

PRESIDENTIAL ADDRESS

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Good evening. My dear friends and fellow colleagues, I stand here today humbled by the honor, grateful for the trust you've bestowed, and mindful of the work done by the predecessors in last 50 years. This milestone of 50 years is a moment to look back to look ahead, learn from the past and plan for the future. I thank Dr CP Bansal and Dr Sailesh Gupta for the kind cooperation provided in handing over the baton.

As Indian Academy of Pediatrics (IAP) continues to work towards reduction of the child mortality, there is yet another emerging challenge of antimicrobial resistance that we face today. Conventional treatments are failing, costs have gone up and we are amidst a man-made crisis with limited new agents in pipeline. IAP has an important role and responsibility here. A 5-year plan has been drawn to promote rational antimicrobial therapy. The modules on Rational Antibiotic Practice (RAP) and Pediatric tuberculosis (TB) are the main components of the project. A Training of Trainers workshop on RAP was conducted on Wednesday, January 8, 2014. I am sure the committed trainers will disseminate it all over the country conducting RAP workshops. A national consultative meeting will be held with the aim to frame a policy document for the country on Rational Antibiotic Therapy in children. We have to educate and make the general public aware of the problem. We plan to celebrate the antibiotic day on September 26 of every year, the day when penicillin was invented, and antibiotic week. A conference exclusively on antibiotics – *the Antibiocon* – is on cards.

The last five years have seen an alarming rise in drug resistant tuberculosis. IAP plans to actively participate in TB control in collaboration with the Child TB Division of Ministry of Health and Family Welfare and Revised National Tuberculosis Control Programme. The experts are developing a module; workshops and interactive case discussions will be held across the country. Through these workshops, the pediatricians can get trained in clinical, diagnostic and programmatic issues related to TB.

Nutrition is a core pillar of child development. IAP will focus on child nutrition in a big way with a module exclusively on nutrition in health and disease to lay the foundation of life-long healthy living. We have successfully launched this module on January 8, 2014, which also serves to train the pediatricians to address the common dietary issues raised by the concerned mothers.

IAP has conceptualized launch of a new vaccine, a novel psychological vaccine of emotional intelligence in the form of workshop on Promoting emotional intelligence. This would preserve and foster the child's psychological wellbeing, which appears to define success and happiness in life more than mere high intelligence quotient. Other important modules we are working on are: neuroimaging for a general pediatrician, and vitamin D and calcium metabolism.

It is important that we keep abreast with the current medical updates, and it is now mandatory also by the various state councils to do so. May 2014 be a year of web revolution where the knowledge disseminated through lectures, conferences, CMEs can reach the unreached like those in rural areas who find it difficult to travel to the venue of conference, or practitioners who can not afford to leave behind their patient care. Students from any corner of the country can participate in case discussions being conducted by experienced teachers from a few select centers of the country. IAP wants to take full advantage of this web technology so that all the pediatricians come closer and grow stronger academically, and in practice.

IAP always has played an important role in the advocacy of immunization. Immunization and Adverse Events Following Immunization along with disease surveillance initiated by the IAP under the IAP infectious diseases surveillance program – *'idsurv'* – has been lauded by the 'National Center for Disease Control' and 'Integrated Disease Surveillance Project'. The epidemiological data will help the policy makers of the

country to plan interventions. We need to now consolidate further by moving beyond mere sensitization of the members and collect some meaningful data.

IAP 'Mission Uday' project, in its 2nd year, needs to focus on the select districts and generate some useful data. Major under-five killers – diarrhea and pneumonia – need to be tackled with more realistic measures. Advocacy needs to be translated into action at field level and it will happen only when the IAP members move out of their chambers and join hands with the fractured public health network in making the health care and health education reach the unreached rural India

IAP, like any large and expanding organization, is facing the challenge of a potential internal crisis with conflicting ideas and complex issues but we will continue to focus on the goals that we have set. My appeal to all the members is:

“Wherever you come from or whatever position you hold, your action needs to be unified with the rest of the academy to accomplish the bigger picture of service to

child health. If personal successes take over the interests of the academy, there will only be a deleterious loss of focus. My earnest appeal to all is to repose your faith in the organization, to not drift away from the values and goals that the academy stand for today in the eyes of the world.”

So, let us mark this day as a remembrance of the 50 glorious years of the Academy that we proudly belong to, and strive towards passing on the pearls of knowledge and care to the future generation of doctors and children of this country.

I will be failing in my duty if I don't acknowledge the 3 most important reasons why I stand here today. My brother and *bhabhi* who reared me like a son, my wife Pratima and sons who support me despite my heavy diversion of family time to work, and you my colleagues whose immense faith has honored me this precious opportunity to serve the academy and thereby the children of our country.

Jai IAP
Jai Hind