



FEDERATION OF INDIAN THALASSEMICS NATIONAL THALASSEMIA BULLETIN

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Vol. 13 No.2.

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October 2007

Rahul Dravid Joins Dr.J.S.Arora to SAY



Dr. J.S. Arora, Dream Teamer of NTWS with former Indian Cricket team captain Rahul Dravid with play cards at Vodafone Delhi Half Marathon '07, organized by Give India on 28th Oct '07

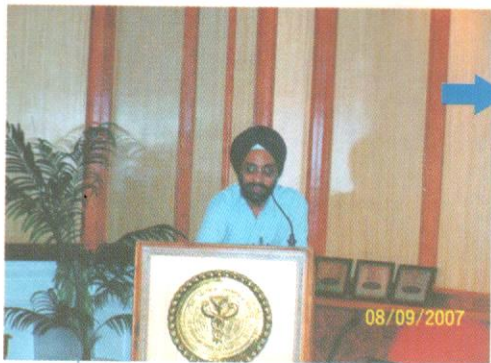
चक्क दे INDIA
मिटा दे THALASSEMIA

NTWS Team at Vodafone Delhi Half Marathon '07, 28th Oct. 2007



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Dr. Arora addressing the audience at ISBTI (Delhi) workshop AIIMS



Dr. J.S. Arora, Mrs. Vandana and Monisha attending ISBTI (Delhi) workshop AIIMS



Dr. Makroo General Secretary ISBTI, Dr. Srivastav DGHS, Dr. J.S. Arora General Secretary NTWS addressing the press during National Blood Donors Day 1st Oct. 2007.

National Voluntary Blood Donors Day Celebrations At India Habitat Centre on 1st Oct. '07



Jyoti, Isha, Tushar & Vandana Performing at World Blood Donor Day on 14-06-2007



Dr J.S. Arora receiving award from MS AIIMS on World Blood Donor's day, 14th June 07 for organizing maximum Blood Donation camps



Editorial

No Blood Grouping Universal blood for all



Scientists have discovered enzymes that can efficiently convert blood groups A, B and AB into the 'universal' O group which can be given to anyone, but is always in short supply. The two novel glycosidase enzymes were identified in bacteria by an

international team led by Henrik Clausen of the University of Copenhagen in Denmark.

The researchers hope that the enzymes will both improve the erratic supplies of blood around the world, and also the safety of transfusions. Clinical trials to test the safety and effectiveness of the converted blood are being planned. The ABO group blood-type system is based on the presence or absence of the sugar-based antigens 'A' and 'B' on red blood cells. Type O blood cells have neither A nor B antigens, so may be safely transfused into anyone. Both types A, B and AB blood do, and cause life-threatening immune reactions if they are given to patients with a different blood group. The bacterial glycosidase enzymes strip these antigens away from A, B and AB blood. The idea of such antigen stripping goes back to the early 1980s, with the discovery of an enzyme in coffee beans that removes B antigens from red blood cells. Early stage clinical trials showed that the converted blood could be safely transfused into individuals of different blood groups; no traces of enzyme or antigen remained to cause reactions. But the enzyme reactions were far too insufficient to make large-scale conversion practical. Clausen's team screened 2,500 extracts from different bacteria and fungi for their ability to cleave off A and B antigens. The newly discovered bacterial 'B' enzyme is nearly 1,000 times more efficient than the coffee-bean B enzyme- the additional discovery of an enzyme to remove A antigens means that all blood types can now be converted. The work is reported in Nature Biotechnology³.

The biggest advantage of the new enzyme technology is eliminating incidents of giving the wrong blood. The Boston-based company Zyme Quest is developing the enzyme technology for commercial use in blood centres. Early-stage clinical trials are underway. If all goes well, blood centres could be using the technologies in just a few years.

Running Marathon and making pledges is perhaps one of the best ways where one can carry their messages to the whole world. This year NTWS participated in the Vodafone Delhi Half Marathon 2007 which was held on 28th Oct'07. This is a platform given by "Give India" to various NGO's for raising funds and fulfilling their dream projects by running

First woman IPS officer Dr. Kiran Bedi (Director General Bureau of Police Research & Development) and Dr. J.S. Arora (General Secretary of NTWS) two Dream Teamers registered for our National Thalassemia Welfare Society. They were sponsored for Rs. 1 Lac each by Mr. Surrinder Modi and Dr. V.P. Choudhry.

In the Corporate Challenge NTWS had one Corporate team Fluor Daniel, supporting in the VDHM 2007. Fluor Daniel has always been with NTWS whenever in need. They have been regularly donating Blood for the Thalassemic children and supporting by donating medical equipments to the poor Thalassemia patients.

Over 100 Thalassemics have been registered under NTWS's **"Patient Support Programme"** for subsidised medicines, equipments, vaccinations & investigations and over 1200 units for free check-up at special Thalassemia Clinic at 2nd Floor, MCD Community Centre, 12-Block, Near Gurudwara Guru Singh Sabha, Tilak Nagar, New Delhi.

Funds raised by this activity will be used to support above enrolled patients and add few more patients in "Patients Support Programme" "Poor and needy" members of NTWS may apply in above programme.

It gives me immense pleasure to inform you that Myself and Dr R.K. Srivastva (Director General Health Services) were the two doctors invited from India to actively participate in deliberations of **WHO Sponsored South East Asia Regional Patient Safety Workshop on Patients for Patient Safety** which was held on 17-19 July 2007, in Jakarta, Indonesia.

Both of us were the members of Jakarta Declaration Drafting committee

Jakarta Declaration which was created by the patients, health professionals and policymakers has been endorsed by Regional Committee of the World Health Organization in South East Asia. This endorsement is recognition of the vital role that patients can play in creating safer health care systems in the Region. **The Declaration is an official addendum to the Resolution on "Promoting Patient Safety in Health Care". Henceforth, patients, health care providers and policy makers will work as partners in all aspects of patient safety in the Region."**

Some of the main points of jakrata declaration are as under

1. Declare that no patients should suffer preventable harm;
2. Agree that patients are at the centre of all patient safety efforts;
3. Acknowledge that fear of blame and punishment should not deter open and honest communication between patients and health care providers;
4. Recognize that we must work in partnership in order to achieve the major behavioural and system changes that are required to address patient safety in our Region;

Dr. J. S. Arora

Thalassemia & Pregnancy

Dr. V P Choudhry, MD FIAP FIMS FIMSA FIACM FISHTM, Director,

Dr. Amit Upadhyay, MD, Consultant,

Dr. Neeta Dhabhai, Consultant Gynecologist
Sun Flag-Pahuja Center for Blood Disorders, Fdb

Hemoglobinopathies are the most common & serious single gene disorders in the World. As per WHO estimates nearly 4% of the world population has the gene disorders. Among the various hemoglobin disorders Thalassemia is the most common. In India various surveys have revealed that over 3.5% of our population is carrier for Thalassemia gene. Nearly Four crore population has Thalassemia gene and anywhere 10,000 to 12,000 Thalassemic children are born every year in our country. It is unfortunate that maximum numbers of these children are born in countries with limited resources i.e. South East Asian countries

The optimal treatment of Thalassemia is now well established and consists of the following

- ✍ Regular leucodepleted red cell transfusions to maintain hemoglobin above 10 gm/dl.
- ✍ Prevention of transfusion transmitted infection
- ✍ Regular chelation therapy to maintain serum ferritin between 1000 to 1500 ng/ml. This is possible by regular Desferal / Kelfer or by combination therapy in adequate doses daily.
- ✍ To prevent and manage complication of vital organs such as heart, liver, endocrine glands, etc.
- ✍ Psychosocial support.

Cost of optimal therapy varies anywhere between 50,000 to 100,000 Rs per year per child depending upon the age, chelation therapy, treatment centre etc.

However this cost of therapy may increase, manifold in presence of any complication and endocrine problem. There are three possible paths for children with Thalassemia major.

- ✍ Normal life: Children receiving the optimum treatment will have near normal and good quality of life. They will marry and can have normal children.
- ✍ Prolongation of Life: Children having suboptimal or poor treatment (blood transfusion alone and/or poor chelation therapy), generally survive till second decade. They often develop multiple complications such as major organ failure, transfusion transmitted infection, poor quality of life etc.
- ✍ Early death: Children who are left and do not receive any treatment succumb to the disease in the initial 5 years of life during Pregnancy the obstetrician is likely to see Thalassemia in three different states viz.

a) Thalassemia major: Most of these cases are likely to be iron overloaded and may be having cardiomyopathy with cardiac dysfunction or endocrine problem such as growth retardation, primary or secondary amenorrhoea, poor sexual development etc.

b) Cases with Thalassemia intermedia: who may be undernourished and with slight iron overload.

c) Majority of Cases are likely to Thalassemia carrier or minor.

These cases are likely to account for 4% of their cases However in certain communities these cases may account for 15-20% of their cases.

Problems of Thalassemia Major and Intermedia:

Cases of Thalassemia major with pregnancy are few in our country as limited numbers of children receive optimum treatment during their childhood & subsequent years. Problems associated with them often include (a) iron overload (b) under nutrition (c) growth retardation (d) multi-organ dysfunction (e) presence of transfusion associated infection.

These pregnancies are high risk and should be considered as precious as these are assisted pregnancies. The foetal wastage occurs in 30-50% of cases & the incidence of pre term and small for date babies is quite high. It is advised that these women should be kept on high transfusion regime during pregnancy and their hemoglobin should be maintained between 11-12 gm/dl. Women who maintain their hemoglobin more than 10 gm/dl have full term normal delivery in 50-85% of cases.

Thalassemic women with pregnancy cannot be given desferal during pregnancy because of its ill effect on fetus. However it should not be given at all during the first trimester. The effect of deferiprone during pregnancy is not known therefore it is generally not advised. All these cases during pregnancies should be monitored for development of complication such as diabetes and other endocrinopathies, organ dysfunction and metabolic problems. These pregnancies need to be monitored for foetal growth periodically. Development of any complication, if any, needs to be detected early and managed appropriately. These cases should be managed jointly by the obstetrician and hematologist.

Similarly the outcome of pregnancies in person with Thalassemia Intermedia is poor. Our experience of foetal outcome at AIIMS are given in Table I.

The stress of pregnancy worsens the symptoms of Thalassemia. During pregnancy, the volume of blood increases substantially during 2nd & 3rd trimester.

This can lead to increase in blood transfusion requirements and increase in cardiac work load.

These Thalassemics have an increased risk of developing type 1 diabetes. The stress of pregnancy can worsen this condition. Diabetes needs to be detected early and well controlled throughout pregnancy. (Table II & Table III).

TABLE IV
Thalassemia control programme
Why prevention

- ? High prevalence
- ? Traits are normal and health
- ? Marriages within the same community morbidity and Mortality is high
- ? Death certain if no treatment is given to Thalassaemic children
- ? Survival based on repeated blood transfusion and regular chelation therapy
- ? Blood is a scarcity & Carries risk of TTI
- ? Treatment is costly, painful and has Complications
- ? Treatment is burden on family and health Resources.
- ? Permanent cure BMT-HLA match generally available in 30 % of cases
- ? BMT cost enormous with high risk Pregnancy Outcome is poor

TABLE V
Comparative evaluation of
NESTROFT and RBC Indices

69 0	91 67	79 08	8 49	821	861	56 > CBH 4 0
1 99	8 45	37 65	2 99	431	422	9P > 22 > CH1
50 79	89 26	74 36	30 79	131	712	11 08 > VCI
7 89	1 57	8 87	5 89	331	771	TF ORTSEL
% av	% av	%	%			seac
ev - td p ev +	fliceps	tsnes	TTB	FOON		tse

थैलासीमिया व गर्भावस्था

विश्वभर में एक जीन से प्रभावित होने वाले रोगों में से हीमोग्लोबिन विकृतियों सबसे अधिक पायी जाती है। विश्व स्वास्थ्य संस्था के अनुमान के अनुसार दुनिया की 4% अबदी इस जीन से प्रभावित हैं। हीमोग्लोबिन विकृतियों में थैलासीमिया सबसे सामान्य है। भारत में विभिन्न सर्वेक्षणों द्वारा पाया गया है कि 3.5% जन समूह थैलासीमिया जीन प्रभावित है। 4 करोड़ व्यक्तियों में थैलासीमिया जीन है। लगभग 10,000 से 12,000 बच्चे हर वर्ष थैलासीमिया रोग से प्रभावित होते हैं। यह दुर्भाग्यपूर्ण है कि सबसे अधिक थैलासीमिया रोगी सीमित स्रोतों वाले दक्षिण पूर्व एशिया के देशों में पैदा होते हैं थैलासीमिया की उचित चिकित्सा अब पूर्ण रूप से सुनिश्चित कर ली गई है जो कि निम्न प्रकार है।

? नियमित रूप से श्वेतकण रहित रक्त संचारण कर हीमोग्लोबिन को 10 ग्राम से अधिक रखना

? रक्त संचारण से होने वाले रोगों की रोकथाम

? नियमित रूप से लोह निष्कासक चिकित्सा द्वारा रक्त में डैस्फराल, कैल्फर अथवा संयुक्त औषधि से संभव है

? महत्वपूर्ण अंगों जैसे हृदय, यकृत व अंतः स्रावी ग्रन्थियों को दुष्प्रभावों से बचाव तथा क्षतिग्रस्त होने पर उनकी उचित चिकित्सा।

? मनो समाजिक सहायता समुचित चिकित्सा का व्यय रोगी की आयु, लोह निष्कासक दवा तथा चिकित्सालय पर निर्भर करता है यह खर्चा शरीर में किसी प्रकार के दुष्प्रभाव या अंतः स्रावी ग्रन्थियों में विकृति के कारण कई गुणा बढ़ सकता है। थैलासीमिया बच्चों में चिकित्सा व्यवस्था अनुसार, तीन प्रकार का प्रभाव देखने को मिलता है।

? सामान्य जीवन - समुचित चिकित्सा प्राप्त करने वाले बच्चों का जीवन लगभग सामान्य तथा सुखद होता है, वे शादी भी कर सकते हैं तथा उनके सामान्य बच्चे भी हो सकते हैं।

? जीवन वृद्धि - आधा - अधुरे मन से इलाज करने पर जैसे सिर्फ रक्त संचारण या थोड़ा बहुत लोह निष्कासन करने से जीवन के दूसरे या तीसरे दशक में मृत्यु। इन रोगियों में बहुअंगीय दुष्प्रभाव जैसे कि मुख्य अंगों का कार्यहीन

होना रक्त संचारण संबंधी रोग तथा स्वास्थ्यहीन जीवन यापन।

? शीघ्र मृत्यु - जिस थैलासीमिक रोगी का किसी कारण से इलाज/चिकित्सा नहीं होती उसकी समान्यतः 5 वर्ष की आयु तक मृत्यु हो जाती है। गर्भावस्था के दौरान तीन प्रकार से थैलासीमिया का सामना स्त्री रोग विशेषज्ञ को करना पड़ सकता है।

- अ) थैलासीमिया मेजर :- ऐसी स्थिति में, लोहे का अत्यधिक जमाव, हृदय रोग, अंतः स्रावी समस्याएँ, शारीरिक विकास में कमी प्राथमिक अथवा अन्यतर मासिक स्राव का अभाव, प्रजनन अंगों के विकास में कमी इत्यादि
- ब) थैलासीमिया माइनर :- पोषण में कमी तथा थोड़ी बहुत लोह वृद्धि।
- स) थैलासीमिया न्यूनतम/माइनर :- बहुत सी गर्भवती महिलाएँ इसी अवस्था में आती हैं जो कि कुल गर्भवती महिलाओं का 4% है और कुछ समुदायों में यह 15%-20% हो सकता है।

थैलासीमिया मेजर व मध्यमा की समस्याएँ।

हमारे देश में थैलासीमिया मेजर में गर्भावस्था की संभावनाये बहुत कम है क्योंकि बहुत कम थैलासीमिया रोगी ऐसे हैं जिनको बचपन में तथा उसके बाद भी समुचित रूप से चिकित्सा प्राप्त होती है, से रोगियों में अक्सर :-

- 1) लोह वृद्धि 2) पोषण तत्वों की कमी 3) विकास वृद्धि में कमी 4) बहुअंगीय क्षीणता 5) रक्त संचारण संबंधी संक्रमण

यह गर्भावस्था बहुत महत्वपूर्ण होती है क्योंकि इनमें गर्भधारण के समय अक्सर विशेष चिकित्सा की आवश्यकता पड़ती है 30-50% प्रतिशत परिस्थितियों में गर्भ विनाश समय पूर्व प्रसव तथा अपूर्ण विकसित शिशु जन्म की संभावना अधिक रहती है। इन गर्भवती महिलाओं का हीमोग्लोबिन लगातार 10 ग्राम से अधिक रहता है तो 50-85% संभावना है कि प्रसव सामान्य तथा पूर्ण अवधि पर होगा। डैस्फराल गर्भवती महिलाओं में गर्भावस्था के दौरान नहीं दिया जा सकता क्योंकि उस से गर्भ को नुकसान होने की आशंका बनी रहती है। विशेष रूप से गर्भ के प्रथम त्रैमास में उसका प्रयोग पूर्णतया अवांछनीय है डैफरीपरोन के गर्भ पर प्रभाव के बारे में कोई जानकारी नहीं है अतः उसका गर्भावस्था में प्रस्तावित नहीं है थैलासीमिया गर्भावस्था में मधुमेह, अन्य अन्तःस्रावी ग्रन्थियों तथा अन्य अंगों में

होने वाली विकृतियों पर विशेष ध्यान देने की आवश्यकता है। थैलासीमिया मध्यमा गर्भावस्था में भ्रूण के विकास तथा अन्य विकृतियों पर तुरंत निदान व चिकित्सा आवश्यक है अतः उनको स्त्री रोग विशेषज्ञ तथा रूधिर रोग चिकित्सक के अंतर्गत ही गर्भावस्था की देख रेख व प्रसव करवाना चाहिये। उसी प्रकार थैलासीमिया मध्यमा गर्भावस्था में भी परिणाम अच्छे नहीं मिलते।

गर्भावस्था का तनाव थैलासीमिया मध्यमा को गम्भीर बना देता है। तथा द्वितीय व तृतीय त्रैमास में रक्त का विस्तार बढ़ जाता है तथा उससे रक्त संचारण की आवश्यकता तथा हृदय पर अधिक कार्य भार आ पड़ता है। थैलासीमिया गर्भावस्था में मधुमेह होने की सम्भावना बहुत अधिक रहती है इसके तहत ही निदान व चिकित्सा की आवश्यकता होती है। फॅलिक एसिड के प्रयोग से न्यूरोल ट्यूब विकृति में मेगालोब्लास्टिक रक्ताल्पता का प्रभाव कम हो जाता है। गर्भावस्था में प्रोटिन व अतिरिक्त पोषण तत्वों का प्रयोग मां व गर्भ दोनों के लिये लाभदायक है।

?बचाव

थैलासीमिया वाहक व गर्भावस्था दिल्ली तथा आसपास के क्षेत्रों में 5% व्यक्ति थैलासीमिया वाहक है उनका निदान स्त्रियों की सामान्य रोगों की जाँच या गर्भावस्था जाँच द्वारा स्त्री रोग विशेषज्ञ द्वारा आसानी से की जा सकती है। इस समय पर स्त्रियाँ चिकित्सा की सभी बातों को ध्यान से सुनती हैं। तथा पूर्णतया

मानती है थैलासीमिया वाहक की जाँच निम्न प्रकार से की जा सकती हैं।

रक्त कणों का विश्लेषण

यदि हीमोग्लोबिन की मात्रा के अनुपात से रक्तकणों की संख्या अधिक हो और $MCV < 80$ हो तो थैलासीमिया वाहक होने की सम्भावना अधिक होती है और उसे Hb HPLC, Hb ELECTROPHORESIS द्वारा पूर्णतया निश्चित किया जा सकता है और यदि रक्त कणों की संख्या भी कम हो तो निम्न लोह रक्तलपता के बारे में सोचना चाहिये तथा रक्त में लोह मात्रा निर्धारित करके लोह की कमी को पूरा कर देना चाहिये। सभी थैलासीमिया वाहक स्त्रियों के पतियों की थैलासीमिया वाहक की जाँच भी आवश्यक करवानी चाहिये। यदि पति-पत्नी दोनों थैलासीमिया वाहक हों तो प्रत्येक गर्भावस्था में 25% सम्भावना है कि बच्चा पूर्ण थैलासीमिया मेजर रोगी होगा। उसकी जाँच CVS (10-12 सप्ताह) या CORDOCENTESIS (18 सप्ताह) द्वारा की जाती है यदि भ्रूण थैलासीमिया मेजर हो तो गर्भपात करवाया जा सकता है थैलासीमिया रोक थाम के कार्यक्रम को सफल बनाने के लिये आवश्यक है कि आम जनता, सभी चिकित्सा स्वयं सेवी संस्थाएँ, प्रचार माध्यम, धार्मिक संस्थायें व सरकारी तंत्र मिल कर काम करें। साईप्रस, ग्रीक आदी देशों में उस तरह के प्रयास सफल रहे हैं तथा अब नये थैलासीमिया मेजर बच्चे नहीं पैदा होते!

National Thalassemia Welfare Society Activity Report

1. To observe International Thalassemia Day 2007 NTWS organized **two successive Night Blood Donation Camps** in association with Heroites Gurgaon, on 8th & 9th May 2007. AIIMS blood bank team collected Blood.
2. Two successive Blood Donation Camps in association with Fluor Daniel Gurgaon, on 10th May & 11th May. 2007 AIIMS blood bank team collected 103 & 106 units of Blood respectively.
3. To observe International Thalassemia Day the National Thalassemia Welfare Society organized a visit to Appu Ghar on 12th May 2007, children enjoyed a lot, riding joy ride & oysters. The hot summer scorching Sun also was not able to stop the spirit of the Thalassemic children from enjoying at Appu Ghar. More than 700 Thalassemia families, staff of Thalassemia Wards, Blood Bank Staffs of all the Govt. Hospitals participated in the Appu Ghar joy - rides. Whole day the children chilled in the rain dance and other water amusements. There was media coverage from the leading News Channels, AAJ TAK, NDTV, Sahara NCR and no of newspapers.
4. On 13th of May 2007 the 2nd Sunday of the month which is the day of regular Thalassemia clinic of NTWS was specially dedicated for screening of Hepatiti B, C and HIV in association with G.B. Pant Hospital. NTWS is organizing This type of camp regularly every month since Dec 2006. thanks to Dr. S.K. Sarin, Prof. Director & Head, Deptt. Of Gastroenterology GB Pant Hospital Delhi for helping us in organizing these camps. Mrs. Mohini and her team is assisting us in this endeavour even camps being on holidays (Sundays).

5. On 26th May 2007 NTWS for the first time organized Blood Donation Camp in association with Bajaj Hindusthan Ltd., Noida, and a lecture was also organized along with the BDC. Dr J.S. Arora General Secretary of NTWS apprised the "bajaj family" about the problems & prevention of Thalassemia and need & benefits of blood donation. 77 units of blood were collected by LNJP blood bank team.
6. On 1st June 2007, the first day of admission form distribution at Delhi University, NTWS organized a short & quick BDC at Delhi University, North Campus, where 25 units of blood were collected by AIIMS blood bank.
7. A blood donation camp was organized at Gurudwara Shri Guru Singh Sabha Vikas Puri for the fourth time consecutively on the occasion of Guru Arjan Dev ji's Martyrdom day the 16th June 2007. 34 units of blood were collected by Red Cross Blood Bank team.
8. NTWS organized 22nd Blood Donation camp at society office premises on 17th June 2007 in association with Yog Avam Manav Seva Sansthan, MVBDA, Vikas Puri Main Market Assoc. and KG-I, Vikas Puri Residents Welfare Association. 59 persons donated blood. AIIMS blood bank team collected the blood.
9. On 20th June 2007 NTWS organized BDC in association with Motorola, Gurgaon, where LNJP blood bank team collected 72 units of Blood.
10. Mr. Jewesh Manuja of National Thalassemia Welfare Society organized 5th Blood Donation Camp on 24th June 2007, in association with the Jail Road Market assoc. Where the Red Cross Team collected 150 units.
11. NTWS organized a Blood Donation Camp in association With Aegis BPO Services Ltd, NOIDA for the first time

where 74 units of blood were collected by LNJP Blood Bank Team. There was a small meeting the previous day of the camp between Dr. J.S. Arora, Monisha and Ritika Chandok, Manager Communication Aegis BPO, where Aegis showed its willingness to organize Blood Donation Camp with most of our Thalassemia Societies in other states of India where Aegis have their offices.

12. A 24 hrs Blood Donation Camp on 5th & 6th July '07 was organized by NTWS in association with Keanes World Zen, Gurgaon, where 68 units of blood were collected by DDU Hospital & LNJP Hospital Blood Bank Teams.

3. NTWS organized a Blood Donation Camp in association with Smart Cube, Kalkaji on 16th July 2007 where AIIMS Blood Bank Team collected the Blood.

Other Activities:

? National Thalassemia Welfare society associated with ISBTI, Delhi chapter to organize "Abhinandan" a colorful event on the occasion of World Blood Donors Day the 14th June, 2007 at Jawaharlal Auditorium AIIMS. Besides a skit by Rotary BB staff and puppet show on blood donation motivation, Ishaan adult Thalassemic and Law Graduate thanked blood donors by a short talk, Isha, Jyoti and Vandana along with Tushar sang another song based upon famous hindi song "ik payar ka nagma hai". An upcoming singer Tushar Arora who is only 11 yrs old, a Thalassemic Child from Faridabad stole the show with his excellent voice. Organizers were so thrilled to hear his songs that he was asked to sing again & again four different songs. Audience were moved by his talent in singing at such a small age. Thalassemic children who have gracefully crossed the age of 18 yrs were also honored. On 13th July 2007, the Blood Donor Club of Bal Bharti School, Ghaziabad organized a lecture for their higher class students. The students and members of Blood Donors Club viewed the documentary "Chetna" and asked lots of queries regarding Thalassemia, Dr. J. S. Arora answered their queries and asked the students to get themselves tested for Thalassemic and to pledge, to become a regular Blood Donor when they attain the age of 18 years. Students were also eager to help the Thalassemics financially when they will settle down with their jobs. A Thalassemia Exhibition was organized by Dr. Reema, psychiatrist, Bal Bharti Public School, Gaziabad on the school premises on 28th July 2007, where parents were also invited.

? NTWS in association with Hematology department of Sun Flag Hospital, Faridabad organized a free Hep B, C & HIV screening Camp on 29th July, 2007, where samples of 72 Thalassemic Children were collected. The samples were collected & tested by G B Pant Hospital, Dept. of Gastroenterology.

? Vishwa Jagrti Mission Yuva Manch celebrated the Independence Day by donating Blood for the Thalassemic children at Karuna Sindhu Charitable Hospital, Bhakkarwala on 15th August 2007. National Thalassemia Welfare Society in collaboration with the Yuva Manch organized this camp. Swami Shudhanshu Ji Maharaj inaugurated the Blood Donation Camp and appealed all his followers to com

forward and donate blood for the Thalassemic children. 94 units of blood were collected by DDU Hospital blood bank. ? Sarala Fabrics, Mohan Nagar organized a Blood Donation Camp for the second time in association with NTWS on 16th August 2007. LNJP Hospital Blood Bank Team collected the Blood.

? NTWS in association with Art of Living organized a Blood Donation Camp at Society's premises where 106 units of blood were collected by DDU Hospital Blood Bank on date 16.9.07.

? NTWS was invited to **National Voluntary Blood Donation Day** celebrated on 1st Oct'07 to promote the Voluntary Blood Donation program in the country in association with Indian Society of Blood Transfusion & Immunohaematology, NACO, State Blood Transfusion Council, NCT Delhi & Dept. of Transfusion Medicine, Indraprastha Apollo Hospital, New Delhi. The regular voluntary blood Donors and voluntary Blood Donor Organisation were honored. The function was Conducted at Golmohar Hall, India Habitat Centre, New Delhi. Thalassemic children participated in the cultural show. Mst. Tushar stole the show by singing a song written by Dr. J.S. Arora based on original song "eh meri zindagi tu mere saath hai". He was asked by the audience to sing more songs. Ms. Tanu Verma thanked the precious and worthy Donors for whom we are always proud, who come and save our lives by donating blood. The Blood Bank Office - in-charge of Delhi Heart and Lung Institute Dr. Deepika Chatterjee also invited Tushar to perform in their Hospital function which was organized in the honour of their Voluntary Blood Donors.

? NTWS organized a Blood Donation Camp in association with Young India at MDI campus, Gurgaon. The MDI students donated blood. 115 units of blood were collected by LNJP Hospital Team.

? NTWS was invited to participate in a Health Mela organized on 5th Oct to 7th of Oct'07 by an NGO "Kalp Vraksh" in Dwarka Sector-6. The Thalassemic Children Sangeeta, Sonu, Jyoti, Vandana, Bunny & Aishvarya participated actively and enjoyed the Health Mela. They also created lot of awareness among the general public by informing about Thalassemia and how to prevent the disease. The last day of the Mela the children received participating certificates from Kalp Vraksh

NTWS has tied up with Jaipur Golden Hospital Rohini Sec 3 for subsidized Blood Transfusion Services under the guidance of Consultant Paediatrician, Dr. Satish Mangla. Blood will be available from the Hospital itself, only few patients will be registered, so interested Patients from North-West Delhi should act fast and contact Dr. J.S. Arora immediately for early registration.

NTWS TEAM PARTICIPATE - VODAFONE DELHI HALF MARATHON



Mrs. Vandana & Mr. S.K. Gulati helping VDHM Organizer.



Mrs. Vandana Arora thanking Fluor Daniel for Coporate support



Thalassaemia Children out side Appu Ghar



Thalassaemic Children Enjoying at Appu Ghar

National Thalassemia Welfare Society's Particip



Free Thalassemia Clinic at Sunflag Hosp Fdb, 29-07-07

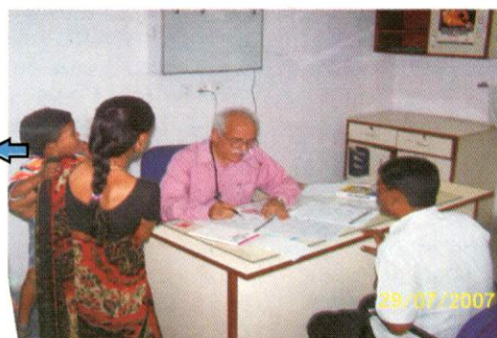


Free Thalassemia Camp organized at Sun Flag Hospital



Dr J.S. Arora examining patients at Sun Flag Hospital

Dr. V.P Choudhry examining patients at Sun Flag Hospital, Faridabad



Dignitaries at dias at inauguration of Lokpriya Thalassemia Welfare Society, Meerut



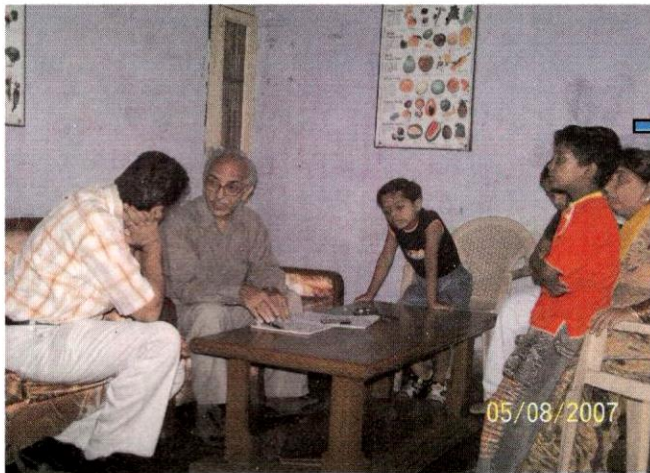
Audience at inauguration of Lokpriya Thalassemia Welfare Society, Meerut

Dr Choudhry examining patients at Meerut

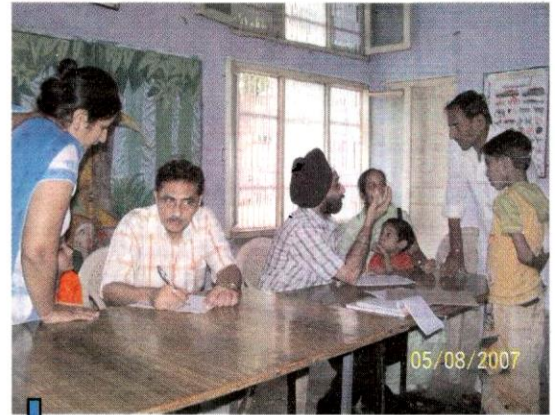


Dr J.S. Arora examining patients at Meerut

ation at Faridabad, Rohtak & Meerut.



Dr Choudhry
examining
patients at
Rohtak



Dr. Pankaj Abrol & Dr J. S. Arora examining
patients at Rohtak Camp on 05-08-07

President
HTWS Mr.
D.B. Sharma
giving
memento to
Dr Choudhry.



HoD
Pediatrics PGI
Rohtak



Blood
Donation camp
Rohtak



Mrs. Mohini of G B Pant Hosp. collecting
samples for free HIV, Hep B & C Tests





TSI Activities



Dr R.K. Srivastva DGHS INDIA, Dr Subhash Solunke WHO representative to Indonesia and Dr J.S. Arora at WHO SEARO - PFPS meet Jakarta



Thalassemic Children and executive of FAT Meeting Mrs. Sonia Gandhi Chairperson UPA

Dr J.S. Arora addressing international community during WHO SEARO PFPS meet at Jakarta Indonesia PFPS



Dr Robin, Dr J.S. Arora, Dr Doris (WHO) and Thalassemic Imaan Mohmad (Maldives)



Left to right Dr Gunawan Indonesia, Dr J.S. Arora, Dr R.K. Shrivastva DGHS India, Dr Zafrulla & Dr Robin from Bangladesh during WHO SEARO PFPS Meet at Jakarta Indonesia

Ms Hughes, head patient safety WHO office London Ms. Rachel Heath Manager PFPS WHO Project London, Dr J.S. Arora & Mrs Savita Luka



Thalassemia Camp at Faridabad held on 29-07-07

Sun Flag Pahuja Centre for Blood Disorders organized a camp for thalassemic children on 29 July 07, in association with National Thalassemia Welfare Society, and Foundation against Thalassemia. It was very well attended. Sixty four children along with parents attended the camp. All these children were examined and screened for Hepatitis B and C and for HIV, along with serum ferritin assay. Fifty four children were given Hepatitis B vaccination. All parents & children were given snacks along with soft drinks and coffee. The expenses on various investigations, vaccination, snacks and necessary arrangements for the camp were born by the Pahuja trust.

Out of 64 children tested 4 were found HIV positive, 10 positive for Hepatitis B and 6 were positive for Hepatitis C. Three children were positive for all three and 1 was positive for both Hepatitis B & C. The ferritin ranges from 170 to 15000 ng/ml with a mean value of 8230 ng/ml.

The camp was organized with the help of team from National Thalassemia Welfare Society led by Dr J S Arora, secretary of the society, team from G B Pant Hospital and team of Dr S S Bansal from Metro Hospital Faridabad. Metro Hospital did Echo of patients with suspected cardiac dysfunction free of cost. Dr V P Choudhry, former prof. and head of Hematology AIIMS, and presently Director SunFlag Pahuja Center for Blood Disorders, requested that all thalassemic children should register with the trust & get the medical care free of cost. Thalassemic children should make full use of his presence. Thalassemia screening program will be initiated with the joint efforts soon. During the function, Shri P B Bhardwaj, Chairman of the hospital, assured that all the possible help for care and control of Thalassemia will be made available in this hospital. Dr Chandra Prakash stressed the partnership of SunFlag Pahuja Centre with various partners like Foundation Against Thalassemia, National Thalassemia Welfare Society, DAV Trust etc. He assured the participants that the trust will do its best to provide care for thalassemia at affordable cost. He further stated that trust will also develop the centre for blood disorders as state of art centre for hematological services. The trust has provided the apheresis unit to strengthen the blood bank services further. He urged the chief guest Mrs. Prasanni Devi, MLA, to use her good office to help the hospital for getting permission for holding blood donation camps and permission to initiate the apheresis unit at the earliest.

Mrs. Prasanni Devi highly appreciated the work being done by the trust. She assured the participants that she will take the matter to the CM and other authorities for all possible help. She donated a sum of Rs. 11000/- for benefit of thalassemic children.

The trust during the function facilitated Mr. K L Khurana, Dr J S Arora & Mr. Ravinder Dudeja for their lifelong dedication and commitment for the cause of thalassemia.

Foundation Against Thalassemia, Faridabad. Activity Report

On 28.06.2007, 27 children belonging to Foundation Against Thalassemia, Faridabad accompanied by Dr. N.K. Pandey Executive Director Fortis Escorts Hospital Faridabad, Dr. Aryavir Bhalla from Manav Rachna Educational Institutions, Mr. Parveen Choudhary from SPL Industries spent some happy moments with Ms. Sonia Gandhi at her residence 10 Jan path, New Delhi. The excitement among the children about Mrs. Gandhi was palpable as they waited patiently with roses in their hands and smile on lips. After welcoming her with flowers the children rushed to grab the autographs and get their pictures clicked with Ms. Sonia Gandhi. Some even bent down to touch her feet and take her blessings. Autograph was given by Smt. Sonia Gandhi on memento. As Foundation give memento to their helping hands, persons who motivate people to donate blood and blood donors with written message '**Share Life Donate Blood**'. Smt. Gandhi gave best wishes to all the children by gifting rose buds to each one. Master Tushar, a Thalassaemic child sang a song, Mrs. Gandhi joined by singing song with Tushar. It was requested by Ravinder Dudeja Gen. Sect. Foundation Against Thalassemia that these Thalassemics children should be given special status like handicapped children to improve their education and employment prospects and arrange medicines for the sufferer. On this, Ms. Gandhi assured that she will personally look into the matter and give necessary directions.

Mrs. Gandhi was very happy seeing a poster made by A Thalassemics child Vishal '**Don't become Batman to save life - Donate Blood and Save Lives**'. a blood donation camp was organized by Foundation Against Thalassemia in association with Rotary Club Faridabad Central at Police Line sector 30 on 1st April 2007. This was the first blood donation camp at Police Line. As police duty is to save the lives of general public by maintaining law and order in the real life they came forward to save the lives of Thalassemics by donating blood and also promised to donate blood whenever required.

On this occasion Faridabad SSP Mr Alok Mittal was present to motivate Police men to donate blood for a noble cause. Councilors Ms Renu Bhatia & Seema Trikha were also present.

Bareilly

Bareilly Society for Care and Control of Thalassemial, organized a Blood Donation camp at IMA Blood bank on 13th April 2007. Dr. S.K. Sardana & Dr. I.J. Sardana arranged serum ferritin assay of all the patients through NTWS.

ACTIVITY REPORT OF THALASSAEMIA SOCIETY OF INDIA KOLKATA FOR THE MONTH OF OCT 2007

SARODIYA FESTIVAL ORGANISED BY TSI

Thalassemia Society Of India like every year organized Sarodiya festival on 13.10.2007 at TSI's Treatment Centre (48 A Mukhtaram Babu Street, Kolkata- 7). Among other activities, the meritorious Thalassaemic patients, who have successfully passed Secondary, Higher Secondary or Graduation, were felicitated in this function. This year 15 such patients have earned this distinction. The atmosphere was filled with applause and the audience made all effort to cheer up the children. Clubs, who have been helping the cause by organizing blood donation camps, were also felicitated. These clubs helped to collect 6540 units of blood through out the year. Bhairab Ganguly College, Madhakul Netaji Seba Kendra, Jadavpur University- faculty of Engineering and Technology respectively earned the distinction of conducting the 1st, 2nd and 3rd highest collecting blood camps. The function was attended by Deputy director- Department of Health, Mr. S. C. Mondol- DRM- Eastern Railway, Officer- In- Charge- Jorasako Thana, Mr. Bijoy Upadhyay- President- Amar Singh Fans Association. Mr. Tapas Sengupta- secretary of TSI delivered a brief speech on the activities of the organization. All the dignitaries who were present at the function vowed to fight against this dreaded illness. The members of Inner Wheel Club made the kind gesture by distributing cloths to the Thalassaemic children.

ACTIVITY REPORT OF THALASSAEMIA SOCIETY OF INDIA (TSI) FOR THE MONTH OF SEPTEMBER 2007

Thalassaemia Society Of India (TSI) has organized 10 Blood Donation camps where 748 units of Blood were collected. Following is the detailed list of the program:

<u>Date</u>	<u>Club/ Association</u>	<u>No. of Units</u>
02-09-07	Godi Bagur Hatath Sangha Bagur, Sabsit, Bangur, Howrah	80
09-09-07	Vivekananda Club, Seoraphully, Hoogly	80
10-09-07	Subhash Uddayan Unnayan Samiti Dr. Meghnad Saha Road, Panihati 24 pgs(South)	70
16- 09-07	Singur Yuva Sangha, Singur, Jalagha, Hooghly	100
16-09-07	Soma Samriti Raksha Committee Kalikapur, 24 Pgs (south)	61
22-09-07	Seva sangha, 48 Kadamtala, Howrah- 1	80
23-09-07	D.Y.F.I, Champahati, 24 pgs(S)	100
28-09-07	Jadavpur University Staff Recruitment Club, Salt Lake Campus, Kolkata- 32	50
30-09-07	Dhamua Keshab Bandhu Samity	47
30-09-07	Tarun Sangha, Salkia, Howrah Dhamua, 24 pgs (South)	80
Total number of patients received Blood transfusion at our treatment centre:		213
Total number of Blood units transfused to the patient:		287
Total number of Blood transfusion with IV Chelation:		70
Total number of IV Chelation:		25
Total number of Hb. Testing done		250
Total number of TC/ DC/ Platelete testing:		250
Liver Function Test:		30



Members of Inner Wheel Club distributing toys to the patients

EMERGENCY BLOOD DONATION CAMPS ORGANISED BY TSI TO MEET UP SCARCITY

Due to acute scarcity of Blood in all the Blood Banks, Thalassaemia Society Of India took the initiative to arrange Blood donation camps to ensure regular treatment for the patients. The camp was organized at the treatment Centre of TSI. The camp started from 22nd October and will last till 10th November 2007. Till date TSI has organized about 150 donors. We all hope this endeavor on part of Thalassaemia Society Of India will be able to meet up the gap of scarcity of Blood. We are pleased to inform you that Thalassaemia Society Of India (TSI) has organized 9 Blood Donation camps where 800 units of Blood were collected. Following are the detailed list of the program:

Date	Club/ Association	No. of Units
02-10-07	Vivekananda Pallyshree Samiti(New)	100
	P.O- Bijonagar(S) 24pgs(S)	
06-10-07	Sakti sangha, Michel nagar, 24 pgs(N)	100
07-10-07	Keshab Bandhu Samity, K. D. Naskar	
	Dhamua, 24 pgs(S)	100
14-10-07	Seva Sangha, 48 Kadamtala, Howrah	80
16-10-07	Kishore Sangha, Sheoraphully, Hooghly	80
22-10-07	D.Y.F.I, Singur Bazar, Hooghly.	80
24-10-07	Krishti Sangha, Michelnagar, 24 pgs(S)	80
28-10-07	Dhamua Keshab Bandhu Samity	
	Tarun Sangha, Salkia, Howrah	80
	Dhamua, 24 pgs (South)	
28-10-07	Nebula, Nadia	100
Total number of patients received Blood transfusion at our treatment centre:		183
Total number of Blood units transfused to the patient:		212
Total number of Blood transfusion with IV Chelation:		60
Total number of IV Chelation :		5
Total number of Hb. Testing done:		202
Total number of TC/ DC/ Platelete testing:		75

THE HEMATOLOGY FOUNDATION - WORLD THALASSAEMIA DAY 8th. May 2007

The Hematology Foundation observed World Thalassaemia Day on 8th. May 2007 by organizing a Talassaemia Awareness Programme, at Kolkata Press Club in presence of a few Special Guests, Representatives from various Media, Members & Children of the Foundation and others. The thrust of the programme was on the difficulties in continuing treatment and to prevent Thalassaemia. In the welcome address, Mr. S. Mitra, the Honorary Secretary of the Foundation highlighted most of the Issues. Dr. (Mrs.) S. Chandra, Chief Advisor of the Foundation greeted the children, who in spite of various difficulties are having the mental strength to build up the professional career. She also spoke how simple is to prevent thalassemia. The Foundation released its first issue of quarterly NEWS Letter on this day through the hands of Dr. (Mrs.) Chandra. Dr. P. Nandy, Executive Committee Member of the Foundation, highlighted the main purpose as to have an effective communication system amongst the members, associates and others as well as to ensure a transparency about the working of the Foundation. This will also give the opportunity to express the talents of our thalassaemic children, 24 adult thalassaemics between age group 16 to 36 were greeted with an appreciation certificate and a gift for Their excellent performance in academic/professional career and as a matter of encouragement for further progress in life.

Dr. Srabanti Bhattacharya (33), M.Sc. & Phd in Geography and working as Lecturer in a reputed College at Kolkata and Sri Subhojit Biswas (34) a Computer Specialist having his business of Printing Press with DTP / Digital Printing etc, two of our thalassaemics, spoke on the occasion highlighting about difficulties in not having proper infrastructure for required treatment in this part of the country and need of Thalassaemia Awareness for Prevention. Mrs. Sanchita Ghosh, Branch manager of Concern India Foundation (NGO) Kolkata Office, who was present as a special guest. spoke about the ideal help received from a specialist like Dr. (Mrs.) Chandra, which she came to know during her interaction with the Foundation in providing the necessary support to update Foundation's Pathological Laboratory. Mr. Washim Kapoor, a renowned painter & artist, who was also present as a special guest, encouraged the Foundation for its activities for the cause of humanity. Dr. Chandra and all other special guests were honoured each with a Memento from the Foundation. Mr. U. B. Chatterjee, President of the Foundation finally thanks all present on the occasion and the encouragement provided to the Foundation. In his concluding speech, he also highlighted the role of State Government & other socially minded organizations for providing the required infrastructure for thalassaemia treatment and to bring proper awareness about thalassaemia and its prevention. The programme was appropriately covered by Media.

“West Bengal Voluntary Blood Donor's Forum”

On International Thalassemia Day 8th May 2007 a Seminar was organized by “West Bengal Voluntary Blood Donor's Forum” in the presence of State Minister and eminent physicians & on same day they organized Blood Donation Camp and distributed medicines to the Thalassemics undergoing treatment at IBTMI. WBVBDA also arranged meeting at Swastha Bhawan, the Head Quarter of Ministry of Health & family Welfare, Government of West Bengal and distributed IEC materials to the participants. In the evening an open meeting was organised at Barasat, the Head Quarter of their Organization in the presence of the Political Parties, Councilors, Marriage Registrar, Priests and Moulavi making much aware to the gathering about the efficacy of H.P.L.C. for the detection of Thalassemia Carrier. They have also organized a State Level Quiz Contest, which was broadcast by All India Radio & Telecast a LIVE T.V. Programme on Thalassemia Awareness.

थैलासिमिया बच्चों का जन्मदिन मनाया

अजमेर रीजन थैलासिमिया वैलफेयर सोसाइटी के तत्वाधान में 8 मई को बिरला सिटी वाटर पार्क में अन्तर्राष्ट्रीय थैलासिमिया दिवस पर सोसाइटी के अन्तर्गत रजिस्टर्ड 71 बच्चों का सामूहिक जन्म दिवस केक, काट कर मनाया गया समारोह के मुख्य अतिथि हनुमान सिंह भाटी व अतिरिक्त संभागीय आयुक्त ने अध्यक्षता की मुख्य अतिथि एवं पवन कुमार जैन विशिष्ट अतिथि का माल्यार्पण राजेश मंगवानी, अशोक सैन, इशरत अली एवं श्रीमती सतनाम कौर जैठानन्द मलुकानी एवं जगदीश चैलानी के द्वारा किया गया सोसायटी के महामंत्री ईश्वर परवानी ने बताया कि इस अवसर पर 71 बच्चों द्वारा हनुमान सिंह भाटी के साथ केक काट काटकर सामूहिक जन्म दिवस मनाया गया ! इस अवसर पर पवन कुमार जैन विशिष्ट अतिथि के द्वारा थैलासिमिया बच्चों की हर संभव आर्थिक मदद करने का आश्वासन दिया समारोह का समापन महामंत्री के द्वारा समस्त आगन्तुकों के आने का आभार व्यक्त करते हुए हुआ ! पारवानी के अनुसार वर्ष 2007-08 को स्वास्थ्य केयर वर्ष के रूप में मनाया जाएगा इसके अन्तर्गत समस्त बच्चों को दीर्घ आयु बनाने हेतु समय पर लोह कण विसर्जन कराने हेतु कैल्फर कैप्सूल एवं डैस्फराल इन्जेक्शन लगाया जाना अनिवार्य होगा साथ ही बच्चों की प्रत्येक तीन माह में सिरम फेरिटिन टेस्ट, सी.बी.सी. टेस्ट, ई.सी.जी. टेस्ट कलरडोपलर सोनोग्राफी कराना अनिवार्य होगा ! साथ ही एच.आई.वी. टेस्ट, थाईराईड टेस्ट, तथा अन्य आवश्यक टेस्ट प्रतिवर्ष एक बार कराना अनिवार्य होगा बच्चों की निरन्तर काउन्सिलिंग सोसायटी के माध्यम से कराई जाएगी साथ ही विश्व प्रसिद्ध शिशु रोग विशेषज्ञों के द्वारा बच्चों के स्वास्थ्य की गहन जांच कराई जाएगी ताकि बच्चों को गंभीर बीमारियों से बचाया जा सके एवं बच्चों की उम्र 50 वर्ष से अधिक की जा सके ! समस्त बच्चों के परिचय पत्र बनावाए गए। सांस्कृतिक कार्यक्रम के अन्तर्गत हितेश मलुकानी एवं सनप्रीत सिंह द्वारा कश्मिक के गीत पर डांस प्रस्तुत कर सबका मन मोह लिया कुमारी दीपिका अरोड़ा ने फना के गीत पर मनमोहक नृत्य प्रस्तुत किया! हर्षित भट्ट द्वारा राष्ट्र प्रेम की कविता सुनाई गई। कुमारी संजना मंगवानी द्वारा जैक एण्ड जिल अग्रेजी पोयम सुनाई गई। समस्त बच्चों को भोजन एवं स्वादिष्ट व्यंजन परोसे गए। बच्चों व अभिभावकों ने दो से पाँच बजे तक जल क्रीडा व झूलो का भरपूर आनन्द लिया।

थैलासिमिया सोसायटी कोटा थैलासिमिया जागरूकता (बचाव एवं उपचार) दो दिवसीय संगोष्ठी

थैलासिमिया सोसायटी कोटा एवं रोटरी क्लब कोटा के संयुक्त तत्वाधान में 1 व 2 सितम्बर 2007 को आयोजित हुई। थैलासिमिया सोसायटी के सचिव सुनील जैन बताया कि 1 सितम्बर शनिवार को डॉ. वी.पी. चौधरी ने जे.डी.बी. गर्ल्स कॉलेज में सवेरे 10 बजे से उपरोक्त विषय पर छात्राओं को व्याख्यान दिया जिसकी छात्राओं ने बड़े ध्यान से सुना और थैलासिमिया माइनर अगर ब्लड डोनेट करता है तो वो ब्लड जिसको चढेगा उसको भी थैलासिमिया होगा या नहीं इत्यादि 10-12 प्रश्न पूछे गये जिनका डॉ. चौधरी ने बहुत सहजता से जवाब दिया। कॉलेज उपाचार्य ने डॉ. चौधरी का स्वागत किया दिन में 1 बजे मोदी गर्ल्स कॉलेज में चेतना सी.डी. दिखाई गई उसके बाद डॉ. चौधरी का व्याख्यान हुआ जिससे छात्राओं ने शादी से पूर्व रक्त जांच करवाने में सहमति जताई। दिन में 3.00 बजे NGO's को सम्बोधित करते हुए डॉ. चौधरी ने थैलासिमिया रोग में NGO's के रोल पर प्रकाश डाला। लगभग 80-100 NGO's सहित 200 लोगों ने कार्यक्रम को सुना। इससे पूर्व रोटरी क्लब अध्यक्ष अनिल मुंदडा, सचिव सुरेश जैन एवं थैलासिमिया सोसायटी अध्यक्ष डॉ. ए. पी. गुप्ता एवं सचिव सुनील जैन ने डॉ. वी.पी. चौधरी का अभिनन्दन किया। रविवार 2 सितम्बर को डॉ. वी.पी. चौधरी एवं डॉ. जे.एस. अरोड़ा ने प्रातः 9 बजे से रोटरी क्लब भवन में थैलासिमिया रोगी बच्चों का परीक्षण किया 11 बजे खुली वार्ता में दोनों चिकित्सकों ने परिजनो को सम्बोधित किया। दिन में 2 बजे लंच के समय पत्रकार वार्ता में थैलासिमिया की रोकथाम में मीडिया के अहम रोग की बात बताई। शादी से पूर्व रक्त की जांच आवश्यकता पर जोर दिया। डॉ. वी.पी. चौधरी एवं डॉ. जे.एस. अरोड़ा ने शाम 7 बजे तक 75 बच्चों को देखा एवं आवश्यकतानुसार कैल्फर डैस्फेराल एवं अन्य जांच की आवश्यकता बताई। थैलासिमिया सोसायटी उपाध्यक्ष नवीन तोतलानी एवं संयुक्त सचिव राजीव पाण्डे एवं राकेश जैन ने दोनों अतिथियों को स्मृति चिन्ह भेंट किये।

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the queries after
viewing Chetna to the
students of Bal Bharti
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Reema psychiatrist at
BBS



Dr J.S. arora
apprised
Mr Kapil Dev
About Thalassemia



NTWS camp at Vikas puri

NTWS volunteer
Gagan explaining
about thalassemia at
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