya Medical Research Centre

Transformational healthcare through  
Research & Innovative solutions



IS YOUR BUSINESS

Lokmanya Hospital

TATA

सुरक्षा  
रस्ता सुरक्षा अभियान



LOKMANYA  
HOLISTIC CANCER CARE  
Dr. Neelima Chakrabarti MD

Integrated Approach  
For Management of  
Cancer Patients



LOKMANYA  
COMPREHENSIVE  
TRAUMA  
MANAGEMENT  
SYSTEM  
ISO 9001:2015 Certified

Lokmanya Hospitals



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Founder Trustee

**Dr. V. G. Vaidya**, M. S. (Bombay)

is renowned name in dedicated service to human kind through Lokmanya Medical Foundation. He is Managing Trustee of the same. He is General Surgeon & Occupational Health Expert for 30 years.

Trustee



**Dr. S. M. K. Hussainy**, M.B.B.S., M.D.

(Internal Medicine)

is renowned General Physician and founder member of Lokmanya Medical Foundation.

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**Dr. M. V. Bhole** MBBS, MD,

Yoga consultant is renowned Scientist & Yoga Expert. He was awarded honorary Doctorate of Science in Yoga by VYASA, Bangalore for the research work carried out in the field of yoga.

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**Dr. Bhushan Patwardhan**

has over 20 years experience in academic and education governance at many Universities and institutions. He is Editor- in-Chief of Journal of Ayurveda and Integrative Medicine and is on several Editorial Boards

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**Dr. Vikram Ghole**

is a methodical and result-oriented scientific researcher with experience in Biochemistry, Molecular Biology and Environmental Sciences. He has had a unique and enriching academic and administrative experience. Extensive laboratory research experience at various reputed laboratories in India, Germany and USA adds to his capability. **National Institute of Virology**  
**Coordinator, Academic Cell**

M.D. LHPL



Invitee

**Dr. N. V. Vaidya**, MBBS, DNB( ortho ), ATLS,

MS( ortho ), Mch

an Eminent Orthopedic Surgeon . Felicitated with Rashtriya Ratna Award & National Mahindra Navistar Award for alternative thinking.



# Lokmanya Medical Research Centre



**Lokmanya Medical Research Centre** established in the year 1985; is a non-governmental, not for profit Scientific and Industrial Research Organization (recognized by Department of Scientific and Industrial Research (DSIR), Govt. of India). LMRC is registered under Public Charitable trust (F/2871/Pune-12/07/1985), and registered under Society Act (Maharashtra /1984/85/Pune).

LMRC is managed by Dr. V.G..Vaidya, MS.(General Surgeon& Integrated Health Expert) Managing Trustee advised by Governing Council and Research Advisory Body of the Lokmanya Medical Research Centre. The "Ethics Committee" of the Lokmanya Medical Research Centre, has been Registered with the Drugs Controller General (India), Directorate General of Health services, New Delhi these committees have been constituted meeting all the statutory requirements.

LMRC is engaged in social-medical Health initiatives focusing in the area of Cancer Healthcare, Occupational Health & environment, sustainable development.and Education. LMRC conducts basic, applied and extra mural research to gain insights about medical and therapeutic science with a commitment to finding new ways to reduce the burden of illness. LMRC contributes to the building of a prosperous and vibrant society by providing quality health services with its up to date infrastructural backup, Evidence Based Research Interventional Strategy and Modern Technology. through sister organisation - Lokmanya Medical Foundation Hospitals.

Since early 80s, Lokmanya Medical Research Centre is in the forefront in the field of Community Health Research and has undertaken various community outreach programs like Safe Life Initiative on Road Safety, Emergency Medical Service, Material & Child Health (Reproductive Child Health- I & II Programme) National Cancer Control Programme, HIV \ AIDS Prevention and intervention programme for industrial workers and Migrants, , Environmental Studies (Environmental Assessment & health profiles of high risk exposed workers) & AYUSH programme.

Lokmanya also offers excellent opportunity for socio-medical research with many ongoing projects approved and supported by , Department of Science and Technology, Ministry of Health and Family Welfare Govt. of India, Eminent Corporate House under CSR and other national and international research bodies.

The organization has all the research and training infrastructure required for training & capacity building through conference, seminar, and workshop as well as experienced Medical staff and research staff which include Medical Experts, Occupational & Environmental safety experts, Sociologist, Economist, Clinical Psychologist, Counselors, Holistic Experts, Yoga therapists, Social workers & Outreach and also to implement projects in whole of Maharashtra & India.



## Vision Statement

LMRC is a nonprofit, independent healthcare organization committed to improving the health status of the communities we serve through:

- Leadership and excellence in delivering quality healthcare services
- Expanding the horizons of medical knowledge through biomedical research
- Educating and training physicians and other healthcare professionals
- Strive to improve the health status of the community through Community Health Care

## Our Objective

- To be engaged in advancement of scientific research pertaining to Cancer, Occupational Health, Environmental Health and Research in indigenous Medicine System.
- Promotion of positive health, prevention of diseases, early diagnosis-treatment and follow up of disease and provision of healthful environment.
- Promote health in its holistic sense including its economic, social and spiritual dimensions.
- Identifying present and futures trends in health, new and emerging disease patterns and seeking joint actions with like minded organizations to meet those needs
- Provide and create a platform to share information and experiences and enhance cooperation in health education and research
- To promote, develop and improve scientific exchange of knowledge as well as technical co-operation between research institution with similar interests and objectives.
- Foster partnership between NGO's, Government agencies, International Agencies and other public and private organizations for undertaking action-oriented research studies.

## Organisation Recognitions

- Lokmanya Medical Research Centre is recognised as a Scientific & Industrial Research Organization by Department of Science & Technology (DST) & DSIR, Government of India.
- Registered with Niti Ayog for NGO registration under Darpan
- Member of National cancer Grid / Indian cancer society
- Recognised by the National Safety Council Mumbai, as NAC (National Awareness and Preparedness for emergencies at Local Level) Sub center
- Recognised by the DG, FASLI – Central Labour Institute to run the AFIH Course for Industrial Doctors
- Recognised to receive Foreign Donations under Foreign Contribution Regulatory Act (FCRA) by the government of India
- Recognised as Scientific Research institute for receiving donations under section 35 (i) (ii) of ITA
- Recognised by the Comm. Of Income Tax under sub clause (II) (b) of subsection (2) of section 17 for rebate in Income Tax for Industrial Personnel for medical treatment at Lokmanya Hospital
- Affiliated institute of Maharashtra University of Health Sciences, Nasik for conducting Fellowship Courses
- Affiliated institute of Institute of Para Medical College, New Delhi for Conducting Diploma
- Recognised by National Clinical Trial Registry (ICMR)



## ILO ON OCCUPATIONAL HEALTH


Occupational accidents & diseases remain the most appalling human tragedy of modern industry and one of its most serious forms of economic waste. Industrial accidents are responsible for the loss of 4 to 5 times as many working days as industrial disputes. In certain cases is comparable to national defence."

The economic burden on the community cannot be expressed in compensation costs alone. It also includes loss of production, disruption of schedules, damage to productive equipment, But the economic burden is by no means the full measure of the human cost. Protection against "Sickness, injury ,disease out of employment" is one of the essential aims of the ILO. It calls for a far more vigorous effort than has been devoted to it!

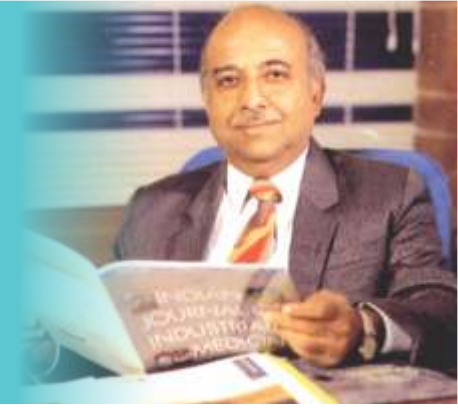
**Francis Blanchard. DG ILO.**

### Report...Swedish International Development Authority

"The need for Occupational Health Service in this area is very big, indeed! The scope for development is simply enormous. The medical facility of L.H. is well located in the midst of industrial area and is thus set to be of potentially great importance The greatest assets of L.M.F. are its leadership and principal staff. The people I met, centrally positioned with leadership roles appeared to me to be very sincere & devoted. They are the best guarantee for a successful and probably extensive development over next few years"



**OCCUPATIONAL  
HEALTH AND  
ENVIRONMENT  
STUDIES.**



**Dr. V. G. Vaidya M. S.**  
*Managing Trustee*

## THE MAKING OF AN OCCUPATIONAL HEALTH CENTRE A NEED BASED ACTIVITY

It was in 1974 that we started the work of ESIS Diagnostic Centre at Lokmanya. We provided the facility of Specialist Consultations, Lab – Investigations, X-ray etc. for around 44000 families of Industrial workers registered with the panel doctors in PCMC area. All the services were provided at the rate of Rs.5/- per year per family!

We also started a casualty centre and treated about 700 to 800 industrial injuries as well as indispositions per month. All these employees had to attend one or two clinics and hospitals in Pune, before we provided these facilities to them, next door.

Within a year or so it was realized that the pattern of diseases in this industrial area was somewhat different from the purely residential zones. Allergies, asthma, Skin problems, backpain formed the major portion of illnesses for which the workers attended the clinics. The overwhelming number of injuries for which the workers attended the clinics. The overwhelming number of injuries was also a matter of grave concern. All these factors led me to develop interest in the upcoming speciality of 'Occupational Health'. All over the world the 'General' Physicians or the Surgeons were laying the foundation for this new speciality. I studied the books published by I.L.O. & W.H.O regarding this speciality and developed the idea of starting an 'Occupational Health Service & Research Centre' project which I submitted to I.C.M.R.

We tried to persuade the employers to undertake medical check-up either pre-employment or periodic. Some of them agreed but when they notified the check-up hardly any employees turned up. It was their contention that any untoward condition noted at the medical checkup would be used against the employee to get rid of him whenever wanted! So we approached the union leaders. Some of them agreed but when approached through them, the management refused. It was now the turn of management to suspect the motive - the factory may be considered to be responsible for this illhealth and may have to give compensation! It was this lack of understanding and apprehensions in these two quarters at that time prevented the beginning of a good and useful activity which would have benefitted both the parties, considerably.

So, instead of starting from occupational health, we concentrated attention close to my own speciality. We were literally treating hundreds of Hand injury cases. It was time somebody analysed their causes. Myself and Dr. U.G.Naik made records of 1250 cases in just 3 months and wrote a paper on

Retrospective Analysis of the Etiology of Industrial Hand Injuries. It was read at the Asian Conference at Singapore. The co-operation of employers and employees was just fantastic and we could create a slide set with synchronized commentary based on our observations and conclusions. Mr. Vijay and Mrs. Saroja Parulkar made proper justice the work done by us. It was a very concerted effort for spreading the message of 'Prevention' through TV interviews, posters, booklets and of course the slide set. More than 1,50,000 employees all over Maharashtra were exposed to the slide-set with the help of Mr. Sharad Gatne, Executive Director (Outreach)

When approached regarding accidents, the negative approach (taken concerning diseases) of both the employers and employees disappeared altogether and both the sections took a decidedly positive stand in the matter. I feel such a unique experiment is unparalleled in the annals of Occupational Health and Safety. So impressed was the Director General of F.A.S.L.I. Dr. Ramaswami that he ordered the translation of Commentary and slide set in 4 Indian languages. The Institute of Engineers (India) awarded me with the prestigious Mehendale Health & Safety Prize at the hands of eminent industrialist Late Shri H.K. Firodia.

We also studied the outcome of this experiment and submitted another Research Paper at Manila in the International Occupational Health Conference, which conclusively proved the significance of sustained education!

Enthused by this great response from the industry, employers and employees alike our team visited O.H. Institute at Ahmedabad and Toxicology Institute at Lucknow to study their working. I submitted the project of Occupational Health Centre of Health Services. I met the concerned Hon. Minister of Health, but alas, he was unaware of the gravity of the subject and gave the proposal unusual twist of 'urban' bias and rejected it! We really missed the great opportunity to start a O.H.C. which now could have been a pride of this area!

We did not get the same response for studying the OH conditions in our area. But whenever such a help was asked for, the advice given by our team certainly served to solve the problems. I can specially mention here the cases of chlorine poisonings, Benzene anaemias, sodium cyanide poisonings lead poisoning etc. where proper inspection and few investigations was all that was required to overcome the problem, saving many M.D.L. We could also solve the problem of occupational deafness in High Explosive unit.

In 1985-86, we formed a separate association – LMRC – basically dealing with OH and Environmental safety – with Dr Ramaswami D.G., FASLI as Chairman. We held 3 seminars of factory doctors, Personnel Managers which established the need to start a OHC in our area and it was unanimously agreed that Lokmanga is the most ideal place for it with its infrastructure and central location.

In spite of I.T. Exemption, no donations came forth initially. However, this did not deter us and all the work was carried out utilizing the staff and funds of L.M.F. After several years struggle, now people have started appreciating work of L.M.R.C. and donations have just started trickling.

In 1987-90, I carried out a project with the help of DST to study the Occupational Health Status in unorganized small units manned mainly by weaker sections. We covered brick kilns, stone quarries and

crushers, construction workers and transport workers. We submitted our report with recommendations to establish some kind of health delivery system for this sector. Action by Government is still awaited !. The report submitted by Dr.B.G.Sahastrabudhe was very much appreciated and was on display at D.S.T. Delhi.

In 1993-94, Dr.S.B.Ray, Ex-Director General, Quality Assurances, Ministry of Defence, New Delhi joined our team and set up the first Industrial Hygiene Laboratory in this area. It is providing services to the Factories on demand. This has given us the opportunity to correlate subjective symptoms with the environmental exposures. We have received lot of equipments like Noise dose meters, Vitalographs,PFTs,Air samplers from Sweden which will help us to undertake the task of helping industries to analyse the environmental factors and hazardous exposure parameters.

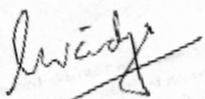
The R.C. & O.H.C. is also carrying out continuous programmes in First Aid, Prevention of Hand and Eye, Injuries , Family Planning,through slide shows and lectures. Recently AIDS Awareness Project was vigorously undertaken for 20 industrial units through Workshops, Booklets, Exhibitions etc through NACO.

The Services of Lokmanya Hospital are an added advantage to the Centre as any emergency situations can be successfully tackled in the ICU/CCU of Lokmanya Hospital. The R.C. & O.H.C. would thus be a unique centre which provides preventive, diagnosis and curative services.

Many eminent professionals are on the advisory body of LMRC and the activities are really growing. Few years ago, I had the opportunity to have collaboration with Swedish organization through Mr.Anders Appelin. Dr.V.P.Joshi was sent to Sweden to study the Occupational Health Centres under the strategic alliance project of SIDA. Dr.Goran, Ljunggren the Chief Occupational Health consultant to Foretagshalsen, in Jonkoping visited Lokmanya twice. This has really given a new impetus to the OHC work by visiting various factories emphasizing the need and usefulness of such a centre. To day our company Health service centre is providing service to may Indusial units.

The starting of a regular and proper Research & Occupational Health Centre is like a dream come true ! Like in case of any new speciality, I had the opportunity to lay the Foundation of the Centre along with my team at Lokmanya Hospital. The tremendous efforts put in by my colleagues like Dr.S.M.K.Hussainy, Dr.Uday Naik, Mrs Saroja & Vijay Parulkar, Mr.Sharad Gatne in the early and formative years of struggle inspite of limited resources, would always be remembered with pride and gratefulness. The centre now has all the specialized knowledge and experience behind it in the form of eminent Occupational Health experts.

I hope and pray that the activities of the centre would pick up really well and serve the population very positively. It would be a unique contribution of LMRC to the Health of Industrial work force and prosperity of Industries.



**Dr. V. G. Vaidya**

*Managing Trustee*

Lokmanya Medical Research Centre, Pune



# Pioneering services to Industries in Occupational Health, Industrial Safety & Environmental protection.



Pioneering efforts have been made under the dynamic and visionary leadership of Dr.V.G.Vaidya (M.S.) to serve the industries in Occupational Health, Industrial Safety, environmental protection and indigenous plants and medicines.

## The details are mentioned underneath.

1. **Hospital** : started first Multi Speciality Hospital in Pimpri Chinchwad Industrial Area (L.M.F)
2. **Specialist Centre (ESIS)** serving 44000 families of Industrial workers from Khadki to Dehuroad for 16 years –
  - OPD @ Rs.5/- per family per year.
  - Offering services of 8 specialities - Lab, X- ray facilities saving the time for going to Pune.
3. **Trauma Centre** for Industrial personnel treating 500-600 injuries p.m.
4. **Research in Hand Injury cases and eye injuries**
  - Papers presented in 5 International conferences.
  - Prevention lectures for 2 Lac workers in Western Maharashtra to bring down successfully the number of injuries.
  - Booklet published in 5 languages by C.L.I
  - Dr. V. G. Vaidya was felicitated with prestigious Mehendale Award by Institute of Engineers of India.
5. Zero backache through Yoga. (A Y U S H)  
Research project on backache problems in Industries for Reducing Absentism.
6. Research in Prevention of AIDS in industrial worker –
  - Creating Peer Groups.
  - Dr.V.G.Vaidya Authored book on AIDS Awareness “AIDS is Your Business”.
7. **Pioneering project** : Occupational Health Hazards of working women in unorganized sector. (Letter from DST appreciating the project.)
8. **Safe Life Initiative on Road Safety** ( Supported by USA, USA, India Pvt. Ltd.)  
Work place road safety for industrial workers  
“SURAKSHA” Book published by  
Lokmanya in colabration with Tata Motors.
9. Central Labour Institute Affiliated Centre for conducting Associate Fellowship in Industrial Health; since last 20 years providing Occupational Health specialist doctors to Industries.
10. Service to Industries by Dr.V. G. Vaidya (M.S.) & Dr. S.M.K.Hussainy (M.D.) as Certifying Surgeons.
11. First Holistic Cancer Care & Research Centre recognized by Mahatma Jyotiba Phule Janaarogya Yojana, Dhanwantari Yojana (PCMC), covered by Insurance Companies etc.
  - Research in Anticancer formulations (FDA approved), RV Caps/ Methylglyoxal
12. **Company Health Services** for Pre-employment / Periodic check-up.
  - Specialist advice for hazard/ pollution management in Industries.
13. Established first Industrial Hygiene Laboratory
14. Occupational Cancers – Early detection/Screening / Lifestyle changes.
15. Internationals collaboration for Occupational Health Services with Sweden (SIDA)

## OCCUPATIONAL HEALTH & ENVIRONMENT STUDIES.

**Lokmanya Hospital** was recognised ESIS Diagnostic Centre for 44,000 families of Industrial workers in PCMC area for providing wide-ranging of diagnostic, secondary and tertiary health care services. The causality centre treated 700 to 800 industrial eye and hand injuries per month the over increasing number of hand and eye injuries was a matter of grave concern. Besides Allergies, Asthma, Skin problems, Backache formed the major portion of illness. It was realized that the pattern of diseases in this industrial area was somewhat different from the purely residential zones. All these factors led **Dr. V. G. Vaidya**, Managing Trustee to develop interest in the upcoming specialty of Occupational Health and in the year 1985 under the guidance of Dr. Ramaswamy, former D.G. FASLI as its first Chairman; in collaboration of Foretag's Halsan, an OHS Consultative firm in Sweden a separate wing of Occupational Health Centre was established.



**INTERNATIONAL ABILYMPICS** : International Abilympics was held in Tokyo in 1981 to commemorate the United Nations' International Year of Disabled Persons. With an Aim for promoting access to employment for persons with disabilities, an essential condition to their integration and autonomy. Dr. V.G.Vaidya, Managing Trustee had the privilege to be part of the organizing team representing India. Four disable workers from India participated in International Abilompics.



### Pioneering work on Prevention of Hand & Eye injuries for industrial workers

Lokmanya has done pioneering work in the "Prevention of Hand & Eye injuries in industrial workers". The case data and the experience gained was put into research papers on "*Retrospective analysis of the*



*Etiology of Industrial Hand Injuries*" & "*Impact of two-way safety education on prevention of Hand & Eye injuries*" were presented by **Dr. V. G. Vaidya** at the International and National Conferences held at Singapore, Vienna, Manila, Finland and in India.

Based on research outcome a pocket booklet on "Prevention of Industrial Hand-Injuries" was translated into 4 Indian languages and published by National Safety Council. Lokmanya produced audio visuals on "Prevention of Hand Injury & Prevention of Blindness and Eye Injury". More than 2 Lakh workers were sensitized and were exposed to education material like Posters, Pamphlets, Booklets, slide-shows organised in various industries as ongoing safety programme.

## HAND & EYE CONSERVATION UNIT:

Even a minor injury to hand is many times enough to render the loss by means of man-days lost & loss of productivity to industries and lost wages, unemployment, socio-psychological setbacks, poverty and infinite series of untold miseries for worker & his family members. Considering this a well equipped **Hand Conservation Centre** was established under the



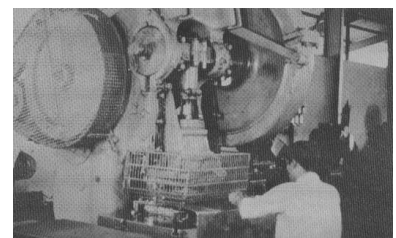
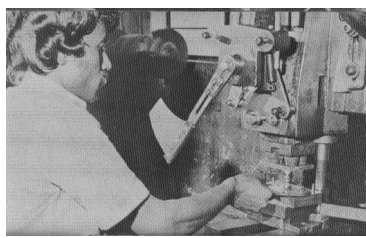
leadership of Dr. V.G.Vaidya. The centre treated more than 450 cases in just 3 months and adequate research was carried out on Causes of Hand & Eye Injuries and evaluated the outcome .

### Prevention of Hand & Eye injuries amongst industrial workers

Based on extensive research and the experience gained the Centre started imparting training & education on **"Prevention of Industrial Hand & Eye Injuries"** in Industries. More than 120000 workers were sensitized on prevention of Hand & Eye injuries. The centre also developed IEC materials based on

our research & Audio Visual Aid on Prevention of Hand & Eye Injuries which was screened in various factories units in Maharashtra, The Impact of this screenings was phenomenal which reduced the hand & eye injuries by 50%. Research papers on Hand & Eye Injuries were

presented in National & International Conferences. National Safety Council published a pocket booklet on **"Prevention of Industrial Hand-Injuries"** in five Indian languages and distributed throughout India.



#### Research Papers Presented.

"Retrospective analysis of the Etiology of Industrial Hand Injuries." was presented at IOH Conference held at Finland

"Causes of Industrial Injuries" was presented at the Indian Occupational Health Association Conference, Mumbai.

"The impact of two-way safety education in Prevention of Hand Injuries." was presented at International Conference held at Manila

"Prevention of Industrial Injuries" was presented at the 10th Asian Conference on Occupational Health held at Singapore.

"Psychological Aspects of Hand Injuries" was presented at International Psychiatric Conference held at Vienna.

The Institute of Engineers (India) awarded Dr. V.G.Vaidya with the prestigious “Mehendale Health & safety Prize” at the august hands of eminent Industrialist Late Shri H. K. Firodia for his contribution in the field of occupational health and safety.



## INTERNATIONAL COLLABORATION ON OCCUPATIONAL HEALTH

Lokmanya had collaboration with Swedish Organisation SIDA through Mr. Anders Appelin, under the strategic alliance project. Lokmanya sponsored Dr V.P.Joshi to obtain training in Occupational Health & Safety Practices from National Institute of Working Life (NIWL), Stockholm, Sweden.



## INDUSTRIAL HYGIENE LABORATORY

In 1993-94 under the guidance of Dr. S. B. Ray Ex- Director General Quality Assurance, set up the first Industrial Hygiene Laboratory in Pune. This Centre has enabled us to undertake Toxicological, epidemiological and various Environmental Surveys, identification and monitoring Industries hazards, stomach wash analysis. and industrial hygiene research on Chlorine Gas Inhalation, Lead, and Sodium Nitrate for various industries in Pune and PCMC MIDC and Government Defense establishments.



## COMPANY HEALTH SERVICES CENTRE

In order to provide quality Employee Health and Occupational Health Research, the Company Health Services was established under the guidance of Dr. Goran Ljunggren, the Chief Occupational Health Consultant to Foretagshalsen, in Jonkoping, University Sweden.

This centre has been recognized by Department of Industrial Safety and Health Govt. of Maharashtra, to provide comprehensive occupational health services. Today Lokmanya Company Health Services is recognized as the employer health partner that helps to meet the basic occupational health needs of the industrial workforce from organized and unorganized sectors and has proved to be an asset to many corporate companies, Small and Medium Scale Industries located in Pune District MIDC area for their statutory compliance.



*We are committed to helping employers care for their greatest assets – the employees they employ. In partnership with the employer company, we will continue to develop innovative strategies that improve employee health, contain healthcare costs and increase staff productivity.*

The LCHS Centre delivers the full range of employee health services, with extensive offerings in wellness, medical screening programs, injury care and comprehensive work site injury prevention initiatives. We offer a variety of healthcare services to corporate and can guide you in planning and implementing your organizations health initiatives through a continuous healthcare delivery program.

**Company Health Services provides comprehensive occupational health services to the Corporate Sector viz.**

## THE L.M.R.C. & O.H.C. CAN OFFER FOLLOWING SERVICES UNDER ONE ROOF

1. Pre employment and Periodic Check ups door step.
2. Routine as well as specialised investigations as per the need:  
Enzyme studies. PFT/ECG/Audiometry ect.
3. Emergency treatment in ICU whenever there is any mishap deu to  
Accidents or exposures.
4. Industrial Hygiene Lab. for environmental evaluation for hazardous  
exposures / air Sampling / Poison analysis.
- 5 Workers Education and guidance to industrial Units.

## OCCUPATIONAL HEALTH RESEARCH

**DST Scheme:** *Promotion and development of Technology for schedule castes/ Scheduled tribe and other weaker section.* **Supported by:** Ministry & Department of Science & Technology, Govt. of India

**PROJECT TITLE:** Action Oriented Pilot Research Study aimed at developing a model strategy to provide Occupational Health Service to the population employed mainly in unorganized small units and living scattered in slums and belongs to economically and socially weaker sections of the Society (1996 – 98)

**Study Objective:** The Objectives of the study was to evolve methodology and organization for diagnosis and early detection of existing health problems of the study population and epidemiology of the selected health problems.

Pilot study was conducted on unorganised workers in four occupations : Brick kiln (25), stone crushing (22), construction (18) and transport (20) sites covering 23880 workers.



### Study Findings:

Based on the study outcome, following recommendation was made to the Department of Science and Technology.

- Development of Social Security benefits (Health Insurance plan) for unorganised workers.
- Integration of Comprehensive occupational health services with General Health Service.
- Development of Low Cost Protective Aids \ Tools Low cost personal protective equipment Kits to be provided by the employer.
- Door Step Mobile Dispensary & immunizations service strategy to be provided basic health services to unorganized sector employees.
- Technological recommendations for In-depth Epidemiological study of determinant of Morbidity and reduction of drudgery and exploitation of worker.
- Steps to be taken for prevention and eradication of child labor
- Adult Literacy classes and pre primary school education to be imparted at work site.

# OCCUPATIONAL HEALTH RESEARCH

Supported By: RVPSP, Ministry & Department of science and technology, Govt of India.

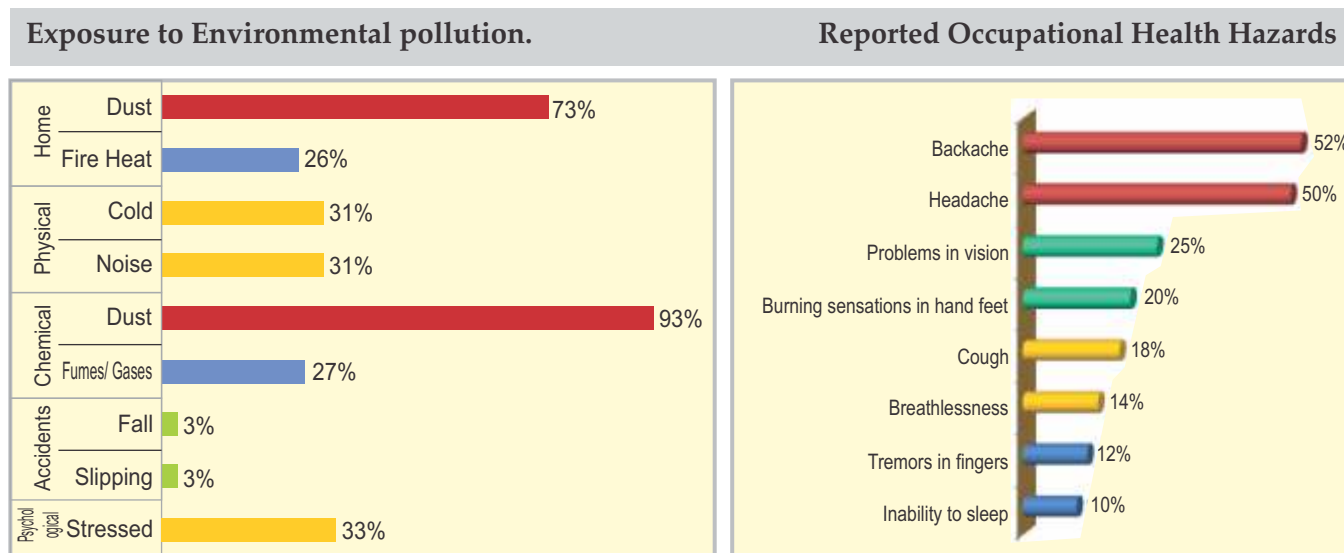
**Project Title:** *Occupational Health Hazards Of Working Women In Unorganized Sector ( 2008- 2010)*

A cross sectional study on “*Occupational Health Hazards of Working Women in unorganized Sector*” was undertaken focusing on assessment of occupational Health hazards of the working women with respect to impact of exposure to pollution, working environment on the general medical condition of women workers.

## OBJECTIVES OF THE PROJECT:

- To conduct environmental survey & compile information on Environmental & occupational hazards of unorganized sector among women in PCMC, Pune District.
- To prepare manuals on working women safety and healthy work practices for unorganized sector
- To conduct Stakeholders workshops on “*Occupational Health Hazards of Working Women in unorganized Sector and Healthy Practices*” especially for Construction and Brick Mftg Sector.

## STUDY RESULTS:



**Table 5: Exposure to Chemical Hazards**

	All Respondents (Col %)	Season (Col %)		Type of work site (Col %)		Duration of work (Col %)		
		Summer	Winter	Brick kiln	Construction site	< a year	1-5 years	>5 years
Dust/Fumes/	93	80	100	85	98	96	91	96
Gases	27	23	29	70	0	11	32	35
Total (n)	103	35	68	40	63	27	53	23

## PROJECT OUTCOME

Research Paper: A study on Occupational Health Hazards of women working in unorganized sectors primarily from exposure of working environment coupled with the general medical symptom paper was presented by Mr. S.B Pattar at the 'Joint Annual Conference of IAPSM-IPHA Maharashtra State 2011' held on 13<sup>th</sup> & 14<sup>th</sup> January 2012 at Karad. Lokmanya Medical Research Centre received Best paper award.

# YOGA

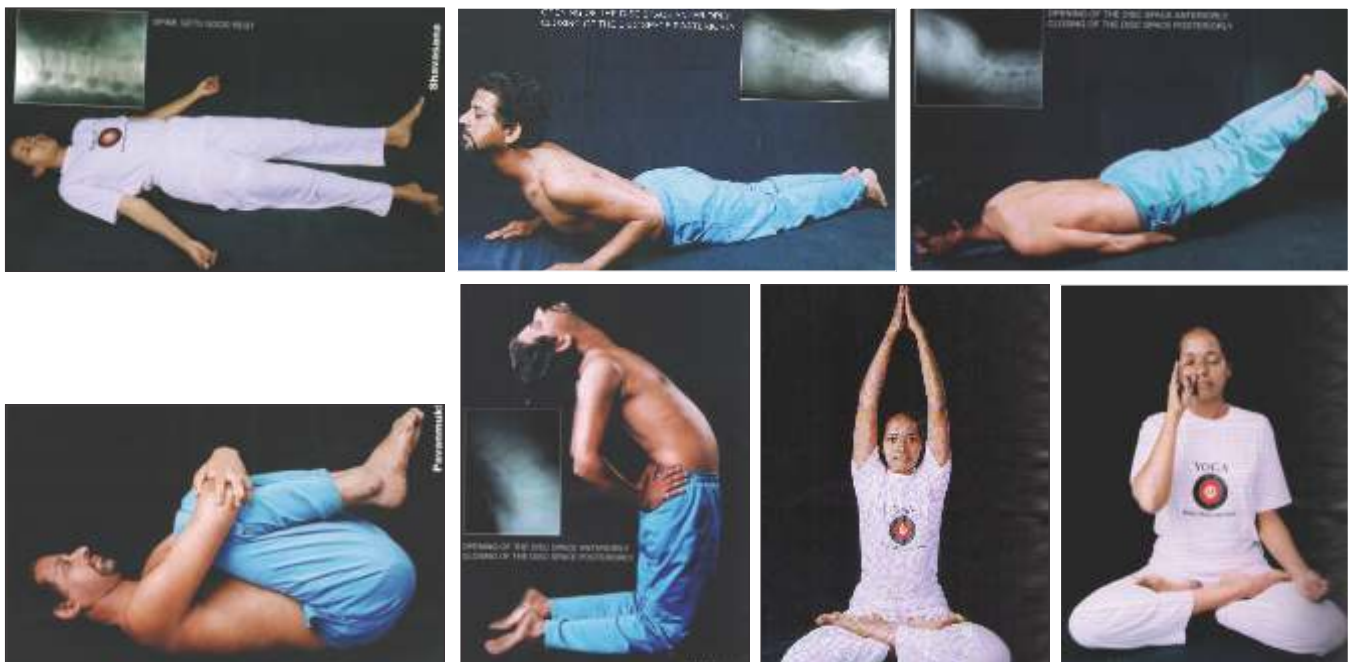
ROLE OF YOGIC PRACTICES IN THE MANAGEMENT OF PATIENTS WITH CHRONIC BACKACHE PROBLEMS WITH PARTICULAR REFERENCE TO ACTIVITY RELATED EFFICIENCY (1999-2003) sanctioned by Indian system of homeopathic and medicine, Government of India,

With an Aim To investigate and study various etiological factors and Psychological determinants in patients with chronic backache problems who are conservatively and or surgically treated and to assess the impact of Yogic practices and approaches on activity related efficiency in work life situation.

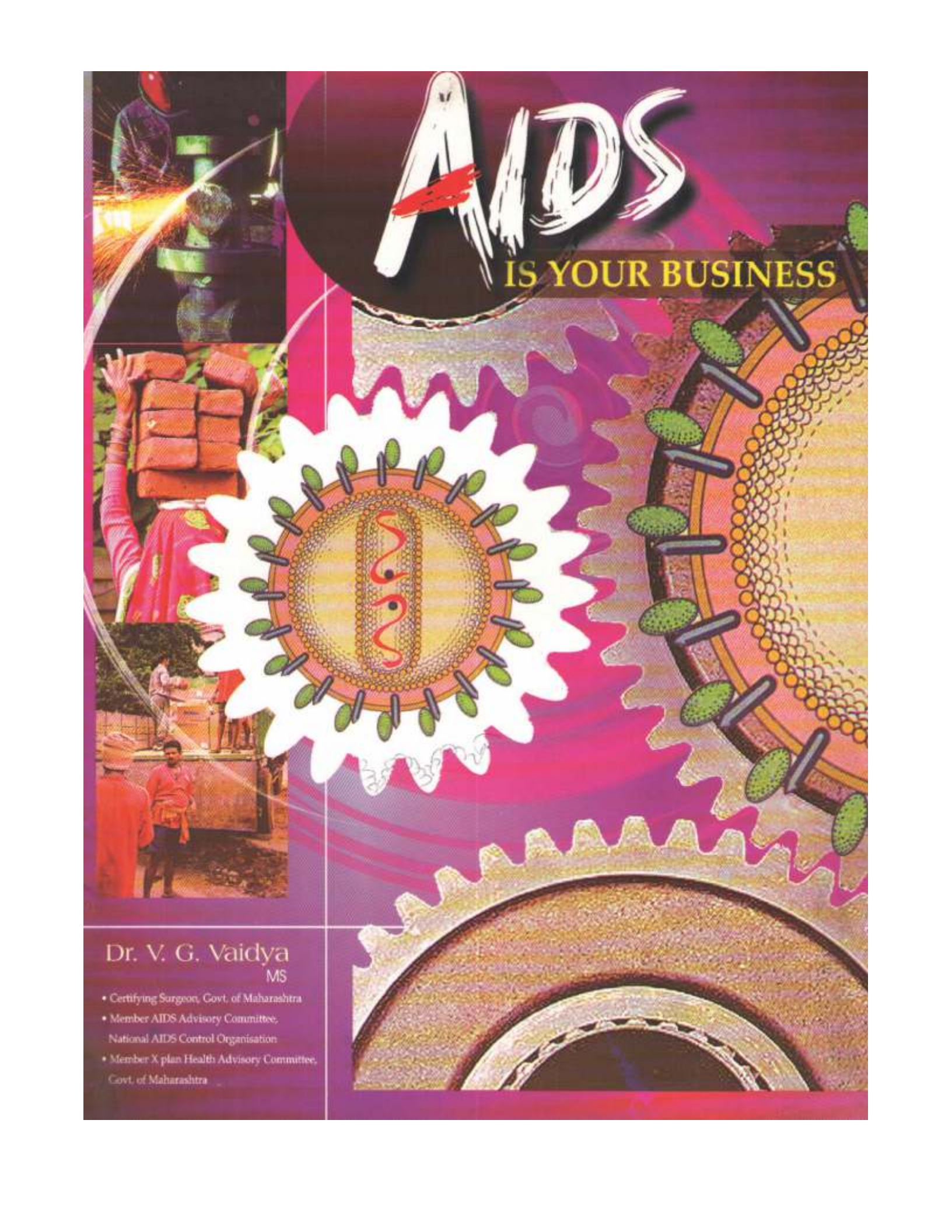
## Study Abstract

This study demonstrated that the problem assumes greater significance with industrial workers being increasingly prone to spinal problems.and the leading cause of reduced work related efficiency and increased absenteeism. Patients who were given yoga showed better symptomatic pain relief (as compared to control group) and a good change toward positive side when their personality was assessed. Positive change was seen in personality factors viz. shift from emotionally unstable to stable, tensed to relaxed, group dependent to self sufficient and undisciplined to controlled. Further the patients who were given yoga showed better work related efficiency and reduced absenteeism as compared to those not given yoga. This project also gave us a chance to highlight a need to establish yoga diagnosis to make yoga therapy to become complete in itself. Dr.Bhole's approach of "Yoga Health Education and Practice (Abhyasa)" has become one of the important highlighting features of this project in this respect.

*Yoga can be a very important tool in management of back pain and is effective in reducing pain scale, improving activity of daily life & work related efficiency. to reduce absenteeism and for improving work related efficiency.*





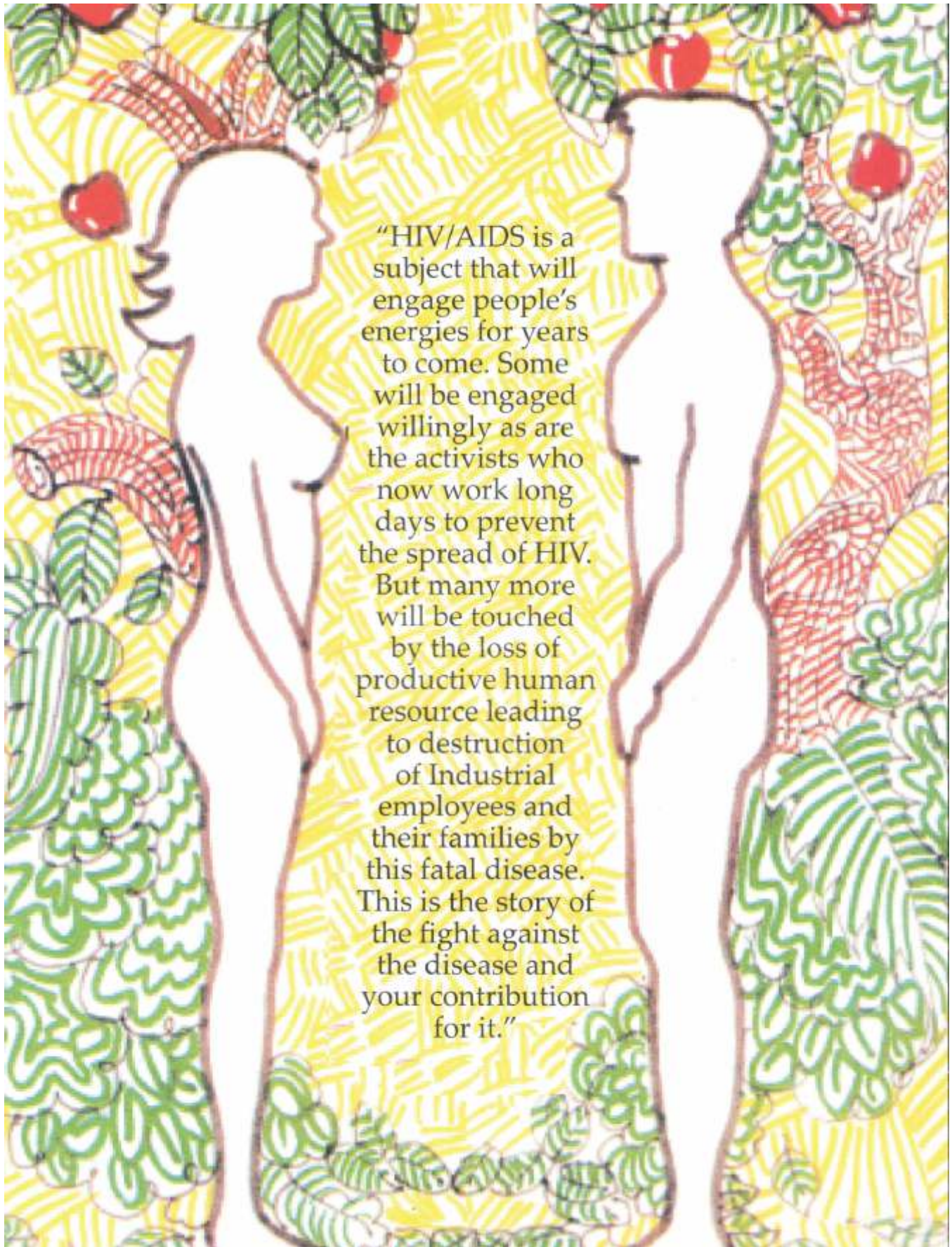
The poster features a dark purple background with a collage of images. On the left, there are three vertical panels: the top one shows a person in a red mask and protective gear working with machinery; the middle one shows a woman in a pink sari carrying a heavy load of red bricks on her head; the bottom one shows a man in a red shirt standing near a public water tap. On the right, there is a large, stylized illustration of a human cell or virus with a white, spiky outer layer and a yellowish interior containing a red, double-helix structure. The word 'AIDS' is written in large, white, stylized letters with a red slash through the 'A'. Below it, the phrase 'IS YOUR BUSINESS' is written in yellow, bold, capital letters. The bottom right corner features a large, golden gear with a textured surface.

# AIDS

IS YOUR BUSINESS

Dr. V. G. Vaidya  
MS

- Certifying Surgeon, Govt. of Maharashtra
- Member AIDS Advisory Committee,  
National AIDS Control Organisation
- Member X plan Health Advisory Committee,  
Govt. of Maharashtra



"HIV/AIDS is a subject that will engage people's energies for years to come. Some will be engaged willingly as are the activists who now work long days to prevent the spread of HIV. But many more will be touched by the loss of productive human resource leading to destruction of Industrial employees and their families by this fatal disease. This is the story of the fight against the disease and your contribution for it."

## HIV/AIDS AWARENESS AND TARGETTED INTERVENTION PROGRAMME

The Lokmanya Blood Bank was recognized as AIDS counseling & Surveillance Centre (1986-1999) by Government of Maharashtra for blood testing and counseling of Sero-Positive Individuals in PCMC.

### AIDS AWARENESS PROGRAMME AMONGST INDUSTRIAL WORKERS FROM UNORGANISED / ORGANIZED SECTORS.

**Supported By:** NACO, Ministry of Health & Family Welfare & Maharashtra State AIDS Control Society, Govt. of Maharashtra.  
Project Duration: 1996 to 1997.



### Project Objectives:

- To impart knowledge on AIDS to the Industrial workers.
- To empower peer group leaders to undertake HIV/AIDS Awareness programme for community.
- To ascertain the level of awareness of preventive practices relating to AIDS.

### Project Strategy:

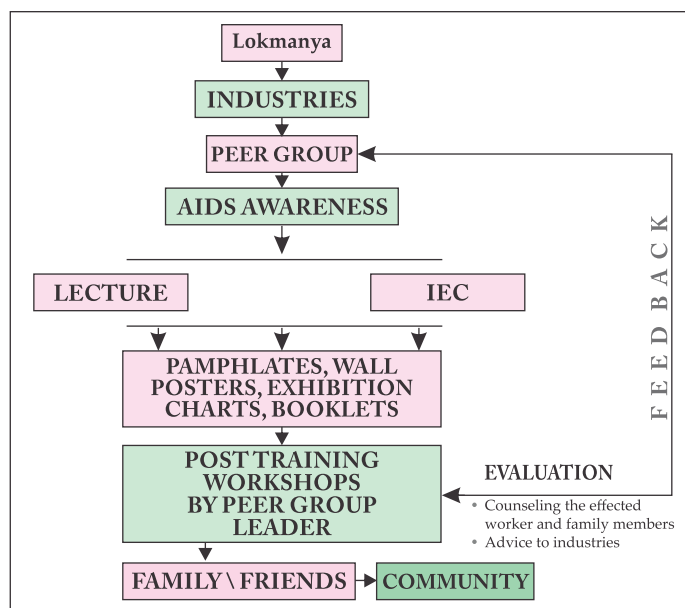
Comprehensive model for AIDS Awareness amongst Industrial Workers was developed in consultation with Maharashtra State AIDS Control Society

.Capacity building of Peer group Leaders in Industry , Organize group meeting and awareness programme in factories. Identify and motivate workers with high risk behavior, Referral service – counselling centre,

Organizing face to face intervention with employer–employee

Health education material was developed for distribution

Organising AIDS Workshop for Employers and Trade Union Leaders.



*The efforts taken on HIV AIDS intervention project are pioneering step forward to enlighten Industries about the AIDS and how it affects their productivity, quality, management and future and how to deal effectively with the situation. . This stream of knowledge was not just limited to employee or the employer but also to their family and in turn to the community.*

**AIDS IS NOT JUST OUR BUSINESS BUT AIDS IS YOUR BUSNIESS TOO.....**

## HIV-AIDS TARGETED INTERVENTION FOR TRUCKERS 2004-08

**Funded by:** Ministry of highways and shipping in collaboration with CIRT

After Industrial workers we found that the Truck Drivers are known to be potent carriers of HIV/AIDS due to numerous reasons which encouraged us to undertake Targeted intervention for TRUCKERS, in collaboration with Central Institute of Road Transport, Pune ; to provide onsite treatment for RTI/STD, AIDS Surveillance and Counseling, Condom distribution and to disseminate information related to HIV/AIDS. 55000 Truckers have been benefited from this program.



## TARGETED INTERVENTION PROGRAMME FOR MIGRANTS WORKERS IN UNORGANISED SECTOR 2008 TO 2010

**Supported By:** MSACS, Govt. of Maharashtra; NACO, ( Bill and Mandela Gates Foundation)

Lokmanya implemented "Targeted Intervention Program for Single, Nuclear & High Risk Migrant Workers engaged in unorganised sector" Supported by Maharashtra state AIDS Control Society, Mumbai under the NAPC III Programme with an aim to halt and reverse the prevalence of HIV/AIDS among the Migrant population and to provide quality services for their sexual needs.

Lokmanya Medical foundation adopts snowball technique for Peer involvement is an effective way of reaching migrant communities and affecting behaviour change Voluntary Peer Leaders were Trained to deliver education on Sexually Transmitted Infections and were encouraged for spreading culturally sensitive messages on HIV/AIDS, STI/STD and Social Marketing strategy was adopted for improving condom accessibility & Condom usages

**thru Street Plays, Lectures and IEC distribution Exhibition were adopted for desiminating infomation about HIV/AIDS.**



## COMMUNITY BEHAVIOUR CHANGE COMMUNICATION



### Promotion Of Rti\std Quality Health Services:

For improving quality services for Syndromic management of STI & STD. Counselling Centre and STI Clinic was established in intervention Area.

### Paper Presentations:

- "AIDS Awareness Programme in Industry", - Indian Journal of Occupational and Environmental Medicine, Vol. 8, No. 1, January-April 2004.
- AIDS in Industry : Is Your Concern; Paper presented at 54th National Conference – IA OH, Kochi, 2004 Dr. V. G. Vaidya\*, Dr. S. M. K. Hussainy\*\*
- A Correlative Study On Presonality Life Style Stress Among Heavy Vehicle Drivers, Presented at IA OH, 2005.
- Cross Sectional Study on single migrant workers in Pimpri Chinchwad Municipal Corporation, District Pune, Joint Annual Conference of Indian Association of Preventive and Social Medicine(IAPSM) Maharashtra Chapter & Indian Association of Public Health (IPHA) Maharashtra Branch, Karad (13<sup>th</sup> & 14<sup>th</sup> January 2012 at Karad) & Published in Journal



### Project Outcome:

22859 unorganised workers sensitized about HIV/AIDS and voluntary HIV Screening conducted for:

- |                        |       |                                     |  |
|------------------------|-------|-------------------------------------|--|
| ■ Construction workers | 16979 | ■ Syndromic management of STI & STD | 6053                                       |
| ■ Hotel waiter         | 753   | ■ RTI \ STI Patents treated         | 567  |
| ■ Industrial workers   | 5127  | ■ HIV positive                      | 15 Patents referred to ART Centre at YCMH. |

# सुरक्षा

रस्ता सुरक्षा अभियान



**SAFE LIFE INITIATIVE  
ON ROAD SAFETY**

**PROJECT FUNDED BY :  
UNITED PARCEL SERVICES, USA**

# SAFE LIFE INITIATIVE ON ROAD SAFETY

Supported by: United Parcel Services, Pvt. Ltd. Mumbai / USA / Mumbai

India is a signatory to Brasilia Declaration and is committed to reduce the number of road accidents and fatalities by 50 per cent by 2020. A specific stand-alone target was included in the **Sustainable Development Goals in Health Goal** to reduce road traffic fatalities by 50% by 2020.

*“Without an adequate knowledge of traffic rule and regulations, and how to use road, many young lives are spoiled or lost, vital resources are wasted. Road traffic injury prevention and mitigation should be given more attention and had to scale up the resources, if increasing human loss and injury on the roads, with their devastating human impact and large economic cost to society are to be avoided.” The accident analysis conducted by Lokmanya points to the need to start road safety education and First Responders Training to all road Users in India.*

**Dr. Narendra Vaidya, M.S (ortho), Mch: ATLS (USA)**



Lokmanya identified the Core areas for Road Safety Intervention under “ Safe Life Initiative on Road Safety Programme.”

- Sensitization of key stakeholders and decision makers on issue of road safety
- Formulating Local Area Action Plan for “ Decade of Action for Road Safety”
- Safety in Transportation of School Children : School Bus Drivers Training and Education
- Sustainable School Road Safety Program : Prevention of RTI amongst school children
- Road Safety Action Plan for Youth ( Helmet Use )
- Capacity Building of Doctors on Trauma Management
- Workplace Road Safety : Road Safety is Your Business
- Road Safety for Sr. Citizens
- Health Driver Campaign : Drivers Health Check-up
- IEC Development

## STAKE HOLDERS & OPINION LEADERS WORKSHOP

Safe Life Initiative on Road Safety was launched on 9<sup>th</sup> October 2010 in presence of Shri. Kisan Sakhare Maharaj, Sr. Scientist Dr Vijay Bhatkar Joint Commissioner Ashok Dhiware; Advocate Shrish Iyer, Member Pune Bar Council; Manoj Patil, DCP (Traffic), Chandrakant Kharatmal RTO Pune; Mr. Satish Patil, Sr. Manager UPS Representative; Mr. Abhijeet .K Chatteraj National Insurance Academy; Mr. Sanjay Mohalkar, Sr. Vice-President Bajaj Allianz and other dignitaries of Lokmanya Medical Foundation Dr. V.G.Vaidya, Managing Trustee, Dr. P.V. Bathlawande, Director; Dr. Suchitra Mankar Medical Director.



## ROAD SAFETY FOR YOUTHS :

### FIRST RESPONDERS TRAINING FOR NEW LICENSE APPLICANT

First responder Training Programme for new license applicant was started at Pimpri-Chinchwad, Regional Transport Office. Training on Road Safety Rules and Regulation , Road Safety Basics and Basic Life Support Training was imparted



### FIRST RESPONDERS TRAINING PROGRAMME SCHOOL BUS & AMBULANCE DRIVERS.

Pre-hospital care includes the care provided at the scene of an injury or acute condition until the patient arrives at a facility that can treat the condition. All the participating drivers were trained in Road Safety Rules and Regulations, Basic Life Support Training and Road Victim Rescue and Transportation



Total No of School Bus Drivers Trained in BLS and Defensive Driving: 285

First Responders Training Programme on Basic Life Support for Ambulance Drivers

58 Ambulance Drivers in First Aid, Rescue Techniques and safe transportation.

### FIRST RESPONDERS TRAINING PROGRAMME FOR RICKSHAW DRIVERS

The objective was to create a cadre of Basic Life Support trained rickshaw drivers. Who can act as First Responders on Roads to facilitate careful transportation of road accident victims to the near by Hospital in “Golden Hours”





## TEACHERS TRAINING WORKSHOP

Teachers Training Workshop on Road Safety Programme was conducted in collaboration with PCMC educational department, Principal & Teachers were trained in Road Safety Awareness and Safe School Transportation. The Participating Schools were asked to establish School Transportation Committee at their respective Schools.



## ROAD SAFETY AWARENESS AMONGST SCHOOL CHILDRENS

With an objective to increase the road safety awareness amongst young road users especially school going student. Various Road Safety Awareness programme were conducted in schools and road safety awareness rally was taken out in Pimpri Chinchwad.

35 schools participated in the program covering 4692 school children.



## WORKPLACE ROAD SAFETY: MAKE ROAD SAFETY A CORPORATE CONCERN

**PRAISE: Preventing Road Accidents and Injuries for the Safety of Employees**

Workplace road safety policies and procedures are essential for providing a safe workplace in the organization. "GUIDELINES ON WORKPLACE ROAD SAFETY" is been formulated by Lokmanya for private and public sector organizations to assist them with the development of their own workplace road safety policies procedures and programs under CSR activities. Booklet on Workplace Road Safety was release at MCCIA



Lokmanya in association with Maratha Chamber of Commerce Industries and Agriculture, Bhosari had organized a seminar on work place road safety themed "Making Road Safety a Corporate Concern" under the Lokmanya Safe Life Initiative on Road Safety Shridhar.P. Joshi, Consultant Advisor TATA Motors delivered the Key Note address on "Good Practices in work place road safety".



## WALK RIGHT CAMPAIGN FOR SENIOR CITIZEN

Lokmanya in association with PCMC Sr. Citizens Mahasangh had organizing Road Safety Awareness programme on “Road Safety for Sr. Citizens” with an objective to address Road Safety Issues of Sr. Citizens and the Risks to Elderly People and recommend measures to enhance the safety of these road users.

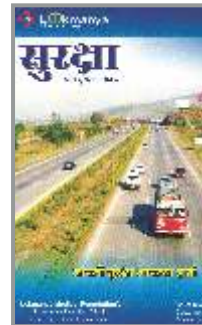


## IEC DEVELOPMENT ON ROAD SAFETY



Developed a training module and IEC to enable environment and increase awareness level on road safety for road users and first responders

A Five book in Marathi called “Surakshit Pravas apalyach hathi” & “Suraksha” on road safety was published by Lokmanya and TATA Motors.



## PROJECT IMPACT.

- **Direct Benefit**
  - 1,50,000 Road Users and their families directly benefited with Safe Life Initiative.
  - Improved awareness level of road users especially School Children, College going Youths on road safety.
  - 2500 BLS \ ATLS Trained First Responders on Roads and Highways
- **Indirect**
  - Programme helped in building advocacy on policy & decision makers and to encourage people to insist and contribute to lasting improvements in effective Road injury prevention
  - Increase awareness about safe driving and driving with responsibility
  - Enforcement of Helmet Rule and reduction in head injury related deaths amongst Youths
  - Improved School Children Transportation and reduction in morbidity and mortality of children
  - Formulation & implementation of Road Safety Policy by 100+ Industrial units in PCMC.
  - Improved Post-crash management of injured riders.

# LOKMANYA COMPREHENSIVE TRAUMA MANAGEMENT SYSTEM

ISO 9000-2000 Certified



*First in India...*

## COMPREHENSIVE EMERGENCY & TRAUMA CARE SYSTEM

In the Year 2001 Mumbai-Pune express highway was made fully operationlised, one of the best roads in India, made for the convenience of public, but In spite of best road engineering experts, 3 lanes made according to the speed of vehicles, there were accidents happening at rate of 5-10 accidents per day. A strong need was felt and Lokmanya pioneered in establishing **Comprehensive Emergency Medical System first of its kind in India** (1998) and launched a project called **“Golden Hour Project”** in the year 2000 with a *“ mission to reduce mortality and morbidity due to Road traffic accidents and injuries, through prevention, improved Pre-hospital trauma care, improved hospital care, proved rehabilitation as also research and training.”* Dr. Narendra Vaidya, M.S(ortho),Mch: ATLS (USA)

There is no legislation for transporting accident victims and ambulance networking during the early phase of inception (1995-96). The people were in sensitive and afraid to help the road accident victims. All stake holders from Medical, Police, Media, Fire Dept, NGO's Highway authorities and Govt. agencies were sensitised on Emergency Medical System and encouraged to establish **Pune EMS**



**consortium.** in consultation with Lifenet EMS , UK.

Lokmanya EMS has sustained the effort for last 20 years and providing comprehensive trauma care. These sustained efforts have resulted into Saving 50000 Lives effective reduction in RTA mortality rate to .033 on Mumbai –

Pune express highways. Lokmanya EMS got quality certification of ISO -9000 -2000. Lokmanya EMS model was replicated thru 108 Ambulance Services in all the states of India . Many National and International agencies have recognized the efforts of Founding Father of Indian EMS System Dr. Narendra V Vaidya and conferred with Shri Rajiv Gandhi Rashtriya Ratan National Award and Mahindra Navistar “Transport Excellence Award 2011” for Alternative Thinking.

### The Components of EMS

- Road Safety Awareness
- Communication & Tracking (GPRS) Systems
- Emergency Medical Services & Disaster Management
- Level I Trauma Centre – Intensive Trauma & Critical Care
- Rehabilitation



# ROAD SAFETY AWARENESS, ACCIDENT PREVENTION PROGRAMME AND EMS EDUCATION ( 1996-ONGOING )

## Introduction

Since 1999 we have been undertaking National Road Safety awareness programme funded by Ministry of Highways & Road transport to educate general population and school children on road safety, EMT training ,Conducting exhibition ,rally ,educating Doctors on Pre- hospital care and trauma management and conducting Medical examination of highway drivers etc

## Activities

### Road Safety Training Programme

- School Awareness programme on Road Safety
- Heavy Vehicle and Truck Drivers medical checkup
- Breath Alcohol Testing of Truckers on Highways
- Training for Highway Police & Local Police
- Teachers Training
- Road Safety Awareness programme for Rickshaw Drivers
- Conducted BLS and ACLS courses at Group of Lokmanya Hospital's .
- BLS and FIRST AID training is a continuous activity of our foundation since last 6 years conducting in collaboration with Central Institute of Road Transport Bhosari, Industrial house , Rotary club & Lions Club.



**Lokmanya Hospital Nigdi , upgraded to Level I Trauma Centre ( Commission on December 2001) .**

This Centre is equipped with 26 bedded Intensive Critical Care unit (set up as per the international norms) backed with advance life saving equipments and 24x7 dedicated Traumatologist and Intensivist.



**First In India Mobile Trauma Critical Care Units (mtccu): (Commissioned On April 4th ,2002)**

The Mobile trauma & Critical Care Units are fully equipped with all necessary life saving equipments of International Standards requirements for ATLS & BLS Ambulances.



**First of Its Kind in India Rapid Trauma Rescue Units (RTRU) (Inaugurated On June 17th, 2002)**



To maneuver the ambulance in narrow lanes, Scooters were modified into an innovative Two Wheeler ambulances with the help of Kinetic Engg. Co. RAPID TRAUMA RESCUE UNITS are equipped with necessary life saving equipments as per ATLS norms. It is the most approach



**First Dedicated Trauma Communication Emergency Dial**

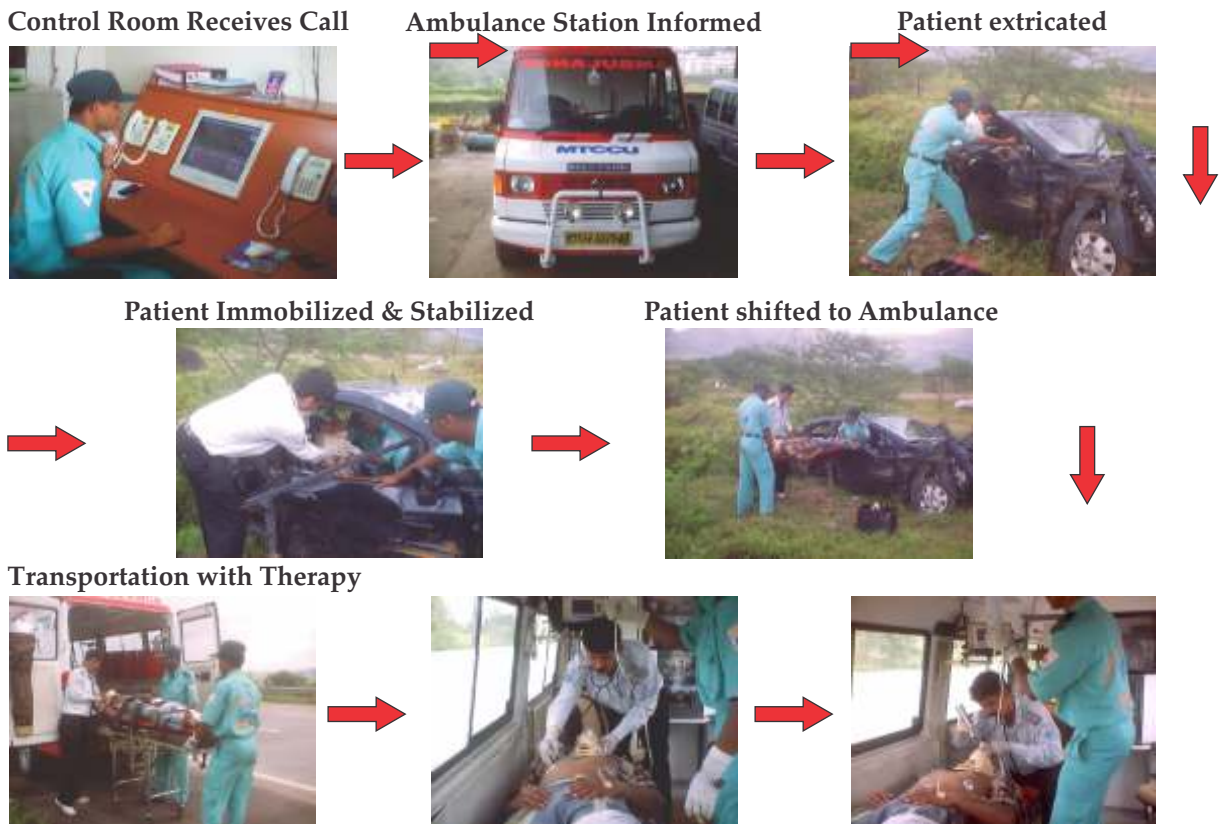
**System:** In association with Rotary Club of Pune. (Pune Heart Brigade: Commissioned on 4th April'2002)



Dedicated Number combined with rapid communication systems enables prompt movements of EMS leading to timely aid resulting in reduction of disability and mortality. Central Control Room with round the clock functioning. GPS has been installed in all the ALS and BLS ambulances that are monitored at control station.

Number	In Collaboration With
105700	Government of India
9822242100	Idea Cellular Ltd.
9822498224	Mumbai Pune Expressway-IRB

## EMS MODUS OPERANDI .....



## STATISTICS (For the period Jan'2000 To June'2017)

<b>AVERAGE REACH TIME</b>	<b>10.30 minutes</b>
---------------------------	----------------------

‡ International Standard Reach Time: 8 minutes

Total number of patients rescued	64781
Major	22381
Minor	35,806
Fatal	6594
Total number of mass casualties incident	14
attended Number of calls attended by Cranes	10204

### REHABILITATION:

The LCTS believes that no treatment is complete until the patient is reinstated back in the society. Our Rehabilitation Programmes conducted by trained Physiotherapists, psychologists, medico-social workers etc; comprise of physical, psychological and socio-economic restoration of the accident victims.

### MEDICO-LEGAL CELL (first NGO centre in INDIA)

Established Medico-legal cell for helping accident victims to get interim benefit from Motor accident tribunal court.

## MEDICAL RELIEF TO GUJARAT EARTHQUAKE



- Team: 16 members
- Place: Anjar, Gujarat
- Surgeries done: 82
- Patients treated: 2132

The applicability of LCTS module in Disaster Management was further substantiated when it played an enormous role during the Gujarat Earthquake Date: 28th Jan to 10<sup>th</sup> Feb. 2001

### ACHIEVEMENTS

1. Lokmanya is the first institute in India to start Emergency Medical services system and provide free life saving treatment (Over 50000 Lives Saved and still saving many more ..)
2. Lokmanya was member of National Road Safety Council for 3 years under Ministry of Road Transport and Highways, New Delhi.
3. "Multi centric study on Road traffic Injury Surveillance in Pune District : World Health Organization (WHO) - ICMR project" conducted jointly with B.J Medical College ; 2006-2007
4. Assessing Emergency and Trauma Care needs and to identify and quantify risk zones resulting from road accidents, adventure sports, tourism, pilgrims and natural disasters for the State of Uttarakhand in Collaboration with Uttarakhand Health Systems Development Project (UAHSDP) was conducted in 2010-11
5. Conducted Emergency Medical Conference (EMCON) in the year 2003 at Pune where all international and national delegates and faculties had participated. Conducted National Trauma Management Course (NTMC) at CIRT Pune in 2003 with Academy of Traumatology India and the faculty members are from South Africa.
5. Recognised by the National Safety Council Mumbai, as NAC (National Awareness and Preparedness for emergencies at Local Level) Sub center
7. Lokmanya has received prestigious National awards like "Rashtriya Ratna Award" and Mahindra Neostar "best alternative thinking".





# RASHTRIYA RATTAN AWARD

## presented to Dr. Narendra V. Vaidya

(Executive Medical Director & Chief Orthopaedic Surgeon, Lokmanya Hospital)



**NOT-FOR-PROFIT** Alternative Thinking

**NATIONAL WINNER**



**Lokmanya Medical Foundation**

From emergency medical services to full-fledged medical support, Lokmanya Medical Foundation have set up 4 hospitals providing emergency medical/trauma care services to accident victims. They set up 25 mobile trauma/critical care units in the Mumbai - Pune and Dehliar - Pune corridors. In addition, they also started road safety programs for drivers, HIV awareness and prevention programs for teachers. These initiatives of Lokmanya Medical Foundation are gliding example of 'Alternative Thinking'.



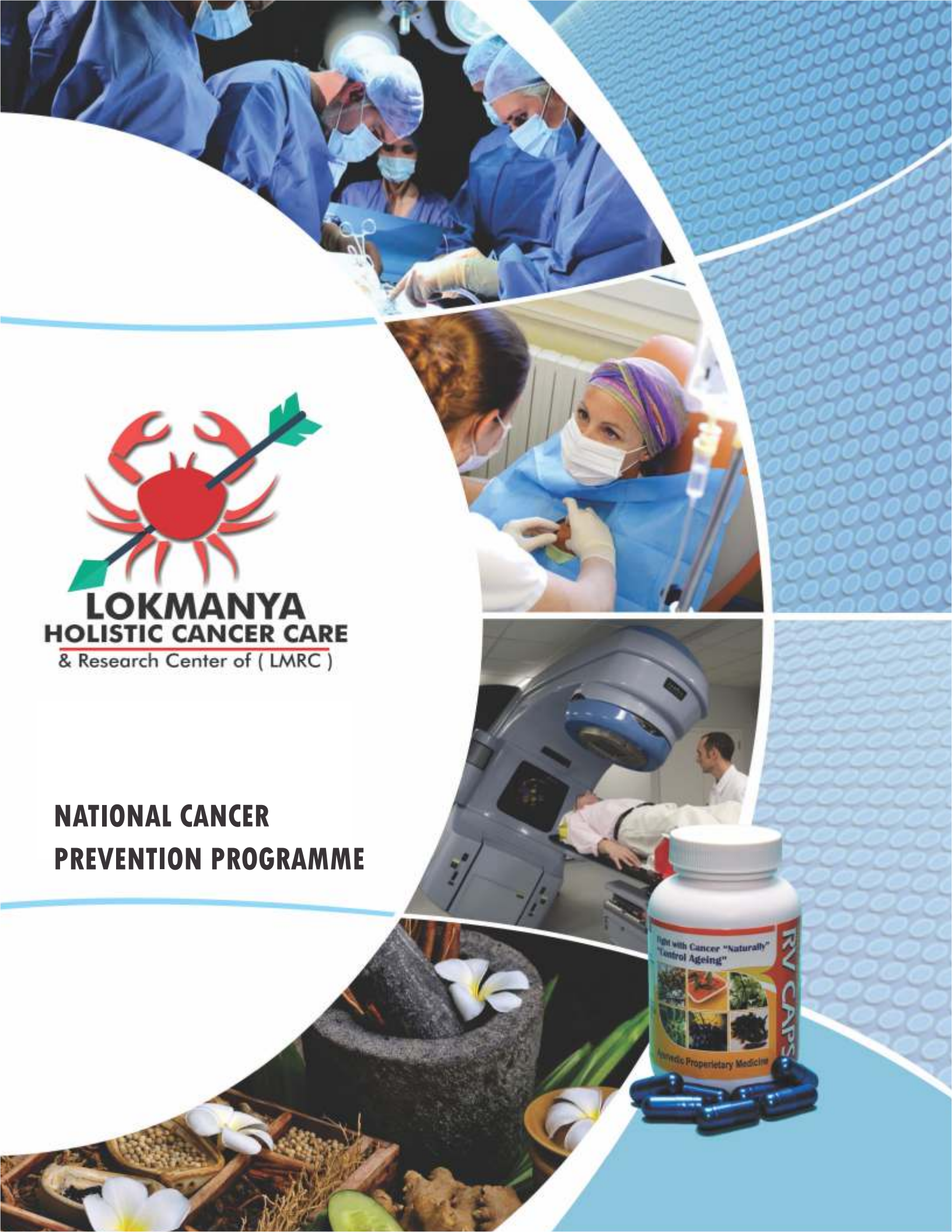
**"RASHTRIYA RATTAN AWARD"**

Presented to  
**DR. NARENDRA V. VAIDYA**  
by  
**HON'BLE SHRI. A. KRISHNAPPA**  
Minister for Animal Husbandry & Sugar  
Govt. of Karnataka

For Outstanding Individual Achievements & Distinguished Services to the Nation  
on the 58th Birth Anniversary of  
Late Shri. Rajiv Gandhi  
23rd August, 2001 at Bangalore.

*Ranjit Singh*  
Secretary General

**GLOBAL ECONOMIC COUNCIL**



**LOKMANYA  
HOLISTIC CANCER CARE**  
& Research Center of ( LMRC )

**NATIONAL CANCER  
PREVENTION PROGRAMME**





**LOKMANYA HOLISTIC  
CANCER CARE &  
RESEARCH CENTRE**

## **INTEGRATED APPROACH FOR MANAGEMENT OF CANCER PATIENTS**



**Dr. V. G. Vaidya**  
M. S. (Bombay)  
Managing Trustee LMRC

“Cancer is a dreadful word for most of our patients and wrongly taken as 'death sentence’’. It is known as “The Emperor of Maladies” because it remains unconquered. In spite of continuous research for last 50 years having spent over \$ 200 billion on it in USA alone on conventional treatments. But with the emergence of newer treatments like Immunotherapy, Anti Hormone Therapy and knowledge about alternative managements there is a great hope of overcoming the disease.

All over the world there is a widespread disappointment about the conventional therapy of Surgery, Radiation and Chemo and resentment about its terrible side effects. In recent studies the 5 year survival in U.S. & Australia where most advanced therapies are available is less than 5%. The increase in survival rates is basically due to early detection in Stage I & II. Opinions are gathering in introducing alternative therapies and methods to cure and control the disease without side effects in India this need of seeking alternative therapies based on our age, old systems is absolute. Beyond some big cities there are no facilities for cancer surgeries or radiation. Chemotherapy is largely unaffordable. It is absolutely necessary to introduce ways and means for management beyond the conventional treatments.



Certain foods, substances have been proved to be very effective anticancer agents like Grape seeds, Curcumin. Dietary formulas have been developed in many countries to increase immunity and kill cancer cells. All these are mentioned for the benefit of patients. Other methods are introduced depending upon the behavior of cancer cells like Ozone therapy, electrical impulse therapy and Accupressure are showing good results. Last, but not the least the Author and his colleagues have developed research products R.V. Caps / ACF (M.G.) which are showing very promising results especially in cases where Radiation and Chemo are not used for various reasons. The side effects of Chemo and Radiation are controlled to a large extent by these Products.

Palliative care has been given due importance at the center by appointment of Palliative Care Specialist Doctors who will guide the patients and relatives up to end of life care.

After resting my active surgical career as well as developing and managing Lokmanya Hospitals for 40 yrs, I have been extensively studying about the various alternative approaches to prevent and treat cancer. The best and most logical way to achieve that is to integrate the knowledge of each approach – conventional and alternative to get the best possible results to relieve the agony of the patients of this dreadful disease. This has also prompted me to produce my own anticancer research product RV Caps.



LOKMANYA  
HOLISTIC  
CANCER CARE &  
RESEARCH  
CENTRE

Lokmanya Holistic Cancer Care Centre combines personalized cancer treatment with leading-edge research to provide you with unparalleled cancer care. Our integrated practice brings together a multispecialty cancer treatment team of experts to ensure you get the best care available.

**Lokmanya Holistic Cancer Center** is a state-of-the-art integrative treatment model that treats cancer with conventional approaches like Surgery, Radiation, Chemotherapy; while also offering evidence-based alternative to control the side effects as well as directly attack and kill cancer cells.

### *Salient Features*

- Full spectrum of cancer management from prevention, early detection, conventional treatment facilities supported with evidence-based alternative approaches.
- Community Outreach Programme for prevention and early detection of cancer.
- Multi specialty Cancer clinics:
- Advanced Leading-edge diagnostic technologies for early diagnosis.
- The multidisciplinary team approach leading to better care and outcome for cancer patients. Our team includes medical oncologists, surgical oncologists, radiation specialist, radiologists, pathologists, clinical pharmacists, nurses, nutritionists and other healthcare professionals with special training in Ayurveda, Homoeopathy, Ozone Therapy, Yoga for Cancer Care.
- Inclusive cancer patient care plan that assures proper treatment of the symptoms and side effects of cancer through modern and traditional cancer treatment.
- Palliative care throughout the course of treatment, from diagnosis through end of life care.
- Research Facilities in search of optimal management of cancer, to develop prevention tactics & medicine to control / cure the patients.
- Community Health system to train & educate the next generation of healthcare professionals.

*Lokmanya Holistic Cancer Center also offers medical professionals the opportunity to refer and follow patients and to access medical education offered by key specialists.*

#### **Contact Details:**

**Holistic Cancer Care Center** Chinchwad, 314/B, Telco Road, Near Chinchwad Railway Station, Chinchwad, Pune, Maharashtra, India. 411033. Visit us on [www.lmrc.in](http://www.lmrc.in)  
For Appointment Contact No: 020- 46606803, Mo.: 8446623333 email: [contact@lmrc.in](mailto:contact@lmrc.in)

## NATIONAL CANCER CONTROL PROGRAMME 1992-96, 2003-04

supported by Ministry of Health and Family Welfare, Government of India

### PROJECT OBJECTIVES :

Lokmanya implemented National Cancer Control Programme (NCCP) in Pune District with an objective to reduce the number of cancer cases and deaths and improve quality of life of cancer patients, through the systematic and equitable implementation of evidence-based strategies for: prevention, early detection, diagnosis, treatment, rehabilitation, palliation and research to search for innovative solutions and evaluate outcomes.

### STRATEGIES ADOPTED :

- Door step Mobile Cancer Screening and early detection Facility and referral services.
- Anti Tobacco & Cancer Awareness Campaign
- Continuous Medical education on Cancer Screening and Detection for Doctors and Nursing Staff
- Initiating Cancer registry in Pimpri Chinchwad in association with Indian Cancer Society.

### CANCER SCREENING AND EARLY DETECTION

**Mobile Outreach Programme** was initiated for catering the health needs of vulnerable population of urban slums and remote, inaccessible rural parts of the Pune District



Over 50000 patients benefited from Free cancer screening and detection camps under this programme, the following services were provided during the camp Clinical screening & Detection, Lab Investigation Medicines, tertiaryreferral service and Sensitization on self breast examination methods. These camps were organized in collaboration with DHO, Pune Zilla Parishad and Local community based Organizations.

## Anti Tobacco Campaign for Young School going children

Lokmanya initiated Anti tobacco Campaign for young school going children. 188 schools of PCMC covering more than 20,000 students were sensitized on No Tobacco / Gutkha Use and Oral Hygiene. Essay and Poster Competitions were conducted as a part of the campaign

**Hon. Late Shri. R.R. (Aabha) Patil, Community Cancer Awareness & Screening campaign** was initiated in Pune District by Lokmanya in association with DHO Pune. Awareness Programme for Corporates, Community Clubs, Banks and Government Employees were sensitised on Cancer Cause and Treatment Options.



## TRAINING WORKSHOP ON PAP SMEAR TEST FOR PUBLIC HEALTH NURSES.

Pap test is a single test to find abnormal cells changes that may arise from cervical cancer or before it develops. Pap test is done at least once in every 3 years after they begin to have sexual intercourse or later than 21 plus.

Pap-Smear tests - Training program to give correct information about Cancer of Cervix, Ovary and Uterus was conducted by Lokmanya for Doctors & Nurses Staff from 35 selected PCMC hospitals and encouraged them to conduct Pap-Smear tests for early detection of Cancer .



## CANCER REGISTRY

Lokmanya Medical Research Centre initiated Cancer Registry work in PCMC Area in guidance from Indian Cancer Society (Pune Chapter), Public Health Department of PCMC, Yeshwantrao Chavan Memorial Hospital, and other Private Hospitals, in order to keep surveillance and register the cancer patients for referral services and treatment.

## CANCER RESEARCH PRODUCTS

### ANTI CANCER DRUG – METHYL GLYOXAL CLINICAL TRIALS

Indian Scientist Dr. Manu Ray and team from IACS Kolkatta has developed a non-toxic method of chemotherapy. Methyl Glyoxal (MG) is a simple organic chemical found in small quantities in our body. In cancer patients, levels of MG become very low. Clinical trail conducted at Lokmanya shows that when MG administer along with some other micronutrients orally and by injections ; disrupts the excessive biosynthesis of ATP responsible for the overgrowth (Mitochondrial Adenosine-tri-phosphate) in cancer cells only thus leading to selective destruction of cancer cells. This suggests that methylglyoxal is a very good drug for the cancer therapy.



### RESEARCH TRIALS ON CURCUMIN

Turmeric is long known for its anti-inflammatory, anti-septic and in vivo bio-cleansing properties for centuries it has been noted recently that curcumin, the main alkaloid in turmeric has significant immune-modulatory and oncogene regulatory properties. Curcumin compound was investigated for its possible anti-cancer properties at Lokmanya. With an aim to determine the absorption pattern of 3 comparable curcumin products by studying plasma/serum levels after oral administration of these products at specific intervals in healthy human volunteers.

RV Cap is a p-oly herbal formulation extensively researched & developed by Dr. V.G Vaidya M.S (Gen.Surgery) along with Ayurvedic specialists. RV Caps is produced by, New visions Ltd,Pune with honest intention to help cancer patients without causing harmful effects. The formulation has very powerful antioxidant and anti-aging effect ,which acts synergistically to protect the body from free radicals and carcinogens . It rejuvenate the body immune system and repair the mutations causing cancer cell death (Apoptosis). It also helps in preventing recurrence of Cancer post surgery thus reducing the possibility of Metastasis and enhances response to chemotherapy and reduce the side effects of radiation therapy.

**RV CAPS**  
Ayurvedic Proprietary Medicine

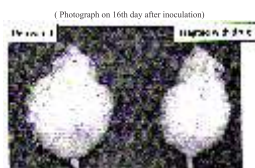


Fig.1.EAC inoculated mice treated orally with drug  
**Carcinoma**

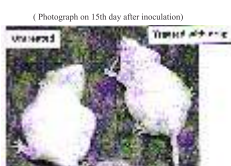


Fig.2.EAC inoculated mice treated orally with drug  
**Sarcoma**

1. Animal Experiments in renowned BOSE Institute, Kolkata.  
**Reports from eminent scientist :**  
“From result presented above it can be concluded that the RV Caps have very good Anti Cancer property.”
2. Antioxident effects of combination are greater than GSE alone. (Tulip Lab.)
3. Metal contents in the formulation are almost Nil (WNL) ASHCO NIVLAB.
4. FDA approved product - KD/AYU/003-A/11
5. Patent approved : Number 3543/MUM/2012.
6. Approved by Ethics Committee - LMRC
7. Approved by Clinical Trial Registry Govt. of India





**CENTRE FOR PANCHAKARMA, KSHARASUTRA AND YOGA & NATUROPATHY**

Centre for Panchakarma and Ksharasutra and Centre of Yoga & Naturopathy was established ; **supported by ISM&H department of Ministry of Health & Family Welfare** was started in the year 2007 Specialized centres are providing treatment to cancer patients and undertaking research

The Lokmanya Holistic Cancer Care Centre emphasizes on holistic approach by integrating mainline allopathic treatments with selected evidence & research based alternative treatments like Ayurveda, Homoeopathy, Naturopathy, Yoga, Acupressure, Acupuncture and therapies , Massage, Exercise, Social group, Mind body Medicine techniques, Immuno - therapy etc is being judiciously combined with Surgery, Radiology & Chemotherapy to give fruitful results and provide safer, effective and gentle care to suffering patients of Cancer. As soon as the diagnosis of cancer is confirmed we start the Seven Point alternative therapy.



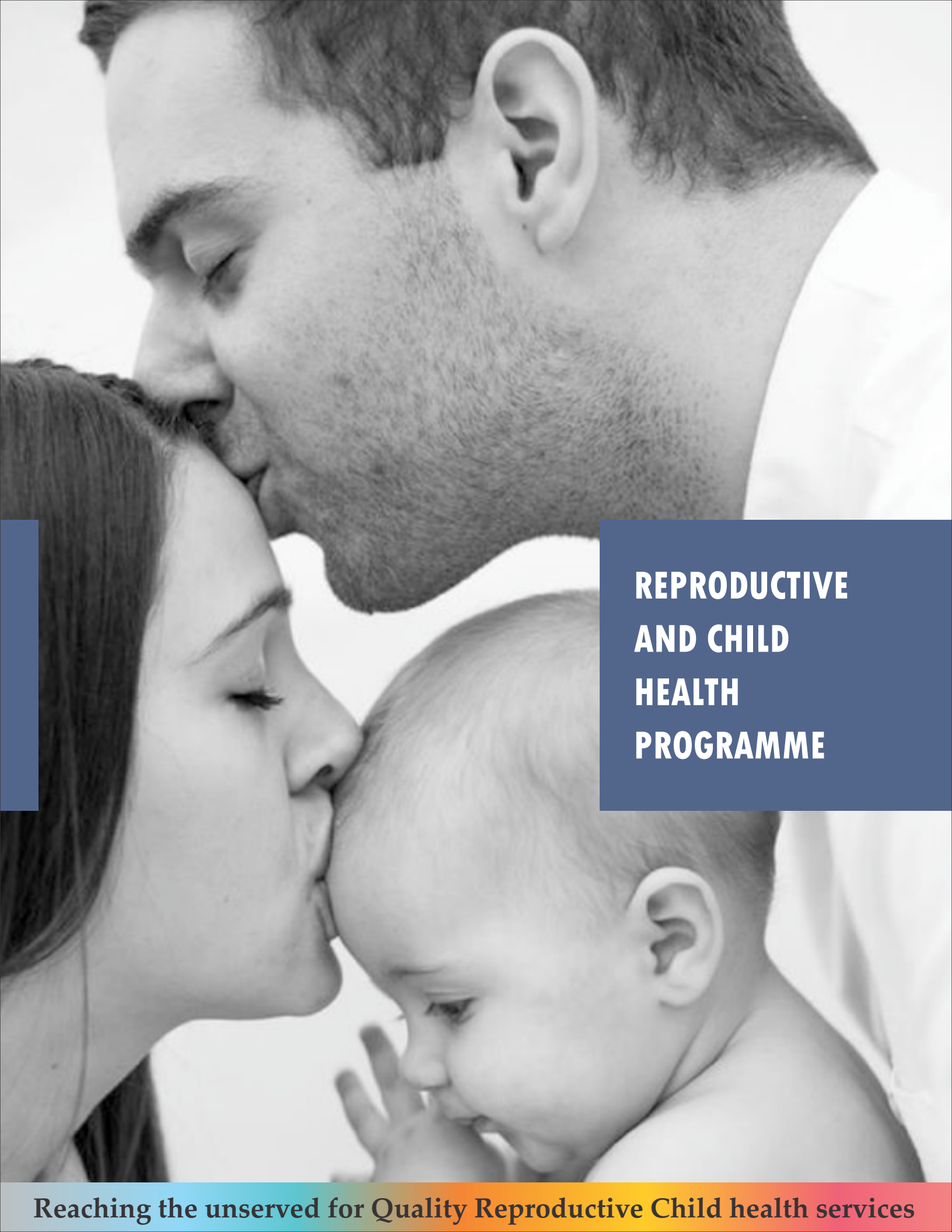
**SEVEN POINT PROGRAM OF ALTERNATIVE THERAPY**

- 1 "*Let Food Be Your Medicine.*": Advice from Naturopathy & Dietician.
- 2 "*Detox, to reduce toxic exposure*": Help from Panchakarma & Ayurveda , Homoeopathic Expert
- 3 "*Balance Your Energy*": Yoga Therapy , Acupressure, Physiotherapy.
- 4 "*Heal Your Emotional Wounds*": Stress Management , Psychologist Counseling
- 5 "*Boost Your Immunesystem*": Ayurvedic Medicine, RV Cap & Vitamin Supplementation & Ozone Therapy.
- 6 "*Practicing True Prevention*": Lifestyle management , tobacco cessation & preventive health Check-up
- 7 "*Palliative Care*": Palliative consulatation for life threatening illness.

**RESEARCH PUBLICATIONS:**

- Treatment of a number of cancer patients suffering from different types of malignancies by methyl glyoxal based formulation. Cancer Therapy Vol-4 Page 1, 2006 by Dr Manju Ray Dr. A.V Kulkarni
- Screening of women for Early Detection of Cancer in Women in Urban Slums of PCMC area: A Camp approach presented at Joint Annual Conference of Indian Association of Preventive and Social Medicine ( IAPSM) 13<sup>th</sup> & 14<sup>th</sup> January 2012 at Karad.(Soveniour)
- "*Role Of Yogic Practices In The Management Of Patients With Chronic Backache Problems With Particular Reference To Activity Related Efficiency.*" Supported By The Extra Mural Research Projects On Ism&h (1999-2003)





**REPRODUCTIVE  
AND CHILD  
HEALTH  
PROGRAMME**

Reaching the unserved for Quality Reproductive Child health services

## Family Welfare To Reproductive Child Health ( 1979 To 1995)

### FAMILY WELFARE TO REPRODUCTIVE CHILD HEALTH

SUPPORTED BY : Ministry of Health & Family Welfare , Government of India

Lokmanya started the first Family Welfare Centre in Pimpri Chinchwad Corporation Area in 1979 supported by the Government of India for Post Partum Centre Infrastructure and Creating awareness on Family Planning and Reproductive Life Skill education, Nutrition, School Health and M.C.H. activities were the main thrust of the institute. It popularized laparoscopic camp in Pune area and the Couple protection rate performance had reached an all time high of 239% higher of target in 1983-84.



### ENCOURAGING SPACING METHODS AND STERILIZATION 1996-97

SUPPORTED BY : Ministry of Health and family welfare, Government of India.

Identified 8 hard cord pockets in urban slums of Pimpri Chinchwad Corporation Area , Encouraging Spacing Methods & Sterilization project was implemented where eligible protection rate was less than 50% for implementing project.



<b>Achievements</b>	Total Project Population : 17,940	Male	9,217
		Female	8,723
	Pre Project		45, 67%
	Post Project Couple Protection Rate		75.79%
	Unprotected couples covered		55.43%
	Target of sterilization cases		450
	Performance of Sterilization cases		83.77%



# Model District Reproductive Child Health Programme (urban Rch)

European Commission (Sector Investment Programme) & Government of India jointly decided to implement the Model Reproductive and Child Health Programme in Pune District. Lokmanya Medical Foundation implemented MDRCH (Urban) programme in urban slums and migratory population of Pimpri Chinchwad Industrial Township covering 29,344 population.

## Project Objective : The six demand generation programs for urban area:

- Increasing early registration of ANC & resident ANC before 16 weeks
- Promoting Institutional deliveries
- Increasing birth and death registration
- Bringing down infant mortality and maternal mortality.
- Imparting family life education to adolescent girls and boys.
- Increasing age of marriage for girls.
- Organisation and strengthening of self-help groups
- Formation of slum health committee and their regular meeting
- Gender sensitization in the community
- Promoting and training Parivartaks for all the 6 demand generations.

## PROGRAMME IMPLEMENTATION PLAN: STAKEHOLDERS MEETINGS

### ■ Zonal Co-ordination Committee Meeting :

MDRCH Zonal coordination committee was constituted under the chairmanship of Commissioner and 2 Coordination committee meeting were held during the period.



### ■ Slum Health Committee (s.h.c.)

Established S. H. C in Gandhinagar, Vidhyanagar, Dalvinagar, Indiranagar, Kalakhadak an innovative effort to implement monitor, evaluate and solve health issues at the grassroots level.

### ■ RCH Sensitization Workshops

RCH sensitization and orientation program were organized for the Medical Officer, Private Practitioners, School Teachers Public Health Nurses, ANM and ICDS workers



## IEC Materials Developed

- Booklets/Pamphlets on MCH card ,HIV/AIDS card ,Adolescent health booklet, 40+ care booklet were developed for free distribution
- Programme on six demand generation “Sukhache Kawadse” was aired through ALL INDIA RADIO in the Programme : Maze Ghar Maze Shet, Broadcasting



**Household Planning and Parivartak Training on Six Demand Generation for RCH :** The Objective of the Household planning Identification, Registration & Follow -up Services of Pregnant and Lactating women of Brick Kiln and 7 slums of project area covering 6000 households. This was implemented by a specially designed yellow sticker pasted on the doors of the beneficiary. 1826 parivartaks were trained in 6 demand generation and household planning.



**ANC Education :** Regular training programmes were conducted encompassing the components of Pre natal care ,early registration of ANC registration within 16 weeks, Post natal care ,nutrition, immunization ,birth registration, institutional deliveries and child care by slide sets ,lectures and group discussion.



**Family Life Education For Adolescents School Children :** 9000 school children covering 18 municipal schools were covered . Total 1862 out of school children and 510 school drop out adolescent girls and boys were identified and trained in Family Life Education.



**Women Empowerment :** 338 women parivartaks were trained for women empowerment and gender.

Vocational training for 50 adolescent school drop outs was conducted in coordination with rotary club, pimrpi. 30 girls were gifted sewing machines for their livelihood.



**Need based health camps :** In total 100+ camps of 40+ Care were conducted & 50 Pediatric camps were conducted in the slum area 10065 patients benefited from the Health Camps.

**RTI/STI & HIV/AIDS Awareness :** Awareness Programme on sexually transmitted infections (STIs)/reproductive tract infections (RTIs) and their modes of transmission, methods of protection were organised.

**Mobile Clinic :** RCH Services were provided in the unorganised sector through mobile clinics regularly every Tuesday & Thursday. 15086 beneficiaries availed the facility.



#### Program Outcome:

- Improved ANC \ PNC Care in urban Health Centre
- Improved couple protection Rate by 20%, decreased MMR \ IMR
- Increased Male participation in Immunization and Women health care
- Increase in the awareness in school girls related to ARSH & Hygiene & sanitization
- Increase in the patient foot fall to urban Health Centre for 40plus care.

## SERVICE NGO SCHEME : RCH II PROGRAMME:

The Reproductive and Child Health (RCH) II programme launched by Government of India envisages providing client-centered, demand-driven quality services. Ministry of Health and Family Welfare-Government of India & NRHM Cell, Government of Maharashtra, State Family Welfare Bureau, Government of Maharashtra and Pune District Integrated Health Society had entrusted Lokmanya to implement SNGO Scheme in Khed Talukas of Pune District for the period 2010 to 2013.

**The following are the key indicators that are covered under SNGO project.**

To improve the accessibility, availability and acceptability of RCH services by providing preventive and clinical services in an integrated and participatory manner.

Improving the aggregate indicators towards achieving the expected results set under SNGO Project by the end of 2013.

- To increase full ANC coverage from 28% to 80%
- To increase institutional delivery from 71% to 90%
- To reduce the malnutrition cases
- To provide Family Planning services
- To Provide RTI/STI management services
- To reduce the Percentage of anaemia cases among adolescent girls.

### PROJECT STRATEGIC

**ANC services** were provided through mobile clinics in rural inaccessible tribal areas of Khed Taluka, Specialized Gynecological /Pediatric services at the PHC & referral services at Lokmanya hospital & other Private affiliated Hospitals

**Sensitization Workshop For Stakeholders** : With an objective to create aware about the project goal and objective all the stakeholders were involved and a workshop on SNGO Scheme were organized in the Khed Block. Networking with SHG group was established for 100% registration of ANC /PNC cases.

**Sensitization Of Community Health Workers:** ASHA and PADA workers were trained in registration of pregnancies, deliveries, newborn children, morbidity and mortality records. They also follow pregnant women, 0-3 year olds and any other specific groups as and when so identified.



## VANDE MATARAM CAMPAIGN *Ensuring Safe Motherhood*

**Vande Mataram Campaign :** The morbidity and mortality of maternal health in khed taluka was Studied which indicated that the major causes of maternal mortality are ante and post partum hemorrhage, anemia, obstructed labour, hypertensive disorders, postpartum sepsis and unsafe abortions and quick repeated pregnancies. These are preventable with provision of adequate antenatal care, referral and timely treatment of complications of pregnancy. To bridge this gap Lokmanya launched “*Vande Mataram Campaign*” with an objective to ensure that all women have access to the information and services they need to go safely through pregnancy childbirth and Postnatal care. On every 9th of each month Specialist Camps were organised .

**Vande Mataram Campaign** included the following services:

- Antenatal care Education on safe motherhood and early registrations
- Prenatal care (care during pregnancy) and counseling with focus on high risk pregnancies
- Promotion of maternal nutrition: **Iron-Folic acid (IFA) and nutritional supplementation**
- Adequate delivery assistance in all cases for first postpartum visit
- Provisions for obstetric emergencies including referral services for pregnancy, childbirth and abortion complications
- Postnatal Care (care after the child birth thru Parivartaks & Paricharika.
- Family Welfare Programme : Eligible Couples, counselling for increasing Couple Protection Rate
- Adolescent Girls' Anemia Control Program”

### PROJECT IMPACT

The progress of the Service NGO was measured against selected indicators of Maternal and Child Health (MCH): Antenatal Care (ANC) and Institutional delivery, Child Immunization, Family Planning (FP), Reproductive Tract Infections (RTI)/ Sexually Transmitted Infections (STI), Adolescence Reproductive & Sexual Health (ARSH) to access the improvements in the service delivery is presented here.

Indicator	Description	End line Survey 2013 Percent
1	Eligible couples currently using modern family planning methods	99.90
2	Women received Complete ANC during pregnancy (Minimum 3 checkups, 2 TT injections and 100 IFA tablets)	70.07
3	Institutional Deliveries among the Women interviewed for ANC	80.00
4	Children aged 12-23 who are completely protected against Six Vaccine-Diseases	63.64
5	RTI prevalent Men who have been Completed	100

## ACADEMIC COURSES

**AFIH -ASSOCIATE FELLOW OF INDUSTRIAL HEALTH) Accredited by Directorate and Labour Institutes Ministry of Labour, Government of India.**

The Associate Fellow of Industrial Health (AFIH) course is approved by the Ministry of Labour & Employment, Govt. of India and the examination is being conducted by them and certificates issued by DGFASLI (Directorate General Factory Advice Service & Labour Institutes), Ministry of Labour, and Government of India. LMRC has been running the course since 2002, it is a three months course with theory classes, practical's, project work and Industrial visit. AFIH enrolls 25 students and basic eligibility is MBBS Degree from an Institution fully recognized by the Medical Council of India.

### **Objectives of the course:**

- To enable the Doctors to identify the working environment hazards and manage the Occupational / Health Disorders/ Diseases encountered in various industries in the country.
- To contain the industrial injuries caused by chemical intoxication in general and in hazardous process industries in particular.
- To preventive and control measures to solve occupational health problems.
- To advise, supervise and participate in the national occupational health programmes for the health protection of industrial workers, thereby improving national productivity and prosperity.

## **II. INSTITUTE OF HEALTH CARE TECHNOLOGY AND INFORMATION**

LMRC conducts various courses under academic wing recognized Institute of Para-Medical Technology- New Delhi. It is a one year course with six months of internship program. This Skill development course is proving very successful as students are placed at various health sectors immediately after the completion of the course.

- Diploma in Medical Laboratory Technician Course
- Diploma in X Ray Technician
- Diploma In CT Scan Technician
- Diploma in O.T Technician
- Diploma in MRI Technician
- Diploma In Cath Lab Technician
- Diploma in Accident & Emergency Care Technology
- Diploma in Physiotherapy Assistant
- Diploma in Echocardiography Technology
- Diploma in Dialysis Technology
- Certificate course in Phlebotomist (three months)



## COMPLETED PROJECTS

Spirit of Visionary to realize the dream of progress through research!



1. Road safety awareness & EMS: Supported by UPS, USA and India
2. Occupational Health: Industrial Trauma, Hand Injuries Surgery
3. Unorganized sectors survey & recommendations: Govt. Of India
4. Reproductive child health: British High Commission
5. HIV & AIDS: Research in Industries & Strategic interference, Govt. Of India
6. Research & Clinical Trials: Socio Medical & Bio Medical Research
7. Cancer Prevention & Early Detection
8. Research Products Trials.
9. AYUSH Service & Research: Yoga & Ayurvedic Center
10. Academics: Post Graduate & Undergraduates Education.



## OUR WELL WISHERS





**Spirit of Visionary to realize the dream of  
progress through research!**

## **FUTURE ENDEAVOURS**

### **Mutual Partnership Opportunities:**

Philanthropic support graciously allows us to expand our capacity to cure more patients, strengthen our innovative programs, and champion new medical discoveries. Corporations can support our innovative work in a number of ways through one of these areas of focus:

#### ***Cancer/AYUSH***

- Infrastructure Development Project : Upgrading Cancer Care and Research Centre
- Setting up of comprehensive palliative care unit
- Research in Indigenous Medicine for Cancer Care
- *Community Access To Cancer Health Initiative : Mobile cancer screening and detection*

#### ***Reproductive Child health***

- *“Vande Mataram” : Safe mother hood initiative for vulnerable population*
- *Strengthening of Adolescent reproductive and sexual health*
- Water Sanitation Hygiene & Health Program

#### ***Occupational Health***

- Strengthening of Integrated Occupational Health Centre to Centre of Excellence.
- Environmental Research in River Water Health

#### ***Biotechnology***

- Setting up of Molecular Biology Centre for Cancer Research
- *New research in Biotechnology in gene therapy, stem cell research etc.*

#### ***Road Safety***

- Safe Life Initiative on Road Safety and Emergency Medical Services

#### ***External Monitoring & Evaluation Assignment***

***We are determined to set our sails for progress along the 'Road Map' outlined above and committed to seek answers to the ten fundamental issues framed above.***

The contributions made to LMRC, the sponsoring \ donor agency is eligible for IT tax exemptions under Section 35 (1) (ii) of the Income Tax Act 1961 thus every donor shall be eligible to claim the following claim the following:-

1. Business assesses can claim a weighted deduction of 150% of the amount donated under Sec.35 (1) (ii).
2. Assesses having income other than business can claim a deduction of 100% of the amount donated under Section 80GGA of the Income-Tax Act.

Further we are pleased to inform you that the trust is registered under Foreign Contribution (Regulation) Act, 1976

# लोकमान्य रुग्णालयात लवकरच जागति सर्वसमावेशक कर्करोग उपचार केंद्र

## सचलतीच्या द्रवत रेडिओथेरापीसह विविध उपचार



लोकमान्य रुग्णालयात लवकरच जागति सर्वसमावेशक कर्करोग उपचार केंद्र सचलतीच्या द्रवत रेडिओथेरापीसह विविध उपचार

लोकमान्य रुग्णालयात लवकरच जागति सर्वसमावेशक कर्करोग उपचार केंद्र सचलतीच्या द्रवत रेडिओथेरापीसह विविध उपचार

# रस्ता सुरक्षेवर समग्र ग्रंथ

राज्य सरकारने रस्ता सुरक्षेच्या बाबत समग्र ग्रंथ तयार केला आहे. यात रस्त्यांच्या सुरक्षेबाबतचे विविध बाबींचा समावेश आहे.



राज्य सरकारने रस्ता सुरक्षेच्या बाबत समग्र ग्रंथ तयार केला आहे.



### kin of mishap victims caution traffic violators, pay homage

Officials from transport dept, PCMC and traffic police attend ceremony



People took an oath of obeying traffic rules and paid homage to the road accident victims by lighting candles and observing two-minute silence at the Shri Sri Shakti complex recently.



### विद्यार्थ्यांनी दिला

राज्य शाळांमध्ये विद्यार्थ्यांनी दिला



### रस्ता सुरक्षेचा संदेश

राज्य शाळांमध्ये विद्यार्थ्यांनी दिला



### नवभारत

राज्य शाळांमध्ये विद्यार्थ्यांनी दिला



### एमएसमुळे वाचले १०० प्राण

राज्य शाळांमध्ये विद्यार्थ्यांनी दिला

# औद्योगिक स्वास्थ्य केंद्र का उद्घाटन



केंद्राचे उद्घाटन करत असताना...

### अब नहीं करना पड़ेगा इंतजार

डॉ. विजय जोगी, डॉ. अशोक शर्मा...



केंद्राचे उद्घाटन करत असताना...

# NEWS CLIPINGS

## Appeal for CSR Contribution



Dear Patrons

New Year And Seasons Greetings ! ...

Lokmanya Medical Research Centre (LMRC) is a renowned Not for profit NGO registered under Public Charitable Trust and Registered Society Act. LMRC is recognized as Scientific & Industrial Research Organisation by Ministry of Science and Technology, Government of India. LMRC is engaged in achieving Sustainable Development Goals through Community health and research based solutions to various social-medical and environmental challenges.

Lokmanya has been undertaking various Impactful Health Initiatives that promotes our mission of "Reaching the Unserviced & Unreached" through sustainable community development projects namely Cancer Awareness, Early Detection and Cancer care, Anti-Tobacco Campaigns, Safe Life Initiative on Road Safety and Pre Hospital Emergency Care Services, Reproductive Child Health and Occupational Health etc. as elaborated in the enclosed broucher.

Your companies understand the importance of Corporate Social Responsibility (CSR) and recognize it as a tool to strengthen the business ecosystem at the same time contributing to society at large. Finding the right partner is absolutely critical to the success of a CSR strategy. LMRC is committed to develop partnerships that meets the needs of both our partners and the common communities we serve. Corporations may support a specific development project, donate to our humanitarian healthcare, or co-create a targeted Health campaign.

In order to steepen the trajectory of growth and innovation, and to create human resources even for value based health care, we need significant investments in Infrastructure, Human Talent, and Partnerships over a long time. We urge philanthropists such as your esteemed company to donate liberally to Lokmanya Medical Research Center and extend a helping hand which would go a long way in progressively developing and sustaining such essential activities, most of which are of pure charitable nature.

The contributions made to LMRC, the sponsoring \ donor agency is eligible for IT tax exemptions under Section 35 (1) (ii) of the Income Tax Act 1961 thus every donor shall be eligible to claim the following claim the following:-  
Business assesses can claim a weighted deduction of 150% of the amount donated under Sec.35 (1)(ii).  
Assesses having income other than business can claim a deduction of 100% of the amount donated under Section 80GGA of the Income-Tax Act.

Naming opportunities for institutes centre, units or programmes exist with appropriate levels of donations. Your contribution can make a difference in the life of suffering communities. We invite you to collaborate with us for impactful initiatives, we can make a profound impact together.

Please feel free to write back to undersigned for collaboration. Further we seek your appointment to discuss our proposal in person.

With Warm Regards

Dr. V. G. Vaidya

Managing Trustee

Lokmanya Medical Research Centre.

314 \ B, Near Chinchwad Railway Station, Chinchwad, Pune – 411033

Contact: 9822057766 \ vg vaidya178@gmail.com

Contact CSR Coordinator on



# LMRC

LOKMANYA MEDICAL RESEARCH CENTRE

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Visit us : [www.lmrc.in](http://www.lmrc.in)

**LOKMANYA MEDICAL RESEARCH CENTRE**

