



IAPSM - PUBLIC HEALTH INFOGRAPHICS (IPHI)



Graphic-e-Health



Edition: 1



Issue: 4



**March
2025**



THEME

**CANCER AWARENESS
UNITED BY UNIQUES**

IPHI TEAM:

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Dr. Annarao Kulkarni

Co-Chairperson

Dr. Krupal Joshi

Chief Coordinator

Dr. Krishna Jasani

Assistant Coordinators

Dr. Kushant Bhatt

Dr. Nanda Kumar

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**Maj Gen (Dr, Prof) Atul
Kotwal**

President Elect

Dr. Annarao Kulkarni

Immediate Past President

Dr. Manish Singh

Secretary General

CONTACT US



iapsminfographics.iphi@gmail.com



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Dr. Monesh





CANCER AWARENESS

#UNITED BY UNIQUE

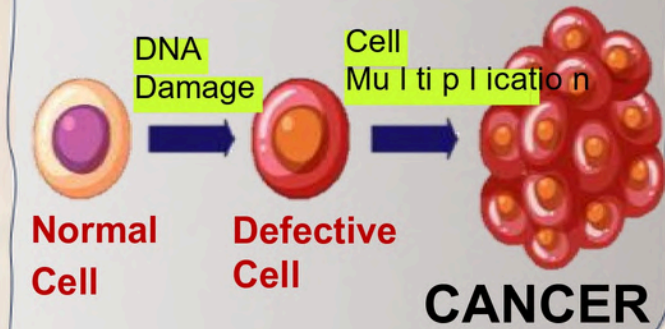
Together we will beat cancer

FIGHT

WHAT IS CANCER?

Cancer is a disease that occurs when changes in a group of normal cells within the body lead to uncontrolled, abnormal growth.

PROCESS OF DEVELOPMENT



GLOBAL CANCER BURDEN

By 2030, annual global cancer cases are expected to reach 30 million.

Incidence

Cases 19,976,499 ASR (World) 196.9

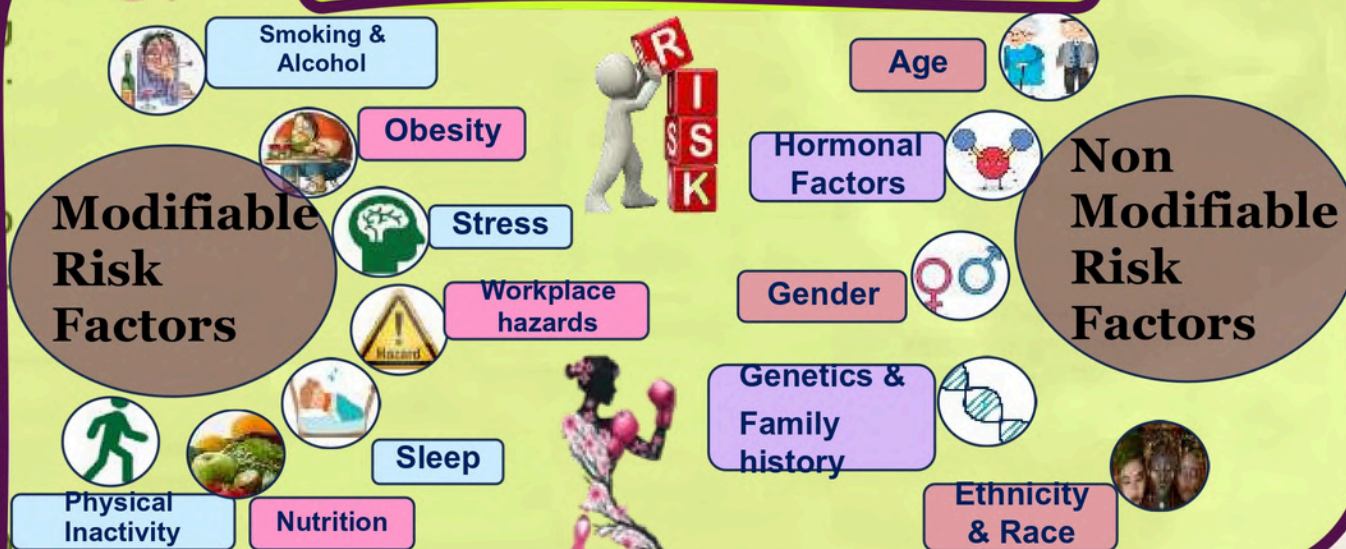
Mortality

Deaths 9,743,832 ASR (World) 91.7

- **New Cancer Cases (2024): ~20 million**
- **Cancer Deaths (2024): ~9.7 million**
- **Lifetime Risk:** 1 in 5 people will develop cancer in their lifetime
- **Most Common Cancers:**
 - **Lung Cancer**—Leading cause of cancer death (~1.8 million deaths/year)
 - **Breast Cancer**—Most diagnosed cancer (~2.3 million cases/year)
 - **Colorectal Cancer**—Third most common (~1.9 million cases/year)
 - **Prostate Cancer**—Fourth most common (~1.5 million cases/year)
 - **Liver & Stomach Cancer**—~1.4 million cases combined

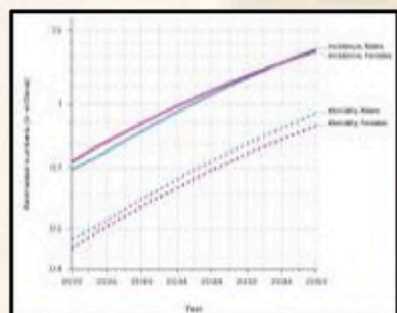
Cancer deaths could surpass 13 million/year if urgent preventive measures are not implemented.

RISK FACTORS

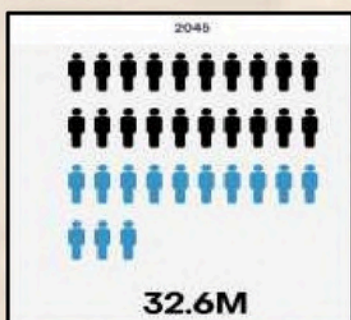


Survival Rates & Early Detection Impact

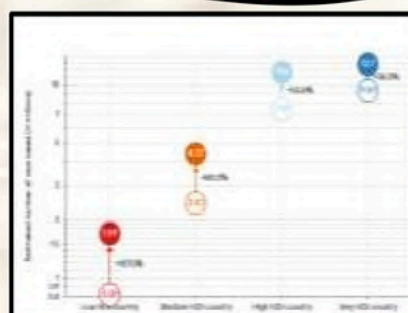
- Early detection = **90%** survival (for breast, cervical, colorectal cancers).
- Late-stage diagnosis = **<30%** survival (especially for lung and pancreatic cancers).
- **Screening & Vaccination Impact:**
 - HPV vaccine can prevent >90% of cervical cancers.
 - Colorectal cancer screening can prevent up to 60% of cases.



Estimated numbers from 2022 to 2050, Males and Females, age [0-85+] India



Estimated number of new cases from 2022 to 2045, Both sexes, age [0-85+] All cancers, World



Estimated number of new cases from 2022 to 2045, Both sexes, age [0-85+], All cancers

50% of all cancers are preventable through lifestyle changes, vaccination, and early screening.



Increasing public awareness, research funding, and healthcare accessibility can save millions of lives.

Dr. NILUFAR MONDAL, PG2
GMC, Bhopal

Global Cancer Observatory
A to Z List of Cancer Types -NCI
"United by Unique", the new World Cancer Day theme 2025-2027 | World Cancer Day



TEAM IPHI

Chief Coordinator-Dr. Krishna Jasani

Assistant Coordinators

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Dr. Nanda Kumar
Dr. Nidhi Patel
Dr. Ramakrishnan

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Dr. Annarao Kulkarni

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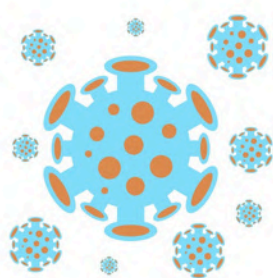
Dr. Krupal Joshi

Let's prevent CERVICAL CANCER



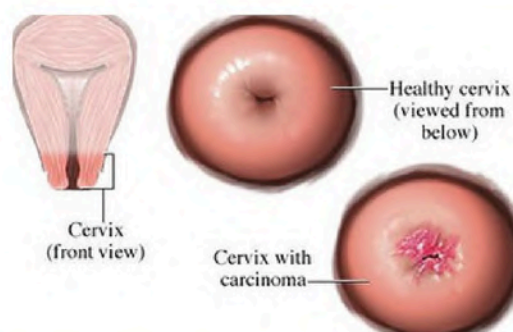
Why?

Because it's the second most common cancer in women worldwide and a number one killer disease for women in India.

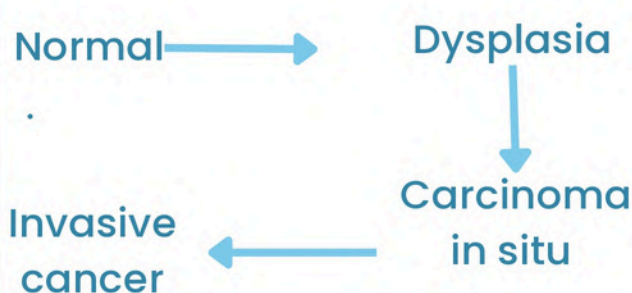


Major Risk

Persistent infection with high-risk **HPV** (Human Papillomavirus) strains



Progression of disease



Normal cervix



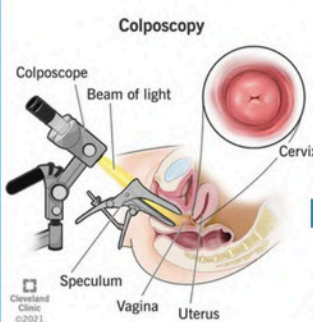
Cervical dysplasia



Signs & Symptoms

- Bleeding between menstrual periods
- Bleeding after sexual intercourse
- Bleeding after a woman has attained menopause.
- Unusual blood stained vaginal discharge
- Unexplained weakness / tiredness / weight loss

Prevention



Screening:

- Age: 30+ years, every 5-10 years
- For HIV patients: 25+ years, every 3 years

- *Methods:* Pap smear, HPV test VIA, VILI, colposcopy

Vaccines

- Available in India : **GARDASIL-9**
CERVAVAC
- For ages: 9-26, can be taken until 45 years
- Dosage: 9-14 years- 2 doses
15+ years - 3 doses



Early screening= early diagnosis= better prognosis !

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Dr. Ramakrishnan

IPHI TEAM



Created by -Dr Kathankini Chandrapal

Post graduate Resident

PDUMC, Rajkot

Source of information:

<https://www.who.int/news-room/fact-sheets/detail/cervical-cancer>



Cervical Cancer: A Preventable Global Challenge

WHO'S MISSION TO ELIMINATE CERVICAL CANCER BY 2030

The Global Burden



A Deadly Inequality

- 4th most common cancer in women worldwide
- 660,000 new cases in 2022
- 350,000 deaths in 2022
- 94% of deaths in low- and middle-income countries

Source- WHO Fact Sheet, March 5, 2024

HPV: The Root of the Problem

- 95% of cases caused by persistent HPV infection
- High-risk HPV types (e.g., 16, 18) are sexually transmitted

Source- WHO Cervical Cancer Overview

The Cause



WHO's Elimination Strategy



The 90-70-90 Targets by 2030

- 90% of girls vaccinated against HPV by age 15
- 70% of women screened with a high-performance test by ages 35 and 45
- 90% of women with cervical disease treated.

Source- WHO Global Strategy, November 2020

How We Fight Back

- HPV Vaccination: Prevents 70% of cases
- Screening: Pap smear, HPV testing, VIA/VILI
- Self-sampling: Boosts access
- Treatment: Simple procedures for precancer, care for invasive cancer

Source- WHO Guidelines, July 2021

Prevention Tools



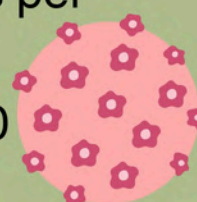
Impact Goals



A Future Without Cervical Cancer

- Reduce incidence to <4 cases per 100,000 women
- Avert 74 million cases by 2120
- Save 62 million lives by 2120

Source- WHO Modeling Estimates, 2020



Join the Fight – Get Vaccinated, Screened and Treated Today!

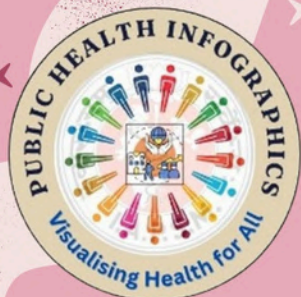
Created by
Dr. Shivani S S and Dr. Noronha Levis Manuel
2nd Year
Post Graduate Resident
Community Medicine
St Johns Medical College

IPHI Team:



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Co-Chairperson-Dr. Krupal Joshi
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UNITED IN DIVERSITY, STRONGER AGAINST CANCER

#WorldCancerDay2025-2027
#UnitedByUnique



CANCER FACTS

By 2040, experts predict that new cancer cases will top **30 million** if we don't act.



1 OUT OF 5

PEOPLE WILL DEVELOP CANCER DURING THEIR LIVES



IN 2022, THERE WERE AROUND
20 MILLION
NEW CANCER CASES &
CLAIMED 9.7 MILLION LIVES

ANNUAL ECONOMIC IMPACT OF COST OF CANCER CARE IS

\$1 TRILLION



CALL GOVERNMENTS, ORGANISATIONS, AND INSTITUTIONS WITH THE POWER TO **SUPPORT, IMPLEMENT, AND SUSTAINABLY FINANCE AND TAKE URGENT ACTION-**



EMPOWER PEOPLE, FAMILIES, AND COMMUNITIES IN CANCER CARE

RECONFIGURE HEALTH SYSTEMS FOR A PEOPLE-FOCUSED APPROACH



EDUCATE AND ENGAGE THE HEALTH WORKFORCE ON PEOPLE-FOCUSED CARE

ASSESS AND UPDATE CURRENT CANCER CARE PRACTICES



FOCUS ON EQUITABLE ACCESS AND HIGH-QUALITY CARE FOR ALL

TAKING ACTION: STARTING SMALL

It begins with awareness.

EVERY VIEW, EVERY PERSPECTIVE, AND EVERY STORY COUNTS.

WHAT CAN I DO?

- Join the action at worldcancerday.org/map-activities.
- Translate materials- Sign up by emailing hello@worldcancerday.org.
- Participate in the "upside down challenge" at worldcancerday.org/upsidedown-challenge.

TRANSFORMING CANCER CARE: INDIA'S NEW APPROACHES



Establishment of 200 **Daycare Cancer Centres** #



Affordable cancer care-Union Budget 2025-26 emphasizes strengthening cancer care with initiatives like **customs duty exemptions** on life-saving drugs *

Many organizations are hosting online events, including **awareness talks** and interactive sessions @

Policy Reforms to Boost Clinical Trials

Corporate Social Responsibility (CSR) Initiatives^

Budget 2025: Cancer care centres to be established in all Indian districts. Retrieved from [India Today](#). *Ministry of Health and Family Welfare (MoHFW), Government of India. (2025). Press Release on Cancer Care Initiatives. Retrieved from [MoHFW](#) ^Free Press Journal. (2025, February 4). Mumbai MOC Cancer Care Centre receives Triumph Over Cancer painting from Merck India under Art Against Cancer Initiative. @Express India (2025, February 4). World Cancer Day 2025: Transforming Cancer Care in India.

World Cancer Day. (2025). World Cancer Day 2025: Action Toolkit. Union for International Cancer Control (UICC). Available from: <https://www.worldcancerday.org/materials>

Created by:

Dr. Deepika Bishnoi

MD Community Medicine,
HBTMC & Dr. R. N. Cooper Hospital,
Juhu, Mumbai

Team IPHI

Chairperson-
Dr. Annarao Kulkarni

Co - Chairperson-
Dr. Krupal Joshi



Chief Coordinator-
Dr. Krishna Jasani

Assistant Coordinators-
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BREAST CANCER AWARENESS

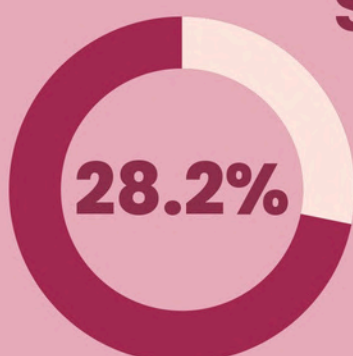


BREAST CANCER FACTS

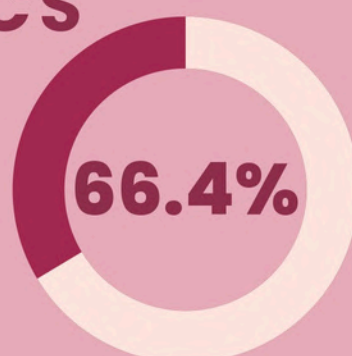
- Breast cancer caused 670 000 deaths globally in 2022.
- Roughly half of all breast cancers occur in women with no specific risk factors other than sex and age.
- Breast cancer was the most common cancer in women in 157 countries out of 185 in 2022.
- Breast cancer occurs in every country in the world.
- Approximately 0.5–1% of breast cancers occur in men.



STATISTICS



Breast Cancer accounts for 28.2% of all female cancers



According to recent studies, the 5-year age-standardized relative survival rate for breast cancer in India is around 66.4%, with significant variation across age groups, with younger women generally having slightly lower survival rates compared to older women



Prevention of breast cancer



RISK FACTORS

Family History

- Having a family history of breast cancer or other cancers increases the risk
- Inherited gene mutations, like BRCA1 and BRCA2, can increase the risk

Lifestyle factors

- Being overweight or obese can increase the risk
- Drinking alcohol can increase the risk
- Smoking can increase the risk
- Being physically inactive can increase the risk
- Exposure to ionizing radiation can increase the risk
- Taking certain hormone therapies can increase the risk

Age

- The risk of breast cancer increases with age, especially after age 40

Other factors

- Having dense breast tissue
- Having a personal history of breast cancer or benign breast disease
- Having certain genetic conditions

Created by:-Dr Pratibha Singh
PG Resident, Dept of Community
Medicine
S N Medical College, Agra

IPHI TEAM

Chief coordinator
Dr Krishna Jasani

Chairperson
Dr Annarao Kulkarni

Assistant Coordinators

Dr Kushant Bhatt
Dr Nanda Kumar
Dr Nidhi Patel
Dr Ramakrishnan

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Source of
Information: <https://www.who.int/news-room/fact-sheets/detail/breast-cancer>



Most common cause of cancer death, mainly due to carcinogenic effects of cigarette smoke viz. polycyclic aromatic hydrocarbons.

STATISTICS



IN INDIA, 1 IN 5 HEAVY SMOKERS COULD DEVELOP LUNG CANCER

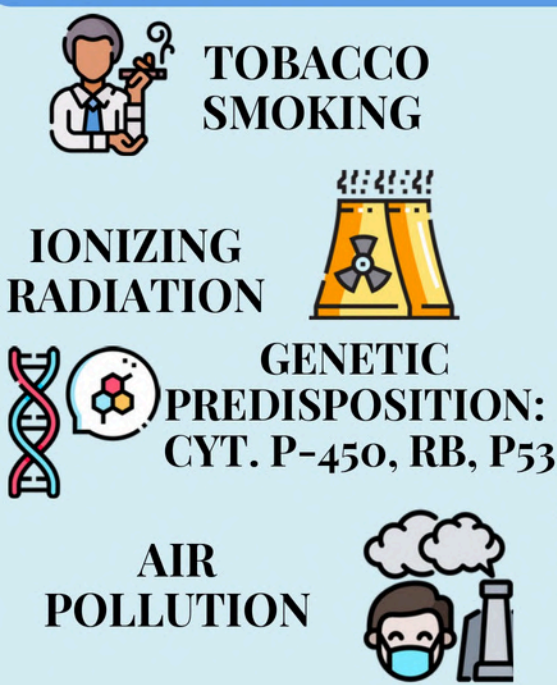
small cell lung cancer (SCLC)

- HIGHLY METASTATIC
- HIGH RESPONSE TO CHEMOTHERAPY

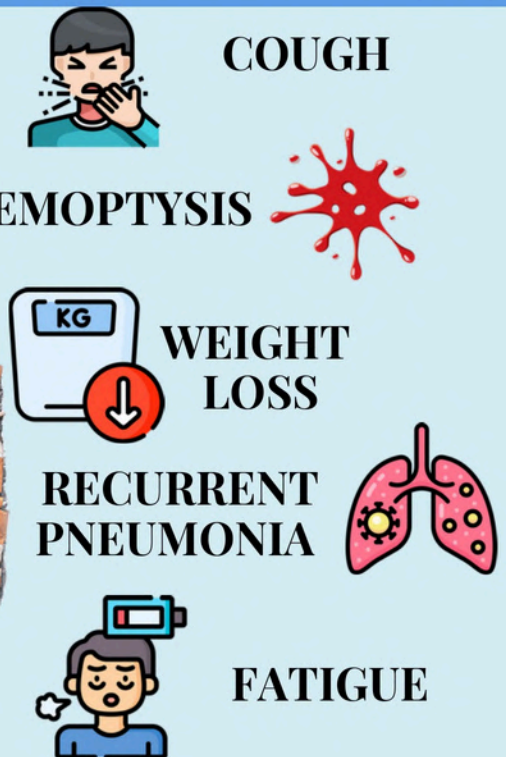
non-small cell lung cancer (NSCLC)

- MOST COMMON IN INDIA
- DETECTED AT LATER STAGES
- LESS METASTATIC
- LESS RESPONSIVE

RISK FACTORS



CLINICAL FEATURES



Diagnosis

CHEST X-RAY, CT SCAN, PET SCAN
 BIOPSY: BRONCHOSCOPY, PERCUTANEOUS ASPIRATION
 CYTOLOGY: SPUTUM, BRONCHIAL BRUSHINGS & WASHINGS
 IMMUNOHISTOCHEMISTRY
 MOLECULAR & GENETIC TESTING

Treatment

LOBECTOMY : TREATMENT OF CHOICE FOR STAGE I TO IIIA
 CHEMOTHERAPY: ADJUVANT/NEOADJUVANT CISPLATIN + PACLITAXEL
 RADIOTHERAPY: FOR CURE/PALLIATION

PRIMARY PREVENTION

- counselling for smoking cessation
- awareness campaigns regarding risks of smoking
- air pollution control, promotion of cleaner cooking fuels
- Legislative measures: control of sales of tobacco products, health warning on cigarette packets, restriction of smoking at public places

SECONDARY PREVENTION

- Screening programs: chest X-ray, sputum cytology, low dose CT for high risk population
- Health education of public on early symptoms

TERTIARY PREVENTION

- availability of affordable treatment options
- psychological and social support to patients and families
- follow-ups and rehabilitation for cancer survivors

CREATED BY:

Dr. Anoop KP
 Final Year PG Resident
 Community Medicine
 B.J. Govt. Medical College, Pune

IPHI TEAM



Chairperson: Dr. Annarao Kulkarni
 Co-chairperson: Dr. Krupal Joshi
 Chief Coordinator: Dr. Krishna Jasani
 Assistant Coordinators:
 Dr. Kushant Bhatt, Dr. Nanda Kumar
 Dr. Nidhi Patel, Dr. Ramakrishnan



Get to know: For a cancer free future.



HOW TO PREVENT CANCER ?



Primary Prevention

No smoking

Eat healthy fruits & vegetables

Sun protection

Healthy weight

Get vaccinated

Don't share needles

Secondary Prevention

Screening tests

&

Early diagnosis

Tertiary Prevention

Symptom management	Preventing recurrence
Rehabilitation	Long-term follow-up

Warning signs!!



1. Unusual bleeding / discharge
2. Change in bowel & bladder habits
3. A sore that doesn't heal
4. Nagging cough / hoarseness
5. Obvious change in mole / wart
6. Indigestion / difficulty in swallowing
7. Thickening / lump.

Created by Dr. Shaik Afreen Begum

Team IPHI

Source of information:

<https://my.clevelandclinic.org/departments/cancer/patient-education/wellness-prevention/warning-signs>

Chairperson :
Co - Chairperson :
Chief Coordinator :
Assistant Coordinators :

Dr. Annarao Kulkarni
Dr. Krupal Joshi
Dr. Krishna Jasani
Dr. Kushant Bhatt,
Dr. Nanda Kumar,
Dr. Nidhi Patel,
Dr. Ramakrishnan





“CANCER AWARENESS: UNITED BY UNIQUE”

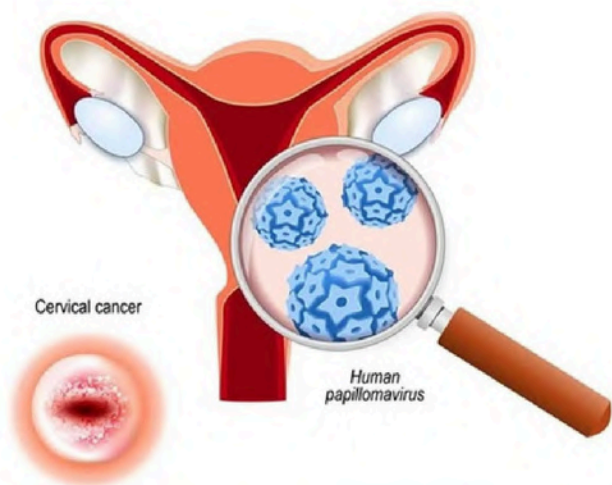


‘NEED OF THE HOUR – CERVICAL CANCER’

- Cervical cancer stands one of the leading cause of cancer-related deaths among women in India.
- Around 1.23 lakh new women are diagnosed with cervical cancer in India and 67,500 women die of cervical cancer in India every year



RISK FACTORS &



- Persistent Human Papillomavirus (HPV) infection.
- Multiparity
- Multiple sexual partners
- Engaging in first sexual intercourse at an early age
- Smoking
- STI (especially HIV /AIDS)

THE RED

- Abnormal vaginal bleeding
- Unusual vaginal discharge with foul smell
- Vaginal bleeding after having sexual intercourse (post coital bleeding)
- Lower abdomen or pelvic pain
- Pain during sexual intercourse (dyspareunia)



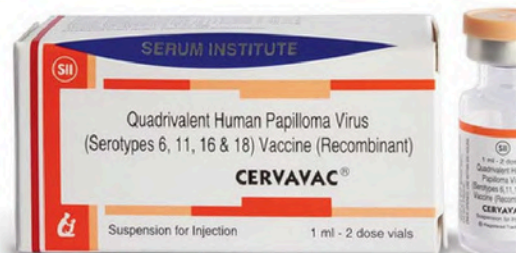
DON'T WAIT - GET



- ☒ **PAP SMEAR**
- ☒ **VIA (Visual Inspection with Acetic acid)**
- ☒ **VILI (Visual Inspection with Lugol's Iodine)**

PROTECT YOUR FUTURE – GET THE HPV VACCINE TODAY!

- Cervavac-Quadrivalent indigenous HPV vaccine
- Recommended for girls in the age group of 9–14 years



“ Empowering Prevention and Early Detection”
(Theme for cervical cancer awareness 2025)

Source:

- <https://cancerindia.org.in/cervical-cancer/#1715666071516-166b4812-22e2> (content)
- <https://medicircle.in/human-papillomavirus-hpv-infection-and-cervical-cancer> (images)
- <https://www.moffitt.org/cancers/cervical-cancer/signs-symptoms/> (images)
- <https://theprint.in/health/why-govt-has-no-plans-to-include-cervical-cancer-vaccine-in-routine-immunisation-package-anytime-soon/1958008/> (images)

IPHI TEAM



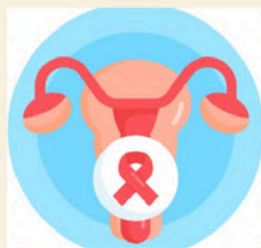
Created By,
Dr. Kesava Perumal S
Final Year PG/Junior resident
Dept. of Community Medicine
BMCRC, Ballari, Karnataka.

Chief Coordinator
Dr. Krishna Jasani
Kulkarnni

Chairperson
Dr. Annarao

Assistant Coordinators
Dr. Kushant Bhat
Dr.Nanda Kumar
Dr. Nidhi Patel
Dr. Ramakrishnan

Co-Chairperson
Dr.Krupal Joshi



CERVICAL CANCER

The World Cancer Day
theme 2025-2027

"UNITED BY
UNIQUE"

FACTS:

Cervical cancer develops in the cells of the cervix, the lower part of the uterus that links to the vagina.

Primarily caused by persistent infection of *human papillomavirus (HPV)*.

- Cervical cancer is the *fourth* most common cancer in women worldwide, with about 660,000 cases and 350,000 deaths in 2022.
- Cervical cancer is the *second* most common cancer in India. New cases registered were 127,526 and deaths were 34,806 by GLOBOCAN 2022 data.

Be Cervical Cancer Aware SIGNS & SYMPTOMS

- Unusual Vaginal Bleeding between periods
- Pain and discomfort during sex
- Foul smelling vaginal discharge
- Fatigue and weight loss
- Bleeding post coital or post menopause
- Pelvic pain or Abdominal pain

LEVELS OF PREVENTION

PRIMARY

Sexual education on :

- avoid multiple sexual partners
- Use of barrier contraceptives
- HPV vaccination
- Promote male circumcision

SECONDARY

Screening tests to do:
Women aged 25 - 65
years
every 3-5 years

- Pap smear test,
- VIA (visual inspection with acetic acid),
- VILI (visual inspection with Lugol's iodine)
- HPV DNA Testing

TERTIARY

Treats invasive cervical cancer by :
surgery and radiation
combined with
chemotherapy

GET VACCINATED:

CERVAVAC or GARDASIL

-Quadrivalent(HPV Serotypes 6, 11, 16 and 18) Vaccine
given 0.5 ml intramuscularly to:

- 9 to 14 years- 2 doses at 0 month and 6 month
- 15 to 26 years- 3 doses at 0,1 and 6 months



CREATED BY:

DR.ADMIRA FERNANDES
DR.DURGA AHUJA

2ND YEAR PG RESIDENT
COMMUNITY DEPARTMENT

NSCGMC, KHANDWA, MADHYA PRADESH

Chief Coordinator:
Dr.Krishna Jasani

Assistant Coordinators:
Dr.Kushant Bhatt
Dr.Nanda Kumar
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Dr.Krupal Joshi

REFERENCES:

- 1) Ferlay J, Ervik M, Lam F, Laversanne M, Colombet M, Mery L, et al. *Global cancer observatory: cancer today*. Lyon, France: International Agency for Research on Cancer; 2024.
- 2) ICMR - National Institute of Cancer Prevention and Research
- 3) www.aia.kh (IMAGE)
- 4) www.vecteezy.com (IMAGE)
- 5) WHO- <https://www.who.int/news-room/fact-sheets/detail/cervical-cancer>
- 6) https://www.seruminstitute.com/product_ind_cervavac.php





UNITED IN OUR MESSAGE • UNIQUE IN OUR STORIES

CANCER

It's not just a disease

To rewrite how we think about cancer, we use

People Centred Care

HOW DOES IT WORK?



COLLABORATION

By shared decision making and active participation. Patient and healthcare provider work hand in hand

01

02

CONNECTION

Values social ties, engaging individuals, families, and communities for holistic, humane care.



COMMUNITY

A community approach to cancer care enhances health literacy, self-care, and system responsiveness.

03

WHAT'S IN A NAME?

PATIENT-CENTRED

care treats patients as partners, respecting their values and ensuring coordinated, aligned treatment.

PERSON-CENTRED

care values the whole individual, addressing their medical, psychological, social, and spiritual needs holistically.

PEOPLE-CENTRED

care integrates patient- and person-centred models within the community, ensuring inclusive, equitable, and high-quality care for all.

Let's place people at the centre of care
And their stories at the heart of the conversation



IPHI team

Reference :

Union for International Cancer Control (UICC). The campaign. Geneva: UICC;[Internet] [cited 2025 Feb 22]. Available from: <https://www.worldcancerday.org/the-campaign>

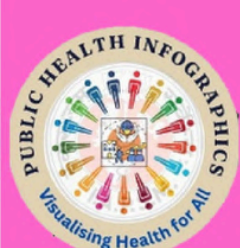
Created by :

Dr Alan Shaju
PGJR, AIIMS Raipur

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Chief Coordinator:
Dr. Krishna Jasani

Asst
Coordinators :
Dr. Kushant Bhatt
Dr. Nanda Kumar
Dr. Nidhi Patel
Dr. Ramakrishnan



BREAST CANCER – "Check, Detect, Protect!"



40 is an
important
number

BREAST CANCER



About **ONE** in **EIGHT** women develops invasive breast cancer every year

**Early
screening
Can save
many lives**



Facts & Figures (India)

- **Leading cause of cancer in women in India**
- **Number of new cases (2022) females, all ages- 1,92,020 (26.6%, cumulative risk- 2.9)**
- **Number of deaths – 98,337 (10.7%)**
- **Approx. 0.5-1% breast cancer occurs in males**

Source- Global cancer observatory (WHO)

Risk factors for Breast Cancer



A family history of breast cancer in a first-degree relative



Previous Breast Cancer



A history of ovarian cancers (BRCA I and BRCA II Mutations)



Exposure to Radiation



A past medical history of malignant or benign breast disease

Prevention of Breast Cancer



Limit Alcohol Consumption



Quit Smoking



Do a Careful Breast Self-Exam Monthly



Do Physical Exercise Regularly



Healthy and Balanced Diet



Control Body Weight

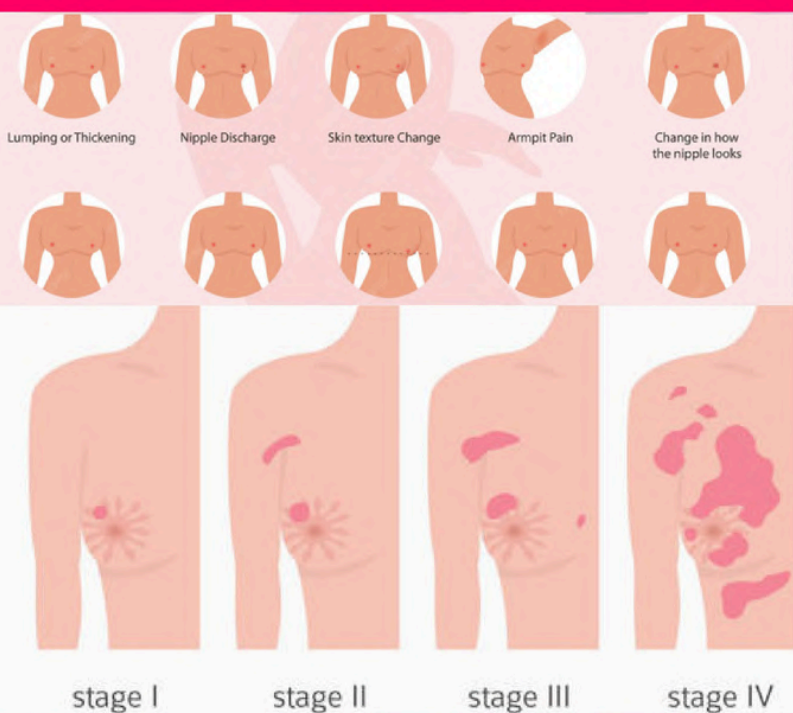


Breast Cancer Screening - Hereditary Cancer - BRCA Testing



Consult Your Doctor

Symptoms of Breast Cancer



Self Breast Examination

awareness



IN FRONT OF THE MIRROR



IN FRONT OF THE MIRROR



EXAMINE ARMPIT



UP AND DOWN



CIRCLES AND WEDGES

Created by:- Dr Sakshi Sharma
PG resident, Armed Forces Medical College, Pune
Source of information-
<https://gco.iarc.who.int/media/globocan/factsheets/populations/356-india-fact-sheet.pdf>

IPHI Team



Chief Coordinator
Dr. Krishna Jasani

Assistant Coordinators
Dr. Kushant Bhatt
Dr. Nanda Kumar
Dr. Nidhi Patel
Dr. Ramakrishnan

Chairperson
Dr. Annarao Kulkarni

Co- chairperson
Dr. Krupal Joshi



PROTECT YOURSELF
PROTECT YOUR KIN.



TPT

TUBERCULOSIS PREVENTIVE TREATMENT



1

WHAT IS TPT?

A Course of one or more anti-tuberculosis medicines given with the intention of preventing the development of TB disease.

WHO NEEDS IT ?

2

- 1.HOUSEHOLD CONTACT OF TB
- 2.PEOPLE LIVING WITH HIV.
- 3.INITIATING IMMUNOSUPPRESSIVES THERAPY.
- 4.ANTI TNF Rx,
- 5.ORGAN .TRANSPLANTATION.
- 6.RECEIVING DIALYSI.
- 7.SILICOSIS PATIENT.



3

WHY I NEED IT?

To treat the infection at the early stage and prevent bacteria multiplication .

WHAT Rx OPTION DO I HAVE?

4

- 1.DAILY ISONIAZID MONOTHERAPY - 6 months
2. WEEKLY ISONIAZID AND RIFAPENTINE - 3 months



HOW LONG SHOULD I TAKE?

CRITERIA FOR Rx COMPLETION:

- FOR 6H - 80% doses completed in 239 days(133% days)
- For 3HP - 90% doses completed in 120 days(133% days)



5

YOU
DID
IT!

END STIGMA, SCREEN NOW

Dr.G.K.VIDHUBALA
1st YEAR POSTGRADUATE,
DEPARTMENT OF COMMUNITY MEDICINE,
SHIMOGA INSTITUTE OF MEDICAL
SCIENCES,
SHIMOGA , KARNATAKA.
SOURCE :- WHO NTEP

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7th April 2025

World Health Day 2025



HEALTHY BEGINNINGS, HOPEFUL FUTURES

“Empowering Mothers, Nurturing Children,
Building Brighter Futures”



“Protecting
Maternal Health,
Empowering the
Next Generation”



“Better Care for
Mothers, Brighter
Futures for
Children”

- Prenatal Care is Essential
- Proper Nutrition for Mother and Child
- Safe Delivery Practices
- Immunization for Infants

- Breastfeeding for Optimal Growth
- Birth Spacing
- Hygiene and Sanitation
- Mental Health Support for Mothers

GOALS



To raise awareness about gaps in maternal and newborn survival and the need to prioritize women’s longer-term well-being



Advocate for effective investments that improve the health of women and babies



Encourage collective action to support parents as well as health professionals who provide critical care



Provide useful health information relating to pregnancy, childbirth, and the postnatal period

Created by-

Dr Monesh Verma,
2nd-year Postgraduate
Department of Community Medicine

Chirayu Medical College and Medical Hospital,
Bhopal, Madhya Pradesh.

Contact Mail ID: iapsminfographics.iphi@gmail.com

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Chairperson Dr. Annarao Kulkarni

Co-Chairperson Dr. Krupal Joshi

Chief Coordinator Dr. Krishna Jasani

Assistant Coordinators Dr. Kushant Bhatt, Dr. Nanda Kumar, Dr. Nidhi Patel , Dr. Ramakrishnan



24TH MARCH 2025

World Tuberculosis Day 2025

Yes! We Can End TB
Commit, Invest, Deliver



Created by-

Dr Monesh Verma,
2nd-year Postgraduate
Department of Community Medicine

Chirayu Medical College and Medical Hospital, Bhopal, Madhya Pradesh.

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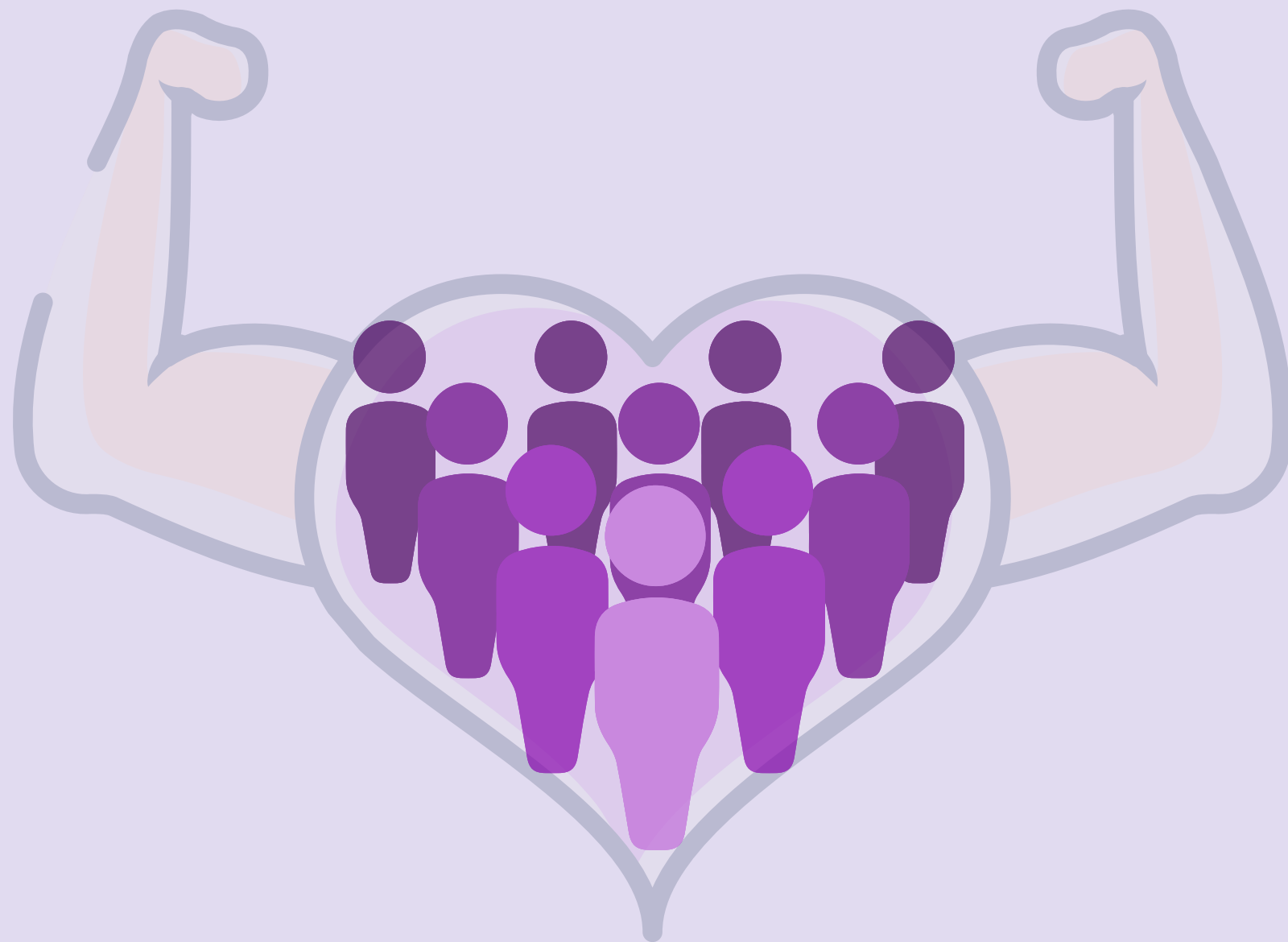
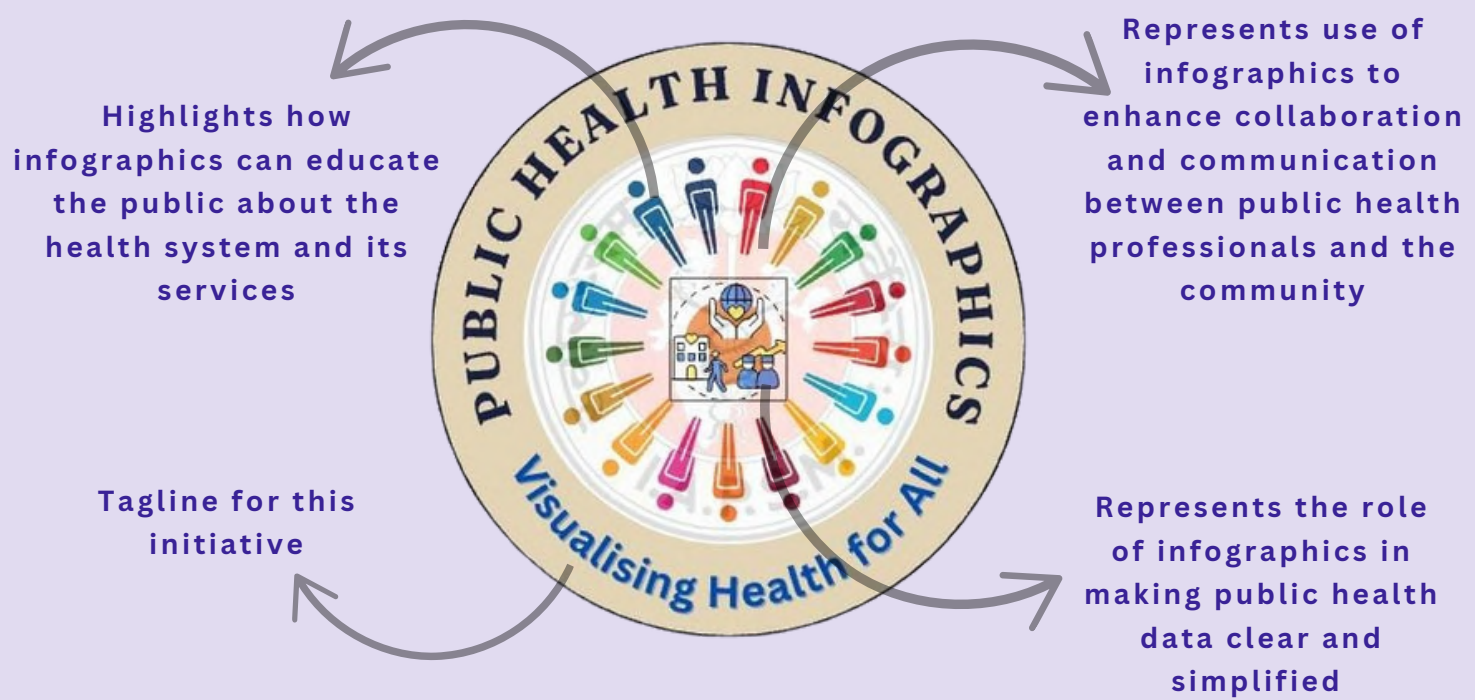
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Ramakrishnan



IAPSM - PUBLIC HEALTH INFOGRAPHICS (IPHI)



Graphic-e-Health



Dear IAPSM Members,

“ Thank you for taking the time to explore our latest Public Health Infographics Edition. It is gratifying to know that these visual resources contribute to enhancing public health knowledge within our IAPSM community.

Your continued support and engagement with the Public Health Infographics initiative are truly appreciated. Our aim is to consistently improve the quality and relevance of our content, ensuring it serves as a useful resource for all. If you have any suggestions, feedback, or ideas for future infographic topics, we encourage you to reach out to us at iapsminfographics.iphi@gmail.com. We welcome your insights and are eager to incorporate changes that can enrich your experience.

Together, let's make this initiative even more impactful for our community.”



Best Regards,
Team IAPSM Public Health Infographics

CONTACT US



iapsminfographics.iphi@gmail.com



Infographics iapsm



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