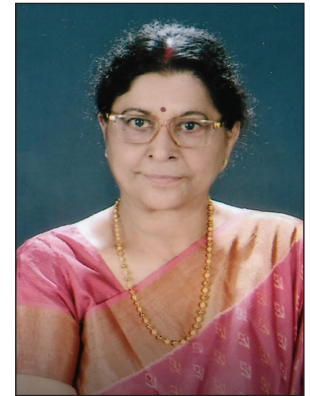


## President's Speech



**Dr. Usha Sharma**  
**President, 2020-22**

Chief Guest: Dr. Manju Gita Mishra  
President of ISOPARB: Dr. Suchitra Pandit  
Guest of Honour: Dr. Kamal Bakshi &  
Dr. Vandana Walvekar  
Organizing Chairperson: Dr. S.N. Tripathi  
Secretary General: Dr. Meena Samant  
Guest Speaker: Dr. Santosh J. Karmakar

Senior Members of ISOPARB and Friends,

At the outset, I thank the almighty by whose grace we have all joined webinar for ISOPARB Midterm National Conference 2020.

Thank you all for entrusting me to lead ISOPARB from 2020 to 2022.

ISOPARB was formed in 1978 by stalwarts of our country, Late Prof. G. Achari, Late Prof. Kamala Achari, from Patna and Late Dr. (Professor) Tarun Banerjee, Professor K.M. Gun, from Kolkata with a handful of members. My senior predecessors have nurtured ISOPARB with their dedicated good work in the past. Today we have 2445 members and 26 city chapters.

I hope 2021 will be a landmark year for progress and growth of ISOPARB.

Our progress in acquiring recent advancement in prevention, diagnosis and treatment in the field of perinatology will continue with our regular clinical meetings, CME Programs, workshops and awareness camps. Our services to adolescent girls, women and children will be rendered by free medical camps in city and villages alike.

### **Our theme for 2020-22 is “Say No to Birth Defects”**

As per World Health Organization (2016) an estimated 303,000 newborns die within 4 weeks of birth globally due to congenital anomalies. This figure has not changed much since then. Congenital anomalies contribute to long term disability which may have significant impact on individuals, families, healthcare system, societies and the country, so we will focus on ways for reducing birth defects.

Obstetricians, Neonatologists play a vital role in preventing and managing birth defects.

### **Our Strategy –**

Mass educational campaigns –

- Family planning strategies, reproduction before 35 years
- Avoidable risk factors of birth defects
- Preconception, prenatal & neonatal care

Preventive strategies

- Folic acid supplementation
- Rubella Vaccination
- Restrict alcohol consumption
- Avoidance of teratogenic medications

Parental guidance

- Organisations which provide rehabilitatory support to such children
- Psychological support to parents and child with birth defects

Providing best medical care

- Medical
- Surgical

Provision of genetic screening

- Cost effective
- sensitive, easily available programmes

Epidemiological Data collection

- Extent of the problem
- Intervention priorities

## **Preconception Counseling**

Preconception counseling involves education, risk assessment and intervention before pregnancy to reduce the chances of poor perinatal outcomes.

Preconception care often remains neglected owing to multiple reasons such as lack of understanding and acceptance of objectives of preconception care, secrecy about pregnancy planning, lack of prevailing culture of 'preparing for pregnancy', and unawareness about realities of unplanned pregnancies. This results in negligence towards preconception risk assessment, family planning and preconception care. Thus, benefits of preconception care remain unrecognized in India.

To improve preconception care in India and bridge the gap in preconception care and poor neonatal outcome, it is essential to inculcate healthcare precautionary measures in adolescents and emphasis should be given to antenatal care. Following measures could help in improving preconception care in India.

- Information on preconception health should be made widely available particularly in schools and family planning clinics
- More provisions should be made for preconception assessment or care from any health professional
- Preconception health should be promoted more routinely in a positive way even in women who are not immediately planning pregnancy. Importance of preconception health should be taught to all the women once they reach reproductive age

- Men should also be actively involved in preconception care and counselling as their health is an equally important determinant of neonatal well-being
- Access to GPs should be enhanced, particularly for young people and women who are less disposed to seeing their GP/ male practitioners

Frequent awareness camps across all cities and villages of India regarding prevention, detection and treatment of congenital anomalies which will help in reducing the numbers of birth of abnormal babies. This will result in healthy babies and healthy future India.

We will join hands with other organizations to conduct programs all over India.

This year ISOPARB is blessed with a galaxy of dynamic and dedicated office bearers. Our four Vice Presidents Dr. Sulekha Pandey, Dr. Shashi Kala Kola, Dr. Saswati Sanyal Choudhury and Dr. Parul Kotadawala will play an important role in all activities of ISOPARB.

Secretary General Dr. Meena Samant and Treasurer Dr. Pragya Mishra Choudhary with all the office bearers and all ISOPARB members will work together to best of their capabilities for progress and growth of ISOPARB.

Journal of ISOPARB is the mirror of the society. It is our pride that IJOPARB is an indexed journal since 2017, under the able leadership of Professor Hiralal Konar. We need to improve the quality of the Journal further and we need to go with other indexing agencies. Our work is on.

I quote Henry Ford – *Coming Together is Beginning, Keeping Together is Progress and Working Together is Success.*

I request all ISOPARB members to make at least one new member which will enable us to have a robust ISOPARB 2021. Once the numbers of ISOPARB members doubles, joins hands together for ISOPARB activities then we will definitely achieve success in all our pursuits.

JAI HIND

Long Live ISOPARB

Dr. Usha Sharma