

"Life is the collection of experiences and their intensity" — Jim Rohn

The past two years have brought experiences which have overwhelmed some, devastated others and undeniably been soul stirring for all of us. Hopefully we have now weathered the storm that brought life almost to a halt, not just for us in our tiny corner of the world, but for mankind in general.

As always your very own BOGS TIMES has moved in tandem with the constantly altering scenario, bringing you articles highlighting the various developments in our specialty. The 'Topic in focus' reviews the recent amendments in the MTP Act, emphasizing the ramifications pertinent to each and every one of us. Our guest author from the district discusses the lesser talked about but no less important problem of Vulvodynia, while our Interview team brings you up close and personal to eminent gynecologist and author Professor Hiralal Konar. We chronicle the numerous health, educational and awareness events our society has conducted since our last Foundation day, both on virtual and physical platforms; and also give you a small peek into the upcoming Mega event all of us are proud to host: AICOG 2023!

On the hope that we have turned the corner to a better tomorrow, all of us from the BOGS TIMES desk wish that you and your near and dear ones remain safe, and can once again bask in the warmth of a firm handshake and friendly hug!

"Yesterday is today's memory and tomorrow is today's dream" -Khalil Gibran

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AICOG 2023 UPDATES



With great pleasure, we are happy to inform you that our Bengal Obstetric and Gynaecological Society is organizing the 65th AICOG in early January 2023 at Milan Mela Grounds (opposite Science City) after a period of 16 years.

Many of the senior members will recollect the great times we all enjoyed together at the last AICOG held at the Salt Lake Grounds in 2007.



We request all members to kindly block the dates (early Jan 2023) well in advance and spread the message across colleagues. We also look forward to the collective involvement of all society members, which will help us to put up a memorable show at the national level.

The Organizing Committee has been working hard over the last one year to put up a great show. Please be free to be a part of history by devoting your valuable time for this mega event. You may mail which committee (scientific, workshop, registration, publication, venue, hospitality, free communication, cultural) you would like to be a part of at bogs1936@gmail.com



I would also take this opportunity to reach out to all colleagues to kindly complete the registration formalities for AICOG 2023 at the earliest before the early bird offer runs out.

Look forward to working together

Dr Bhaskar Pal *Org Chair* AICOG 2023 **Dr Basab Mukherjee** *Org Secretary* AICOG 2023 **Dr Dibyendu Banerjee** *Org Secretary* AICOG 2023



President Speaks ...

Respected Seniors and Dear Friends

It has been sixteen months since the current team was installed and this is only the second time I have an opportunity to write to you through the BOGS Times, such has been the



order of the day. We published the only BOGS Times of our tenure on the occasion of the virtual celebration of the Foundation Day on July 25, 2021, at a time when we were carrying on the academic activities fully in the virtual world. The virtual platform did allow us the opportunity to have several international luminaries delivering orations and keynote lectures, a small silver lining to the cloud of the pandemic. After the second wave of the pandemic ebbed, we took baby steps to organize the World Prematurity Day Conference in November, a FOGSI event, on a hybrid model. This was followed by a successful Annual Day celebration in December where we got to meet many colleagues after a long hiatus. But soon the third wave upset our plans to hold BOGSCON in February 2022.

It seems the worst is over as far as the pandemic is concerned. We had the first face to face oration of our tenure in early March. Our society hosted ENDOGYN 2022, the annual national conference of the Indian Association of Gynaecological Endoscopists, on March 11-13, 2022. It was a hugely successful event with participants from all over the country. It does seem the happy days are here again. In that backdrop, we are here with BOGSCON, undoubtedly the most important event in the society's annual calendar. It has been a whirlwind of preparation, with a very short notice, and preceded by a national conference. Even the weather is not going to be as pleasant as in the usual BOGSCON time of winter. We have still tried to have the BOGSCON in its usual flavour, mixing academic extravaganza with social evenings. I am sure we will all make the most of it, getting the chance to be with one another face to face in a large event after almost 27 months.

The rest of the news from the society is business as usual. We are carrying on with the clinical activities but our social activities, except for the scholarships, have been hindered by the pandemic. The elections to the Managing Committee is round the corner, and in less than two months a new team will take the baton from us and continue the show. We will all be busy in organizing the 65th AICOG in Kolkata in January 2023 and we need to make it super successful, which will not be possible without your wholehearted support and participation. Before I end, let us pause for a moment and remember our colleagues who have fallen victims to COVID. BOGS and BOGSCON will miss them.

Long live BOGS.

Dr Bhaskar Pal

Hony. Secretary Speaks ...

Respected Seniors, my dear Colleagues and Friends

It is my honour and pleasure to address you as the Secretary of The Bengal Obstetrics and Gynaecological Society in the second issue of BOGS Times of this academic year.



The Team BOGS 2020-2022 has taken over the charge of our beloved Society on 21st November 2020 at a very crucial period in the middle of the ongoing pandemic.

The new team, a perfect mixture of young and experienced members, has already organized many academic as well as public awareness programs in both virtual and physical platform.

I am fortunate and feel blessed to have the support of members of the Managing Committee especially my President, Clinical Secretary & Joint Clinical Secretary.

We have organised the first ever BOGS Yuvacon 2021 on January 9th & 10th on a virtual platform. A conference exclusively for the young gynaecologists of West Bengal, it was primarily aimed to encourage our Post Graduate students to present their good work and to promote the talent of our young members.

We have also organised mega events physically: FOGSI Hybrid Conference on the occasion of "World Prematurity Day" on 21st November 2021 at ITC Royal Bengal with the participation of FOGSI President, Secretary General as well as other national faculties.

We celebrated BOGS Annual day physically for the first time in the history of our beloved society, on 23rd December 2021 at the Oberoi Grand with the 7th Dr Subhash Mukherjee Memorial lecture & the 29th Dr Jajneswar Chakraborty Memorial oration.

This is the BOGSCON issue of BOGS Times. We are celebrating the 46th Annual Conference of our Society, "BOGSCON 46," physically. The members of the organizing committee have taken great efforts to present to you another mega show at ITC Royal Bengal. Hope it will be memorable for all of you, with active participation in master class, case based discussions, symposia, keynote lectures, free communications along with the 23rd Dr D C Dutta Memorial Oration and Dr Subodh Sur Roy Memorial Conference CME.

This edition of BOGS Times carries the interview of Professor Hiralal Konar. The amendments to the MTP act are elaborated by Professor Arup Kumar Majhi and Vulvodynia by Dr Priyankur Roy (our guest from the districts) along with pictures of various activities of our society over the last few months.

The theme of BOGS this year is "Together We can". I hope we will continue our academic, social and public awareness activities with the active participation of all our members for the rest of the year.

Stay Safe and Healthy. Long live BOGS, Jai Hind! Regards

> Professor (Dr) Ramprasad Dey Hony. Secretary, BOGS

Topic In Focus





MTP Act and its status after amendment 2021

Prof Arup Kumar Majhi

MD, DNB, FICOG

Professor, Obstetrics and Gynaecology, Santiniketan Medical College, Bolpur, Birbhum Former Head of the Department, Obstetrics and Gynaecology, R G Kar Medical College, Kolkata National President-Elect, Indian Society of Perinatology and Reproductive Biology Past President, The Bengal Obstetric and Gynaecological Society

Introduction

The MTP Act, 1971 is an act to provide termination for certain pregnancies by registered medical practitioners and for the matters related with that.

MTP bill was passed by both the houses of Parliament and got the assent of President on 10-8-1971. MTP Act 1971 came into force in India from 1st April 1972 except in Jammu and Kashmir where it became effective from 1st November 1976. Rules and regulations were framed in 1975. The act has been amended in 2002 as "MTP (amendment) Act, 2002" and further amended in2003 under the title "Medical Termination of Pregnancy Rules 2003" and "Medical Termination of Pregnancy Regulations 2003" where medical method of abortion was also included under the purview of the Act.

The Rajya Sabha had passed the Medical Termination of Pregnancy (Amendment) Bill, 2021 to amend the Medical Termination of Pregnancy Act, 1971 ("MTP Act") on 17th March, 2021 and Parliament received the assent of the President on 25th March, 2021 and published it in the Gazette for general information on 25th March, 2021. Central Government has made the Medical Termination of pregnancy (amendment) rules, 2021 by amending MTP rules, 2003. They came into force on the date of their publication in the official gazette by Ministry of health and family welfare notification on 12th October, 2021.

After fifty years there have been some significant amendments, taking into consideration the remarkable developments of medical technology and increasing social demands which focus on a better quality of life.

Updated information about the Act has been provided here, highlighting the recent amendments, with the aim of helping practitioners in their day to day practice.

Domains of discussion

- Indication of MTPs
- Period of gestation up to when MTP is allowed
- Eligibility of service providers
- Approval of place
- Documentation and Forms
- Information to higher authority
- MTP in minor

Indications of MTP- Grounds for MTP (Table 1):

Table 1: Indications of MTP according to length of pregnancy

Upto 20 weeks*- [Like MTP Act 1971]

There is no amendment except the eligibility of woman irrespective of marital status

- 1) Therapeutic
- 2) Eugenic
- 3) Humanitarian
- 4) Social grounds
- Therapeutic -continuation of pregnancy endangers the life of woman or may result in grave injury to physical or mental health
- Eugenic- risk the child will be born with serious physical or mental abnormalities
- Humanitarian- caused by rape
- Social reasons– it encompasses contraceptive failure used by any woman or her partner that may likely cause serious mental injury, or social or economic environment which can injure the women's health.
- In the amendment 2021 any woman* irrespective of marital status is eligible for MTP on ground of contraceptive failure

Beyond 20 weeks till 24 weeks** [MTP (Amendment) Bill, 2021]

Following categories of women shall be considered

- (a) Survivors of sexual assault or rape or incest
- (b) Minors
- (c) Change of marital status during the ongoing pregnancy (widowhood and divorce)
- (d) Women with physical disabilities [major disability as per criteria laid down under the Rights of Persons with Disabilities Act, 2016 (49 of 2016)]
- (e) Mentally ill women including mental retardation
- (f) The foetal malformation that has substantial risk of being incompatible with life or if the child is born it may suffer from such physical or mental abnormalities to be seriously handicapped
- (g) Women with pregnancy in humanitarian settings or disaster or emergency situations as declared by Government

Beyond 24 weeks onwards*** [MTP (Amendment) Bill, 2021]

The foetal malformation has substantial risk of it being incompatible with life or if the child is born it may suffer from such physical or mental abnormalities to be seriously handicapped as decided by the medical board only after due consideration and ensuring that the procedure would be safe for the woman at that gestation age

- * Where the length of the pregnancy does not exceed twenty weeks, where any pregnancy occurs as a result of failure of any device or method used by any woman or her partner for the purpose of limiting the number of children or preventing pregnancy, the anguish caused by such pregnancy may be presumed to constitute a grave injury to the mental health of the pregnant woman (amendment 2021).
- ** To terminate pregnancies between 20 and 24 weeks, the indications are limited to special categories of women (a to g) as specified and hence, contraceptive failure is not an indication in this period of gestation.
- *** For terminations beyond 24-week gestations no other indication is considered except substantial foetal abnormalities. Even if it is by rape there is no provision for termination in this amendment, the only way is to writ petition the court.

Period of gestation up to when MTP is allowed (Table 2) Table 2: Period of gestation up to when MTP is allowed

Period of gestation	Allowed or not
Upto 20 weeks	Allowed in all indications
Beyond 20 weeks till 24 weeks	Allowed in some special indications
Beyond 24 weeks onwards, no upper limit of gestation specified	Only foetal malformation with substantial risk as de- cided by the medical board

Basic differences between MTP Act 1971 and MTP (Amendment) Bill, 2021 (Table 3):

Table 3: Basic differences between MTP Act 1971 and MTP (Amendment) Bill, 2021 with regards to period of gestation and opinion of number of practitioner/ practitioners

Period of gestation	MTP Act 1971	MTP (Amendment) Bill, 2021
Upto 12 weeks	Advice of one doctor	Advice of one doctor
12-20 weeks	Advice of two doctors	Advice of one doctor
20-24 weeks	Not allowed	Advice of two doctors for some categories of pregnant women
Beyond 24 weeks	Not allowed	Two practitioners will perform the termination based on the de- cision of Medical Board in case of substantial foetal abnormal- ity irrespective of the length of pregnancy

Any time during pregnancy	One doctor if termination is immediately nec- essary to save the pregnant woman's life (MTP Act 1971 under section 5. Here section 3&4 are not applied. Section 3 deals with length of pregnancy and criteria of RMP and section 4 specifies the place where MTP can be done)

Who can perform MTP (Eligibility of service providers)?

Categories	Criteria
(a)	In case of a medical practitioner who was registered in a state medical register imme- diately before the date of commencement of the Acts – he or she had experience in the practice of gynaecology and obstetrics for a period of not less than three years.
(b)	In the case of a medical practitioner who was registered in a state medical register on or after the date of commencement of the Act, either (i) He or she has completed six months of house surgency in gynaecology and obstet- rics; or (ii) He or she had experience at any hospital for a period of not less than 1 year in the practice of obstetrics and gynaecology or
(c)	He or she has assisted a registered medical practitioner in at least twenty five cases of MTP of which at least five have been per- formed independently in a hospital estab- lished or maintained, or a training institute approved for this purpose, by the Govern- ment
(ca) (incorpo- rated in amendment 2021)	A Registered Medical Practitioner shall have the following experience and training for conducting termination of pregnancy upto nine weeks of gestation period by medical methods of abortion, namely: - (i) experience at any hospital for a period of not less than three months in the practice of obstetrics and gynaecology; or (ii) has independently performed ten cases of pregnancy termination by medical meth- ods of abortion under the supervision of a Registered Medical Practitioner in a hospi- tal established or maintained, or a training institute approved for this purpose, by the Government."
(d)	In case of a medical practitioner who has been registered in a State Medical Register and who holds a postgraduate degree or diploma in gynaecology and obstetrics.

For medical termination of pregnancy beyond twenty-four weeks gestation period the opinion shall be given by a Medical Board duly constituted by the respective State Government or Union territory Administration at approved facilities and two Registered Medical Practitioners eligible under categories (a), (b) and (d) shall perform the termination of pregnancy based on the decision of such Medical Board.

Table 5 shows period of gestation, category and number of Registered Medical Pactitioners needed for particular cases

Period of gestation	Category of practitioners	Number of practioners
Upto nine weeks of gestation period by medical methods of abortion	(a),(b),(c), (ca),(d)	One
Till twelve weeks of gestation, by surgical method	(a), (b), (c), (d)	One
Beyond twelve weeks to twenty weeks	(a),(b),(d)	One
Beyond twenty weeks to twenty four weeks	(a),(b),(d)	Two (Form E)
Beyond twenty eight weeks	(a), (b), (d)	Two practitioners will perform the termina- tion based on the deci- sion of Medical Board

Table 5: Period of gestation, Category and Number of Registered Medical Pactitioners

Practitioners of (c) category can perform MTP only upto 12 weeks gestation and practitioners of (ca) category only upto 9 weeks.

Medical board

Medical Board's opinion is needed for the purposes of termination of pregnancy beyond twenty four weeks of gestation for foetal malformation.

Every State Government or Union territory shall, by notification in the Official Gazette, constitute a Board to be called a Medical Board for the purposes of termination of pregnancy beyond twenty four weeks of gestation for foetal malformation.

The Medical Board shall consist of the following:

- (a) a Gynaecologist
- (b) a Paediatrician
- (c) a Radiologist or Sonologist
- (d) such other number of members as may be notified in the Official Gazette by the State Government or Union territory

Powers of Medical Board

- (i) to allow or deny termination of pregnancy beyond twenty-four weeks gestation period only after due consideration and ensuring that the procedure would be safe for the woman at that gestation age and whether the foetal malformation has substantial risk of being incompatible with life or if the child is born it may suffer from such physical or mental abnormalities to be seriously handicapped
- (ii) co-opt other specialists in the Board and ask for any additional investigations if required, for deciding on termination of pregnancy

Functions of the Medical Board

- (i) To examine the woman who may approach for medical termination of pregnancy, and her reports.
- (ii) To provide opinion in Form D with regard to approval or rejection of request for termination of pregnancy
- (iii) To ensure the termination procedure when advised by Medical Board is carried out with all safety precautions along with appropriate counselling

Time limit in relation to termination of pregnancy beyond twenty-four weeks of gestation period

- Medical Board will give decision to allow or deny in Form D within three days of receiving request for MTP
- Termination procedure when advised, is to be carried out within five days of receipt of request for MTP

Approval of place

There are few changes in the amendment over rule 5 of MTP rules 2003 as far as logistics are concerned

- For 2nd trimester up to 24 weeks of pregnancy (instead of 20 weeks) logistics remain same:
- (a) an operation table and instruments for performing abdominal or gynaecological surgery
- (b) anaesthetic equipment, resuscitation equipment and sterilization equipment
- (c) drugs and parental fluids for emergency use, notified by central government from time to time (the words "the Central government" has substituted the term" Government of India").
- For termination beyond twenty-four weeks of pregnancy:-In addition to (a) to (c) additional point (d) is added in the amendment-
- (d) facilities for procedure under ultrasound guidance.

Documentations and FORMS

FORM A: Form of application for the approval of a place (edited with 24 weeks)

FORM B: Certificate of approval (no change)

FORM C: Consent of woman (no change)

FROM D: Report of the Medical Board for Pregnancy Termination beyond 24 weeks- new form after amendment

FROM E: Opinion Form of Registered Medical Practitioners (For gestation age beyond 20 weeks till 24 weeks)- New form after amendment

FORM I: Form of certifying opinion or opinions-Every registered medical practitioner who terminates any pregnancy shall, within three hours from the termination of the pregnancy certify such termination in Form I

FORM II: Monthly statement of cases -Every head of the hospital or owner of the approved place shall send to the Chief Medical Officer of the Sate, in form II a monthly statement of cases where medical termination of pregnancy has been done (change)

FORM III: ADMISSION REGISTER (To be destroyed on expiry of five years from the date of last entry). Admission Register shall be a secret document and the information contained therein as to the name and other particulars of the pregnant woman shall not be disclosed to any person (change)

Key features of the MTP (amendment) bill 2021

- MTP is allowed up to 20 weeks on the opinion of just one medical practitioner.
- To terminate pregnancies between 20 and 24 weeks, the opinion of not less than two practitioners are needed and this applies only to special categories of women as specified.
- Terminations beyond 24-week gestations can be done by two Registered Medical Practitioners only in case of substantial risk of foetal abnormalities based on the decision of Medical Board duly constructed by the state government or union territory. In that case there is no upper limit of period of gestation.
- For terminations beyond 24-week gestations no other indication is considered except substantial foetal abnormalities. There is no provision for termination of late pregnancies arising from rape in this amendment-the only option is to writ petition the court.
- Registered medical practitioners only with experience and training in gynaecology/obstetrics can perform MTP.
- The medical methods of abortion (MMA) have been allowed up to 9 weeks (from previous 7 weeks). MTP by medical method up to 9 weeks is also allowed by the medical practitioners who have undergone 3 months training in O&G or have done 10 cases MMA under supervision of registered medical practitioners in a hospital or training institute approved for this purpose in addition to other categories of practitioners.
- In the amendment 2021, failure of contraceptive failure used by any woman or her partner as a cause of MTP is not restricted to married woman, it is any woman irrespective to marital status
- No registered medical practitioner shall reveal the name and other particulars of a woman whose pregnancy has been terminated under this Act except to a person authorised (appropriate authority) by any law for the time being in force and whoever contravenes the provisions as above shall be punishable with imprisonment which may extend to one year, or a fine, or both (amendment).

Steps of procedure in sequential manner

- Approach by the woman for termination
- History and assessment of the genuine indication, Physical examination – general and gynaecological. Investigations

 Hb%, urine for albumin and sugar and blood group.
 Anti-D gamma globulin should be administered to Rh negative woman
- Counselling regarding procedures and potential complication
- Filling up FORM C-Consent of woman and other FORMs as mentioned
- Certifying opinion or opinions of practitioner/ practitioners- FORM I or FORM E
- Routine consent for anaesthesia
- Completion of procedure(MTP)
- Case sheet written for completion of procedure, anaesthetic note, postoperative advice
- Form C and Form B and intimation of termination are placed in envelop, sealed and marked as secret. The serial number of patients as in admission registrar and name of practitioner/ practitioners are written on every envelope
- Envelop is sent to the head of the hospital or owner of the approved place. Till it is submitted it is kept under custody of the practitioner/ practitioners
- Every head of the hospital or owner of the approved place shall arrange to keep the same in safe custody and send only the monthly statement before 5th of every month in form II to the Chief Medical Officer or health ministry in case of cities.

Protection of privacy of a woman (amendment 2021)

(1) No registered medical practitioner shall reveal the name and other particulars of a woman whose pregnancy has been terminated under this Act except to a person authorised by any law for the time being in force. (2) Whoever contravenes the provisions as above shall be punishable with imprisonment which may extend to one year, or with fine, or with both (amendment 2021).

MTP in minor

MTP in minor unmarried girls with age less than 18 years: Pregnancy is always regarded as a result of sexual assault or rape (POCSO Act 2021). Police must be informed and ideally, the product of conception is to be preserved (in normal saline for DNA testing) for handing over to police although this point is not mentioned in MTP Act. In true sense, this procedure is even applicable to minor (age less than 18 years) married girl also.

Routine sonography before MTP

There is no directive regarding routine sonography before MTP in the amendment bill. However, there are several advantages of doing USG before any MTP. Attempts of medical method and first trimester surgical method in undiagnosed ectopic pregnancy often result in serious catastrophic events.

MTP amendment 2021- where is it silent?

- If a fetus of more than 500 gm and living is delivered: is supportive care to be given?
- As there is no upper limit of gestation age for termination in case of severe congenital anomalies, there is chance of a living grossly malformed baby being born after the procedure. Should any special procedure be adopted during termination to prevent this? If the malformed baby survives after termination whose responsibility is the child?

Conclusion

Medical Termination of Pregnancy (Amendment) Bill, 2021 has widened the scope of MTP especially in case of grossly malformed fetus and some special situations and also provides

"Form D

(See sub-clause (ii) of clause (b) of rule 3A)

Report of the Medical Board for Pregnancy Termination Beyond 24 weeks

Details of the woman seeking termination of pregnancy:

- 1. Name of the woman
- 2. Age:
- 3. Registration/Case Number:
- 4. Available reports and investigations:

S.No	Report	Opinion on the findings	

5. Additional Investigations (if done):

S.No	Investigations done	Key findings	

6. Opinion by Medical Board for termination of pregnancy:

- a) Allowed
- b) Denied

Justification for the decision:

 Physical fitness of the woman for the termination of pregnancy: a. Yes

b. No

Members of the Medical Board who reviewed the case:

S.No	Name	Signature

Date and Time:.....

access to unmarried women. There are few grey areas which will hopefully be cleared in subsequent days. Finally, it is to be remembered that till date no suit for other legal proceedings shall lie against any registered medical practitioner for any damage caused or likely to be caused by anything which is in good faith done or intended to be done under the MTP Act, 1971 and the procedure is done with strict adherence to the MTP rules and regulations.

Sources:

Place: Date:

Note:

- 1. The Medical Termination of Pregnancy Act, 1971 (Act 34 of 1971) dt. 10.8.1971
- 2. The Medical Termination of Pregnancy Rules, 2003 [GSR No. 485(E)] dt 13-6-2003
- 3. The Medical Termination of Pregnancy Regulations, 2003 [GSR No. 486(E)] dt 13-6-2003
- 4. The Medical Termination of Pregnancy (Amendment) Act, 2021 (No. 8 of 2021) 25th March 2021
- 5. The Medical Termination of Pregnancy (Amendment) Rules, 2021 [GSR 730(E)] 12th October, 2021
- 6. POCSO Act 2012 (no 32 of 2012) 19th June 2012

FORM E

Opinion Form of Registered Medical Practitioners (For gestation age beyond twenty weeks till twenty-four weeks)

[See sub-rule (2) of rule 4A]

(Name and qualifications of the Registered Medical Practitioner in block letters)

(Full address of the Registered Medical Practitioner)

(Name and qualifications of the Registered Medical Practitioner in block letters)

(Full address of the Registered Medical Practitioner)

hereby certify that we are of opinion, formed in good faith, that it is necessary to terminate the pregnancy of

(Full name of pregnant woman in block letters)

(Full address of pregnant woman in block letters)

which is beyond twenty weeks but till twenty-four weeks under special circumstances as given below*.

*Specify the circumstance(s) from (a) to (g) appropriate for termination of pregnancy beyond twenty weeks till twenty-four weeks:

- (a) Survivors of sexual assault or rape or incest
- (b) Minors

resident of

- (c) Change of marital status during the ongoing pregnancy (widowhood and divorce)
- (d) Women with physical disabilities [major disability as per criteria laid down under the Rights of Persons with Disabilities Act, 2016 (49 of 2016)]
- (e) Mentally ill women including mental retardation
- (f) The foetal malformation that has substantial risk of being incompatible with life or if the child is born it may suffer from such physical or mental abnormalities to be seriously handicapped
- (g) Women with pregnancy in humanitarian settings or disaster or emergency situations as declared by Government

We hear by give intimation that we terminated the pregnancy of the woman referred to above who bears the Serial No. in the Admission Register of the hospital / approved place.

Account may be taken of the pregnant woman's actual or reasonably foreseeable environment in determining

whether the continuance of her pregnancy would involve a grave injury to her physical or mental health. "

Note:- The Medical Termination of Pregnancy Rules, 2003 were published in the Gazette of India, Extraordinary, Part II, section 3, sub-section (i) vide notification number G.S.R. 485(E), dated the 13th June, 2003. Uploaded by Dte. of Printing at Government of India Press, Ring Road, Mayapuri, New Delhi-110064 and Published by the Controller of Publications, Delhi-110054.

Signature of the Registered Medical Practitioner

Signature of the Registered Medical Practitioner

[F. No. M-12015/16/2021-MCH] Dr. PATIBANDLA ASHOK BABU, Jt. Secv.



Up, Close and Personal PROF HIRALAL KONAR

Prof Hiralal Konar is a well-known academician, the author of a very successful book, clinician par-excellence and a respected teacher. Dr Jayita Chakrabarti, Dr Tulika Jha and Dr Alpana Chhetri met him at his CIT Road house for a tete-a tete about his life and works.

- **BT:** Sir, tell us about your childhood and your memories of growing up.
- **HK:** I was born in the district of Burdwan (presently Bardhaman) on the 10th of August 1953. We are a well-off family. My father was an open minded socially active person with a strong personality. We are two sisters and six brothers. I am the 6th amongst all of us.
- BT: What was your aim since your school days?
- With the start of my school days, I enjoyed discussing HK: / helping my classmates in any of the subject matters. From class VI and mainly from class VII, I was entrusted to do the class of mathematics, English and Chemistry, as an assistant to our class teacher. This I continued it there after till date. Teaching has been my passion. I was awarded several academic distinctions (Scholarships) throughout my school carrier. My father donated all the money for the developments of our school. I received national scholarship in Higher Secondary Examination. I was inspired by my teachers in Mathematics, Chemistry and English. Initially, I joined BSc Honors, in Chemistry at Raj College, Burdwan. Because of political unrest, we had to wait for the medical entrance list. Soon after the medical list came out, I joined the medical course.
- **BT:** Why did you change your mind to pursue the course in medicine?
- **HK:** My father was not so keen on me being a doctor since there was a social turmoil during that phase. But destiny moved me to Calcutta. I was happy, as I knew, that this is the profession where I can continue my passion as a teacher, and as well as a professional person to serve people in society.
- **BT:** Sir, we would like to know the institutions and the year you joined as a medical student.
- **HK:** I did my pre-medical from R.G. Kar Medical College in 1971, and I joined MBBS at Sir Nil Ratan Sircar Medical College (NRSMCH) in 1972. One event may be of interest to you. The day I entered to NRS with my father for the first time, I fell in love with the institution seeing the beautiful green surroundings, rows of trees, gardens, flowers, and the fountains. I expressed my desire to father. By the grace of the Almighty, two third of my career was spent in this institution. I am ever indebted to my mother institute NRSMCH.
- **BT:** How was your life and academics during your MBBS days?
- HK: In my pre-medicals, I stood first in Biochemistry. The then anatomy teachers in Bengal, inspired me a lot. I used to attend the classes of the stalwarts of anatomy, Prof A.K. Dutta, Prof Samar Mitra, Prof K.K. Banerjee who were the famous teachers and authors of Anatomy. I was the class assistants, secured highest marks in the University, gold medals and recipient of honors in

many subjects under the guidance of all the teachers at NRSMCH.

- **BT:** What motivated you to take up Obstetrics & Gynecology?
- HK: I had interest in both Medicine as well as Surgery. I was inclined to surgery, as I stood first in the University with the subject. My teachers called me back and encouraged me to join Obstetrics and Gynecology as it is the profession where a combination of both (medicine and surgery) exists. Above all, I was highly inspired by my teachers in Obst & Gynae and also with other subjects, who rather over the days, replaced the parents. I wish I could name all of them such as: Prof. Mahamaya Sarkar, Prof N.N. Roy Choudhury, Prof. Ajit Sarkar, Dr C.C. Mitra, Dr Gouri Shankar Mondal. Prof K. M. Gun, Prof D. C. Dutta, Prof B. N. Chakravarty, Prof S. K. Pal, Prof. B.B. Sarkar, Prof U. S. Arora, Prof A. K. Chandra, Prof Maqbul Ahmed, (Surgery), Prof S. K. Sarkar (Pathology), Prof Ashit Roy (Pharmacology), Prof Subhas Mukherjee (Physiology), have always been as guardians during my student days at NRS.
- **BT:** We all would love to hear your encounter and association with the legend Prof D.C. Dutta who not only is your mentor but also father-in-law.
- HK: It's interesting again. You know, probably all of us have faced such events. What I came to know later on, Prof D.C. Dutta was from Calcutta Medical College and worked as a Resident surgeon there. Our BOGS conference oration goes by his name. Those days most of our teachers in NRS were form CMC. In fact we (NRSMCH) were in strong competition with CMCH. You will be amazed to know, all our teachers were very respectful and used to love each other much. It appeared to me as if they were from one family with brothers and sisters. It is our teachers again, they could see the future within us and thought to make it. The rest of it you can easily imagine.
- **BT:** Sir, what inspired you to go to Chandigarh for further studies?
- HK: During my internship and house surgeonship, I was highly motivated by the clinical excellence of Prof K.M. Gun and Prof C.C. Mitra (HOD), who taught me diagnose the rarest of rare cases during ward rounds. Prof Mitra taught me the importance of history taking to diagnose a case. He was the one, told me that our patients are our books and to listen to them carefully. He advised me to leave Calcutta and go to AIIMS or PGI Chandigarh for specialization in O&G. I was selected at the end of 3 phases of independent assessment at PGI. I worked there in the year 1982-1984 under Prof G.I. Dhall and the others. Following specialization, I came back to Calcutta and joined the state health service. I have tried to introduce the same standard of education and the examination system in Calcutta also.
- **BT:** How did you go with the health care system in Bengal?





RCOG-Membership

- **HK:** My first posting was in Kurseong Hospital. When there was a MCI visit in North Bengal Medical College, I joined there as Registrar in 1985 and worked till 1989. My days in NBMC is a very pleasant memory. My son was born in North Bengal. We used to perform family planning camps (Laparoscopic ligation) throughout the five districts of Northern Bengal. We have performed over 22,000 cases of laparoscopic ligations during that period. All are recorded in the Jr. OB-GYN India and Jr IMA . We have discussed our experience and suggestions to the Dept of Health and Family Welfare with this.
- BT: When did you think of MRCOG and moving to UK?
- I was advised by Prof. N. N. R C, Prof K M Gun and Prof HK: I. Mitra to try and get the exposure of international standard of education and clinical practice. I got the official permission from the health service. I cleared MRCOG, part -1 in 1991 and I went to UK in 1992 and joined the NHS. I was in UK from 1992 to 1996 where I worked as a Regional Registrar in Northern and Yorkshire region. As I came back to India, I joined the teaching post in Burdwan Medical College. In the year 2000, I joined NRS as a lecturer and continued till the post of a Professor. I worked as the Professor and Head at Midnapore Medical College. I completed the health service from Calcutta National Medical College in 2018. Thereafter, I joined as the Professor and Head in Agartala Government Medical College, Tripura. Presently I am working at KPC Medical College, Kolkata as the Head of the Department.
- **BT:** Sir, we would like to hear about your work in the health service.



Membership Admission-1993

- HK: I devoted myself to the patient care maximally. I used to attract huge number of patients where ever I have worked. Patients loved me. Maximum 361 patients in one of my OPD at NRSMCH was the record. I have involved my colleagues in other disciplines whenever I was in need. I was loved by my students, juniors as they felt free to work with me . I take special responsibility for their training and research works. I attended the evening rounds routinely worked even the holidays, attended emergency calls even in the middle of night for the care of my patients. I am till in touch with many of my students and patients and their families. All my research papers are with my patients those seen and managed. There is significant development in the health care system and service in Bengal.
- **BT:** Sir, we would like to hear about your family.
- **HK:** To be honest, I am deeply indebted to my wife Mrs. Madhusri Konar in this respect. In family, she is the person who takes care all of us. She takes care of all our relations also. Without her sacrifice we could not have performed this much. I was married on 10th March and am blessed with son and daughter. My son is an Assistant Professor (O&G) and my daughter is pursuing medicine now (MS- O&G).
- **BT:** You are associated with various organizations please tell us about your active involvement in our very own society BOGS, FOGSI, AOFOG, ISOPARB.



ICOG Convocation-Chairman-19.01.13



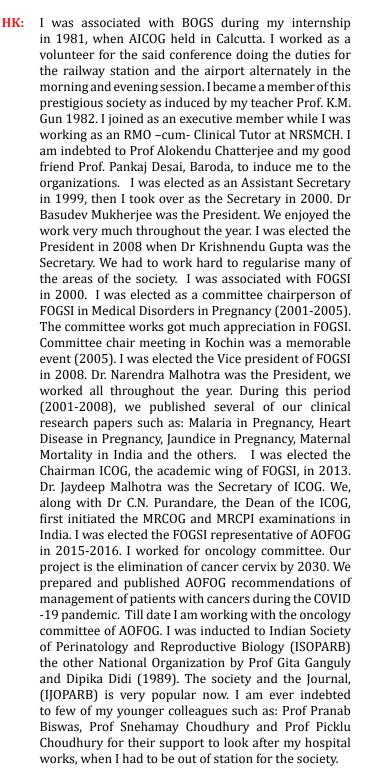
AICC-RCOG-at Chandigarh





Days at NBMCH-1987

Bhratri Dwitiya



BT: Sir, tell us about your works as an author and editor?



Family Holidays at Shillong

HK: I served 3 terms (3 years each) as National Corresponding Editor in Jr. Obst. Gynae of India. Presently I hold the post of Editor-in-Chief of ISOPARB journal for last 7 years.

Prof D.C. Dutta left us in 1996 and I took over the responsibility of maintaining the legacy of the famous textbooks of Obstetrics and the Text book of Gynaecology. I published a book on bedside clinics and viva-voce in Obstetrics and Gynaecology. I am the author of Clinics in Obstetrics and Clinics in Gynaecology as released this January 2022. I have contributed in over 120 publications in the national and international journals. My works reflect the health issues in Indian scenario. My presentations also reflect the health care issues in Indian context predominantly. Several book Chapter contributions too. Few of my important publications are "Tamoxifen Therapy in Breast carcinoma and its association with Endometrial Cancer; Mullerian Malformations and Reconstructive Surgery - Clinicians approach."

- **BT:** Apart from your professional career what are your hobbies?
- HK: I love natural wildlife photography and travelling, is my area of interest and my hobby. I have invested in imported expensive cameras since my younger days. Reading literature both English (Shakespeare, Lord Tennyson, Stephen Covey, Robert Browning, Gautam Ghosh and others) and Bengali (RN Tagore, Sarat Chandra, Bibhuti Bhusan, Swami Vivekananda, the magazine 'Desh') is my favorite past time. My father appointed me a master to teach me singing but it could not make any progress.
- **BT:** It was great knowing you as a person so closely, Sir, what is your message to this present generation?
- **HK:** Work, Sincerity and Dedication have no other alternative. Unity is the strength and Organization is the power. Through the large societies like, BOGS, FOGSI, we are tied through the bonds of knowledge, learning and academics. We need to be professional and try to work for the society towards the progress. We in BOGS, are very proud to know our predecessors founded this society (BOGS) in this state and in the same year, the Federation (FOGSI), at the national level (1936). We are well recognised for our far sight. We are ever grateful to our predecessors. The successors of the society need to think beyond the boundaries.

"LONG LIVE BOGS"

VULVODYNIA

Priyankur Roy, MS, Fellowship in Reproductive Medicine Fertility Consultant, Siliguri Jt Secretary Siliguri OBG Society

Introduction

Dyspareunia can be classified in many different ways. Some authors categorize this symptom as being primary, occurring ever since the first attempt at vaginal intercourse, or secondary, beginning spontaneously after previous painfree and enjoyable intercourse. It may also be characterized as superficial, in which the patient notices pain primarily during vaginal penetration, or deep, in which the pain is worse with deeper penetration or thrusting. This chapter focuses on the evaluation and treatment of women with vulvodynia.

Etiology

Anatomical	Dermatological
Stenotic hymen	Dermatitis
Congenital abnormalities	Lichen sclerosus
Postsurgical scarring	Lichen planus
Muscular	Inflammatory
Vaginismus	Desquamative inflammatory vaginitis
Hormonal	Interstitial cystitis
Atrophic vaginitis	Vulvar vestibulitis
Infectious	Ulcerative
Vulvovaginal candidiasis	Aphthous ulcers
Trichomoniasis	Behçet's syndrome
Bacterial vaginosis	Systemic disorder
Genital herpes	Sjögren's syndrome
Genital warts	Systemic sclerosis
Mucopurulent cervicitis	Vulvar Crohn's disease
Urinary tract infection	Neoplastic
Decreased lubrication	Vulvar intraepithelial neoplasia
Post-radiation therapy	Vulvar carcinoma
Psychological	Vaginal carcinoma

Localised Provoked Vulvodynia

Vulvodynia is defined as chronic vulvar burning condition of unknown etiology and is thought to represent a broad umbrella group of conditions that cause vulvar pain. Classically, vulvar vestibulitis syndrome (VVS), a condition where women exhibit specific point tenderness in the vestibule, has been considered the most common form of vulvodynia. It is characterized by feelings of vulvar rawness, stinging and/or burning. The nomenclature for this condition is currently in flux. In 2003, the International Society

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for the Study of Vulvovaginal Diseases (ISSVD) proposed a new terminology and classification system for vulvar pain. Provoked vulvodynia means that discomfort is triggered when physical contact occurs, as opposed to unprovoked situations where pain occurs spontaneously. Because the presence of inflammation (i.e. -itis) in VVS has been repeatedly debated, the term has been eliminated. With the new system, most patients with VVS would be classified as having localized provoked vulvodynia (LPV). Although both terms have been used in this chapter, providers should be aware of the current recommended nomenclature.



ISSVD terminology and classification of vulvar pain:

- A) Vulvar pain related to a specific disorder
- 1) Infectious (e.g. candidiasis, herpes, trichomoniasis)
 2) Inflammatory (e.g. lichen planus, immunobullous
- disorders)3) Neoplastic (e.g. Paget's disease, squamous cell carcinoma, etc.)
- 4) Neurologic (e.g. herpes neuralgia, spinal nerve compression, etc.)
- B) Vulvodynia
- 1) Generalized
 - a) Provoked (sexual, nonsexual, or both)
 - b) Unprovoked
 - c) Mixed (provoked and unprovoked)
- 2) Localized (vestibulodynia, clitorodynia, hemivulvodynia, etc.)
 - a) Provoked (sexual, nonsexual, or both)
 - b) Unprovoked
 - c) Mixed (provoked and unprovoked)

Diagnosis

Women with LPV present with a primary report of dyspareunia, particularly with intromission. Most of the time, these symptoms occur in women who have previously had comfortable, pain-free intercourse and then gradually or acutely noticed this problem. Other activities that involve contact with the introital area, such as tampon insertion, wearing tight clothes, or bike riding, may cause pain. Patients also note variable amounts of burning, irritation, and itching in their daily activities. Symptoms are almost completely localized to the vulvar vestibule.

A clinical diagnosis is made by fulfilling Friedreich's criteria, which consist of a history of vulvar pain with attempted intromission during intercourse, finding focal areas of erythema confined to the vulvar vestibule, and eliciting tenderness on palpation of these areas with a cotton-tipped applicator. In most cases, patients are required to have duration of symptoms of more than 6 months before their symptoms are diagnosed as LPV. Although most clinicians agree on Friedreich's criteria, fulfilling these criteria may not always be straightforward. For example, vestibular erythema is relatively common in many women and of itself may be a normal finding.

Furthermore, tenderness to pressure on examination may depend on the technique of the examiners and their ability to elicit the appropriate response. Finally, although the diagnosis of LPV entails an exclusion of other conditions that can cause vulvar inflammation and pain, such as candidiasis or vulvar nonneoplastic epithelial disorders, the role of ancillary tests such as vaginal evaluations for causes of vaginitis, fungal cultures, or even vulvar biopsies varies tremendously within the published literature. Nevertheless, Bergeron and colleagues, in trying to assess the reliability of diagnosing LPV when performed by two independent gynecologic examinations, did find substantial inter-rater agreement, particularly when it came to the criterion of tenderness.

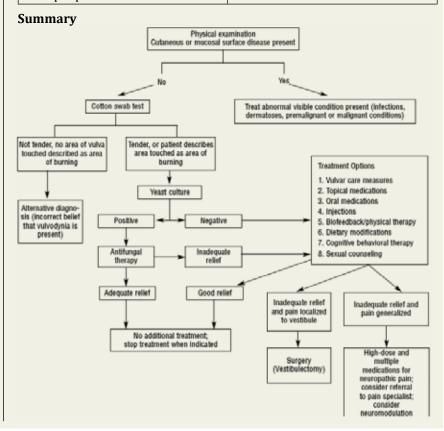
Management

No matter what the cause, certain adjunctive maneuvers may help alleviate the patient's symptoms. Avoiding soaps and chemical irritants may help to decrease vulvar or vestibular inflammation. The general recommendation is routine use of a waterbased lubricant with intercourse with avoidance of alcohol-based as they can tend to contribute to vaginal dryness and exacerbate symptoms. Because chronic pain may lead to decreased lubrication as a secondary phenomenon, it is easier to have patients use a lubricant, rather than have them worry about this issue. In women who use latex condoms and who may be latex-sensitive, use of a polyurethane condom or some other method of birth control may avert a reaction to the condom. Finally, as noted earlier, dyspareunia is a symptom that may have many psychological ramifications, ranging from decreased libido to relationship difficulties to vaginismus.

Women with chronic dyspareunia who feel that the pain is having a significant impact on libido or psychosexual self-image should be referred for counseling. Multimodal sex therapy, consisting of individual and couples therapy and other interventions such as cognitive–behavior techniques, is an important part of the multidisciplinary approach to these disorders.

As can be expected when the cause is unknown and has been attributed to such a wide variety of diseases, many treatment options have been proposed for LPV. In brief, the options can be classified as either medical or surgical.Possible therapies for localized provoked vulvodynia:

Medical	Surgical
Topical lidocaine	Pulse dye laser
Topical corticosteroids	Local excision
Tricyclic antidepressants	Vestibuloplasty
Biofeedback therapy/ Physical therapy	Partial vestibulectomy with vaginal advancement
Acupuncture	
Muscle relaxants	
Antiepileptics	



ENDOGYN 2022

ENDOGYN 2022, the annual national conference of Indian Association of Gynaecological Endoscopists (IAGE) and organised by the Bengal Obstetrics and Gynaecological Society, was held at J W Marriott from March 11 to 13, 2022.

There was a workshop on March 11 which was telecast live, from Manipal Hospitals and Apollo Multi-speciality Hospitals, to J W Marriott. A total of 25 laparoscopic, hysteroscopic and vaginal surgeries were performed by the best surgeons from all over the country. It was a wonderful learning experience for the audience who watched the transmission, in rapt attention, till late in the evening.

The 3 days of the congress were an academic feast for delegates as all aspects of gynaecological endoscopy, including robotic surgery, were discussed in details in the various sessions, held in the three halls. Renowned faculty from all over the nation held the audience in rapt attention throughout the three days of the conference. Many young gynaecological endoscopic surgeons from all over the country also showcased their talents and impressive work in the several invited video sessions.

There were two orations by the outgoing IAGE President, Dr S Krishnakumar and the incoming IAGE President, Dr Bhaskar Pal. There were two plenary keynote sessions as well and the keynote speakers were stalwarts namely Dr Shyam Desai, Dr Prashant Mangeshikar and Dr P G Paul, all past presidents of IAGE and Dr P C Mahapatra, past president of FOGSI. There were keynote lectures by renowned gynaecologists namely Pandit Palaskar, Sailesh Puntambekar, Prakash Trivedi, Rishma Pai, Sunita Tandulwadkar, Hrishikesh Pai, P K Shah and Nandita Palshetkar. All the lectures and orations were well appreciated by the audience.

The inauguration ceremony was held on March 12, 2022 at 7 PM in which the last committee (2020-22) handed over the reins to the incoming team of 2022-23. Dr S Krishnakumar handed over the charge of IAGE President to Dr Bhaskar Pal and Dr Pandit Palaskar handed over the charge of IAGE Secretary to Dr Atul Ganatra. The past two teams were felicitated for their impressive work throughout the year especially during the COVID pandemic. The Guest of Honour for the occasion was Dr S Shanthakumari, President FOGSI. The inauguration ceremony ended with rendition of the national anthem.

Besides academics, there was a wonderful musical programme by famous singer Ms Anwesha Dattagupta. The food on all the 3 days was delicious and everyone enjoyed this physical conference, held after a hiatus of 2 years, to the hilt. About 450 doctors attended the conference.



ENDOGYN 2022













































BOGS ANNUAL DAY

The Bengal Obstetric & Gynaecological Society organized a daylong programme on Thursday, December 23, 2021, which was planned on the lines of our Foundation Day. It was named BOGS Annual Day. The Foundation Day, unfortunately, had to be celebrated on the virtual platform in 2020 and 2021.

The programme began with a session on free communications where three winners from last year's YUVACON, which was held on January 9 & 10, 2021 and four winners of the prestigious Dr Tapashi Nag Memorial Talent Search session of Foundation Day presented their interesting and prize-winning research papers.

The four chairpersons for the session were Dr Ashis Kr Mukhopadhyay, Dr Krishnendu Gupta, Dr Kusagradhi Ghosh and Dr Sukanta Misra, all past presidents of our society. The participants and the topics of their free communications were as follows:

- **Dr. Bishista Bagchi:** Latent genital tuberculosis a causative factor for ectopic pregnancy- a retrospective analysis
- **Dr Kasturi Barman:** A Study on Prevalence of Different Variables Associated with Adnexal Masses in Women of Reproductive Age Group
- **Dr Dipanjan Bandhya:** Blunt Versus Sharp Expansion of The Uterine Incision in Lower Segment Caesarean Section: A Comparative Study
- **Dr Jagriti Pandey:** Knowledge and Practices about Coronavirus disease (COVID 19) among pregnant women in rural West Bengal, India
- **Dr Kaveti Mallika:** Evaluation of Partograph in Monitoring Progress of Labour and Feto-Maternal Outcome in First Stage of Labour in an Urban Teaching Hospital
- **Dr Sanchari Sengupta:** Biomarker Analysis of Circulating Tumour Cells Regarding Ovarian Carcinoma
- **Dr Yashi Sharma:** An observational study of routine 18-20 weeks anomaly scan in pregnancy and its outcome
- **Dr Pranita Banka:** Risk Assessment and Scoring System of Venous Thromboembolism and Its Prevention During Pregnancy and Puerperium

The next session was the "Invited debate" session in which the winners of the prestigious Dr M N Sarkar Memorial Debate of this year's Foundation Day participated as debaters but the motions of the debate were new.

The chairpersons were the three Vice presidents of the society, Dr Abinash Chandra Ray, Dr Basab Mukherjee, Dr Mausumi De Banerjee. The motion for the Debate 1 was "**Web Based Teaching or Training in Our Speciality is Suboptimal**" and Dr Suparna Biswas and Dr Esha Das spoke FOR and AGAINST the motion respectively. The motion for Debate 2 was "**Third Dose of The COVID-19 Vaccine Should Be Given to Healthcare Workers Immediately**" and Dr Tanushree Paul and Dr Sohini Chaudhury spoke FOR and AGAINST the motion respectively.

This was followed by an interesting Symposium on Subfertility, which was organized by the Subfertility and Reproductive Endocrinology subcommittee of BOGS. The chairpersons were Dr Arup Kumar Majhi, Dr Gita Ganguly Mukherjee, Dr Subhash









BOGS ANNUAL DAY





















Chandra Biswas, all past presidents of our society. The first speaker was Dr Rohit Gutgutia and his topic was "Assessment & Management of Male Infertility" and the second speaker was Dr Rajeev Agarwal and he spoke on "Optimising Success of IUI".

The next session was a short inauguration ceremony, the highlight of which was the felicitation of senior octogenarian members for their sincere dedication and contribution towards The Bengal Obstetric and Gynaecological Society. Dr Alokendu Chatterjee, Dr Bulbul Raichaudhuri, Dr Dipak Sarkar, Dr Krishna Chatterjee and Dr Pratap Basu were felicitated with a plaque and bouquet of flowers each. As is customary, our President Dr Bhaskar Pal and Hony Secretary Dr Ramprasad Dey, presented the Dr C S Dawn President's **Appreciation Award** to the immediate past president of our society, Dr Dibyendu Banerjee. Dr Banerjee along with Dr M M Samsuzzoha, the then Honorary Secretary of BOGS, did some really amazing academic and humanitarian work during their tenure, which was prolonged by 6 months due to the pandemic.

The inauguration ceremony was followed by the prestigious 7th Dr Subhash Mukherjee Memorial Lecture. The speaker this year was Dr Ameet Patki, who is a stalwart in this field and the topic of his lecture was "Have We Reached the Crossroads in the Management of PCOS?"

The next programme was the much-awaited 29th Dr Jajneshwar Chakraborty Memorial Oration. The orator this year was Dr S Krishnakumar and the topic of his oration was "Preserving the Reserve: Surgical Strategies on Ovary".

The last academic session of the day was an interesting panel discussion on "Case scenarios in ART". Dr Suparna Banerjee moderated it and the panellists were Dr Aindri Sanyal, Dr Hasibul Hassan Shirazee, Dr Indranil Saha, Dr Koushiki Ray Sarkar, Dr Madhab Chandra Das and Dr Sujay Dasgupta.

We next had the valedictory session in which medals and certificates were handed over in person to the prize-winners of Yuvacon and Foundation Day, 2021. Post-graduate students who ranked first in the MS (O&G) and DGO examinations, 2019 and 2020 were awarded the Dr B C Lahiri Memorial Award and the Dr B Halder Memorial Award respectively. Appreciation awards were also presented to MBBS graduates who ranked first in Ob & Gyn in the Final MBBS Professional examination in the years 2020 and 2021.

- Dr Ishba Naiam •
 - First in MS (0&G), 2019 First in MS (0&G), 2020 Dr Sumana Nandi
 - Dr Urmi Majumdar First in DGO, 2019
- Dr Kallol Saha
- First in DGO, 2020
- Dr Shankar Dev First in MBBS (0&G), 2020
- Dr Deblina Ghosh First in MBBS (0&G), 2021

Flowers were also presented to members of our society for their achievements on the national and international arenas.

The day's events ended with an entertaining lucky draw followed by the National Anthem.

One hundred and seventy eight doctors attended the programme.

WORLD PREMATURITY DAY



FOGSI celebrated the "World Prematurity Day" on Sunday, November 21, 2021 in the form of a hybrid conference, which was organized by The Bengal Obstetric & Gynaecological Society (BOGS). It was held at ITC Royal Bengal, Kolkata from 1.30 pm to 7.00 pm. The academic event was preceded by lunch. It was the first hybrid conference organized by BOGS. Ninety-five delegates attended the event physically.

Symposium on Prediction & Prevention of Preterm Labour: Dr

M M Samsuzzoha spoke on "Clinical Characteristics, Risk Factors & Biochemical Markers", Dr Seetha Ramamurthy Pal on "Prediction by Ultrasonography" and Dr Parag Biniwale spoke on "Role of Omega 3 Fatty Acids in Prevention".

Dr Basab Mukherjee spoke on "Role of Progesterone in Prevention" while Dr Madhuri Patel spoke on "Role of Cervical Cerclage". The chairpersons for the session were Dr Arup Kumar Majhi, Dr Mausumi Dey Banerjee, Dr Nirmala Pipara and Dr Pradip Kumar Mitra.

Inauguration: Dr Mariam Khanam & Dr Poushali Sanyal called the dignitaries



to the dais: Dr Bhaskar Pal, President, BOGS, Dr S Shantha Kumari, President, FOGSI, Dr Madhuri Patel, Secretary General FOGSI, Dr Ramprasad Dey, Hony Secretary, BOGS, Dr Basab Mukherjee, Vice President, FOGSI & Vice President, BOGS. Dr Bhaskar Pal, President, BOGS delivered the welcome address.

Dr Mariam Khanam & Dr Poushali Sanyal, then, called the past presidents of BOGS and few others to join along with the dignitaries on the dais for Lighting of the lamp.

The Guests of Honour were Prof Bo Jacobsson, FIGO & Prof Andrew Shennan, FIGO. Dr Mariam Khanam & Dr Poushali Sanyal anchored the programme. Dr Madhuri Patel, Secretary General FOGSI, delivered the vote of thanks.

Keynote Lecture: Dr S Shantha Kumari delivered the keynote lecture on "Prematurity: Global Burden and Our Action". The chairpersons for this important session were Dr Bhaskar Pal, Dr Dibyendu Banerjee and Dr Krishnendu Gupta.

Symposium on Management of Preterm Labour: Dr Ashis Kumar



Mukhopadhyay spoke on "Role of Tocolytics", Dr Ramprasad Dey spoke on "Antenatal Corticosteroids: Current Status", Dr Sukanta Misra spoke on "Neuroprotection in Preterm Births" and Dr Arun Mangalik spoke on "Problems in Preterm Neonates". The chairpersons for the session were Dr Abinash Chandra Ray, Dr Barun Chakraborty, Dr Kalidas Bakshi and Dr Subhash Chandra Biswas.

Panel Discussion on PPROM: Dr Jayita Chakrabarti & Dr Tulika Jha moderated a panel discussion on 'PPROM'. The panelists were Dr Debasmita Mondal, Dr Lila Vyas, Dr Mahua Bhattacharyya, Dr Suranjan Chakrabarti and Dr Susmita Chattopadhyay.

Symposium: Prematurity in Special Situations: When & How to Deliver

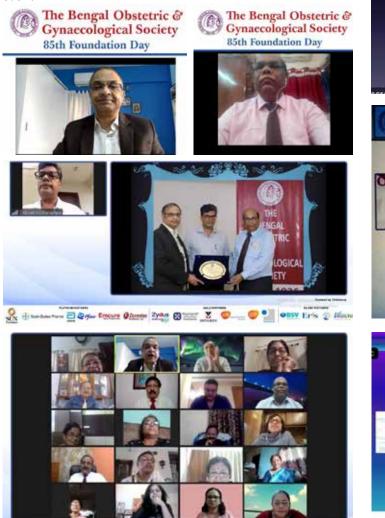
Dr Alpana Chhetri spoke on "HDP", Dr Sebanti Goswami spoke on "FGR", Dr T Ramani Devi spoke on "ART" and Dr Hiralal Konar spoke on "Multiple Pregnancy". The chairpersons for the session were Dr Mamtaz Sanghamita, Dr Saktirupa Chakraborty and Dr Sudhir Adhikari.

The programme ended with a delicious dinner.



85th Foundation Day celebration

The 85th Foundation Day celebration of our Society was held on 25th July 2021 on a virtual platform. The masters of ceremony were Dr Mariam Khanam and Dr Poushali Sanyal and it was well coordinated by Dr Alpana Chhetri and Dr Sujoy Dasgupta. A total of 307 members and delegates joined the event.



The 26th Dr Bamandas Mukherjee Memorial Foundation Day Oration

Dr Liona C Poon, Clinical Professor, Dept. of Obstetrics & Gynaecology, The Chinese University of Hong Kong & Visiting Professor, Dept. of Women & Children's Health, King's College, London delivered the 26th Dr Bamandas Mukherjee Memorial Oration on "Prediction and Prevention of Preterm Birth".

Dr Bhaskar Pal, President and Dr Ramprasad Dey, Hony Secretary chaired the session. Dr Tulika Jha, Hony. Clinical Secretary presented the biodata of Dr Bamandas Mukherjee.

The oration was followed by a CME, which was chaired by Dr Amit Basu, Dr Dibyendu Banerjee, Dr Jayita Chakrabarti and Dr M M Samsuzzoha. The speakers were Dr P C Mahapatra who spoke on "Progesterone in Pregnancy – Use & Misuse", Dr T Ramani Devi spoke on "Medical Management of Endometriosis", Dr Chaitali Datta Ray spoke on "Iron Therapy in Pregnancy: The Rational Approach and Dr Shobha Gudi spoke on "Non-Contraceptive Benefits of Hormonal Contraceptives".





The day ended with the valedictory session, which was conducted, by Dr Tulika Jha and Dr Seetha Ramamurthy Pal. The session had three parts: the appreciation awards for the meritorious students, the prizes for the day's competitions and special appreciation and special mention for our own members.

In the first session, the names of the students who ranked first in the different university exams were announced.

- 1. Dr Sumana Nandi, from VIMS, received Dr B C Lahiri Memorial Award for securing 1st position in MS Final examination for the 2017- 2020.
- Dr Kallol Saha, received Dr B Haldar Memorial Award for securing 1st position in DGO Final examination for the 2018- 2020 batch.
- 3. Dr Deblina Ghosh, an intern in NBMCH, received Appreciation Award for securing 1st position in MBBS 3rd PROF II (Obs & Gynae) Examination, 2021.

22nd Dr Tapashi Nag Memorial Talent Search Session (Free Paper Competition)

It began with introduction of Dr Tapashi Nag by Dr Seetha Ramamurthy Pal. The session was divided into two halves and fourteen budding gynaecologists, seven in each session, presented their research work as papers. Dr Arup Kumar Majhi, Dr Kushagradhi Ghosh, Dr Subhash Chandra Biswas and Dr Sukanta Misra chaired the first half. Dr Ashis Kumar Mukhopadhyay, Dr Biswajyoti Guha, Dr Hiralal Konar and Dr Sudhir Adhikari chaired the second half. Dr Sebanti Goswami, Dr Krishnendu Gupta and Dr Sukumar Barik were the secret judges for this competition.

Dr Yashi Sharma, 2nd year PGT, RKMSP/VIMS, Kolkata stood first, Dr Jagriti Pandey, 3rd year Post Graduate Trainee MS (G&O), Midnapore Medical College & Hospital was second & Dr Kasturi Barman, 3rd year PGT, MS (G&O), Midnapore MCH and Dr Bishista Bagchi, Calcutta Fertility Mission were joint thirds.

In the first half of the 36th Dr M N Sarkar Memorial Debate, the motion was "Instrumental Vaginal Delivery Should Be Discouraged in Modern Obstetric Practice" and the winners were Dr Suparna Biswas, 1st Year PGT, MS (G & O), IPGME&R and SSKMH who stood first (For the motion) and Dr Esha Das, senior resident, R G Kar Medical College, who stood second (Against the motion).

In the second half, the motion for the debate was "Telemedicine in Our Speciality Compromises Optimal Patient Care". Dr Tanushree Paul, 1st year PGT, Vivekananda Institute of Medical Sciences, Ramakrishna Mission Seva Pratishthan won the 1st prize (Against the motion) while Dr Sohini Chaudhury, senior resident, Department of G&O, Vivekananda Institute of Medical Sciences, Ramakrishna Mission Seva Pratishthan won the 2nd prize (For the motion).

In third part of the valedictory session, Dr Dibyendu Banerjee, the Immediate Past President of our society was presented with Dr C S Dawn President's Appreciation award at Pratishruti on July 23rd, 2021. A special mention was made of

- Dr Krishnendu Gupta for being appointed as the FOGSI Representative to AOFOG 2020-22; National Corresponding Editor JOGI, 2021-23; Member, Editorial Board, Journal of SAFOG, 2021-22 and Chair- Sexual and Reproductive Health (SRH) Committee, AOFOG, 2019-2022.
- Dr Ashis Kumar Mukhopadhyay for being elected as a Governing Council member, ICOG, 2021-23.
- Dr Bhaskar Pal for being appointed as the FOGSI Representative to SAFOG 2021-23; National Vice President of IAGE and all India Chair of AICC RCOG.
- Dr Basab Mukherjee for being elected as the FOGSI Vice President for 2021-22 and Regional Coordinator for South Asia, Safe Abortion Committee, FIGO.
- Dr Ramprasad Dey for being appointed as the National Corresponding Editor JOGI, 2021-23.

The 36th Dr M N Sarkar Memorial Debate

It had two motions, which were "Instrumental Vaginal Delivery Should be Discouraged in Modern Obstetric Practice" and "Telemedicine in Our Speciality Compromises Optimal Patient Care". There were eight participants for each of the topics, four "for" and four "against" the motion.

At the outset, Dr Alpana Chhetri read the biodata of Dr M N Sarkar. As is customary, the competition was chaired and judged by the three Vice Presidents of the Society, Dr Abinash Chandra Ray, Dr Mausumi De Banerjee and Dr Basab Mukherjee who also summed up the sessions beautifully. A total of sixteen PGTs from different medical colleges participated in this competition.

This was followed by a short inauguration ceremony, which started with Dr Bhaskar Pal, President, BOGS delivering the welcome address. There was a virtual lighting of the inaugural lamp. The first issue of this academic year's BOGS Times, the mouthpiece of the society, of the year 2021-22 was released. The ceremony ended with the national anthem.

Public Awareness Camp

The Public Awareness sub-committee of The Bengal Obstetric & Gynaecological Society and Kolkata Menopause Society organized a free health check-up camp at Tollygunge Sthanakvasi Jain Sangh, Kolkata. The aim was to create an awareness regarding anaemia, diabetes, hypothyroidism and osteoporosis. There were 75 registrations and free Hb, sugar, thyroid and BMD tests were done. Free tablets of Iron and calcium were distributed. Dr Bipasa Sen, Dr Nirmala Pipara and Dr Sharmishtha Ganguly attended the programme.

The Public Awareness Committee of The Bengal Obstetric & Gynaecological Society and Kolkata Menopause Society organized a physical public awareness camp on "Women's Health" on September 3, 2021 from 11.00 am to 2.00 pm at Matri Mangal Prathisthan, 228, Rabindra Sarani, Kolkata-700007.



The 37th Dr Sreemanta Banerjee Memorial Oration

For the 37th Dr Sreemanta Banerjee Memorial Oration, a Live Webinar was organized on Saturday, October 9, 2021, in which Prof Lesley Regan, Professor & Head, Dept. Obst & Gynae, St Mary's Hospital, Imperial College London, Honorary Secretary, FIGO, Immediate Past President, RCOG, spoke on "Recurrent Miscarriage: Current Evidence and Emerging Horizons"

One hundred and ninety had attended the programme and tuned in live.



BOGSCMEonEarlyPregnancyComplications

The BOGS organized a CME on August 31, 2021 on a digital platform.

The programme began with opening remarks by Dr Seetha Ramamurthy Pal and welcome address by Dr Bhaskar Pal. Dr Ameet Patki spoke on "Progesterone in Recurrent Pregnancy Loss". The chairpersons for the session were Dr Ramprasad Dey and Dr Tulika Jha. This was followed by a case based discussion on "Early Pregnancy Complications" which was moderated by Dr Susmita Chattopadhyay and Dr Alpana Chhetri and panelists were Dr Mariam Khanam, Dr Priyanka Pipara, Dr Ramna Banerjee, Dr Sanjib Dutta, Dr Sukumar Mitra and Dr Suparna Banerjee.

CME on Adolescent Health

The Adolescent Health Subcommittee of The BOGS organized a CME on "Adolescent Health" on September 11, 2021 on a digital platform. The programme began with opening remarks by Dr Tulika Jha and welcome address by Dr Bhaskar Pal. Dr Angela Dunford spoke on "General Overview of Paediatric and Adolescent Gynaecology" and Dr Mausumi De Banerjee spoke on POSCO Act and Its Implications. The Chairpersons for the session were Dr Bimal Chandra Bhadra, Dr Debjani Bhadra and Dr Ramprasad Dey.

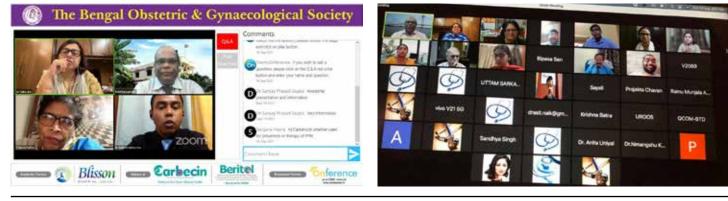
This was followed by a case based discussion on "Adolescent Health Issues" which was moderated by Dr Jayita Chakrabarti and Dr Sanjib Dutta and panelists were Dr Abir Mukherjee, Dr Basab Mukherjee, Dr Rajasish Majumder, Dr Shabana Roze Chowdhury and Dr Subidita Chatterjee with expert inputs by Dr Suranjan Chakrabarti.





CME on Managing Post Partum Haemorrhage

The BOGS organized a CME on "Managing Post Partum Haemorrhage" which was held on September 18, on a digital platform. Dr Subhash Chandra Biswas spoke on "The Golden Hour & Assessment of Blood Loss" and Dr Sheela Mane spoke on "Prevention & Medical Management of PPH". The chairpersons for the session were Dr Hiralal Konar and Dr M M Samsuzzoha. Dr Sudipta Shekhar Das, consultant haematologist, spoke on "Rational Use of Blood & Blood Products" and Dr Ramprasad Dey spoke on "Surgical Management of PPH". The chairpersons for the session were Dr Kalpana Sarkar and Dr Tulika Jha.



CME on "Medical Disorders in Pregnancy"

The Medical Disorders in Pregnancy Subcommittee of BOGS organised a CME on "Medical Disorders in Pregnancy" on Saturday, October 23, 2021 through a live webinar.

Dr Sebanti Goswami spoke on 'Obesity in Pregnancy' and Dr Somajita Chakraborty was very informative on 'APLS: Recent Updates". Dr Alok Basu and Dr Biswajyoti Guha moderated a panel discussion on 'Hyperglycaemia in Pregnancy'. The panelists were Dr Amit Kyal, Dr Binayak Sinha, Dr Mariam Khanam, Dr Nandini Chakraborty, Dr Ranjana Tibrewal and Dr Suranjan Chakrabarti. The entire programme was well conducted by Master of Ceremony Dr Mariam Khanam.

Two hundred and seventy three

registered for the programme and 136 tuned in live.









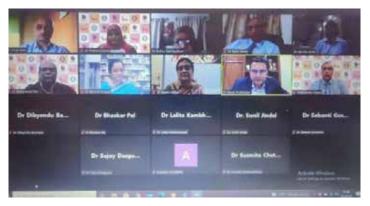
CME on PPH

The BOGS organized a CME on PPH on August 28, 2021 on a digital platform. Dr Uma Pandey, HOD, BHU spoke on "Role of Uterotonics in Preventing PPH: Newer Insight with Carbetocin". The chairpersons for the session were Dr Subhash Chandra



Biswas and Dr Sudhir Adhikari. This was followed by a panel discussion on "Managing PPH" was moderated by Dr Sebanti Goswami, Dr Seetha Ramamurthy Pal and panelists were Dr Arup Kumar Majhi, Dr Ashis Kumar Mukhopadhyay, Dr Dibyendu Banerjee, Dr Krishnendu Gupta and Dr Kusagradhi Ghosh.





CME on Sexual Dysfunction

The Sexual Medicine Committee of FOGSI, in association with the BOGS organized a CME on Sexual Dysfunction on September 28, 2021 on a digital platform.

The masters of ceremony were Dr Lalita Kambhampati and Dr Apurba Dutta. The programme began with the Inaugural Ceremony. Dr Krishnendu Gupta was the Chief Guest and Dr Basab Mukherjee and Dr Bipin Pandit were Guests of Honour.

Dr Hafizur Rahman gave a talk on "Sexual history taking", Dr Padmini Prasad spoke on "Counselling in sexual dysfunction" and Dr Niraj Jadav spoke on "Intimacy skill for couple". The Chairpersons for the session were Dr Bulbul Raichaudhuri, Dr Dibyendu Banerjee and Dr Ramprasad Dey.

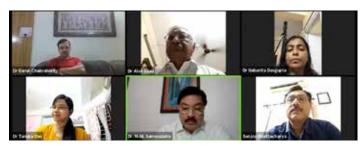
Dr Queen Aditya spoke on "Female Interest/Arousal disorder" and Dr Shama Sultana spoke on "Orgasm Disorder". The Chairpersons for the session were Dr Barun Chakraborty and Dr Suranjan Chakrabarti. Dr Sunil Jindal spoke on "Erectile Dysfunction" and Dr Sujoy Dasgupta spoke on "Premature Ejaculation". The Chairpersons for this session were Dr Sebanti Goswami and Dr Susmita Chattopadhyay.

CME on the occasion of World Contraception Day

The Fertility Regulation & MTP Subcommittee of The BOGS organized a CME on the occasion of World Contraception Day on September 26, 2021 on a digital platform. Dr Sandip Sengupta spoke on "Contraception in Women with Medical Disorders" and Dr Poushali Sanyal spoke on "Post Abortal Contraception". The chairpersons for the session were Dr Bandana Biswas, Dr Partha Mukherjee and Dr Pradip Mukherjee.

This was followed by a panel discussion on "Difficult Case Scenarios of MTP" which was moderated by Dr M M Samsuzzoha and Dr Basab Mukherjee. The panelists were Dr Alok Basu, Dr Barun Chakraborty, Dr Nabanita Dasgupta, Dr Sanjay Kumar Bhattacharyya and Dr Tanuka Das.

A total of 170 doctors tuned in live for the webinar.











Independence Day 2021 Celebration

The 75th Independence Day was celebrated on August 15, 2021 at "Pratishruti". The programme started at 9.00 am by hoisting the national flag along with the BOGS flag by Dr Bhaskar Pal, President, BOGS and Dr Ramprasad Dey, Hony. Secretary. A total of fifteen members physically attended the auspicious occasion. National anthem was sung by our members. It was also attended by others through virtual mode who could not attend this physically.

To promote the pollution free green world, a few trees were planted in the backyard of our office "Pratishruti". After that the members went to Alokendu Bodh Niketan, at Kankurgachi and distributed gifts to the differently abled children of the school.



CME on "Perinatology"

The Perinatology Subcommittee of BOGS organised a CME on "Perinatology" on Saturday, November 20, 2021 through a live webinar.

Dr Sukumar Barik spoke on the interesting topic of 'Having The Perfect Baby'. The chairpersons for the session were Dr Partha Kumar Bhattacharyya and Dr Sudip Kumar Saha.

Dr Alpana Chhetri and Dr Sharmistha Ganguly moderated a panel discussion on 'High Risk Fetus'. The panelists were Dr Ayesha Khan, Dr Jayati Mondal, Dr Partha Bhattacharyya, Dr Rajiv Dhall, Dr Sandip Sengupta and Dr Sudip Saha.

Two hundred and twenty six doctors registered for the program.

The 64th Sir Kedarnath Das Memorial Oration

The 64th Sir Kedarnath Das Memorial Oration was held on Friday, March 4, 2022 at Gynaecology Seminar Room, R G Kar Medical College & Hospital, Kolkata. Prof Arup Kumar Majhi, Former HOD, Ob & Gyn, R G Kar Medical College, Kolkata, National President Elect, Indian Society of Perinatology and Reproductive Biology, Past President, BOGS, spoke on "Obstetric Forceps - History and Evolution".

Dr Bhaskar Pal, President, BOGS and Dr Ramprasad Dey, Hony. Secretary, BOGS chaired the session.

It was the first oration to be held physically in over two years and one hundred and two doctors attended the programme.





FOGSI CME on "I Care for Contraception"

The Family Welfare Committee, FOGSI (2021-22), in association with The Bengal Obstetric & Gynaecological Society, organized a CME on "I Care for Contraception" on Saturday, January 29, 2022 through a live webinar. The programme began with opening remarks by Dr S Shantha Kumari, President, FOGSI. Dr Sebanti Goswami spoke on "Contraception: Which, When and Why." The Chairpersons for the session were Dr Abinash Chandra Ray and Dr Mausumi De Banerjee. This was followed by a Panel Discussion on "Tailoring Contraception for Women". Dr Shobha N Gudi, Chairperson, Family Welfare Committee, FOGSI moderated it. The panelists for the session were Dr Tulika Jha, Dr Jayita Chakrabarti, Dr Ramprasad Dey, Dr Jyothi GS, Dr Kiranmayi Devineni and Dr Sanjivani Wanjari. It was very informative and interactive.

CME on "The MTP Act"

The Fertility Regulation and MTP Subcommittee, BOGS organized a CME on "The MTP Act" on Friday, February 18, 2022 through a live webinar.

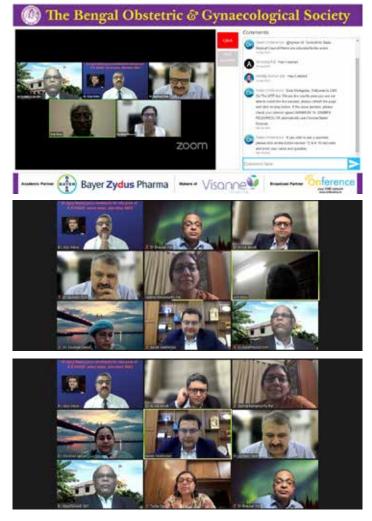
The programme began with opening remarks by Dr Ramprasad Dey, Hony Secretary, BOGS followed by the welcome address by Dr Bhaskar Pal, President, BOGS.

Dr Jaydeep Tank spoke on "MTP Act and Its Amendment" and Dr Ajay Mane spoke on "Difficult Scenarios in Interpreting the MTP Act". The Chairpersons for the session were Dr Alok Basu and Dr Bandana Biswas.

This was followed by an interactive session called "Ask the Experts" which was moderated wonderfully by Dr Basab Mukherjee, Dr Arnab Basak and Dr Poushali Sanyal.

Dr Jayita Chakrabarti, Hony. Jt. Secretary, BOGS offered the Vote of Thanks. Dr Tulika Jha and Dr Seetha Ramamurthy Pal coordinated the programme very well.

About 230 delegates registered for the event.



World Breastfeeding Week

The BOGS celebrated World Breastfeeding Week on Friday, August 6, 2021on a digital platform. Dr Suranjan Chakrabarti spoke on "Breastfeeding in the Modern World: Benefits, Problems and Interventions". The chairpersons for the session were Dr Ramprasad Dey and Dr Nirmala Pipara. This was followed by a panel discussion on "Promoting Breast Feeding: Successes and Challenges" which was moderated by Dr Avishek Bhadra & Dr Poushali Sanyal and the panellists were Dr Bratati Bhattacharyya, Dr Jayati Mondal, Dr Nupur Nandi, Dr Shabana Roze Chowdhury, and Ms Sumana Saha.

2nd Clinical Meeting

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The 2nd Clinical Meeting in the form of a Live Webinar was organized on Saturday, October 9, 2021.

The following cases were presented:

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"A Case of Nulliparous Prolapse and Its Management" by Dr Rashmi Jha, Calcutta National Medical College & Hospital.

"An Observational Study of Pure Gonadal Dysgenesis with Familial Inheritance in a Tertiary Care Centre in Darjeeling" by Dr Sree Rashmi RJ, North Bengal Medical College & Hospital.

"A Rare Malignancy of The Ovary: Malignant Mixed Mullerian Tumour" by Dr Madhubanti Mukherjee, CSS College of Obstetrics, Gynaecology and Child Health.

The Chairpersons for the session were Dr Gita Basu Banerjee, Dr Seetha Ramamurthy Pal, and Dr S P Pati.

One hundred and ninety doctors had attended the programme.

THE 37TH DR SREEMANTA BANERJEE MEMORIAL ORATION

THE 37TH DR SREEMANTA BANERJEE MEMORIAL ORATION

3rd Clinical Meeting

The 3rd Clinical Meeting was organized physically on Friday, March 4, 2022 at Gynaecology Seminar Room, R G Kar Medical College & Hospital, Kolkata.

Dr Soumyodipta Ghosh, 2nd Year PGT, G&O, RG Kar Medical College presented an interesting case titled "Spontaneous Development of Quadriplegia at 3rd Trimester - An Interesting Case". The chairpersons for the session were Dr Ashok Kumar Mondal and Dr Rupkamal Das.

One hundred and two doctors attended the programme.



34th Dr Chunilal Mukherjee Memorial Oration

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The 34th Dr Chunilal Mukherjee Memorial Oration, a Live Webinar was organized on Saturday, November 20, 2021, in which Dr Jeanne Conry, President FIGO, spoke on "Environment & Women's Health".

Two hundred and twenty six doctors had registered for the programme and tuned in live.





Obituary



Dr Ashutosh Gangooly



Dr Arati Roy



Dr B M Banerjee

"We all die. The goal isn't to live forever, The goal is to create something that will."

The past year has been very cruel and many lives have been lost, several from our own fraternity.

Three more of our dear BOGSIANS have been lost to fate and we deeply mourn their demise and convey our sincere condolences to their bereaved families. They may have left but they will always dwell in our hearts.

> "A part of us in their memories died with them. A part of them in our memories still live in us."



New Members Annual Members

Dr Aanchal Agarwal, Dr Abhishek Ray, Dr Aditi Roy, Dr Amina Molla, Dr Amitabha Banerjee, Dr Amitava Mandal, Dr Anamika Chaudhary, Dr Anwesha Das Ghosh, Dr Bansi Bisal, Dr Barnali Ghosh, Dr Brotish Mitra, Dr Chandrakanta Mondal, Dr Deblina Sarkar, Dr Debnath Ghosh, Dr Deboroop Mandal, Dr Debraj Das, Dr Epika Ghorai, Dr Esha Das, Dr H M Mohtasib Alam, Dr Hemantha Kumar Hansda, Dr Inisha Sarkar, Dr Ishba Shahnaz, Dr Juhi Perween, Dr Kakali Pal, Dr Kalapi Chatterjee, Dr Kallol Saha, Dr Madhurima Roy, Dr Malvika Tiwari, Dr Manepalli Siva Tejaswi, Dr Manisha Singh, Dr Masoom Fatima, Dr Meenakshi Tiwari, Dr Nasreen Alam, Dr Neha Anjum, Dr Pallabi Sengupta, Dr Paromita Sarkar, Dr Payel Karmakar, Dr Piyali Das, Dr Pragya Basak, Dr Pritha Biswas, Dr Pritha Dhara, Dr Pritha Kolay, Dr Prithwikar Mandal, Dr Priya Singh, Dr Priya Tiwari, Dr Rashmi Jha, Dr Reshma Kumari, Dr Rishita Bose, Dr Riya Chakrabarty, Dr Rocky Saha, Dr Sai Dibyadarshini Bhuyan, Dr Sanat Bala, Dr Sangita Das, Dr Setu Chhabra, Dr Shreya Saha, Dr Shubhra Ghosh, Dr Sneha Kumari Shah, Dr Soumik Mandal, Dr Subhajit Barua, Dr Subhasis Pal Chowdhury, Dr Sujata Bandyopadhay, Dr Surajit Adak, Dr Surajit Ghosh, Dr Tanushree Kumar, Dr Trisha Chattoraj, Dr Vibha Kumari, Dr Vrunda Appannagari, Dr Yashi Sharma.

